



State of Maryland

**Maryland
Institute for
Emergency Medical
Services Systems**

653 West Pratt Street
Baltimore, Maryland
21201-1536

*Larry Hogan
Governor*

*Clay B. Stamp, NRP
Chairman
Emergency Medical
Services Board*

*Theodore R. Delbridge, MD, MPH
Executive Director*

*410-706-5074
FAX 410-706-4768*

State Emergency Medical Services Board

June 11, 2019
Meeting Agenda

1. Call to Order – Mr. Stamp
2. Approval of Minutes from May 14, 2019
3. MIEMSS Report – Dr. Delbridge
 - Alternative Destination Protocol - ACTION
4. MSPAC Update – Captain McMinn
5. MSFA Update
6. Old Business
7. New Business
8. Adjourn to Closed Session
9. Reconvene in Open Session



**State Emergency Services Board
June 11, 2019**

Minutes

State of Maryland

**Maryland
Institute for
Emergency Medical
Services Systems**

653 West Pratt Street
Baltimore, Maryland
21201-1536

*Larry Hogan
Governor*

*Clay B. Stamp, NRP
Chairman
Emergency Medical
Services Board*

*Theodore R. Delbridge, MD, MPH
Executive Director*

*410-706-5074
FAX 410-706-4768*

Board Members Present: Clay Stamp, NRP, Chairperson; Sherry Adams, Vice Chairperson; Stephen Cox; William J. Frohna, MD; Dany Westerband, MD; James Scheulen, NRP; Mary Alice Vanhoy, RN (phone) Sally Showalter, RN; Dean E. Albert Reece, MD

Board Members Absent: Murray Kalish, MD

Others Present:

MSPAC: Major Tagliaferri; Capt. McMinn; Lance Wood

MIEMSS: Dr. Delbridge; Ms. Gainer; Ms. Abramson; Ms. Aycock; Dr. Bailey; Mr. Barto; Mr. Brown; Dr. Chizmar; Dr. Floccare; Ms. Gilliam; Ms. Mays; Ms. Myers; Mr. Schaefer; Ms. Goff

OAG: Mr. Magee; Ms. Sette

RACSTC: Dr. Snedeker

Chairman Stamp called the meeting to order at 9:07 am. He thanked the MIEMSS staff, EMS Board members and stakeholders for their service.

ACTION: Upon the motion by Dr. Frohna, seconded by Dr. Westerband, the Board voted unanimously to approve the minutes of the EMS Board meeting held on May 14, 2019.

MIEMSS Report

A copy of the Executive Director's Report was distributed.

Dr. Delbridge gave an update on Data sharing, the Communications Upgrade project, Hospital Alerts System, the EMS Plan and the Alternative Destination Protocol.

Chesapeake Regional Information System for our Partners (CRISP)

Dr. Delbridge gave an update on the current jurisdictions sending data to CRISP, jurisdictions in process and those who have yet to elect to send data.

The Hilltop Institute

Dr. Delbridge said he and Dr. Chizmar met with the leadership of the Hilltop Institute, a research organization at the University of Maryland, Baltimore County (UMBC) dedicated to

improving the health and wellbeing of people and communities. The Hilltop Institute conducts data analytics and translational research on behalf of government agencies, foundations, and nonprofit organizations to inform public policy at the national, state, and local levels. He said that the Hilltop Institute and the Maryland Department of Health collaborate to conduct objective, evidence-based research and analysis to inform state health policy.

Dr. Delbridge said the possible sharing of MIEMSS data was discussed.

Communications Upgrade Project

Dr. Delbridge said that MIEMSS continues to work on the Communications Upgrade Project for replacing outdated technology. The MIEMSS Communications Team is working closely with the contractor (Overland Contracting, Inc.) in weekly calls on the Detailed Design Review. The MIEMSS Team is also exploring improved back up options for the communications center.

Chairman Stamp suggested having the Communication Team provide an in depth report on the Communications Upgrade Project to the Board at a future meeting.

Hospital Alerts (CHATS)

Dr. Delbridge said there is still inconsistent use of Yellow Alerts system by hospitals. He said that MIEMSS has secured a six-month extension of the software program for CHATS. September 30th is deadline for deciding whether to continue with the same system or to move to a different system.

Mr. Scheulen suggested that SEMSAC and the Regional Councils study the issues surrounding alerts. Chairman Stamp said there is a need to determine the “ask” for any changes to the current system.

Ms. Adams said that the current system has been a helpful tool utilized by Department of Health for requesting bed statuses, etc.

EMS Plan

Dr. Delbridge gave an update on the current status of the EMS Plan. He said that MIEMSS is currently in the process of identifying Steering Committee members. The MIEMSS staff has submitted a draft of the goals for each topic area for the Plan. The SEMSAC and CASAC participants for interested topic areas have been identified. MIEMSS is reaching out to other interested stakeholders via the upcoming MSFA Convention and the MIEMSS web site for input. Work will continue over the summer.

ED Overcrowding

Dr. Delbridge said that emergency department wait times for low acuity patients transported by EMS often exceeds 60 minutes, particularly in certain hospitals.

Legislative Reports

Dr. Delbridge said that MIEMSS is working on two reports to the Legislature due in November & December 2019:

- Emergency Department Overcrowding Update: MIEMSS will work with HSCRC to update progress toward implementation of crowding reduction strategies.
- Reimbursement for New Models of Care Delivery: MIEMSS, in consultation with MHCC and HSCRS is to report on development of a statewide plan for reimbursement of three new models of

care (mobile integrated health; EMS without transport; and transport to an alternative (non-ED) destination).

ET3 - Evaluation, Triage, Treatment and Transport

ET3 is a 5-year model program developed by the Centers for Medicare & Medicaid Innovation that would provide Medicare reimbursement to EMS for transportation to an alternate destination other than an ED, and for treatment by a qualified health care practitioner with no transport. The ET3 model does not currently include mobile integrated health programs.

Crisis Intervention / Stabilization Centers

Dr. Delbridge said that approximately 2% of the 400,000 EMS responses are for “Behavioral / Psychiatric Disorders. Approximately 71% of these responses are in Anne Arundel County, Baltimore City, Baltimore County, Prince George’s County and Montgomery County. A network of alternate destinations needs to be created.

A discussion regarding the training of EMS for Behavioral Health issues and the “Second Victim” of a trauma ensued.

Alternate Destination Protocol

A copy of the protocol was distributed.

Dr. Delbridge presented the proposed Alternative Destination (AD) Protocol.

Dr. Chizmar said that the protocol, in the new format, had been approved by the Protocol Review Committee.

A lengthy discussion followed regarding medical director oversight and the variables of patient conditions and appropriate facilities. Potential changes to regulations were also discussed.

ACTION: Upon the motion by Mr. Scheulen, seconded by Mr. Cox, the Board voted to approve the updated Alternative Destination Protocol with the removal of the insurance question. Dean Reece abstained.

SEMSAC Report – No Report

MSPAC Report

A copy of the report was distributed.

Captain McMinn said that Colonel Pallozzi has sent correspondence to the DBM Secretary regarding issues with helicopter maintenance.

Mr. Cox complimented the MSPAC on the recent double helicopter mission in Harford County.

RACSTC – No Report

MSFA

Mr. Cox said that the MSFA Convention will be held from June 15th through June 21st in Ocean City, Maryland. He said there are plenty of great programs at the convention, including an EMT refresher.

MFRI

Mr. Cox said that MFRI has purchased all equipment for the College Park Pierson Vue testing site. The next site is scheduled for MFRI North East. Mr. Cox said the North East Coordinator is retiring in August.

OLD BUSINESS

N/A

NEW BUSINESS

N/A

ACTION: Upon the motion by Ms. Vanhoy, seconded by Mr. Scheulen, the Board voted to adjourn to closed session.

The EMS Board adjourned to closed session to carry out administrative functions, to discuss the appointment of appointees and officials under General Provisions Article §3-305(b)(1), to consult with counsel, to obtain legal advice on pending disciplinary actions under General Provisions Article §3-305(a) (7), and to maintain certain records and information in confidence as required by Health Occ. Art. §14-506 (b) under General Provisions Article §3-305 (a) (13).

In Closed Session:

Board Members Present: Clay B. Stamp, NREMT P, Chairperson; Sherry Adams, Vice Chairperson; Stephen Cox; Sally Showalter, RN; William J. Frohna, M.D.; James Scheulen, NREMT P; Mary Alice Vanhoy, RN (by Phone). Dany Westerland, M.D.; Dean E. Albert Reece, M.D.

Board Members Not Present: Murray Kalish, MD

MIEMSS: Dr. Delbridge; Dr. Chizmar; Ms. Gainer; Ms. Abramson; Ms. Goff; Mr. Schaefer; Ms. Mays

OAG: Mr. Magee; Ms. Sette.

In closed session:

1. The Board considered Adult Trauma Center reverifications; and
2. The Board considered EMS clinician disciplinary actions.

The Board returned to open session.

In open session:

Board Members Present: Clay B. Stamp, NREMT P, Chairperson; Sherry Adams, Vice Chairperson; Stephen Cox; Sally Showalter, RN; William J. Frohna, M.D.; James Scheulen, NREMT P; Mary Alice Vanhoy, RN (by Phone). Dany Westerband, M.D.; Dean E. Albert Reece, M.D.

Board Members Not Present: Murray Kalish, MD

MIEMSS: Dr. Delbridge; Dr. Chizmar; Ms. Gainer; Ms. Abramson; Ms. Goff; Mr. Schaefer

OAG: Mr. Magee; Ms. Sette.

ACTION: Upon the motion by Mr. Scheulen, seconded by Mr. Cox, the Board voted to approve Prince George's Hospital center for the remaining four-years of a five-year designation as an Adult Trauma Center.

ACTION: Upon the motion by Dr. Reece, seconded by Ms. Showalter, the Board voted to approve Suburban Hospital center for the remaining four-years of a five-year designation as an Adult Trauma Center.

Chairman Stamp announced that the EMS Board meeting for July 2019 has been cancelled.

There being no further business, the Board voted to adjourn.