Vermont Emergency Medical Services Advisory Committee

Meeting Minutes

Date: July 16, 2025

Location: Northeastern Vermont Regional Hospital & Microsoft Teams

Attendance: Drew Hazelton, Adam Heuslein, Pat Malone, Michael Wright, Courtney Newman, Aaron Collette, Charles Piso, Will Moran, Dan Wolfson, Connor Dunn, Michael Tarbell, Brad (no last name), Kate Rothwell, Joe Aldsworth, William Fritz, Charles Keir, Kathy Jochim,

Chelsea Dubie, Leslie Lindquist, Bill Camarda, Matthew Parrish, Donna Jacob

Meeting called to order: 1:07 PM

Call to Order and Agenda Modifications

Chair Drew Hazelton called the meeting to order and requested additions or deletions to the agenda. One addition was made: a financial update from the fiscal agent. The update will be included in the formal meeting minutes.

Financial Report

William Moran presented a summary of the Advisory Committee's financial status:

• Total Allocation (Act 157): \$370,000

Funds Expended: \$148,200Remaining Balance: \$221,800

In addition to these project-specific funds, the Advisory Committee receives an annual operating allocation of \$40,000, which may be rolled over for up to three years, totaling \$120,000 in potential support. The use of each funding stream must align with its intended purpose, either operational support or project-specific deliverables.

Data Integrity and Minutes

The Committee acknowledged the absence of official minutes from the July 9th meeting due to technical issues with the AI-based note-taking system. A summary is being reconstructed manually using available data and partial recordings.

Primary Discussion: Performance Measures for EMS System Evaluation

Purpose

The Committee focused on identifying meaningful and actionable performance measures to inform the development of Vermont's EMS Five-Year Strategic Plan, as required by Act 157.

Drew Hazelton emphasized the importance of establishing performance metrics to define baseline conditions, set improvement goals, and report outcomes to stakeholders, particularly the legislature.

Clinical Measures

The Committee discussed the adoption of standardized clinical quality metrics, particularly those defined by:

- NEMSQA (National EMS Quality Alliance)
- NEMSIS (National EMS Information System)

These standardized metrics are:

- Based on nationally accepted definitions
- Aligned with available data through ImageTrend/SIREN
- Potentially compatible with Biospatial reporting dashboards

Example measures under consideration:

- Timeliness and frequency of 12-lead EKG acquisition for ACS patients
- Assessment and documentation standards for stroke, diabetes, and trauma cases

Committee members agreed that adoption of existing standards, rather than the creation of custom metrics, would ensure greater validity, comparability, and resource efficiency.

Operational and System Reliability Measures

The Committee discussed ongoing challenges in measuring EMS system reliability, including:

- Inconsistent 24/7/365 ambulance coverage across services
- Lack of centralized or standardized dispatch time data
- Difficulty capturing accurate mutual aid incidents and delays

Key Points Raised:

- Many services do not have comprehensive dispatch CAD systems.
- Existing systems often rely on manual time entries, which are prone to inconsistency.
- Mutual aid responses are frequently underreported or misclassified in SIREN.

Potential Metrics Discussed:

- Percentage of time services are unable to staff a primary ambulance
- Number and frequency of mutual aid responses by town and agency
- Proportion of agencies able to provide continuous 24/7 coverage

It was noted that while the ideal long-term solution would involve a statewide CAD system, interim data collection efforts—such as structured interviews and targeted surveys—would be essential.

CARES Registry and Dispatch Data

Dr. Daniel Wolfson reported on Vermont's participation in the CARES (Cardiac Arrest Registry to Enhance Survival) program, which includes:

- Statewide cardiac arrest reporting
- Outcome data such as AED use and neurologic survival
- New collaboration with the 911 Board to provide time-to-dispatch data for cardiac arrests

This dataset offers an example of a reliable, reproducible, and outcome-focused performance metric system already in place.

Data Access and Biospatial Integration

The Committee discussed recent progress in procuring Biospatial, a data visualization and analytics platform that would:

- Integrate with ImageTrend/SIREN
- Allow real-time access to EMS performance dashboards
- Support agency-level and statewide data comparisons

Although the contract is not finalized, the Office of EMS has received authorization to draft contract language.

Next Steps: Formation of Technical Advisory Groups

To advance the development of performance measures, the Committee agreed to establish subgroups, referred to as technical advisory groups (TAGs), to explore and recommend metrics in the following domains:

- Clinical performance
- Operational/system reliability
- Education and workforce development
- Financial health and sustainability

The Office of EMS will work with its data team and Committee members to:

- Review existing NEMSQA and CARES metrics
- Assess feasibility based on currently available data
- Recommend several initial measures for use in the EMS plan

Legislative Reporting and Accountability

Committee members stressed the importance of accountability and accurate system representation in forthcoming reports to the legislature. Proposals included:

- Tying reporting requirements to EMS licensing or provider tax submissions
- Issuing follow-up phone calls to collect critical operational data
- Emphasizing transparency and support over punitive enforcement in early data collection phases

There was consensus that the Committee must report on not only services that have failed but also those at risk, to guide future funding, legislative support, and system-wide improvements.

Meeting Conclusion and Action Items

Agreements:

- Performance measures are essential and will be developed and presented at the next meeting.
- Initial focus will be on measures for which data currently exists or can be gathered.
- Phone outreach to agencies has begun to verify system reliability information.
- Legislative mandates regarding annual budget reviews and performance reporting will be central to the Committee's deliverables.

Next Meeting:

- Members will receive a summary of candidate performance metrics and recommendations from the data team.
- Establish a technical advisory group to advance and agree upon performance metrics for inclusion in the EMS plan will be reviewed.

Meeting adjourned at: 3 PM