

Act 142 Consultation Group Meeting 12/19/2011

The meeting was called to order at 1305 by Dr. Harry Chen.

The minutes to the October 2011 meeting were reviewed, amended by P. Cobb and accepted. Amendment: At the bottom of pg 1 under recommendations: include a statement that the group disapproved the authorization of a provider operating at a higher level than the license level of the squad..

There was a discussion regarding the process that will be followed once the Consultation Group finishes the draft report. These steps are 1- have the committees review the document, 2-forward the draft report to the legislature. The legislature will then take testimony on the report at their meeting.

Review of Draft Report:

- It was noted that there needed to be consistency in the use of specific terminology between documents; especially substituting 'licensed' for 'certified'. Credentialing is done by agencies.
- Specific reference to 'fire department' was eliminated. Some reviewers noted that only ambulance services and first response groups are licensed by the EMS department. The term 'license' is meant only to apply to a service function. There was no consensus regarding the appropriateness of eliminating 'fire department'. This will be discussed further.
- **901. Policy:** This section should state that there is consensus for the need for credentialing and assurance of competency.
- **906.6.a:** It was pointed out that many ambulance services do not have individual written protocols with their affiliated hospitals but rather have district wide protocols. This should be included in this section.
- **906.6.b:** This section should include reference to *standing orders*. Revise wording to include: 'where necessary and practical, direct communication...'
- **906.8 :** There was some discussion as to whether EMS will change its reporting relationship from NHTSA to another agency yet to be named. There was consensus to leave the reference to NHTSA and change it if needed.
- **906.8.e:** This section refers to any applicant who has served as an advanced emergency medical technician in various capacities out of the existing EMS organization. There was consensus that since 'advanced' is a certification level, this qualifier should be revised to read: 'An applicant who has served as a hospital corpsman or medic....'
- **906.8.f** There was consensus that as long as someone is affiliated with the National Guard and not necessarily serving with them, the State of VT can still grant that person licensure. This wording should be changed.
- **906.8.g:** This paragraph stated that there was no prerequisite for an advanced level of training in order for someone to enroll in an advanced program. The whole paragraph was eliminated since the group did not want to refer to any specific licensure level.

4286. Advisory committee

There was much discussion about the number of members (26) on the Advisory Committee and who should make up the membership. The proposed membership was based on the premise that that every group that provides EMS services should be represented. It was generally agreed that 26 members was a very large committee and that it might be difficult to get anything done. Some felt that once the initial meetings took place, as time went on the number of members attending would be significantly reduced depending on the topic of discussion and interest. It was suggested that we should be all inclusive at first and address the membership numbers after the Advisory Committee has been in existence for a year. Membership number recommendations should be included in the yearly report.

4287. Emergency medical services special fund

The group discussed the wording of the paragraph with regard to the list of supported activities. Some expressed concern about funding things like SIREN's Field Bridge at the potential expense of training. C. Bell pointed out that ongoing fees for SIREN are estimated to only be about \$100,000/yr. The listed activities in this section were only examples of what could be supported by the fund.

The funding source for this special fund has not yet been identified.

Title 24

2657 – Purposes and powers of EMS districts

a.3: Add credentialing to statement: 'Enter into agreements and contracts for furnishing technical, educational or support services and credentialing related to the provision of emergency medical treatment'

a.11: There was discussion as to how to assure that agencies employ credentialing. Districts will play a role, and assurance could be accomplished by site visits.

Section 20 (c) of Act 142:

Action: Need to clarify whether a person an individual may provide emergency medical services that exceed the scope of practice for the license level of the service with which the individual is affiliated.

Next steps:

Continue to work on the draft focusing specifically at:

- Funding resources for the Special Fund
- Inclusion of the fire department reference
- The number of members on the Advisory Committee and the number of times it meets
- Terminology consistency

It was agreed that once the draft is revised, it will be sent out again for review. The Advisory Group will not meet again prior to sending out the revised draft.

The meeting adjourned at 1338.