

Appendix A
FY 15 Work Plan

For each of the following areas, describe the regional work plan and identify measurable performance outcomes. The work plans should also identify adjustments made as a result of the work done during FY14.

1) Medical Control Training and Direction

- a. Improve the understanding of EMS for emergency physicians and others who provide Online Medical Control.
- b. Ongoing assessment of the above plans and adjustments to show measurable improvement.
- c. Working with EMS services to assure that each service receives medical control input, to include at a minimum: input/involvement with the service's quality improvement program and integration of the QI program with continuing education programs.
- d. Work plan shall include at a minimum:
 - i. The total number of emergency department physicians, physician assistants, independent nurse practitioners, by hospital.
 - ii. The total of those who have completed an OLMC program (e.g. MEMS, NAEMSP, etc.).
 - iii. Plans/activities to get 100% OLMC trained.
 - iv. Listing of all EMS Services with the name of service medical director, and how the regional EMS office has assisted with medical director recruitment/retention.

APEMS Workplan

1. We will maintain an updated list of the number of Physicians, PA's, and NP's by hospital.
2. We will regularly communicate with the Hospital ED Contacts to update the status of the OLMC training and provide whatever support we can to encourage participation.
3. We will maintain a list of EMS services along with their Medical Director. We will continue to request that ED Medical Directors encourage their ED staff providers to get involved with local EMS. We will develop a list of suggestions for services looking for Medical Directors and update the job description.

2) Quality Improvement

- a. Submit the region's QI plan to provide technical assistance to each EMS agency within the designated region. The regional plan shall include an integrated Quality Improvement (QI) program that will: a) evaluate (assess) and b) improve competencies for EMS providers. The regional QI report will include:
 - i. Describing the involvement of the medical director in QI

- ii. If a service does not have a service medical director, how is QI being performed?
 - iii. How are performance issues resolved and tracked for trending?
 - iv. How are sentinel events reported and tracked for trending?
 - v. How are QI activities connected to training and education? Are performance measures re-evaluated?
 - vi. How are run report reviews conducted?
 - vii. Reporting on trends sent to all services and to Maine EMS
- b. Service QI plans should include at a minimum:
- i. Identifying QI indicators with benchmark data(e.g. MEMSRR to identify service/regional trends).
 - ii. Assist with identifying and assisting the service to develop and provide educational programs that utilize the results of QI activities.
 - iii. Use follow-up data to evaluate the effectiveness of training/educational programs
 - iv. Working with local EMS providers with whom they routinely interact.
 - v. Adjusting QI and education plans as necessary.
- c. Regional QI plans shall include performance indicators and clinical outcomes.
- d. The regional office shall function as a liaison between state and local QI committees and assist with mutually agreed upon QI data collection and reporting as requested by the MEMS QI Committee.

APEMS Workplan

- a. Regional QI Plan
- 1. We will meet with our Regional Medical Directors to create regional competency benchmarks that we measure and provide feedback to the services through the sub-regional QI committees quarterly.
 - 2. We will create education programs tied to Regional QI initiatives that we will distribute and deliver through the Sub-regional QI Committees.
 - 3. Provide information on sentinel events and suggestions for reporting and follow-up.
 - 4. We will measure and improve regional performance objectives and clinical outcomes by:
 - a. Identifying areas for improvement by polling our services, hospitals, and QA nurses.
 - b. Selecting appropriate performance measures to assess these areas.
 - c. Obtaining a baseline of current practices using the selected measures.
 - d. Reassessing or monitoring the effect of improvement efforts on measure performance.
- b. Service QI Plans
- 1. Update our sample QI plan to include all components identified by Maine EMS and distribute to our services
 - 2. Encourage the services to establish QI benchmarks and provide suggestions for

performance measures.

3. Provide suggestions and resources on the development of educational programs tied to their QI, and encourage the use of follow-up audits to check effectiveness.
 4. We will suggest methods to identify trends amongst individual providers with suggestions on remediation pathways when requested.
 5. Encourage regular review of QI process and benchmarks
 6. Encourage the involvement of all providers in the service level QI process.
- c. See “a” above (Regional QI Plan)
- d. APEMS will continue to be an active member of the State QI committee and continue the communication link between the State, Regional, and Local QI committees.

3) Training Coordination

- a. Coordinate and assist with EMS training programs as identified by:
 - i. EMS services;
 - ii. QI activities; and
 - iii. Regional needs assessment
- b. Work with local EMS services to incorporate education programs that integrate with quality improvement activities
- c. In accordance with the Maine EMS Rules, approve continuing education courses for services within the region.

APEMS Workplan

1. APEMS will continue to offer a robust licensure and continuing education program
2. We will conduct our annual survey in the fall to identify education needs throughout the APEMS catchment area, being careful to identify which region each of the respondents resides within.
3. Continue to coordinate with the regional and state QI committees, as well as the Maine EMS office and MDPB, on program development and delivery.
4. Continue to approve and record regional continuing programs following current Maine EMS guidelines. We will also work with Maine EMS to institute changes to the continuing education administrative program.

4) Regional Councils

- a. Conduct regional council meetings on a quarterly basis (minimum requirement) to assure representation of the EMS community and the community at large.
- b. Expand attendance at Council meetings and information dissemination.

- c. Send minutes of meetings to Maine EMS within 30 days of meeting or sooner if available.

APEMS Workplan

1. We will schedule regional council meetings on a quarterly basis and continue to look for community representative.
2. We will continue to develop and improve our web-based communication program to more widely disseminate information
3. We will send council minutes to Maine EMS within 30 days of the meetings.

5) Public Information, Education, and Relations

- a. Provide PIER related training for services in order to help services build local community awareness/support.

APEMS Workplan

1. We will schedule PIER-related training in each region for our services
2. We will continue to promote and list PIER outreach opportunities on our website and social media

6) Attendance and Participation in Maine EMS meetings

- a. Attendance and participation include the following:
 - i. Regional Coordinator at Operations Team meetings;
 - ii. Regional Medical Director in Medical Directions and Practice Board meetings; and
 - iii. Regional QI representative in MEMS QI Committee meetings.

Unexcused absence from 2 or more meetings will result in a penalty of 5% of the total contract price.

APEMS Workplan

1. APEMS will continue to be an active participant in, and contributor to, the Operations, MDPB, and State QI meetings

7) Other projects

- a. Require the Regional Coordinator or a council representative to participate in EMS development and support projects when requested by Maine EMS and when consented to by the Regional Coordinator or council representative.

APEMS Workplan

APEMS will continue to be an active participant in, and contributor to, EMS development and support projects as outlined.

8) Reports

- a. Submit an annual activity report for FY 14 to Maine EMS no later than 4:00 PM on September 30, 2014.
- b. Submit an independently prepared financial report for FY 14 to Maine EMS no later than 4:00 PM on December 31, 2014.
- c. Submit a progress report for FY 15 to Maine EMS no later than 4:00 PM on December 31, 2014.
- d. Submit an annual activity report for FY 15 to Maine EMS no later than 4:00 PM June 30, 2015.

Reports shall be submitted in electronic format.

Failure to provide all reports in a timely manner will result in a penalty of 5% of the contract price per delinquent report and may affect both the current and future contracts.

APEMS Workplan

1. APEMS will continue to submit reports as required by Maine EMS