

Minutes
Training Subcommittee Meeting
June 4, 2008

Training Subcommittee Members

Present

Shanna Alger
Jeff Davis
Jay Downs
Eric Hales
Dorrell Henderson
Marlon Jones
Jack Meersman
John Miller
Gennie Mulqueen
Nathan Pennington
Debby Peterson
Dana Shaw
Marty Wilson

Excused

Kathleen Adalgais, M.D.
Neil Coker
Carol Huff
Kirk Middaugh
Mark Oraskovich, M.D.
Kim Rowland, M.D.

Visitors

Otis Smith
Joe White
Ernie Williams

Bureau Personnel

Dennis Bang
Travis Scoresby
Leslie Johnson
Dan Camp
Michelle Hale
Tami McDonald
Angie Andrus
Jim Hansen
Peter Taillac, M.D.

- Jack Meersman called the meeting to order and asked for a motion to approve the minutes of March 5, 2008. Nathan Pennington wanted to clarify that in the last meeting he was talking about the Intermediate and the Intermediate Advanced and also that the agencies would stay at their current level, and that there would be no decrease in the service provided.

Nathan Pennington motioned to approve the minutes with corrections from the March 2008 meeting. The motion was seconded by Shanna Alger and passed unanimously.

-Travis Scoresby and Dr. Taillac proposed the following rule change for Tuberculin Skin Tests:

“Submit to the Department a statement from a physician (or other health care provider) confirming the applicant’s negative results of a Tuberculin Skin Test or equivalent (TB test) examination conducted within the prior year.”

- (i) If the test is positive, and there is no documented history of prior Latent TB Infection (LTBI) treatment, the applicant must see his primary care physician for a chest x-ray (CXR) in accordance with current CDC guidelines and further evaluation. Results of CXR must be submitted to the Bureau.
 - a. If the CXR is negative, the applicant’s medical history will be reviewed by the State EMS Medical Director. If deemed to be a public health risk, treatment for LTBI must be instituted. After appropriate treatment is begun, the applicant may be cleared for certification. A statement from the

treating physician must be submitted for review by the State EMS Medical Director. Within one month of completion of treatment, documentation of completion must also be submitted for review. If treatment recommended by state EMS Medical Director is not completed, the applicant's certification may be denied.

- b. If the CXR is positive, the applicant is considered to have Active TB. Evaluation and completion of treatment by an appropriate physician will be required prior to certification. Each such case will be reviewed by the State EMS Medical Director.
 - c. In the event that an applicant who is required to get treatment refuses the treatment, BEMS may deny certification.
- (ii) A TB test should not be performed on a person who has a documented history of either a prior positive TB test or prior treatment for tuberculosis. The applicant must instead have a CXR in accordance with current CDC guidelines and provide documentation of negative CXR results to the Bureau.
 - (iii) If the applicant has had prior treatment for active TB or LTBI, the applicant must provide documentation of this treatment prior to certification. Documentation of treatment will be maintained by the Bureau, and needs only to be provided once. Each such case will be reviewed by the State EMS Medical Director.

The state EMS medical director (Dr. Taillac) would give his recommendation for treatment after sitting down with the individual and the individual's doctor to review the case and decide what treatment would work the best.

Nathan Pennington motioned to accept the TB rule change. Eric Hales seconded the motion and the motion passed unanimously.

-Jack Meersman discussed the Paramedic certification changes – Two year. vs. four year. Jack recommended that we keep the four-year certification and if background checks need to be done more then we do them every two years. Jack wants to see all levels of certification have the same requirements. Agencies will administer recertification practical tests and the state will audit the testing. Peter Taillac suggests that a task force be put together with some members of the Training Subcommittee members.

-Jack Meersman talked about CME hours needed for recertification. The proposed recertification CME hours for a four year cycle would be as follows: Basic =90 hours, Intermediate and Intermediate Advanced = 100 and Paramedics =120. The Scope of Practice was used as a guideline for the CME hours. The ACLS and PALS are no longer a part of the Paramedic CME because they are already a state requirement. Marlon was concerned about the hours going up for the paramedic CME. He says that they would like to see some adjustments to the CME by adding the ACLS and PALS into the CME. Recommendation was made to make CPR, ACLS, and PALS its own separate category. Recommendation was also made to take hours from Trauma and move the extra hours to the Medicine category. Marlon Jones, Eric Hales, Nathan Pennington, Marty Wilson,

John Miller, and Joe White would be interested in looking over the CME hours and adding ACLS and PALS to the requirements and bring back to the Training Subcommittee Meeting.

-Peter Taillac talked about the Paramedic Practical's. He suggests having an open book type of test where the Bureau of Emergency Medical Services would send out topics that would need to be addressed, possibly doing it online. Marlon Jones talked about how he administers tests to his paramedics to keep them up to date with skills. Iron County is doing something very similar with testing for their agencies. Peter wants to see consistency all across the state. Recommendation was made that a little quiz be given at the end of a little exam that the agencies would keep on file, so that if the agency were to be audited they would have those on record. Recommendation was also made that it not be computerized because all agencies don't have access to a computer.

-Jack Meersman talked about Live vs. Media. He stated that 35% had to be a live process or interacting. 65% can be done online. Travis states that this rule change really helps the people that aren't affiliated with an agency. He quoted part of the rule that states "Qualified continuing medical education hours shall consist of CME approved for credit by the Department, a designated EMS Training Officer, or the Continuing Education Coordinating Board of EMS".

-Peter Taillac will create a task force that addresses the Paramedic Practical. Shanna Alger, Eric Hales and Marlon Jones volunteered to be on the task force.

-Jack Meersman talked about Stoke and Trauma information. He stated that there is a phone number that if the agencies transport a patient they can call and get information on that patient to see if they made a right choice to transport. Jack stated, when you call they will ask enough information to make sure that you are an EMS agency and that you are the one that transported the patient. This information is statewide.

-Leslie talked about changing dates of the Subcommittee Meeting. She proposed having them on the second Wednesday of the month starting in the New Year.

-Dennis stated that if anyone knows anybody that is interested in being on any of the Test Teams to fill out an application online and send it to him.

Next meeting will be held on September 3rd at 10:00 a.m. at our new location. 3760 S. Highland Dr., Salt Lake City.

Nathan Pennington motioned to adjourn the meeting and Gennie Mulqueen seconded and the motion passed unanimously.

- Meeting adjourned.