



eLicensure Statewide Steering Committee

July 20, 2017
10:00 am to 3:00 pm
Room 212
653 West Pratt Street
Baltimore, Maryland

Meeting called by: Rae Oliveira, MIEMSS

Agenda Topics

10:00 Welcome and Introductions

10:10 Committee Purpose and General House keeping

10:15 What we have heard thus far from users

10:45 Where we stand with current system improvements

12:00 Break - Lunch provided

12:30 Member Roundtable

2:45 – 3:00 Meeting Closure and Adjournment

eLicensure Statewide Steering Committee Meeting - July 20, 2017

Those attending in person: Collen Lull, Baltimore City; Krystal Kelly and Karin Mc Gillin, Baltimore County; Charles Packard, BWI; Heather Howes, Calvert County; Cutis Wiggins, Carroll County; Paul Massarelli, Cecil County; Lori Cherry, Charles County; Wayne Tiermersma and Curtis O'Neal Garrett County; Linda Dousa and Bill Dousa, Harford County; David Rice, Kent County; Lee Silverman, Montgomery County; Charles Duran, Naval District; Richard Koch, Ocean City; Bryan Spies, Prince George's County; Scott Wheatley, Queen Anne's County; Brian LeCates, Talbot County; Mike Parsons, Wicomico County; John Oliveira, Venetia Roberts, and Scott Spangler, LifeStar Response; Chuck Boone, Procure; Sue Colburn, Anne Arundel CC and Chesapeake College; Mike O'Connell, Anne Arundel CC; Robert Henderson, CCBC; Gary Woiliams, UMBC; Jeff Willats; Rae Oliveira, Terrell Buckson, Pete Fiackos, Mark New, Jon Bratt, Jeff Huggins, Jon Barto, and Lisa Chervon, MIEMSS.

Those attending on the phone: Ryan Todd, Caroline County; Doug Beitzel, Garrett College; David Collins, Worcester County; Kathleen Harne and Mike Cole, Frederick County; Teresa Stoller, Prince George's CC; Christine Lippy Barnes; Chris Truitt, Salisbury Fire Company; Bev Witmer, Hagerstown CC; April Johnson, College of So MD; Aksa Nainan, MIEMSS; Tim Collins, Somerset County; Danny Webster, Wor-Wic ; Todd Dyche, MFRI; Cory Polidore, Anne Arundel County; Mark Pettit, St. Mary's County; and Rick Hemphill.

Dr. Alcorta: Today's discussions will be strategies and the development of a To Do List. The eLicensure product will make it easier for your providers to manage their accounts, manage affiliations through you as the designated authority and your medical directors, quality assurance and CME's. MIEMSS is also trying to simultaneously set this up to link and populate with eMEDS (Image Trend's electronic patient care report). Image Trend has been mandated to make those corrections. In the initial implementation, jurisdictions provided MIEMSS feedback very quickly that it wasn't meeting your needs and we pulled it back almost one year ago; Dr. Alcorta thanked the jurisdictions for their direct feedback and support.

Today we will review the elements of the software package, what is working, what is not working, what is not working at all and/or what has not been built. This will be an ongoing opportunity for you to ask MIEMSS to make corrections to this software.

The meeting was turned over to Rae Oliveira, Director, Licensure and Education who provided an overview of the day's Agenda. The objective today is to work collaboratively, prioritize high impact items, resolve quickly and then start working on the lower priority items. Everyone was thanked for their participation today. Ms. Oliveira discussed what the eLicensure product will do and the elements, link and populate with eMEDS.

A roll call of everyone attending via GoToMeeting as well as around the room introductions. The group was advised that there will be future meetings held every other month. Updates will be provided to the EMS educational programs, EMSOPs and commercials as to what is new with the system. In the future, these meetings will be one and one-half hours. As we move forward, let us know what we are missing and what your concerns are. Regarding eMEDS related issues; Jason Cantera is the eMEDS Administrator and is your point of contact (410-706-3669).

The positives: Rae provided a system review stating this gives the providers more control in the system, more control of their applications as to where they are in the system, i.e. has the card been issued, looking at continuing education, to name a few. More CME visibility by providers; future integration

AMENDED 9/22/17

with eMEDS Elite and LMS. Good to see the documents, to confirm the status, if they are current and their expiration date.

AG Question: Monty does not want the provider to print their own cards – there is a regulation?? Rae said she will check on this with the AG.

Affiliation Form: Rae stated still using the paper form. They had intended by July 10th it would be live but due to functionality of the system, they are hesitant to open up something as crucial as affiliations until after this meeting and can get a consensus on something this important. Affiliations got lost and applications for courses or refreshers. Dr. Alcorta: the software allowed the educators to put into their course results providers thinking they were also simultaneously taking care of the affiliation and in so doing had to investigate why they did not have an affiliation. Credit for the course as well as an affiliation.

Discussion: Email a list of everyone you want dropped from your list to licensure-support@miemss.org.

Discussion: System too slow! Image Trend has done some things they thought would improve it. This is an issue for MIEMSS and knows it is an issue for you.

Dr. Alcorta: When we look at eMEDS doing daily reports and licensure products, we are dealing with the single company issue. We have identified some of this on the eMEDS side of the house as an opportunity for being streamlined if we get Microsoft Silverlight out of the equation. We have spoken not only to our technical contact; we have spoken to their president and their corporate manager. They are currently having meetings with the leadership at the Image Trend Conference to address and voice our system concern about the waste of your time waiting for screens to load, waiting for the software to process what you are doing, and development of strategies to reduce the waste of your time and ours. Dr. Alcorta does not have the corporate solution today from Image Trend. He knows coming from NASEMSO medical directors at the national level, realizing that multiple states use Image Trend, part of what we think is occurring is their success is part of their failure because they have expanded significantly and have not kept up with their own success. On the horizon is Elite and tablet devices.

Rae announced she will send the slides out to everyone after the meeting.

Scope of work into Image Trend. Expecting to get a master list of how they want to address this, if not a statement of work and will speak to MIEMSS on July 31st. Hope to have a price out list on this date. You will be able to see all your services and anyone in your jurisdiction. Working with IT company to make this happen sooner with another option. May have another way to do this in the meantime.

Question about Report Writer Public Portal, can we use eMEDS?: There is not a report writer function in the licensure portal. Jason Cantera can answer this question better as this is an eMEDS question.

Question: Will they eventually be able to do this from the eMEDS side? No, affiliation forms will be housed in Licensure

Dr. Alcorta: If you look at the licensure product, this to MIEMSS is the backboard to the highest EMS officials as to who is affiliated with you, what their CME status is, so that you can manage your organization. The eMEDS piece is those that have visibility and responsibility within your jurisdiction to

AMENDED 9/22/17

do a report. Different responsibility. You don't have to run personnel reports out of eMEDS, that's Licensure.

Dr. Alcorta was asked to answer question: Legal protection from legal authority – can you as EMSOP have visibility of the other affiliations that the EMS field provider has and she is referencing the ability to share information about QA cases for their providers: 1) Visibility of the affiliation – can we do? That's a lot; 2) QA piece – not allowed to share; 3) Appropriate affiliation notification if any change of that provider – Monty question again.

When conducting a provider search, opportunity for improvement based on the software tool set. Relative to that, they have to have a license for certification in the state to search at all; the short term solution for commercial services call Lisa Chervon or one of her representatives who will look for provider in the system. For Public Safety work with the Regional Administrators or with Licensure and Certification. Comment: for your bad boy, your public portal was up and now that site is not up. Dr. Alcorta and Rae not aware and they will address. – Issue was resolved

If today you are a Code Stat user, which is a software add on, managing, downloading, analyzing your cardiac arrests and currently costs \$1200, Image Trend throws in the cloud transition which will take off the SPK-9 and will put on the SPK-10 when you go live.

Many years ago there was a request to identify "Drivers," non-certified and non-licensed drivers used to get your units on the street. Jurisdictions wanted to be able to identify drivers on MAIS vs eMEDS reports. In that effort, a separate EPINS was generated for the services to be able to track "Drivers.". There was a pilot, it was tested and two counties are currently using EPINS for every staff they have. There is existing eLicensure software when they do the synchronization, but they have to have all the elements of being registered as a provider in the system. MIEMSS currently trying to figure out how to address this in the software. If it changes in eMEDS it is not something you control, MIEMSS controls. Rae – more eMEDS discussion – will bring back to the Change Management Committee for discussion later.

Dr. Alcorta asked for a straw vote: drivers into the licensure product as a non-certified person of some type – you would prefer that rather than be independently managed within eMEDS itself? Goes back to what Rae was speaking about, if you had everything in eMEDS, then all you need to do is look in eMEDS. Show of hands: Those interested in having it in the licensure product – show of hands? How many would prefer to have it in eMEDS? Only 4 hands went up total. 1 vote on line for eMEDS. 1 vote in room for licensure. (Dr. Alcorta: we would require them to log in and have an account.) Rae: this is a bigger issue and will be put on the board for discussion later.

Affiliation Application: Rae explained still on the "blue paper form". Started working on making the affiliation form electronic and discussed the COMAR regulations. Two pathways were offered for signing off on the affiliation forms. Commercials fall under the second phase of this. COMAR requires: ALS must have the EMSOP and medical director signature and BLS EMSOP or medical director signature. Several jurisdictions said they want to use the COMAR regulation requirement.

Issue: At the EMT level when someone takes a MFRI class, it is their company signing off that it is okay for them to take the class. At the EMSOP level there was no connection between that person showing up on the affiliation list and no sign off as required by COMAR. When we go electronic that will go away.

AMENDED 9/22/17

Rae reviewed Path I and Path II and all jurisdictions falling under each Path to include Commercials. If you want to change Paths, notify Rae.

Best way to reach Licensure and Certification: licensure-support@miemss.org, 410.706.7381 or Main office lines: 410-706-3666 or 800-762-7157

Office staff introduced: Doris Boyer, Sharon Morgan and Karen Johnson. Michelle Bell is attending the Image Trend Conference this week. Also attending today is Terrell Buckson, Pete Fiackos and Mark New.

Rae logged in to the public administrative portal – she started with the dashboard and began the afternoon demonstration.

Question: Is there some way to have an activity log? Terrell will look into the activity log. There was no ability to sort – you could not tell who is what. There has to be a way to make this list more manageable – it's a mess to try and track these providers. Lee: still not sure everything completed is going through.

Dr. Alcorta: when they complete the sign off and goes away from system, if go into individual provider's account, would they have visibility of when the affiliation was completed? Terrell: Yes. They can always see some forms. Lee: Those forms are not evident. And then you have to remember the individual. Lee: Asking what software does – want ability to have a log of what they do – typical coding. Feels it is not a big deal. Baltimore City: multiple in my jurisdiction applications have already been approved.....well who did it, which approved it? I want to be able to find out who did it. Some jurisdictions have multiple service providers.

Affiliation List: everything from the old system did not transfer over to the new system, i.e. Rick Koch sent list to John Barto with names of providers that did not transfer over. Rae responded the reason is that it all depends on how it was sorted. There are people from 1995 who are still on list that have expired. Need to clean up and try and get rid. There are people who have been in the Ocean City Fire Department for 20 years who are not on the list.

Dr. Alcorta: Feels it is important for everyone to have an understanding of what has transpired. NPPR, where all your licensed and affiliated providers, primary, secondary, tertiary affiliations and commercial. The reality is, there was also an additional NPPR into the new licensure product problem and when the list was migrated not only the current but all of the archive information was put it in as live. There were deceased, expired, disaffiliated, etc. The reality is there are still some hangovers from this. As Rick is highlighting for Ocean City, when E&C gave you the list for protocols, we gave you the list of primary affiliates and obviously some providers fell off but may be affiliated with your service in the new licensure product. We will work on this; it will be a constant issue.

Audience Comment: the jurisdiction/company knows their people better than anyone else. Better than MIEMSS. Are you able to give the jurisdiction the ability to remove people from our company. Rae: once go electronic and implement the electronic affiliation form can do that. Until then, that can't happen. Trying to make the licensure system work and the best way is to allow the field service directors to manage their own system. Removal process has been stalled forever. Rae will look into that. It cannot be done right now.

Dr. Alcorta stated one of things MIEMSS will be doing with this process: 1) when a new person wants to be affiliated with a service, you will get an email that says new affiliate. At the BLS level you have that

AMENDED 9/22/17

control. You will have the ability to say "Yes" affiliate. If ALS, you will have the same process, but once you click "Yes" affiliate it is going to go to your medical director. He will then go into the file and approve or disapprove. That process works. The element you are speaking about now is the disaffiliation and we don't have that functionality today.

Training: You have to be turned on as an Instructor. Apply for Con Ed or course approval. This is a four page process. Once instructor creates the course, in lower box enter instructor's name. Jurisdictions were not aware of this. Group asking for a manual. Once assigned a course instructor's can assign grades, etc.

Demonstration continued. Lee asked about recording ConEd/courses.

Terrell asked if he still has to manually check if I or CRT has renewed with MD or Registry? Terrell goes back and routinely reviews those applications to see if NR updated those applications. It will come in as registry failed. He is manually reviewing. Still setting everything up on the back end. Dr. Alcorta spoke about the NCCP equivalent.

Scott Wheatley: Starting in 2017 for ALS courses, they are going to ask for a MIEMSS number. Different jurisdictions use LMS's to import outside training. In the previous system those Con Eds showed up automatically in the Con Ed system. Correct? Rae: Yes.

Provider able to withdraw an application. Terrell for some reason they can only do some. Some could not reject. Terrell adding another functionality abandoning application.

Protocol Update: mechanism that limits the provider who has not taken the protocol update. Is there a way to turn off their eMEDS? Or give a warning that you have three days to complete your protocol update? Dr. A: can look into that. If it prompts a call to Jason, that will not work. That's an eMEDS piece.

Dr. A from a historic element, MIEMSS has gotten a list and disaffiliates the provider and a week later get another list saying affiliate them. No promises.

Round Table:

Anne Arundel: college perspective looking on is signing as a program for students that are enrolling. Will sign for protocol? Will come out of medical director. Terrell asking colleges to provide student with letter. He will sign student off on application as protocol update.

Garrett: affiliation form EMT to CRT level. Still paper form. For CRT and paramedic. The form is tied to the electronic application. Provide student with form if do protocol update.

MFRI: BLS perspective EMT that has expired and taken EMR and goes to apply they can't select EMR because the system still thinks they are an EMT. Have to go in manually. Mark New has understanding of student type. Asking to look at this in the future to open options.

Anne Arundel: Share drive among all EMSOP's of frequently asked questions and answers/recommendations for changes.

AMENDED 9/22/17

Frederick County: Unpopulating a class. Clean up data base for search. Drop down to 50 providers and the screen resets.

Montgomery: May and November emails saying you need to recert. Email should only go out to those it pertains to. Suggest more focused notification.

Rick Koch: Need timeline. Need to be able to tell providers when, makes it hard to do business. More effective communication.

Kent County: Can't see any of the volunteer company providers.

Public Portal: Access to a couple more columns. Concern with expiration dates. From an end user perspective, 3 different sign ins. With Image Trend should have one sign in.

Scott Wheatley: Thanked for getting everyone together. Time line of priorities. Completion; guidance on how to use the program, user manual suggested, electronic fine.

Initial certification: international students do not have a Social Security#. Mark maintains a roster of such students. That will come up on the team sign in sheet when they go to do their practical.

Next meeting: September 21st @ 1:00 pm
3rd Thursdays of odd months