MINUTES

NORTH CAROLINA EMERGENCY MEDICAL SERVICES
ADVISORY COUNCIL

Department of Health and Human Services
Division of Health Service Regulation
Office of Emergency Medical Services

Brown Building
Dorothea Dix Campus
801 Biggs Drive
Raleigh, North Carolina

August 14, 2018
11:00 A.M.

Members Present

Mr. Graham Pervier, Presiding
Mr. Robert Poe
Mr. John Grindstaff
Dr. Kim Askew
Mr. Kevin Staley
Dr. Ted Delbridge
Ms. Viola Harris
Mr. Todd Baker
Dr. Bill Atkinson
Mr. Donnie Loftis
Mr. Edward Wilson
Mr. Chuck Elledge
Dr. Jay Wyatt
Dr. R. Darryl Nelson

Members Absent

Dr. Bryant Murphy
Dr. L. Lee Isley
Ms. Dianne M. Layden
Dr. Douglas Swanson
Dr. Jeff Williams
Mrs. Carolyn Creech
Mr. Jim Gusler
Mr. Jim Albright
Dr. Edward St. Bernard
Staff Members Present

Mr. Tom Mitchell  
Ms. Susan Rogers  
Dr. James “Tripp” Winslow  
Mr. Wally Ainsworth  
Mr. Todd Messer  
Mr. Dale Sutphin  
Mr. Brad Thompson  
Ms. Melynda Swindells  
Ms. Amy Douglas  
Mr. Doug Calhoun  
Ms. Kimberly Clement  
Mr. Justin Bowers  
Ms. Toshiba Oates

Others Present

Ms. Joyce Winstead, NC Board of Nursing  
Mr. Greg Chapman, CMC  
Ms. Gail Grindstaff, Weaverville  
Ms. Ashley Fox, Wake Forest  
Mr. Andrew Godfrey, Medic  
Ms. Tonya S. Clark, NC Community College System

(1) **Purpose of the Meeting:** The NC EMS Advisory Council met to hear reports from the Injury Committee, the Compliance and Education Committee and receive updates from the Healthcare Preparedness Response & Recovery program. In addition, the Council met to consider Naval Medical Center Camp Lejeune’s Level III Trauma Center initial designation.

(2) **Actions of the Council:**

Mr. Pervier, chairman of the Council, called the meeting to order at 11:00 a.m.

a) Motion was made by Mr. Loftis, seconded by Dr. Delbridge, and unanimously approved that:

   RESOLVED: The EMS Advisory Council minutes from the May 8, 2018 meeting be approved as submitted

b) Motion was made by Dr. Delbridge, seconded by Dr. Nelson, and unanimously approved that:

   RESOLVED: Naval Medical Center Camp Lejeune’s initial Level III Trauma Center designation be effective through August 31, 2021.

Explanation: Naval Medical Center Camp Lejeune was reviewed on July 24, 2018 with a visit by the North Carolina Office of Emergency
Medical Services (OEMS). Many strengths were noted and no deficiencies were found.

c) Motion was made by Mr. Kevin Staley on behalf of the Dr. George Johnson, Jr. Award Committee that:

RESOLVED: The Council accepted the recommendations of the George Johnson, Jr. Award Committee that there would be two 2018 award recipients; Dr. Jane Brice and Mr. Terry Barber.

Explanation: In 2000, the Council elected to establish an award named in Honor of the Council’s longtime chairman, Dr. George Johnson, Jr. The award, given in the name of the council and staff, would be given to individuals who have made outstanding and long lasting contributions to the development and improvement of Emergency Medical Services in North Carolina. The requirements seek individuals whose efforts have been felt statewide and not just in a local community or area.

This year’s nominations brought many qualified individuals. After careful review by the Committee, it was decided to choose two candidates; Dr. Jane Brice of Chapel Hill and Mr. Terry Barber of Wilson.

Dr. Brice and Mr. Barber have over 80 combined years of service in EMS and Trauma in the state.

(3) Other Actions of the Council:

(a) Amy Douglas delivered the following report on the Injury Committee:

- Naval Medical Center Camp Lejeune underwent a site review for designation consideration as a Level III Trauma Center on July, 24, 2018
- There were no noted deficiencies
- There were several notable strengths, a very brief summary of these strengths include
- Outstanding leadership and commitment to trauma care on base and in the surrounding community
- Strong trauma program staff including succession planning as new medical director transitions into the position
- Excellent care of trauma patients was demonstrated in the chart reviews
- Strong performance improvement process and program.
- Outstanding prehospital integration and engagement which is driven by EM liaison’s within Onslow County and Fed Fire EMS
- Very few weaknesses were noted during the review.
- NMCCL will need to be sure to better define characteristics of patients that are kept and cared for at their facility vs transferred out that truly need Level I or II trauma center care
Current blood bank capabilities are not sufficient to truly support the MTP that is in place. The blood bank currently capabilities includes one single apheresis pack of platelets. Given the other high level capabilities of NMCCL, expanding the availability of platelets to be more consistent with other assets should be considered.

OEMS staff recommendations is consistent with that of the reviewers. NMCCL should be receive an initial three year trauma designation as a Level III trauma center.

(b) On behalf of the Compliance and Education Committee, Mr. Robert Poe report the following:

**Compliance**

- 90 cases were heard by the Case Review Panel (including investigations and criminal records) 41% of the cases were due to violent offenses. 59% were referred to the Case Review Panel to be heard by the NC EMS Disciplinary Committee
- 87 cases were heard by the NC EMS Disciplinary Committee; top two reasons were violent offenses and drugs
- Actions taken between May 2018 and July 2018:
  - 7 summary suspensions
  - 31 revocations
  - 1 denial
  - 15 suspensions
  - 1 amended
  - 8 letters of reprimand
- Toshiba Oates was hired as the Compliance Specialist
- SBI Security project has been completed
- CRC policy has been completed, which includes a new re-apply process. Those applicants that have had an adverse action against their credential may choose to go the more formal route by filing a contested case with the Office of Administrative Hearings, which includes hiring an attorney, filing fees, etc. or they can simply apply to OEMS within the 30 day appeal window. There are two applicants who have gone through this process since its beginning in June 2018 have done so successfully.
- The office is working with the Governor’s Task Force on DWIs to identify and use grant funds to hire more drug recognition experts; this will aide in suspected DWI traffic stops. The program is being administered mainly through the NC Highway Patrol. These experts are trained to administer a 12 step protocol to determine whether the person is impaired by drugs and what category of drugs.
- The AG’s office has agreed to work with the office on a comprehensive review of their investigative practices, fact finding methods and reports. This process will begin in August 2018
- The office will be working with the NC District Attorney’s Association to explore an avenue for EMS administrators to report diversion of drugs.
will allow for criminal charges to be considered rather than just dismissing the individual, which allow them to move to another system and continue the same practices.

- Options for videoconference training statewide on compliance issues is being evaluated
- Review of the expansion of live scan fingerprinting will begin in early fall 2018
- Review of the legal recognition process will being in early fall 2018

**Education Update**

- The annual EMS Conference will be held September 28th through October 3rd. The conference is being rebranded from EM Today to NC EMS Expo
- The exhibit hall has been expanded and as of yesterday there was only one booth left.
- Preliminary Paramedic Competition winners are:
  - WFUBMC Air Care – Roger Horton/Barry McMillian
  - Cape Fear Valley Hoke EMS – Less Westbrook/Larry Smith
  - Surry County – Jose Butron/Josh LeCrone
  - Harnett County EMS – Justin Saunders/Morgan Langdon
  - Forsyth County – Jacob Moore/Dustin Gordon
- There are currently 26 institutions that have achieved accreditation
- There are 14 institutions in the Letter of Review process
- There has been 1 voluntary withdrawal
- Wally Ainsworth gave a review of the rules that took place January 1 and some that took place July 1; if anyone has questions, please direct them to Wally

(c) Kimberly Clement presented the following HPP program update:

- Vacant Assistant Program Manager Positions are at HR for final approval before positions can be offered and hopefully filled
- Notice of Award was received for a total of $6,110,088 was received. The office received $86,000 in additional funding which has been submitted for statewide training program to include a healthcare emergency manager train the trainer – preliminary approval from project officer has been received
- All eight regional work plans are approved for FY 2018-2019 and work has begun
- The focus for the coming year is for ongoing engagement and training for long term care facilities
- Medical surge exercises
- Operational readiness sustainment and
- Response planning for patient movement and bed availability
- OEMS Staff recently completed demobilization mission to Marathon, Florida to retrieve the MDH asset that was utilized by Fisherman’s hospital over the past year after Hurricane Maria hit Florida. The team worked incredibly hard in very hot conditions to bring that resource home – huge thank you to the team that assisted with that mission; Roger Kiser, Ronnie Murtagh, David Ezzell, Jim Morris, Robbie Amerson, Wally Ainsworth from OEMS, Brian Parnell from NC EM, Will Connor from Duke HPC and David Holder and Jerry Tysinger from Triad HPC.
Atrium Health: Med-1 has secured a contract through their events medicine team to provide staffing inside the Tryon International Equestrian Center during the Work Equestrian Games.

OEMS has been requested to support Atrium Health: Med-1 during this event with staffing and command and control coordination. The cost for this support is being paid for by Atrium Health: Med-1. Staffing from HPCs & EMS Agencies across the state have volunteered to help. There is a total of 49 shifts still open (>90% of these shifts are for EMTs). This puts us at nearly 90% capacity for the entire number of shifts needed. Recruitment for the event is still active.

OEMS is planning to pre-position State Medical Response System (SMRS) resources (Ambulance Buses, Ambulance Strike Teams and a 5 Bed Mobile Emergency Department) in and around Polk County in case there is a need for medical surge capacity. OEMS Healthcare Preparedness Program will use federal grant funds as part of a training exercise to cover the small cost to pre-position these resources and they would only be staffed and utilized if a disaster or major medical emergency occurred and they were requested by local or state emergency management.

OEMS has 8 executed contracts for the EVD/HCP grant. In-person meeting was held on 7/30 to bring all hospitals together to discuss the future of the grant. DPH participated and will be assisting OEMS with plan coordination, training and exercise. Focus continues to be on all-hazards, high consequence.

(d) Todd Messer presented a power point update on computer based testing; following are key points of his presentation:

- Pilots were launched on May 14, 2018
- Official launch occurred on May 21, 2018, with results held for 30-45 days
- As of August 14, 2018, tests were given as follows: 77 EMR, 1307 EMT, 88 AEMT and 289 Paramedic. There have been a total of 1761 exams attempted. Currently, 253 are scheduled
- Concerning comments were minimal; many positive comments
- Current issues are being resolved fairly quickly; problems with bad email accounts, not following instructions, etc. have caused some concern
- Utilized the modified Angoff Approach; this scoring is commonly used today in high stakes certification licensing tests.
- Multiple exams for each level, each exam score is based on the Minimally Competent Candidate
- Although candidates will not receive a final percentage score, they will receive a breakdown of domains and percentages
- Results are exported from Castle to Continuum every 24 hours
- Once results are posted in Continuum, the AOC/background process begins; if no hits on AOC, no self-reported hits on applicant statement and the individual has lived in NC for greater than 5 years, the Credential will be released within 24 hours

(e) Dr. Winslow gave the following Medical Director update

- There is, apparently, some significant Hepatitis A outbreaks in the surrounding states. Currently, there are 13 Hepatitis A cases in NC, mainly in high risk groups. HHS is requesting EMS to watch for Hepatitis A outbreaks and they are currently evaluating if there are areas where EMS can help
participate in prevention. Currently, NC has not seen any of these outbreaks, but in the surrounding states there have been very significant outbreaks.

- A pediatric trauma needs assessment has been initiated. Currently looking as some of the top zip codes in the state for pediatric trauma and some of the non-trauma hospitals which get the largest numbers of severely injured children. Main takeaways, 60-70% of the severely injured have been in rural areas. Looking to do some education interventions and preventative initiatives to help in these areas.

- The ketamine pilot project, which has been approved by the NC Medical Board, will begin soon. It will not start before September because there are significant requirements local EMS agencies must meet. The Medical Board requires appropriate education be received before the pilot begins. Emphasis is being made that only the medical care providers can make the decision as to who will receive ketamine, not other public health safety professionals on the scene.

(f) Kevin Staley, member of the Dr. George Johnson, Jr. Award Committee presented the nominees chosen by the committee to the Council

(g) Mr. Tom Mitchell gave the following agency update

- Staff updates: Kimberly Clement, HPP Program Manager, hired June 4, 2018, came to OEMS from Division of Public Health. Kimberly is a Paramedic and maintains her affiliation with Wake County EMS. OEMS is awaiting approval from HR for two HPP Assistant Managers, one for Planning and Exercise and one for Operations. Second individual to introduce is Toshiba Oates, Compliance Specialist working out of the main office here in Raleigh. Toshiba started on August 6, 2018 and she will be working on Disciplinary, electronic fingerprinting, etc. to help improve processes in the Compliance section of OEMS. Last staff update is the Western Regional Specialist for education, Tonja Pool, who will begin on August 20, 2018. Tonja served as the executive director of health services and public safety for Catawba Valley Community College

- Rule 204 that was proposed approximately a year and a half ago received 10 letters of objection which caused it to be put before the General Assembly. They had a period of time in which to enact legislation to change the rule, but did not. Therefore, the rule, as it was written, became effective some time in June of this year. The primary objection to the rule was that it eliminated the requirement for the affiliation of the Level I and Level II trauma center for rotary wing and the affiliation with the hospital for fixed wing has been taken out of the licensing requirements.

- Dale Sutphin, OEMS Communications Director, is presently researching the benefits and effectiveness of maintaining and using the MED8 and MED10 Systems, known as the North Carolina Medical Communications Network (NCMCN). EMS agencies are primarily using VIPER system, NCMCN was a secondary system. OEMS is working with healthcare coalitions to be sure there will be no lapse in coverage when we discontinue this aging system. The equipment is in need of expensive repairs. We are in the process of tearing down equipment that is not working and will eventually discontinue use of the system entirely.
The Provider Violence portal, supported by funding through the Duke Endowment, will be rolled out in September.

Some education changes will be proposed. There will be more to come in the following months.

Other Business:
Advisory Council member, Mr. Chuck Elledge, brought to the Council’s attention an incident in Wilkes County involving an emergency vehicle, a Dodge 4500 chassis. The transfer case blew, sending shrapnel up through the chassis and deploying the air bags. Chief Mitchell advised we would try to disseminate this information once we can determine how many agencies are utilizing this type of vehicle.

There being no further business, the meeting adjourned at 11:57 am.

Minutes submitted by Susan Rogers