



Jurisdictional Advisory Virtual Committee Meeting

August 11, 2021 - MIEMSS
653 West Pratt Street, Baltimore, MD

Meeting called by: Christian Griffin, Chairman

10:00 AM **Welcome and Introductions** Christian Griffin

10:00-10:30 AM **OMD Update** Dr. Chizmar

10:30-10:45 AM **Emergency Ops Update** Randy Linthicum

10:45-11:00 AM **Licensure and Certification update** Terrell Buckson

11:00-11:15 AM **Field Ops Update** Jeff Huggins

11:15-11:30 AM **EMS-C Update** Cyndy Wright-Johnson

11:30-11:40 AM **Election of Vice-Chair** Christian Griffin

11:40-12 Noon **Jurisdictional Roundtable** Christian Griffin

Meeting ID
Jurisdictional Advisory Committee

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Phone Numbers

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JAC Meeting – August 11, 2021

The meeting was called to order by Chair, Christian Griffin. The June Minutes were reviewed and motion made by BWI to accept the Minutes as posted, second by Calvert. Motion unanimously passed.

Dr. Chizmar: Welcomed everyone. Thanked everyone for the hard work they have put in over the past 18 months. He provided a COVID update. There are about 400 COVID positive patients hospitalized with 358 in acute care, 106 in the ICU, 73 at alternate care sites (Laurel, Washington Adventist), and currently 9 at the Baltimore Detention Center. The next big concern he stated as we get into the fall months, will be tracking the pediatric population. The largest population among us that is not vaccinated. It is worth taking a look back over the last 18 months. We have had over 32 million cases in the United States but more importantly cases and deaths are both up about 30 percent nationwide. Hospitalizations are up 41 percent over the past week as far as the acute care side goes and 23 percent for ICU. Cases are still accumulating. In terms of vaccinations, through all of the hard work by all in attendance, almost 80 percent of adults 18 years of age and older have received at least one dose of the vaccine in Maryland. Over 3.6 million of the state's population are considered fully vaccinated. Delta variant is more contagious from the CDC, vaccine still offers significant protection against severe illness and hospitalization. Still need to continue to wear a mask and get the vaccine. Seeing healthcare partners both hospitals and SNF requiring vaccinations for staff. Are having those discussions with commercial services now as well. Dr. Chizmar doesn't think this will permeate into the 911 world, but he feels it would be wise to vaccinate as many of our personnel as possible. He thinks there is a significant chance we will see recommendations coming out, particularly about people who are compromised and healthcare personnel about boosters in the fall. Also, you do not want to lose site about the flu vaccine. Things to keep in mind as we progress into the fall.

Public Notice #1: More than 1600 individuals became provisional EMS clinicians. Regulations provided a path for full licensure which must be achieved by February 15, 2022. Provisional EMS clinicians may continue to function while they achieve full credentialing.

The single paramedic team configuration will be extended past September 15, 2021 due to EMS Board approval of a modification to the MIH protocol. This will allow the single MIH paramedic to continue with the caveat that standardized training is developed for MIH EMS clinicians (in development via SEMSAC).

Public Notice #4: Provisional EMDs have until February 15, 2022 to achieve full licensure.

Public Notice #5: Allowed EMT psychomotor testing to occur after completing the cognitive exam and expires August 15, 2021.

Public Notice #6: Allowed Paramedics, CRTs and EMTs to vaccinate the public. Paramedics may continue under new law to vaccinate the public. Under a separate order issued by the Maryland Department of Health, EMTs and CRTs have the option to vaccinate as laypeople, not as EMS clinicians, under certain circumstances.

Public Notice #8: Extended all EMS clinician licenses and certificates that would have otherwise expired in April or June 2021 to October or December 2021, depending on level and remains in effect.

Protocol Updates: About 88-90 percent of ALS, and these may include people who are not active, have taken the protocol update and 70 percent of BLS statewide have taken the update. These numbers are superior to where we were the year before.

Rolling out nebulized albuterol for BLS. They built in a process where jurisdictions have one year to do the training and get the equipment on board the unit. He knows this is training intensive and you will have to actually put hands on to train EMTs in the use of the nebulizer. There are five or six jurisdictions that need to train in the use of the glucometer for BLS. Those are things that as chiefs and operational leads you need to be aware of over the next year medical direction and training departments are going to be working towards. Dr. Chizmar has tried very hard to make sure they mirror the national EMS scope of practice for BLS.

The Alternative Destination and ET-3 programs have kicked off. Particularly Montgomery County and Baltimore City and Annapolis City is coming on line as well. Caroline County deserves a round of applause. They are doing some alternative destination transports without being an official ET-3 participant. They have been successful in taking folks to urgent care centers even without the promise of reimbursement. Despite a big change over in personnel.

Opioid overdoses were up 30 percent nationally in 2020. It's a silent pandemic. Obviously there is some association with COVID-19, mental health and opioid use. Dr. Chizmar provided a graph of weekly trends of naloxone use 2020/2021. Currently tracks naloxone use coupled with the primary impression of opioid overdose. A little over half of the EMS jurisdictions are doing the Naloxone Leave Behind, some are coupling with safe stations or other approaches with their health department. For the remaining 12 jurisdictions who are not doing this, let Dr. Chizmar know what he can do to get you onboard with this. There really is no reason not to. The health department funds it. Matt Levy, DO and his Howard County folks have done a study that has been published in academic literature. Those patients for whom they have left naloxone are five times more likely to engage in treatment down the line. Many of you have been successful with this.

C4 continues to provide a valuable service during a time of high hospital census. Tracking in Region III and for other hospitals that ask for it. Sending reports to leadership and asking them to address. C4 will continue for the current time to try and offload those critically ill patients, getting them to appropriate destinations where they can be cared for.

In addition, Dr. Chizmar has been working with Licensure and Certification on revisions to the ALS protocol orientation. Many will remember this replaces the scan tron test that previously was required of ALS clinicians. That is available online. The ALS Committee has done tremendous work around that to make it accessible. A big thanks to Melissa Meyers who coordinated those efforts. They are also working on a BLS component as well. BLS orientation to Maryland Protocol which MFRI has asked to have access to and will make available for people who are coming in from out of state.

In addition to initial ALS training, they have state continuing education they would like to have completed by March 2022 that was rolled out two years ago in the online training center. Essentially the National Registry, in the past folks have done the National requirements and their own individual requirements. What the ALS Committee has done is taken feedback from across the state,

sometimes it's from you, sometimes from the medical directors, sometimes from legislature, with that question of, it would really be nice to provide that training or content to EMS and package to one set of modules that people can take. They are already developing new content for the next cycle, 2022-2024.

Quality Improvement: Many will remember there was a Quality Improvement Summit in late 2019 just prior to COVID-19 striking. Two things, we are in the process of taping the modules now; they are migrating the QI Officer course to an online format. For those of you who have up and coming QI Officers, you will be able to get your people trained without having to schedule an in-person QI course. Dr. Chizmar will be reaching out to you and your QI Officers to re-establish what is a broad EMS quality improvement base so that where we take look at those key performance indicators that were looked at in November 2019, we can re-evaluate our success. For example, looking at what portion of our patients received aspirin that should not have received aspirin or had an EKG or an EKG in a timely way, and other measures such as trauma, overdose and pediatrics.

Licensure and Certification: BLS application period is now open. All BLS clinicians who are due to recertify are encouraged to go into Licensure and apply to recertify. If you are having trouble, contact the Licensure Support Desk at licensure-support@miemss.org Applications close at midnight on the date your certification expires. Those in attendance are asked to pass along to your personnel. Terrell Buckson has accepted a position in Prince George's County and will be resigning his position in L&C effective August 24th. Pete said they are sad to see him go and wished him good luck in his new pursuit. Chair Griffin wished Terrell well, appreciated working with him over the years.

Dr. Chizmar provided from the field ops perspective, continue to vaccinate and make testing supplies available.

Cyndy Wright-Johnson: Pediatric Champions will be meeting on October 29th. They will be looking at the various types of manikins everyone has in the jurisdictions with focus on the various types of manikins and what they can do for the airway training, i.e. high performance CPR. Request was made for Cyndy to speak to all today of the importance of the Champions being in person call on the 20th they can use the knowledge learned at county or company drills. Importance of pediatric skills training at the county and company levels. Asked if it would be helpful for EMS-C to set up a 2022 calendar. Regarding a planning calendar, Cyndy is hearing that a calendar would be helpful to the Champions. She asked the Committee same questions. Tim Burns referred to their pediatric champion. Heather Howes and Chris Truitt both feel a calendar would be helpful.

Injury Prevention: A child was lost in DC last evening after being found in a car. Cyndy has lots of posters for display. They are located across the state so you do not need to come to Baltimore to pick-up.

PEPP Course on October 28th. If we are in a better place, can increase class size to 24. She will send out materials after the meeting. Champions have the right of first refusal.

Election of Vice-Chair: Vice-Chair Chief Brothers retired. One expression of interest, Battalion Chief Joe Cvach, Anne Arundel County Fire Department. Chair Griffin will open up the poll. All representatives voted and voting was unanimous for Chief Cvach as the new Vice-Chair of JAC. Chair Griffin wanted to give Chief Cvach a shout out as he has known him a long time. Chief Cvach recently celebrated 20 years of service with the Anne Arundel County Fire Department. He got an excellence in action award for the care of a child with a traumatic injury; was recognized for going above and beyond for a patient who fell

off a roof. Chief Cvach and his crew finished the roof repair because rain was coming. He is a long time emergency services instructor. He was credited with saving a man's life. There was a young man who had stopped to render aid for a disabled vehicle and he was struck by a truck. A police officer came on the scene to assist him and the police officer didn't know what to do so the young man directed the police officer to give him a belt so he could self-apply a tourniquet for his near amputation of his leg. Chief Cvach was recently promoted to the rank of Battalion Chief. Chief Cvach is looking forward to his JAC appointment.

Jurisdictional Roundtable:

Anne Arundel County: They are running an academy with their partners at Anne Arundel Community College. They will be running some large scale training in the upcoming month and are very excited about that. Their RSI and Ultrasound programs are running with very good success.

Baltimore City: COVID numbers are starting to climb, both on the street and internally. Regarding the hospitals as Dr. Chizmar was talking about earlier, he had calls from both Hopkins and the University systems stating they had over a 306 percent increase in those calls. The hospital offload times are way up. Another problem, WBAL trying hard to get an interview with them regarding the hospital offload issues. They are trying to let the hospitals know it is just a matter of time before it comes out. The City MIH Team is out vaccinating the home bound and vulnerable population and this has been successful.

Baltimore County: Curious if anyone else is having issues with CRISP in that they are not getting daily notifications of transports, has been down for about two weeks now. They will continue to work with tech support. They are having the same hospital concerns as the City with hospital prolonged offload times. Busy working on their EMS re-organization. Will be a phased in approach. Beginning soon with their paramedic first class position which encompasses a lot of their preceptors. They will bring more EMS positions onboard and four more captains for shift work each day. Worked with Office of Budget and Finance to get the rest of the data and information needed for the emergency medical transport program to get their application in before the deadline. Seeing an increase in COVID cases, however not seeing many breakthrough cases with COVID, but they are coming up with more positives. 70 percent complete converting their med-volt system to the cloud system. Finishing up their OSHA

BWI: There are seven recruits in the Anne Arundel County academy class currently. Last month they completed the pediatric high performance CPR training for all shifts. Starting next week Rescue Tech course drills will begin with the Maryland Transportation Police.

Calvert County: There are several things going on. Penny Miller has accepted the EMS Chief position and will be starting the end of August. They have a recruit class starting the end of September with paramedics/EMTs. Purchased First Watch and are in the process of getting it up and running.

Caroline County: Mark Sheridan introduced himself as the new Director of Emergency Services for Caroline County. Kathy Jo Marvel, promoted to EMS Chief and will start attending the JAC meeting as Caroline County's representative. Dr. Krohmer has decided to retire and they will begin recruiting for a medical director. Staffing continues to be an issue as it is for everyone. Community Outreach, Narcan Leave Behind, he met with their public health officer last week and that is one of the programs he spoke to her about.

Andy Fulton: Alternative Destination Program (ADP) is still moving forward. Shore Regional ran into a staffing issue so won't be joining the ADP until November or December. Urgent Care facility has proven to save them in mileage and time. Choptank Community Health Center (Goldsboro, Denton, Federalsburg), recently the transports have gone to Federalsburg, keeps their units in the county. Overall, although not compensated, the ADP is running well in Caroline.

Frederick County: Have started two new recruit classes with 54 people now in the recruit class. Continuing with a graduation expectation in December of paramedic/ALS class with 13 people in that class. Started a new initiative in July with the Frederick City Police with a mobile crisis vehicle. This is a non-uniform law enforcement officer with a mental health officer and an EMS person responding to mental health calls. They try to intervene vs taking the patient to the hospital or incarceration. Will update as they move forward. We did hire for two new positions, getting ready to interview for an EMS Captain and a new position for a QA Officer.

Harford County: Hopefully breaking ground for the North Harford Station the first week of October. They have received their bariatric unit. Potentially looking at a county wide billing service.

Howard County: Their in-house paramedic program will be starting this fall. They did have an ultrasound program they had started to pilot and will be starting this backup in the fall hoping to use the butterfly as an alternative to the original devices they were using; will be implementing medication pumps and the training will be during their fall con ed; will be using the sapphire pumps. These will all be in the ambulances and supervisors cars. They had tried the Direct to Triage program modeled after Anne Arundel County's parameters. What they were finding was a fairly high compliance. They were taking patients to the hospital who clearly met the criteria, however either the charge nurse or the ambo floor nurse was uncomfortable leaving the patient in the waiting room. Regarding the cardiac arrest data, their outcome data was not as optimistic as they had hoped. Had to go around and readjust the culture. It was culture not equipment that was the problem. What they are seeing now is the negative interactions between clinicians and nursing staff, actually affecting their employees. They are trying to address as best as they can. There will be some fallout after this pandemic. This is not just a local problem but definitely a State problem. Region III is high turnaround time and transfer time for the patients.

Montgomery County: Welcomed Chief Pete Friedman. He will be attending the JAC Meetings going forward. The Direct to Triage Program happy to share findings with anyone who would like them. The ET-3 program, the way they are doing it, the Alternative Destination Program and telemedicine have been disappointing. They will be speaking on that at the NAEMSP conference next year. Have done deep dives into their cardiac arrest data. Have seen a dramatic increase in their outcomes efforts. Biggest things they have is those results hold true even when they remove the COVID-19 patients from the data set. During the pandemic, they noticed time to leads on went up by over one minute and time to first epinephrine went up to over 3 minutes. Have to work on getting those leads back down.

St. Mary's County: David Stamey has resigned his position as EMS Division Chief. Kirsten Shea has filled the position as Acting EMS Division Chief. They have a new CAD procurement process. Working very hard with their partners at St. Mary's Hospital on their hospital offload times. St. Mary's has been more diligent about reporting their color status in CHATS. All units are internet connected. BLS 12-Lead program participation. Still working in partnership with their health department on COVID vaccinations. They are running offsite vaccination sites for them. They have started their EMS billing process.

Talbot County: Brian LaCates announced they have a new Director, Department of Emergency Services, Chief Mike McAdams. Former Director Clay Stamp has moved on to the position of County Administrator.

Washington County: Their new training center is about 50 percent completed with an anticipated walk through of February 2022. The Board of County Commissioners voted unanimously to take on the paramedic educational program. Setting that up for September 2022.

Wicomico: Seeing call volumes pick up. They had their busiest month to date. Hosted a Tim Phalen 12 Lead class, "Critical Thinking for Improved Cath Lab Activation." They are thinking about making this an annual event. They are on Day 3 of their MIH program. .

MSP: Just completed a month long class with Queen Anne's County EMS on helicopter and RSI training. This worked out wonderfully. They are slated to complete five upgrades to crew chief next week. Six new medics have completed their academy and field training.

MSFA: The MSFA EMS Committee will meet on September 12th and the MSFA Executive Committee will meet on September 18th and 19th.

STC: They are still accepting EMS students as observers. Requested suggestions for topics in their EMS broadcasts.

Meeting ended at 11:30 am

Next meeting October 13, 2021.