

EMS Advisory Council / Education Committee      January 20, 2010

Ocean Center, Daytona, Florida, Room 202A - 3:00pm

Danny Griffin called meeting to order at 3:00pm, See sign-in sheet distributed.

Agenda for meeting was posted by Desi prior to Education Committee meeting. Interested parties were encouraged to review agenda prior to meetings.

Danny Griffin explained the need for 2008-2010 strategic plan report to be provided to State Surgeon General of accomplishments the EMS Advisory Council / Education Committee achieved. If anyone would like to contribute to this report, please send to Danny.

If 401 opened there may be opportunity to change present Strategic Plan format of new Plan every 2 years, to one of every three to four years, with an annual review. The present two years is driven by 401, but places implementation, planning, etc into very tight time line.

Strategic Plan allows for a more stable format as Committees are less focused on perceived 'crisis' of the meetings. Have a set of Goals and Objectives, keeping in mind document is fluid to allow for changes and revisions to reflect best practices and standardizations as implemented.

Danny introduced Tracy Yacobellis, from the Department of Education representative. Tracy discussed curriculum framework.

Discussed the revisions (four levels of practice) and each are fluid enough to add to as necessary. Congratulations were extended to Lisa Walker, Cory Richter, and Julie Bacon for the great job and ability for groups to work together, as all individuals and constituencies have avenues for input.

Discussed the implementation of the Agenda for the Future and the need for Florida to implement time lines (see slide). Discussed surveys in progress (although noted had limited responses from some). Also discussed gap analysis. Danny clarified that adoption of the EMT and Paramedic scope of practice are foregone conclusion. There was discussion of Florida's First Responders, which at present complete a variety of available courses but receives no certification. Many of these individuals are volunteers, who may not have the financial means to obtain certifications and then updates. Joe McManus of the Lifeguards' indicated 70% of them are First Responders. This is already part of allied health and many High Schools offer. Tracy Yacobellis indicated there are some available funding opportunities and funding is growing because of needs. John Scott talked about the use of EMR in diverse/non-traditional roles such as Day Cares.

Note: The term First Responder will become Emergency Medical Responder.

Discussed survey results to date (have not reached closure date), identifying each area of responses by those affected for additional educational opportunities (programs to meet needs) and those who be utilizing these services within their respective departments (fire, non-fire, Forestry, Lifeguards, etc). (See Survey)

Also discussed identifying educational modules for the State - added content, noting many States currently do more than original curriculum mandates. At one point there were 47 different levels of EMT providers in the US (and we wonder why there is such confusion?). This process will greatly enhance public knowledge of levels of practice when requesting assistance from other states during disasters. Danny will be providing an update, including current/progress thus far of surveys, and will be asking for support of EMR.

Adoption of the EMR and certification of the EMR would accomplish regulation of EMR including refreshers for those individuals. Discussed Florida State recognition of individual 'certified'. There was also discussion of the problems associated with the various other individuals this would affect, i.e., Law Enforcement are First Responders but use their own course developed by FDLE. A Forestry representative in attendance stated that there are over six hundred Forestry employees who are also First Responders. Danny will have dialog with Forestry to determine best steps going forward. Danny then requested opinions from participants about the Advanced EMT (AEMT) level.

Jamie Green discussed taking data to Advisory Council as opposed to recommendation. There was discussion of if there is enough data, from the various groups affected, for Florida as a whole? And additional discussion included the financial burdens this may impose, including departments that fund their certifications, i.e., Chiefs budgets, etc. Danny explained that this was the main reason he purposely involved those most affected (education and job providers), with a 40% response, which is quite good. One option expressed was having individuals responsible for portion and departments responsible for other portion.

Clint expressed concern about opening issues with third level (AEMT) and how it would be paid for as well as how would be reimbursed. He felt could have negative impact on reimbursement with payers electing to reimburse on a lower scale based on these levels.

Danny mentioned that Georgia EMT- intermediates as minimum staffing on ambulances. As well, with the recent changes to 64J, Florida EMTs are close to the AEMT level, but updates are done post graduation by departments who actually hire these individuals then train them to the specifics of the department.

Dr. Nelson urged State recognition because State recognition of AEMT would have AEMT ambulance component, which would bring with it other issues.

Danny stated, we may see AEMT use would be helpful to the Paramedic shortage of a few years ago that seemed to be mostly regional in nature, rather than affecting the State as a whole.

Some expressed State recognition would provide better agency protection but would add a layer of costs not presently within the systems, and these costs may become an issue.

Steve McCoy reminded group we still have a lot of work to do and is very expensive process for State certification (for levels). Would require data base and lot of ground work not present at this time.

Jamie indicated if recommend the four levels it would be up to the individuals (both for education and providers) to have option to utilize or not. Jamie also informed the group this is an historic moment to send this recommendation forward (of the four levels).

John Scott talked about taking on projects that set standards, i.e., the Instructor Course, and encouraged the group to stay on course and hold people accountable, and set standards.

Some expressed idea of supporting this would be easier if it was 'budget neutral'.

There was discussion of adopting these levels (as written) in Rule, and changes would be easier going forward.

John Todaro discussed education's ethical responsibilities. Felt we need to support the four levels, and if we have not been regulating them it needs to be. He stated that we need to take profession in correct direction.

Shari Turner discussed Education Committee looking at standards of education and everything else should be secondary.

Discussed things that are customer driven and regions may differ in needs. In Florida 2/3 are EMTs while 1/3 are Paramedics, although Jamie clarified point of all are given opportunity for access. May be easier to go through levels if this is how an individual wants to progress. We will need to work on the transition between the levels as well. Danny felt strongly about the Education Committee and hard work/efforts that would be involved in this process/progress. Would not make sense to do the work and then not have State adopt. As well, discussed there are funding opportunities associated with the Agenda for the Future, since this is a nationally recognized process.

The Medical Directors have not taken a stance on issue. Levels and associated issues have only been discussed during their meetings. Danny indicated he will take the issue to Medical Directors at their meeting tomorrow.

Next discussed the legislative effort he has achieved in obtaining support for removing the outdated HIV requirements in 401. (Point of clarification: HIV is covered, as well as other topics, in agenda currently. This would not eliminate education but rather replace with updated mandates.) Senator Steve Oelrich is supporting Education's efforts.

Discussed focus for next two years and time line involved. Tracy Yacobellis from DOE can assist committee in linking curriculum framework but texts and examinations need to be in place. Tracy discussed the time line, splitting up of programs, and the DOE method of operating basically a year in advance. Work this year would reflect the needed issues addressing the EMR. She indicated would most likely put AEMT towards back of plan, and may still need to go to DOE as a request. Tracy discussed process DOE goes through, including legislative and/or technological changes that may need to occur. This process involves working groups, department heads, and steering committees as well as may involve State Board. There was discussion of issues of 'grandfathering' individuals and having to review changes to levels in existence now to bridge differing levels are where different individuals would fall (both forwards or potentially back).

Discussed gap analysis and if group felt there was a need for analysis? There was discussion of hours, content, length of programs, and development of new standards. Many felt Florida teaches above minimums. Consensus was to obtain analysis to determine where state falls in reference to education modules. Danny reminded group of 'consistency' message with Agenda for the Future, and raised issue of increased education with these levels is considered a floor and not necessarily a ceiling. Some may not want process to lower certification level, which at present is not an issue in Florida. Discussed last year's work on modules for state and added content.

Discussed the need for developing reciprocity procedures as defined in the NAEMSO timeline. Informed group there is a form in development by the NASEMSO that would be consistent in each state. The form help states review the any potential problems from the state that an individual requesting reciprocity is practicing. This would reveal and deficiencies of disciplinary issues involved.

Jamie discussed some in favor of reciprocity while others opposed. Danny reminded group of the importance of the Agenda for the Future's portability, very similarly to other health care professionals currently recognized with reciprocity. Shari expressed desire to leave the issues up to the individual to maintain, whether they move or stay within the same state. Danny indicated National Registry is looking into competency based recertification process. Clint asked about

state's 'level's varying but Danny clarified all state's would meet minimums. States can recognize reciprocity but still 'test' on anything 'required' by Florida over levels.

Consensus from group: Recommend all four levels but not at this Advisory Council meeting Friday as need more information for informed decisions, as well as the required 30 day notice/posting for all to review. Danny did identify a few more groups to survey who attended the education meetings.

Meeting adjourned 4:30pm

Meeting Minutes will be posted to EMS Bureau site