

## SEMACE/MEDICAL STANDARDS

*With input from SEMACE Member Dr. Pigott*

- NYC Rescue Task Force protocol changes approved by SEMACE & SEMSCO. This revision allows for triage of patients in “warm” zone; allows for “red tag” patients to be moved to the “cold” zone for further treatment & transport.
- NYS BLS Protocol changes approved by SEMACE & SEMSCO. This revision replaces the word “hospital” with “facility” whenever it appears in the document. This is in anticipation of the application of the Emergency Triage, Treatment, & Transport (ET3) reimbursement model which will allow patients to be transported to other locations besides hospitals. BLS protocols were approved at the NYS Commissioner of Health level and are expected to be in place August 1, 2019 with preliminary training materials to be available June, 2019.
- NYS Collaborative Protocol changes approved by SEMACE & SEMSCO. This allows the change from “hospital” to “facility” as per the BLS protocols (above). It also allows changes to formulary medication concentrations in ALS Protocol as needed without having to be approved by SEMACE. This is to address medication shortages.

SEMACE/SEMSCO approved 7 quality measures which will be collected & analyzed statewide by NYS Bureau of EMS beginning Summer 2019, to be reported at the September 2019 SEMACE meeting:

1. % of patients with a presentation of chest pain who received pre-hospital 12-lead ECG
2. % of cardiac arrest patients who were resuscitated to ROSC
3. % of opioid overdose patients who treated but refused transport
4. % of trauma patients transported per CDC trauma triage algorithm
5. % of patients intubated in the field who received confirmation of placement by ETCO<sub>2</sub>
6. % of patients with stroke symptoms who had blood glucose level determination
7. % of stroke patients who were transported to approved stroke center

Discussion took place recommending a change in the AEMT education to adhere to the National Standards, with additional region-specific modules to be added as necessary. This was to allow AEMTs trained in other states to more easily obtain reciprocity and credentialing in NYS. Motion was postponed until the September 2019 meeting to allow further research comparing the National Standard curriculum with the current model. Initial discussion started on a statewide ALS protocol – or at least a minimum standard for ALS care.

Discussion about school nurse Scope of Practice and ability to apply hemostatic dressing and commercial tourniquet without patient specific orders. These are FDA approved items and are interpreted by the NYS Department of Education to require patient specific order to use even in an emergency situation. Motion was made, seconded and passed to send letter asking Commissioners of Health and Education to work together to allow school nurses to better treat severe bleeding.

Trauma System in NYS: Cherisse Berry, MD, Bellevue Hospital, was introduced as the ACS representative to SEMAC. She is also the Co-Chair of the STAC Systems Committee. She repeated a presentation on doing a global assessment of the trauma system in NYS as compared to other states and past history to determine where we stand and where we need to get better including strategic goals. Support for trauma system can then be sought from public and legislature. Using the Benchmark Indicators and Scoring Tool (BIST) 16 indicators have been selected and validated. Input will be sought from a broad base of stakeholders including SEMAC and SEMSCO members.

### **Bureau of EMS & Trauma Systems Staff Report by Director Ryan Greenberg**

The NYS Bureau of EMS announced the Emergency Triage, Treatment & Transport (ET3) Centers for Medicare & Medicaid Services initiative to offer alternative transport destinations to Medicare patients. Not everyone needs to be transported to a hospital and they may be transported to a “Facility” or not at all in the future. Telemedicine is expected to be a big part of the initiative. Half a dozen agencies from around the state have approached the Bureau of EMS and Trauma Systems about submitting proposals.

Policy Statement 12-06, “EMS Mutual Aid” is currently being rewritten. Mutual aid agreement to ensure coverage is needed by every EMS agency. Article 30 provides for local REMSCO review and approval. A bid to revamp back end of administrative licensure processes will be going out, expect changes in next 12 to 24 months.

### **Education –**

Jean Taylor has been officially promoted to Deputy Director, Education & Certification Services. Teresa Allen who handled reciprocity, verifications, ADA accommodations, etc. was promoted to a DOH position. The Bureau received a waiver to start to hire people for positions vacated, especially in the Education Department due to retirement and promotions. He asked that we work with them as they work through some of this.

CME Recertification Program Policy changes will be out by the Bureau in May; awaiting the final forms to come back from the forms committee. It also has to go through the Commissioner and legal review processes. Those processes could take from 4 to 12 weeks. Estimated to be out sometime in the summer.

Update on Electronic submissions, Exam Ticket Requests and verifications are now going through e-mail. E-mail addresses will be set up for administrative submissions and automatic receipts and acknowledgements for course sponsor paperwork and the CME Program in the future. The Instructor Policy update has been completed. Expect publication soon.

Innovative ways to deliver education are being looked at. There is current policy limiting online education to 20%, which is being re-evaluated. Hands-on skills need to be demonstrated and some information needs to be delivered in person. Maybe 50% online is OK. Does CIC need to be in each distributed learning site? The Bureau of EMS and Trauma Systems wants to hear about better ways or proposals to deliver EMS education.

### **EMT-CC to EMT-P Bridge Program Update –**

The course has enrolled 102 of the 1,500 EMT-CCs in the state in the first course. Enrollment for second course ends in May. The course is not easy, takes up a lot of time and involves a lot of self-learning. Teaching to National Standards is expected to better prepare students to pass the EMT-P exam. Anthony Conrardy, Director, Northwell Health's Center for Learning & Innovation, advised in a message to DOH:

“This program is not designed around the students' perceived notion of what is or is not on the written NYS paramedic exam but what is expected of the national EMS education standards. Also, students' previous experience with lecture based programs and continuing education platforms have placed them at a slight disadvantage as they are expecting to be spoon fed the material. It does take some time for the students to get familiar with the learners directed activities to discover this information.”

Statewide BLS and Collaborative Protocols updates have been approved by the Commissioner of Health, will be posted on the Bureau website and go into effect August 1, 2019. Online learning will be provided on DOH Learning Management System (LMS) possibly in June. Regional Program Agencies may be given access to use LMS for local training.

### **Update on the Bureau's Face Book page “New York State Health Department EMS Community” –**

Started in January and it is now up to 1,200 followers.

EMS Standards of Excellence program seeks to raise the bar on clinical quality service. It is a voluntary accreditation program. There will be 3 levels of recognition covering 8 aspects with about 20 points in each including leadership, operations, finance, medical direction, etc. The program is not finalized yet and still in draft component, but things we're looking at are those accredited companies pediatric prepared as a starting point.

## **Update on EMSC –**

Pediatric Emergency Care Coordinator program has 114 programs around the state.

## **Operations Report - Daniel Clayton & Dana Jonas**

Verbal report was not prepared but it was indicated a written report would be sent to Committee members by the end of the week. There was discussion of a need for a NYS Department of Transportation permit sticker on ambulances not carrying patients while traveling on highways. One agency reported a NYS police trooper advised sticker was needed if an ambulance is out for maintenance or crew personal run. However, a DOT sticker may only be needed for dealer owned vehicles weighing over 10,000 lbs. GVW while traveling on highways. NYS certified ambulance vehicles have not been known to need a DOT sticker. Issue will be researched.

Director Greenberg reports that they have 2 new data analysts that are processing EMS data information to get it back out to regions and agencies. NEMSIS 3 - there are 255 agencies on with 1,800 still on NEMSIS 2. It is hoped that all agencies will be converted to NEMSIS 3 by December 31, 2019. New analytic software platforms such as Tableau are being used and/or looked at. Seven statewide quality metrics have been selected with more information to come in September.

NYS EMS Memorial dedication will be on Tuesday, May 21, 2019 at 11am. This year 7 names are being added. For the first time all are from 911 related deaths. Please try and participate to show your support for the families. Included is our very own Dr. Michael Guttenberg, Suffolk County REMAC Member, Northwell Health Center for EMS and Commack Ambulance Member.

NYS Vital Signs Conference will be in Buffalo October 24<sup>th</sup> – 27<sup>th</sup>, 2019. Please visit the Vital Signs website. EMS Week May 19<sup>th</sup> – 25<sup>th</sup>, 2019. The Bureau is having a statewide initiative and marketing program for EMS week. They are asking that every EMS agency in the state go into the community on Sunday, May 19, 2019 from 12:00 PM to 4:00 PM to educate the community on what EMS does.

Trauma – Trauma Center verifications by American College of Surgeons (ACS) are continuing on a regular basis. Information from STAC indicated in the State of NY there are the following numbers of Trauma Centers:

- 21 level 1 Adult (1 is Provisional)
- 13 level 2 Adult (4 are Provisional)
- 10 level 3 Adult (2 are Provisional)
- 7 level 1 Pediatric (1 is Provisional and 2 are free standing)
- 9 level 2 Pediatric (3 are Provisional)

Continued.

Trauma Centers would like more interaction with local EMS providers and can be asked for patient outcome information. Copy of letter to hospital CEOs about sharing information is on the DOH website. Next STAC meeting is May 15, 2019 in Troy, NY.

## **SEMSCO**

Patty Bashaw, Chairperson's Report:

New members were introduced: Christopher Smith, Healthcare Association of New York State (HANYNS); and William Michael Masterton, Suffolk REMSCO. Roll call conducted and quorum present. Minutes of March 6, 2019 meeting were approved. No Correspondence to report. County EMS Coordinators Association met May 5, 2019. Will be speaking with various EMS associations to start a dialog and understand what they do and who they represent. There are core tasks that that can be agreed upon to work with legislators to keep EMS in eye of the state and communities.

1st Vice Chair's Report: None (excused due to attendance at a department funeral in home area)

2nd Vice Chair's Report: None

SEMSCO / SEMAC sub-committee recommended, and the SEMSCO unanimously approved, 3 forwarded motions: NYC Rescue Task Force; Statewide BLS Protocols; and Collaborative Protocols. Mention was made of issues that were covered in other meetings: quality metrics items; Stop-the-Bleed initiative and school nurse need for certain patient specific orders; and EMS as essential service what it would and would not do.

## **SEMSCO Education & Training**

Notification of a change of exam location will now be sent to Course Sponsors and CICs, not the students. Written Exam Ticket Requests are now online rather than call in to the Bureau of EMS and Trauma Systems. Long and short form course sponsor renewal forms went out. CME manual update is close to coming out. Going up chain in the Bureau. New Instructor Policy (19-01) is approved and it is now posted on the Bureau of EMS and Trauma Systems website. Spinal restriction educational material is currently being worked on and should be completed soon.

AEMT curricular in NYS moving to National Standards was discussed. Motion was made that effective September 2020 AEMT courses in NYS will follow National Standard curriculum. Blood draws by AEMTs at the request of police under the Vehicle & Traffic Law was brought up as marijuana testing requires early blood draw and leaving in a training module was suggested [see Bureau of EMS and Trauma Systems Statement 11-01]. Concern about this issue as well as incorporation of other additional optional educational modules was added to the motion. Issue of "Trained and Equipped" and a variation in collaborative/regional/local/agency options was brought up. It was mentioned that the 2018 National EMS Scope of Practice issued by the National Highway Traffic Safety Administration is a more correct reference than National Standards curriculum.

Continued.

There were comments from some that their areas did not have a problem with pass rates or textbooks. A comparison of existing Collaborative Protocols and proposed 2020 National Standards plus data on infrequently used skills was asked for. Motion was made and seconded to postpone consideration of the seconded E&T Committee motion till the September 24, 2019 SEMAC meeting, which was passed. Committee is working on a job description for Regional Faculty position. EMT-CC to EMT-P bridge program is progressing with 98 of original 102 still enrolled. Second enrollment period ends in May with class starting in June.

#### **SEMSCO Finance Sub-committee –**

Project started on evaluation of funding category Aid to Localities and its use for support of EMS Course Sponsors. Items to be looked at include: course costs; cost shifting to students; books and fees; and other inputs. In response to a question at SEMSCO it was advised that the committee has not discussed if EMS education costs for students should be fully funded.

#### **State Trauma Advisory Committee –**

No report. Cherisse Berry, MD, Bellevue Hospital repeated a presentation from the morning Medical Standards & Protocol Committee meeting. Issue of Scope-of-Practice of school nurses presented at the morning Medical Standards & Protocol Committee meeting was brought up. Suggestion was added that Commissioner of Health be able to issue waivers on requirement for patient specific orders when general public are trained or authorized to provide a medical intervention. STAC meets May 15, 2019 in Troy, NY.

SEMSCO Systems and Safety Sub-Committee- several seconded motions;

- Move to uphold the decision by Big Lakes REMSCO to approve the application by Central Orleans Voluntary Ambulance to expand its operating territory to include the East and West battalions of Orleans County. Motion Passed. There was a brief recess and discussion about PHL and GCL reference the number of people necessary for a motion to pass. After a brief recess, James Tardy with the Division of Legal Affairs for NYS DOH, made a clarification on PHL in reference to voting, a motion to pass with majority of those that are currently present. Motion passes.
- Move to uphold the decision by Suffolk REMSCO regarding the approval of North Shore Ambulance & Oxygen Service, Inc. expansion. Motion was 1<sup>st</sup> made and seconded to postpone this motion vote until September's meeting. Motion to postpone passes.

- Question was raised about letters of opposition being sent to the Bureau of EMS and Trauma Systems as permitted by Policy Statement 06-06. Reply was that letters were received after the ALJ decision and order was issued and there is a procedural question about whether they present new information. Issue was referred to Division of Legal Affairs and an official decision has not yet been received. Motion was made, seconded and passed to postpone a vote until the September 25, 2019 meeting.
- Nassau REMSCO, and appealed by North Shore Ambulance & Oxygen Service, Inc., ALJ recommended Nassau REMSCO action be reversed. Systems Committee seconded motion to remand issue back to Nassau REMSCO was deemed to be out of order so there is no seconded motion from the Systems Committee.
- A motion was made and seconded from the floor, SEMSCO overturn the decision of Nassau REMSCO and grant the expansion of operating territory to North Shore Ambulance and Oxygen Services for all of Nassau County. Motion did not pass.

The Legislative Committee – Seconded motions were received from the committee to support the following 3 bills:

- A00239/S04119 - Prohibits emergency service providers from selling patient health information without written consent.
- A01208/S01805 - Authorizes collaborative programs for community paramedicine services as part of the hospital-home care-physician collaboration program.
- A06211/S03526 - Authorizes payments to non-participating or non-preferred providers of ambulance services licensed under Article 30 of the Public Health Law.

Motions were passed unanimously without discussion.

#### **The EMS Children Advisory Committee –**

Last EMSC meeting was March 12, 2019. Next meeting is June 4, 2019 in Albany. Pediatric Prepared group meets monthly via webinar to discuss standards. Pediatric Prepared will be a required part of the Standards of Excellence voluntary program. Group has defined a Pediatric Emergency Care Coordinator and talked about equipment standards, continuing education requirements, skills competency, quality improvement component and safe transport component. It was announced that Suffolk County REMSCO has the largest number of PECC agencies in the state.

The next SEMAC/SEMSCO meeting dates are September 24 – 25, 2019 at the Hilton Garden Inn.

END OF REPORT