

State Emergency Medical Services Board
April 12, 2011
Minutes

Board Members Present: Victor Broccolino, Vice-Chair; David Fowler, M.D.; David Hexter, M.D.; Murray Kalish, M.D.; Robert Maloney; Dean Albert Reece, M.D., Ph.D.; Sally Showalter; Mary Alice Vanhoy, R.N.; Gene Worthington.

Board Members Absent: Donald L. DeVries, Esq., Chairman; Dany Westerland, M.D.

Others Present:

MIEMSS: Dr. Bass; Ms. Abramson; Ms. Alban; Dr. Alcorta; Ms. Aycocock; Ms. Beachley; Mr. Brown; Mr. Darchicourt; Mr. Fiackos; Ms. Gainer; Ms. Gilliam; Ms. Goff; Mr. Hawthorne; Mr. Hurlock; Ms. Myers; Mr. New; Mr. Schaefer.

OAG: Mr. Magee; Ms. Sette.

MSP Aviation Command: Keith McMinn.

Maryland State Firemen's Association: 1st Vice-President Dave Lewis; 2nd Vice-President John Denver.

R Adams Cowley Shock Trauma Center: Ms. Karen Doyle; Mr. Jim Radcliffe.

Mr. Broccolino called the meeting to order at 9:07 a.m.

ACTION: Upon the motion of Mr. Worthington, which was seconded by Dr. Kalish, the Board approved the minutes of the March 10, 2011 open meeting.

EXECUTIVE DIRECTOR'S REPORT

EMS Care at the Beach. Dr. Bass reported that the statewide EMS Conference held in early April in Ocean City was very successful with over 250 attendees. He said that the program included national speakers and was well received.

STEMI. Dr. Bass said that all 23 Maryland hospitals that currently perform primary PCI under either a Certificate of Need or waiver have been designated as Cardiac Interventional Centers by MIEMSS. He said that MIEMSS had also entered into MOUs with three out-of-state hospitals to receive STEMI patients from Maryland. He said that MIEMSS issued a press released and notified the EMS community on April 1, 2011 of the designations. He said that Regional STEMI committees were meeting regularly to address STEMI system development on a regional basis and that region-specific issues had been incorporated into regional plans for STEMI care.

Provider Continuing Education Requirements. Dr. Bass said that MIEMSS had received a letter from the Maryland State Firemen's Association indicating that many companies struggle to ensure that their providers have completed the Protocol updates each year. Dr. Bass said that MIEMSS would be working to ensure that EMS providers complete required protocol updates and to support EMS operational programs in this effort. He said that by June 3, MIEMSS will provide each jurisdiction with a list of the jurisdiction's providers who have not completed the required protocol update; an updated list will be provided to jurisdictions on July 1. In addition, MIEMSS will remind providers through emails, EMS Newsletter articles, and other methods of the existing COMAR regulatory requirement to submit verification of protocol update completion along with their applications for renewal.

eMEDS. Dr. Bass reported that the 30-day eMEDS pilot test was successful and the planned statewide roll-out would occur soon. He said that he hoped that the integration of all commercial services and jurisdictional programs would be completed by the end of calendar year 2011.

HC Standard. Dr. Bass said that MIEMSS had completed acceptance testing on the Health and Medical Dashboard contained within HC Standard. He said the Dashboard incorporates a number of programs, including the Maryland Health Alert Network, ESSENCE, and WebEOC, and also allows users to customize their Dashboard screen. He said that MIEMSS is beginning the implementation of the new Dashboard and has conducted multiple training sessions.

Yellow Alerts. Dr. Bass said that Yellow Alert data shows that 2010 alert utilization again decreased significantly from 2009, as it had from 2008 and since peaking in 2006. He said that re-routes continued to be markedly decreased as well.

Visit by NHTSA. Dr. Bass reported that DOT NHTSA Administrator, David Strickland, had recently visited MIEMSS to see the Maryland EMS System first-hand.

EMS Week. Dr. Bass said that May 15, 2011, through May 21, 2011, will be National EMS Week 2011, with May 18 set aside as Emergency Medical Services for Children Day. He said this year's theme is "*EMS – Everyday Heroes.*" He said that MIEMSS had received over 40 nominations for the Stars of Life Awards.

STATEWIDE EMS ADVISORY COUNCIL

Dr. Kalish reported that SEMSAC met on April 7, 2011, and approved the proposed changes to the protocols regarding Acute Ventilator Device Standards, Chronic Ventilator Device Standards, and Chronic Ventilated Patients.

R ADAMS COWLEY SHOCK TRAUMA CENTER

Ms. Doyle reported that STC admissions are increased over the number in FY11, as well as the number budgeted. She said that OR cases were also increased over 2010. She said that the number of beds occupied by month was slightly increased over the same period last year and that there had been no capacity alerts during March 2011. Mr. Broccolino asked about the patient acuity level. Ms. Doyle said that acuity for patients in the ICU is very high, while acuity for some patients coming by protocol to the Trauma Receiving Unit is not as high.

Ms. Doyle reported on the STC's educational activities. She said that the third quarter had been very busy for educational outreach efforts. She also reminded the Board that the STC Gala would be held on Saturday, April 16th.

LEGISLATIVE REPORT

Ms. Gainer summarized the results of the legislative session for the EMS system. She said that the final operating budget contained provisions to require that beginning in 2014, revenues collected from the moving violation surcharge be credited to the EMS Operations Fund, after distribution of an amount set forth annually to the Charles W. Riley Fire and Emergency Medical Services Tuition Reimbursement Program. She said that the Department of Legislative Services projected that the moving violation surcharge produces about \$8.2 million annually.

Ms. Gainer said that the Joint Chairmen's report included language requesting a study to evaluate the legality, feasibility, and ramifications of insurance billing for MSP medevac services. She said that legislature had approved funding for an 11th MSP helicopter, as well as funding for a flight simulator. She also said that the capital budget included funding for MIEMSS to address a communications cabling problem, for UMMS for their Trauma, Critical Care and Emergency Expansion Project, and for Johns Hopkins Medicine for their Cardiovascular and Critical Care Tower.

UPDATE ON ACTIVITIES

Maryland State Firemen's Association. Second Vice-President Lewis reported on the efforts of the MSFA during the legislative session. He reminded the Board members of the upcoming MSFA Annual Convention in Ocean City in June and invited them to attend.

OLD BUSINESS

Comprehensive Stroke Center Regulations. Ms. Aycock presented to the Board for information a draft of the Comprehensive Stroke Center regulations. She said that the draft had been developed with input from the stroke community, including physicians and hospitals. She said the draft had been posted to the MIEMSS website and a link to the draft had been included in the Maryland Hospital Association newsletter. She said that several informal comments received had asked whether the draft would alter any EMS protocols currently in place. She said that the draft would not alter any EMS protocols currently in place. She said that in May, the Board would be asked to vote on the draft for promulgation as a draft regulation.

NEW BUSINESS

Ventilator Protocol Modification. Dr. Alcorta presented proposed modifications to the Ventilator Protocol. He said that pressure support is currently shown as a mandatory requirement. He said that the proposed modification would change this requirement from “mandatory” to “strongly recommended” since programs with ventilators that lack pressure support would otherwise have to purchase new ventilators by July 1 in order to be in compliance. Also, under the “Chronic Ventilated Patient,” the existing protocols lack a well-defined window during which time the change to the ventilator setting would have occurred. The proposed modification addresses this by defining the window to be “within 24 hours.”

Dr. Hexter asked when the protocol change would become effective. Dr. Alcorta responded that it would become effective immediately upon Board approval.

ACTION: Upon the motion of Dean Reece which was seconded by Dr. Hexter, the Board approved the modification to the Ventilator Protocol.

Proposed Changes to Regulations. Mr. Magee presented to the Board for information draft regulation changes.

- Incorporation by Reference. The draft changes to COMAR 30.01.02.01 would update the EMS Protocols and the Trauma Data Dictionaries that are incorporated by reference into Title 30 regulations.
- Trauma / Specialty Center Designation. The draft changes to different provisions of COMAR 30.08.02 would: 1) clarify that electronic applications for designation are allowed; 2) recognize CON waivers; 3) extend time for designation decisions to 90 days; and 4) modify site review requirements for re-verification purposes.

- Educational Program Approval. The draft changes to COMAR 30.04.02.12, 30.04.03.17, and 30.04.04.15, would expand the conditions of provisional approval for education programs.

Mr. Magee said that he anticipated asking the Board in May to approve the draft changes for promulgation as proposed regulations.

Mr. Broccolino announced that the Board would be retiring to Executive Session, after which it would reconvene in Open Session.

ACTION: Upon the motion of Dr. Kalish, which was seconded by Ms. Showalter, the Board adjourned to Executive Session.

The purpose of the closed session was to carry out administrative functions under State Government Article §10-502(b), to obtain legal advice from counsel under State Government Article § 10-508 (a) (7), and to discuss certain site reviews and maintain certain records and information in confidence as required by Health Occupations Article §14-506 (b) under State Government Article § 10-508(a) (13).

The closed session was attended by:

Board Members Present: Victor Broccolino, Vice Chair; David Fowler, M.D.; David Hexter, M.D.; Murray Kalish, M.D.; Robert Maloney; Dean Albert Reece, M.D., Ph.D.; Sally Showalter; Mary Alice Vanhoy, R.N.; Gene Worthington.

Board Members Absent: Donald L. DeVries, Esq., Chairman; Dany Westerband, M.D.

Others Present:

MIEMSS: Dr. Bass; Dr. Alcorta; Ms. Aycock; Ms. Beachley; Mr. Fiackos; Ms. Gainer; Ms. Goff; Ms. Myers; Mr. Schaefer.

OAG: Mr. Magee; Ms. Sette.

The Board approved the closed session minutes from the March 10, 2011, meeting.

The Board was provided information on the determination of an application for designation as a freestanding emergency medical facility; an application for designation as a primary stroke center; and an application for designation as an eye trauma center.

The Board was provided information on Memoranda of Understanding with out-of-state Cardiac Interventional Centers.

The Board was provided information regarding the results of site surveys of EMS Educational Programs.

The Board reviewed SEMSAC appointments.

The Board considered provider disciplinary cases.

The Board reconvened into Open Session at 10:58 a.m.

Board Members Present: Victor Broccolino, Vice-chair; David Fowler, M.D.; David Hexter, M.D.; Murray Kalish, M.D.; Robert Maloney; Sally Showalter; Mary Alice Vanhoy, R.N.; Gene Worthington.

Board Members Absent: Donald L. DeVries, Esq., Chairman; Dean Albert Reece, M.D., Ph.D.; Dany Westerband, M.D.

Others Present:

MIEMSS: Dr. Bass; Dr. Alcorta; Ms. Gainer; Ms. Goff; Ms. Schaefer.

OAG: Mr. Magee; Ms. Sette.

ACTION: Upon the motion of Ms. Showalter, which was seconded by Dr. Hexter, the Board voted to approve Memoranda of Understanding between MIEMSS and each of the following out-of-state Cardiac Interventional Centers:

- Bayhealth – Kent General Hospital – Dover, DE
- Christiana Hospital – Newark, DE
- Washington Hospital Center – Washington, DC

ACTION: Upon the motion of Dr. Hexter, which was seconded by Ms. Showalter, and with Ms. Vanhoy abstaining, the Board voted to approve the designation of the Germantown Emergency Center as a Freestanding Emergency Medical Facility.

ACTION: Upon the motion of Dr. Hexter, which was seconded by Ms. Showalter, and with Mr. Broccolino abstaining, the Board voted to approve the designation of the Wilmer Eye Institute at Johns Hopkins Hospital as an Eye Trauma Center.

ACTION: Upon the motion of Dr. Fowler, which was seconded by Dr. Hexter, and with Ms. Vanhoy abstaining, the Board voted to approve:

- **Queen Anne’s County Department of Emergency Services as an EMS Refresher Education Program for a five-year period; and**
- **University of Maryland Express Care to offer Specialty Care Transport Refresher Courses to run concurrent with their existing program approval (until March 9, 2015).**

There being no further business, the Board adjourned by acclamation.