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<th>Time</th>
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<tr>
<td>10:00 AM</td>
<td>Welcome and Introductions</td>
<td>Christian Griffin</td>
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<td>10:00-10:30 AM</td>
<td>OMD Update</td>
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<td>10:30-10:45 AM</td>
<td>Licensure Update</td>
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<td>10:45-11:00 AM</td>
<td>EMS-C Update:</td>
<td>Cyndy Wright-Johnson</td>
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<td>1. EMSC EMS Survey aggregate results</td>
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<td>2. PEPP 4th edition hybrid course faculty training</td>
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<td>3. Occupant Protection – Buckle Up photo request</td>
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<td>11:00-11:15 AM</td>
<td>Election of Vice-Chair</td>
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<td>11:15-11:30 AM</td>
<td>Jurisdictional Roundtable</td>
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Chair Griffin called the meeting to order. Motion made to accept Minutes as posted, unanimously passed.

Dr. Chizmar: Thanked everyone in the jurisdictions who have been active with the vaccinations. As everyone is aware, the numbers are 71 percent for adults over the age of 18 have received at least one dose of the vaccine. He said that fire and EMS has played a critical role in that rollout. Obviously we are not in a state of emergency, but throughout the state of emergency we have transported patients and provided vaccines to the point where Maryland has fared far better than any of the other states. Again, Dr. Chizmar offered a big thank you to all the chiefs on the call as well as all of the EMS clinicians.

The Protocol initial format was rolled out on the website last week. For awareness purposes, there is a little bit of BLS in the ALS section, just because they want ALS to know what BLS can do and vice versa, particularly around the topic of Albuterol and glucometer being standard protocol. As of Monday, there are 800 ALS clinicians and over 2500 BLS clinicians who have already viewed the content. Dr. Chizmar thanked those attending for getting folks on line early. He highlighted earlier some of the major content changes to be aware of, the Albuterol for BLS which began as part of the rollout when it was decided to give jurisdictions up until the next year to gradually rollout both the supply and training on the units. That will be a huge lift for a place that has a lot of BLS units. On the medical directors’ call yesterday there was some discussion around best practices. He stated that there will need to be a brief hands on to touch all of the EMTs in the City. Glucometer for BLS is now standard and is covered under the MIEMSS Clea waiver. Those are the major protocol updates.

In terms of the actual printed rollout there will be 1500 to 2000 copies of the 8 ½ x 11. Plan is to give each jurisdiction, Commercial and EMSOPs at least one to five copies, depending on their need. For this year we will continue to print the pocket protocols. Dr. Chizmar has heard that they have become less useful. Most popular are the spirals.

For awareness purposes, the emergency services transport supplemental payment program could be a tremendous benefit to your EMS jurisdictions. Ms. Gaynor and Dr. Delbridge have been hosting calls on this planned amendment to Medicaid that potentially can provide increased reimbursement for the past several weeks. If not familiar with what Dr. Chizmar is speaking about you are asked to email him.

From an ET3 and Alternate Destination standpoint, ET3 has rolled out in Baltimore City, Montgomery County with plans to roll out in Annapolis. In addition we have a jurisdiction, Caroline County, that has undertaken Alternate Destination transport without reimbursement. Obviously Caroline County is in a unique position, the only county in the state without a hospital.

In the COVID world, there are 275 people in the hospital. There is discussion at this point of starting to downscale some of the alternate care sites. Dr. Chizmar emphasized that he is continuing to advocate for mask use on EMS calls. There was a question raised by a medical director yesterday to fully explore with PSAPs, and Dr. Chizmar encouraged those attending to speak with their PSAPs about this, and that is the question of their continued value in the screening questions of the 911 center. Right now some of the feedback that he has had from some of the jurisdictions has been that everyone is wearing a mask anyway and they are starting to get callers that are pushing back and saying we are all vaccinated here or we’ve had COVID and are now vaccinated and why are you asking these questions, adding to the 911
call processing time. Encourage you to the extent you are able, to approach that discussion with your PSAP managers/directors, realizing that PSAPs have a lot of latitude at the local level. From a recommendation standpoint, there is less value now than before. Prior to universal masking on every single call and prior to 70 percent of our population having at least one vaccine. Dr. Chizmar feels we are going to gradually see the rollback. We are not done with COVID by any means, but feels we have to be of the mindset that we have to rollback things that make sense. The question comes forward if everyone is wearing a mask is there value for the 911 tele communicator to sit on the phone an additional two to three minutes, back and forth with the person, about why they do or don’t have COVID symptoms.

For informational purposes only as this mainly affects Region V, UM Prince George’s Hospital Center, Cheverly, will close Saturday morning at 8:00 am. Prince George’s County has been working closely with them. The new UM Capital Region Medical Center will open Saturday at 8:00 am at the Largo site. It’s a wonderful hospital (Dr. Chizmar has had the opportunity to tour) that will be a tremendous benefit to Prince George’s County and the entire region.

He asks that people keep in mind that the opioid numbers are back on the rise. Dr. Chizmar stated as we continue learn to live with COVID, and not allow COVID to dominate our lives entirely, the focus on cardiac arrest survival will take center stage again.

The QI course, formerly a two-day we come to you course, is being rewritten. Lisa Chervon is seeking broad input into the course. Will make it less focused on compliance and the 5 and 35 day reports, and a bit more clinically oriented and process improvement oriented. There will be a section on Title 30 COMAR Regulations because the quality improvement officer needs to know about it, but it will not dominate the discussion. It will be put in a virtual format where your QI officer will be more accessible without having to schedule in-person courses. Projected timeline will be months for that.

MIESS Personnel Changes: New Region III Coordinator is Andy Robertson; Jeff Huggins is the Director of Field Operations. Associate Region III Coordinator position is vacant and will be posted shortly.

As volume returns to the hospitals, Dr. Chizmar monitors hospital volumes and EMS transfer of care times, off stretcher times. There are several hospitals that ask for their off stretcher times and currently he is supplying weekly reports to about 14 hospitals in the state. Currently there are three hospitals in the Baltimore metropolitan area with a hospital offload time of 12 minutes.

Licensure and Education - Melissa Meyers provided the report: All provisional clinicians are encouraged to submit an application to transition to full licensure. The BLS renewal cycle ends on June 30, 2021. If you have any clinicians who expire on June 30th, you are asked to encourage them to meet renewal requirements or file for an extension prior to their expiration date. For service directors, review your rosters and remove anyone who should no longer be affiliated with your department. Access to the online training center has been updated to include a single sign-on option. This means that when clinicians log into the online training center, they will use the same username and password that they typically use for Licensure and Elite. If this log in does not work, have them submit a help desk ticket. The national scope of practice model has been updated and released. This will prompt changes to the educational standards, however those standards have not yet been released.
Alan Butsch reminded everyone that the Governor's Order stated people do not expire until December. There are still many people who are still on an extension, more are BLS. Encourage as many people as possible to get through the process.

Alan Butsch asked if there will be any subsequent extensions following this? Melissa stated, there will not.

Cyndy Wright-Johnson: Cyndy provided her report in power point format. 2021 EMS for Children: EMS Assessment Maryland had 100% participation; 2021 results demonstrate growth and opportunity; 2022 survey will again occur in January and February as required in federal authorization and appropriation language. She shared the Pediatric EMS Champions & Opportunities, 2021 Save the Dates. A PEPP Course in being offered this weekend in Southern Maryland. It's an all hands on course, completely updated. Additional courses will be offered in the future, at least one in the Fall. Looking to update the Buckle-Up poster. The latest poster is the 2000 version.

Chair Christian Griffin: At the February Meeting there was a solicitation for anyone interested in the position of Vice-Chair to come forward; no interest in the position was received. Chair Griffin is again asking if anyone is interested in the position to send an email to either himself or Chris Hyzer of your interest in the position and then the Committee will act on this in August. If you have any thoughts or questions about this, please bring them forward now. None raised.

Jurisdictional Roundtable:

Annapolis City: The retirement of Chief Robert Christian was announced. Congratulations offered. They have 35 people interviewing for ALS positions. Continuing work on tele med and Alternative Destination. They are increasing their outreach to reduce overdose deaths.

Anne Arundel County: Recertification cycle now in progress for RSI and ultrasound training which is going well. Very happy with the progress.

Baltimore City: Call volumes are increasing and the turnaround times are terrible, about 41 minutes. The ET3 citizens are going to urgent care centers vs the ERs. We have a class in June and July of 20 EMTs and 40 paramedics.

Baltimore County: De-escalating and demobilizing from COVID related activities. Lucas devices on all of their transport units and video-laryngoscopy on all of their ALS units. They were able to budget four more EMS captains and are bringing on a funded position to assist in the office. Working on a supplemental payment program and proud to announce their MIH program has received an award.

Calvert County: Currently working on making an offer to the top ranked candidate for the EMS chief position. Hope to have that position filled and person on board within the next 30 to 45 days. Completed CPAP. There are 14 paramedic applicants who will be interviewed within the next two weeks. By the end of the summer, hopefully will have ALS transport units in service 24/7. Staffing is through CARES funding and will continue to use that funding as long as it is available to maintain temporary staff to fill gaps and vacancies as needed.

Caroline County: Hiring part-time paramedics. Just finished hiring part-time EMTs. At next meeting hopefully will have an announcement of the hiring of an EMS Director in Caroline. For the Alternative
Destination program have added a second site. As far as hospital tracking is going, one of the other areas that can be tracked is, how in rural EMS hospitals, Easton and the Dorchester hospitals keep going on divert and colors and so their turnaround times get backed up. Making it 45 minutes to get an ambulance back from the hospital.

**Cecil County:** Several personnel changes, Chief Tome is the new Director. There is a new Operations Chief, Andy Budzialek. Mr. Donohue looks forward to the Committee meeting him. They are looking forward to hiring four more paramedics. They are still trying to hire Dispatchers. He thanked Jason Cantera for Cecil’s single source eMeds. This will help them with their data and collection analysis. Dr. Aswegan is leaving Cecil County at the end of the month; will remain remotely part-time working closely with Christiana and Union Services in Delaware to try and get a new medical director for the county. Interviews have been scheduled. They are still doing lots of work with COVID vaccinations, although winding down a bit. Hopefully starting in July they will have an overdose response team, a new position for coordinator, and a lieutenant level position working with the overdoses and other services in the County. This is kind of an integrated health model. Hoping to start interviews with an internal uniformed candidate promoted into that position. Working very closely with social services to follow-up on every overdose patient they go on.

**Harford County:** Currently in process of moving forward with the North Harford Station; in the design phase. Will break ground for that station in the fall. Looking to place medication pumps on all front line ambulances. They just recently hired three paramedics who begin on Monday.

**Howard County:** MIH team continues to support the county health department with vaccinations. Looking to place medication pumps on all front line units in the fall. By the summertime will be upgrading all of their videoscopes. County awarded MIH vaccination efforts by National Association of Councils

**Montgomery County:** Update on ET3 program started January 1st with just under 60 uses; ultrasound program started two weeks ago looking at carotid flow and rather to transport; Chief Butsch to move to the apparatus section on July 1st, he will stay in an advisory position.

**Prince George’s County:** Tony Hughes presented. Prince George’s Hospital move this weekend. Butler Transport will be taking care of all transports. Dr. Goltz, Medical Director and Dr. Uribe, Associate Medical Director are now onboard.

**Washington County:** Graduated 28 people from the recruitment field. Working with the crisis intervention team to develop a protocol to allow them to get on scene and interact with patients and perhaps cut down on number of transports to the hospital.

**Ocean City:** Call volumes are way up. Putting bike team (20 member team) together for special events. In process of hiring six new ALS positions, somewhere around 1st of July. The COVID vaccination program has finished with over 3,500 vaccinations completed.

**MFRI:** Robby May is the ALS Coordinator and can be contacted at: rmay@mfri.org The Fall schedule is out as well as ALS. You can now find classes by date, region, and class type. There are a lot of classes that are going into or out of pilot. The EMS Officer 1 class has been significantly redesigned and piloted throughout the state with high reviews.
The training center in Crescent Town is now closed for two years for a major remodel. A few personnel updates: Northeast Regional Training Center, Alex Parricon is the Regional Coordinator; Jack Bell is covering the Upper Eastern Shore and Southern Maryland; and Jack Wood has returned to Headquarters. Director Cox would like to see one day classes, i.e. EMS on skill development.

Other areas they are receiving a large amount of requests for are classes around psychological and behavioral emergencies as well as self-care and resiliency for fire/EMS. If the need wasn’t apparent to any of us before, it certainly was after seeing what occurred last week at the Los Angeles Fire Department. MFRI will adopt and develop their own self-care, resiliency one day class.

**MSP:** At the end of training for their newest group of rescue technicians. Current MSP academy class graduates in July. Process of upgrading five new crew chiefs in August.

**MSFA:** Saturday on June 19th the virtual conference begins. Please look online for the calendar of events.

**Shock Trauma:** Still scheduling for EMS students to come in.

**Queen Anne’s County:** Driver’s license and medications loaded in Image Trend. They are in the process of hiring new recruits, middle of July. Last week they had their largest call volume ever.

**Salisbury:** Festival City was able to secure funding.

The next JAC Meeting is scheduled for August 11, 2021.

Motion adjourned at 11:10 am