

Joint Organization on EMS Education Meeting October 13, 2017 ***at 9:30AM***
 CNM's Workforce Training Center - 5600 Eagle Rock Ave. NE Albuquerque, NM 87113 ([map](#))
 Items with a vote – Items with future/tabled discussion – Obligation set by/for a member

Time	Topic	Presenter
	Meeting Called to Order / Opening Remarks	Jessica Medrano
	Ensure Quorum, turn in proxy/designee documentation Quorum Met; proxies for Region 2 and CNM	Jessica Medrano
	Motion to accept the minutes: Joyce 2nd: Karen Discussion? None. Vote: All in favor	
	Introductions	ALL
	Program reports <ul style="list-style-type: none"> • ENMU: Classes on the ground and running. First progress report for accreditation submitted. They asked about validation for exams. It was a simple fix for us, though there was not really clear direction. I'll advise group on outcome. • DACC: Site visit went really well. Told we were one of the best in the country. No findings. They asked us about test as well, right down to level and analysis. Paramedic class started in summer. Received approval to run a paramedic class in Silver City. 4 Basic and an intermediate. Have done 3 refreshers and will have last chance 13-15. Doing a combo refresher also. My job will be posted soon, in the area. • CNM: 6 Basics going, 2 Intermediate. 2 Medic cohorts. Training Bernalillo County for CEs. SUNPATH curriculum development ongoing. Modules are turned in and we're working on exams. Leslie Foust Clinical Coordinator. Community EMS not seeing a lot of enrollment. Looking into a non-credit option to avoid cancelling each time. Scenario testing for paramedic application all day today. The SUNPATH Has been a great experience. • SJCC: EMR/EMT/AEMT in progress, graduated last paramedic class in August and next begins in spring. All gung-ho. We did NCCP model "refresher" yesterday. We have 3 combo refreshers as well. • UNM: 2 Paramedic starting in November. 35 EMT and 13 AEMT for the year. Ken Schaaf added to rural courses to meet with ICs and administrators in the field. We've gotten great feedback about the support. No questions. 	ALL
	NM EMS Bureau report: <ul style="list-style-type: none"> • Returned from NASEMSO meeting. Few topics discussed there: <ul style="list-style-type: none"> ○ Natl. EMS Management Assn. I spoke with their director. They are trying to get rid of some of the nomenclature. Especially, they would like to call everyone paramedics. I was not terribly excited. He pointed to Canada as an example. They have Paramedic 1, 2, and 3. Mentioned Las Vegas, everyone was referred to with one term: First Responders. Police, EMS, civilians, etc. I challenged him to inform me on how it would advance our profession. Keep this on your radar. NEMSAC (National EMS Advisory Council) - maybe has endorsed the idea of one term for all levels. Any final result would not be binding, but important, of course. ○ National Scope of Practice Model is moving along. A few hiccups in 	Kyle Thornton

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	<p>the process. We (NM) are lucky enough to have 3 people on this team: Anne Bellows, Dr. Brian Moore, and myself. The group is looking at some things that are a big deal to them, some things that are not to us, but: Narcotics for AEMT, Naloxone for everyone. What has come up the most: the number of levels of EMS. One body of thought is that it should be 2. Another body is 5. And another is that it should be 3 – eliminate First Responder. I am a contributor only. I am watching and learning. My input to this point is get the scope of practice done first, and set levels aside for future discussion. So be aware of the national discussion.</p> <ul style="list-style-type: none"> ○ Very first Interstate Commission for EMS Personnel Practice meeting. This is for REPLICA (Recognition of EMS Personnel Licensure Interstate CompAct - http://www.emsreplica.org/). They needed 10 states and have 12 to stand up Commission, so they met. Chairman is Joe Schmider, State Director for Texas. I believe he will run this very well. They become almost a state, and will develop rules on how REPLICA works. We will monitor to make sure that they are something that NM would like to work with. At this point, NM wants to be a REPLICA state. We will re-evaluate if the commission comes up with anything disconcerting. ○ EMS 2050 (http://emsagenda2050.org/). Project far too under the radar. They're having meetings regularly. NHTSA (National Highway Traffic Safety Administration - https://www.nhtsa.gov/) is inviting folks to these meetings to offer input on where you would like to see EMS in the next 30 years. It's an opportunity for you. There's one coming up in LA in January – none real close, but I really encourage you to go to those meetings, if you have an opinion on where we should be going. Really interesting stuff – drones and driverless ambulances. We are well represented in scope of practice, and we need great NM ideas input there. ● More locally, we have our Rules Hearing October 26th. We've been waiting a year and a half and are very excited to be getting this done. The scope of practice that was discussed in 2016 is now going in, and we're adding the medical orders for licensing and treatment form to our EMS DNR program, making changes to the cardiac arrest statute. Five rules being updated. I encourage everyone to show up. It could be entertaining – if you have comments, support, opposition, share them. 9:00AM at the Harold Runnels Building. 1190 S. St. Francis Drive, Santa Fe, NM 87505 (https://goo.gl/maps/VnLDktFh5uD2). ● NMEMSTARS (Emergency Medical Services Tracking And Reporting System - https://www.nmemstars.org) in Beta testing. Their vendors are reporting experiences ok. Expecting to be up to level 3.4, or elite 3 level, by the end of the year or next year. If you're worried about progress, some other 	

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	<p>states at level 2 still. Thanks to Chas Becvarik for all his hard work in the process. There's actually another version out... Won't be implemented for 5 years.</p> <ul style="list-style-type: none"> • Will hopefully be posting state epidemiologist and state stroke/STEMI coordinator positions soon. Will try to make system better as well. • Meetings: <ul style="list-style-type: none"> ○ 11/8 at 1330, SWAC (Statewide EMS Advisory Committee) <ul style="list-style-type: none"> ▪ https://nmhealth.org/about/erd/emsb/comm/#swac ▪ Held at AMR HQ in Las Cruces: 920 South Valley Drive, Las Cruces, New Mexico 88005 - https://goo.gl/maps/ZJycmJW5gk22 ▪ Question: Will there be a call-in number? Odds are good. Doug Campion, phone in? Yes. There will always be a phone in, at all my meetings 😊. I'll have that out soon. ▪ Confirmed: <ul style="list-style-type: none"> • There will be a PRC Advisory meeting at that location that morning at 10 • EMS for Children at 11 there ○ 11/8-9/2017, Region 2 Conference: CE classes, PHTLS Sat-Sun. CEs classes free of charge for EMS providers. <ul style="list-style-type: none"> ▪ Part held at Mountainview Medical Center and part at AMR. ○ 11/14 at 1000, EMS Licensing Commission <ul style="list-style-type: none"> ▪ https://nmhealth.org/about/erd/emsb/comm/#emslc ▪ Held at Scientific Labs in Albuquerque: 1101 Camino de Salud NE, Albuquerque, NM 87102 - https://goo.gl/maps/QQFTQmgBzDp ○ 12/5 at 1300, Air Ambulance Advisory <ul style="list-style-type: none"> ▪ Held at Atlantic Aviation ▪ 2505 Clark Carr Loop SE, Albuquerque, NM 87106 - https://goo.gl/maps/4kkB6iF3eVr ○ 12/15 at 0900, MDC (Medical Direction Committee) <ul style="list-style-type: none"> ▪ https://nmhealth.org/about/erd/emsb/comm/#mdc ▪ Held at CNM WTC in Albuquerque: 5600 Eagle Rock Ave NE, Albuquerque, NM 87113 - https://goo.gl/maps/uG6KEQBCsbP2 ○ 12/18 at 0930, JOE (Joint Organization on Education Committee) <ul style="list-style-type: none"> ▪ https://nmhealth.org/about/erd/emsb/comm/#joe ▪ Held at CNM WTC in Albuquerque: 5600 Eagle Rock Ave NE, Albuquerque, NM 87113 - https://goo.gl/maps/uG6KEQBCsbP2 • Busy January and February! • Economy seems to be picking up. 	

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	<ul style="list-style-type: none"> • Questions? <ul style="list-style-type: none"> ○ Are we not really pushing the underage licensing anymore? No, it's still a possibility and we encourage it. If they have everything needed, how can we make it easier? It might be easier when that happens to call Martin first, to help guide through the process. Is there a way that we can provide information on the process after they come of age? Discussion ensued about the experience of each institution. Institutions can re-clear skills when it comes time to get NR certification. NM only cares about the student having taken and passed the exam. NM does NOT care about NR certification. So assessment counts for full licensure. And Martin can verify students when they come of age. ○ Also regarding NR, they recommend a refresher for people who've failed the cognitive exam 3 times. But why refresh when you weren't competent in the first place? A remediation plan would be much better – yes, the site says other options, but refresher is silly. <i>CNM has an ongoing remediation program</i>, send them to me (Jessica). ○ Further discussion about nomenclature and numbers of levels, possible originations of issues. 	
	<p>Student Ratios: vote on language (not many people left)</p> <ul style="list-style-type: none"> • Approved language not available in time for last minutes: "The US Department of Transportation's National Highway Traffic Safety Administration requires an instructor to student ratio of 1:6 for the psychomotor skills portions of EMS courses. This is the ratio recommended by most medical training programs as well. It is the recommendation of the JOE committee that training institutions adhere to this ratio when teaching psychomotor skills." • Motion: Joyce 2nd: Jesse (?) Discussion? The word recommendation is in there to allow the institution the freedom to staff courses at their discretion. Vote: All in favor • How to police this? Put at the top of each level of standards? Approval Process? Jessica will send out a suggestion of where to have it. 	Jessica Medrano
	<p>Curriculum Standards Review/Vote: Are moving forward with current changes and will plan to vote in December.</p> <ul style="list-style-type: none"> • Combination of National Standard with NM tied into curriculum • Curriculum was sent out on 7/21 for review, with direction to send in comments/changes. <p><u>Paramedic curriculum team:</u> Lindsay Eakes, Sahaj Khalsa, Stacie Nason, Jessica Medrano, Andrew Kalishman</p> <ul style="list-style-type: none"> • Accepted as was, no vote but moving forward. Clarified skills chart. • Add crew resource management & culture of safety <p><u>EMT-I/AEMT curriculum team:</u> Martin Salazar, Diane Meyer, Martin Moulton,</p>	Jessica Medrano

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	<p>Doug Gadomski, Donnie Roberts</p> <ul style="list-style-type: none"> • NMEMSTARS – take it out. Both EMT and AEMT. • Add DCHARTE/SOAP • Add crew resource management & culture of safety <p><u>EMT-B/EMT curriculum team:</u> Gabe DeBaltz, Donna McHenry, Sonya Damon, Kyle Cole</p> <ul style="list-style-type: none"> • Remove from NM EMS –accessing EMS system • NM EMS specific 2.0 hours Bureau and Regional Information? Kyle: we were trying to reduce the overall time. Ok, leave it in or take it out? They seem to find their way to the offices eventually, after licensure. Consensus: Leave it in Basic (already in AEMT). • Remove NMEMSTARS. • DCHARTE/SOAP specifically mentioned, put into all levels? • Add crew resource management & culture of safety • Angina removed from EMT? Kyle: We removed because it's an ACLS topic • When teaching septic shock, need to teach about sepsis too? For better understanding later? Yes. Adding in to shock and resus • Why trauma scoring removed from EMT? Not sure – thought we included Natl. guidelines. Maybe not needed at NM level? But it is in curriculum. Jessica marked to review. • Add occlusive dressing to EMT. • For patient complaints in the clinical field, live simulated vs. standardized patient? It's possible not all current standardized patients fit the definition. Currently CNM has medic students do two additional pediatric assessments on their own (just people they know). They just need to be live. CNM is going to try to pair up students with school nurses. Yes, change language. Community centers, etc. <p><u>FR/EMR curriculum team:</u> Joyce Bradley, Shelly McLaughlin, Justin Powell, Carl Gilmore</p> <ul style="list-style-type: none"> • Remove NMEMSTARS • Adding NM EMS regional info • Remove NM EMS – delete accessing EMS system • Add DCHARTE/SOAP • Add crew resource management & culture of safety 	
	<p>IC credentials management:</p> <ul style="list-style-type: none"> ○ Review transfer document sent out by Donna. This is a document to transfer affiliation from one institution to another. Martin has agreed to print cards (only – record maintenance responsibility of IC and institution). Having a card would be very nice. Maybe we could ask Martin/Bureau to remove names if that ever happens, as only maintenance? Agreed. Maybe maintaining the list of ICs can be the job of the JOE Secretary? Updates to Bureau would come from them (vs. every program director). Suggestion made. Jessica will ask 	<p>Jessica Medrano</p>

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	<p>Donna.</p> <ul style="list-style-type: none"> ○ Question: Why do we need to renew at all? How do you know if your instructors are doing what they should/need to be doing? We had some issues in the past. Determined that we need to, every 2 years, verify that they are performing up to current standard. This process ensures that they are continuing to develop. Carl: It's hard to believe that the rules will take someone as myself out of the field because the courses I teach don't count. Clarified: Change language to all EMS-related classes – but could that be too broadly interpreted? Like card courses? Probably. Working on language: Documentation provided by the IC to the Educational Institution of teaching at least 72 hours of acceptable EMS-related education. To run a certification course, you have to be an IC. But if it's required to renew, we'd lose half our ICs. ○ Motion to accept transfer request form: Jesse. 2nd: Joyce. Further discussion? None. All were in favor (via text from Diane) ○ Place on nmems.org? Not discussed. Asked Kyle and Charles after discussion, and they said fine, get with Martin. Barb will do. 	
	Lifepoint hospital procedure change: Donna not present	Donna McHenry
	<p>Medical Marijuana</p> <ul style="list-style-type: none"> • Background (ENMU): not EMS, but other programs have students that tested positive for marijuana/THC. The school is looking for feedback from programs to determine their stance. • General comments: If it's a medication that affects performance, it's not accepted. AAS: if you test positive (for THC), you are out. We do not currently do any type of intoxication level test. Also, we only test for cause now. Bureau: We would still address anyone who's tested positive and performance was impacted. DACC: Field services said no-one allowed on trucks with it. Consensus: If there is an issue, a card does not defend a positive test and negative situation. 	Jesse Davis
	<p>Attestation Language feedback from NREMT:</p> <ul style="list-style-type: none"> • Discussed the response. Still waiting for a response on: <ul style="list-style-type: none"> ○ Age limit of persons on site day of exam ○ Confirmation on props – table and chair or more extensive? Portfolio scenarios for training is more extensive. • If need to add someone a week before, they might consider. They can email us the additional paperwork. 	Jessica Medrano
	Next meeting/s: MDC meeting 12/15 9:30; can't do 8 th , big scenario development thing at UNM. JOE will be 12/18: 9:30-12:30	
	<p>Goals and Objectives for 2017</p> <ul style="list-style-type: none"> • JOE Process refinement (i.e. Approval Process) • Increased participation in medical direction • Increased visibility 	

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	<ul style="list-style-type: none">• Annual review of JOE Approved curriculum at all levels• Have IC list added as a link to the JOE section of the site	