AGENDA
September 21, 2021

1. Call to Order & Introductions
2. Approval of Minutes
3. Regional Medical Director’s Report
4. Pediatric Medical Director’s/EMSC Report
5. EMS Board Report
6. SEMSAC/Regional Affairs Report
7. MIEMSS Report
8. Agency/Regional Reports (Circle “yes” on the roster if you want to make a report)
9. Old Business
10. New Business
11. Adjournment

Next meeting
November 16, 2021
@ 1330 hrs.
Location: TBD
The meeting was called to order at 1:31 pm. by Chairman Rick Koch

Approval of Minutes: A motion was made by Mary Alice Vanhoy to approve the May 18, 2021 minutes as written, seconded by Brian LeCates and passed.

Rick Koch – Before we get started I would like to recognize Bryan Ebling as the MIEMSS Region IV Administrator.

Regional Medical Director’s Report:

Dr. Chiccone – I will be giving you a report from our Protocol Review Committee that was held on September 8th as well as an update of some things to look forward too.

- The final wording on the Crashing Patient Protocol will be due in November.
- The Protocol that referenced the King airway will now include Supraglottic airway device.
- Therapeutic Hypothermia, which may now be renamed in the literature Targeted Temperature Management. The literature just does not support this as a pre-hospital priority so the Therapeutic Hypothermia protocol will go away.
- There was a recent literature review of TXA, which was favorable. That protocol will make a debut hopefully soon for qualifying patients.
- A VAD Ventricular Assist Device protocol has been proposed to the committee.
- Dr. Chizmar presented us with an article regarding the use of a bougie in direct laryngoscopy. There was a better success rate when they were used on the first attempt to place the endotracheal tube. Out of hospital cardiac arrests seems like when laryngeal tubes were used it was a far better outcome than endotracheal tubes in the short-term goal of 72 hours.
- There will be an upcoming discussion regarding the Red and Yellow Alert status. Dr. Chizmar was kind enough to send us an article that is published in the Western Journal of Emergency Medicine that gives the history in Maryland of where the boarding problem originated. It is a highly complex issue, but this article published from the University of Maryland focused on the fact that the State of Maryland has always been...
unique at least since the 1970ties regarding the Medicare system. Although this is a medical publication, I would really encourage you to read this because in approximately six paragraphs it explains why in-patient hospital beds went away. Doing away with in-patient beds helped hospitals in the State of Maryland achieve the biggest cost savings due to these beds being staffed 24/7. This was strictly a financial decision. This was not the best financial decision; however, it did provide the Medicare savings they were trying to achieve.

**Pediatric Medical Director’s/EMSC Report:**

**Cyndy Wright Johnson** - I sent my report out to the Council, but I will highlight a few things.

- The PEPP course being held on October 28th at Elkridge VFD is full.
- Wednesday, September 29th Danielle is doing an online webinar for instructors, coordinators, former coordinators, or people who have taken PEPP and would like to help teach or run the course.
- The CPEN review course that is scheduled for October 19th and 20th has been moved to a virtual platform.
- A huge thank you to the hospitals, one hundred percent of the hospitals have completed the National Pediatric Readiness 2021 survey!
- MIEMSS has made a commitment to open C4 for pediatrics in the first week of October. Dr. Anders is actively in the process of recruiting Pediatric Emergency Medical Physicians, Pediatric intensivist aware of transport medicine and Pediatric hospitalist to staff that 24/7. I will let Dr. Chizmar go into all of those details and give you that data.

**EMS Board Report:**

**Mary Alice Vanhoy** – We did have our EMS board meeting. We did a little bit of clean up of the items in COMAR related to various designations. It was more just verbiage, nothing that would have any impact on EMS. That was about it at this time, just a lot of catch-up and reports.

**SEMSAC Report / Regional Affairs Report:**

**Mary Alice Vanhoy** – They are working very hard on the MIH project in SEMSAC. One of the things that we did approve at the board was MIH will become a standing committee for SEMSAC.

**MIEMSS Report:**

**Dr. Chizmar** – Dr. Chiccone did an excellent job recapping some of the discussions we have had at the protocol view committee. As you can see, we have been busy advancing the science on both the BLS and ALS front.
There are just a few key points that I want to cover.

- Paramedics may continue to provide vaccinations for both COVID-19 and influenza. September and October is prime time to get your flu vaccine so we can continue to utilize Paramedics for both public and public safety flu and COVID-19 vaccines because of a change in the law with this general assembly.
- Unfortunately, with EMT’s and CRT’s the executive orders expired on August 15, 2020. Therefore, EMT’s and CRT’s can still provide vaccinations but they cannot do so as EMS. Meaning EMT’s and CRT’s can still provide vaccinations if they are under the oversight and training of the health officer in the jurisdiction. The reason for this is that there is a provision that allows lay people with appropriate training and supervision from the health department to be able to provide the vaccinations.
- The ALS state content for continue education is posted on the website. We are asking people to complete that by March of 2022. The ALS committee is already working on new state content for 2022 – 2024 to capture a lot of the input that we have had at our meetings on the continuing education topics.
- We were fortunate enough to bring on 1600 provisional EMS Clinicians state wide including 1200 provisional EMT’s. Several hundred of those provisional EMT’s have made the step to full licensure. However, there are still several hundred provisional EMT’s that have not made the step. These folks will need to file an online application, and complete their continued education requirement before February 11, 2022 to become fully licensed.
- We had a call with Bill Seifarth from the National Registry yesterday. It is our understanding in talking with him that around mid-2023 the current psychomotor exam will be retired. What the National Registry is aiming to replace that with are additions to the National Registry Paramedic cognitive exam. Their plan is to add multi-media based scenarios and eliminate the in person psychomotor exam for new Paramedics.
- Kudos to Salisbury who launched the Minor Definitive Care Now Program. They sent me their first report and I was astonished by the level of activity. Chris Truitt, Dr. Todd, everyone from Salisbury and Wicomico County Thank you for getting the program off the ground, tremendous work!
- The lawyers have reviewed the eMEDS data that was inadvertently distributed to Montgomery County and Howard County. They have determined that there was no breach of HIPPA or the Maryland privacy law. MIEMSS has been reassured by the legal analysis that this is not something that requires calling patients about. It went to a secure place, the people who saw the data immediately reported it to ImageTrend, and there was no leakage to non-HIPPA covered individuals.
- The last piece I will defer to Bryan is the conversation with Delaware hospitals. I know that there has been some discussion about that and Bryan has been working to coordinate a meeting with Dr. Rosenbaum who is the incoming new State EMS Medical Director in Delaware and Diane Hainsworth.

Bryan Ebling – There are just a few additional items I would like to cover.

- Those Clinicians that will expire in either April or June of 2021 have been provided extensions until October or December of 2021.
The Delaware meeting with Dr. Rosenbaum and others is tentatively scheduled for September 29th. I am going to be putting out a doodle poll either this afternoon or tomorrow morning as far as what time of day.

Since the inception of C4 over 1400 assists as of yesterday and they are looking for some contractual employees. They are looking for C4 Coordinators, so if you are a paramedic or RN and are interested in doing that type of work we can put you in touch with the right folks.

Region IV is about 50% active on the @HA application. We have several counties that need to have their CAD systems programmed to be able to access and push data through that application.

I want to thank Tidal Health Peninsula for their efforts in providing their annual Trauma Conference remotely this year. The topics were very interesting and I appreciate their efforts.

The state is going through the process of selecting a new lab for processing COVID-19 test kits. We will be collecting the old test kits prior to the changeover. If you are in need of any test kits, please reach out to our office and we can pass those requests along.

There was a survey that was sent out yesterday through Dr. Chizmar’s office in regards to COVID and FLU vaccinations. Please take a moment to complete that survey, it is due by October 1st.

Dr. Chizmar thanked Bryan for covering the survey. He also added that MIEMSS is obligated to give a report on the status of vaccinations. Completing this survey will give us the needed data to present to the legislature.

Chempack sustainment: Trooper 4 and 6 will be visited on September 29th and medications will be updated as needed. Hospitals that house Chempack kits will receive a shipment of medications that are will require updating within two days of receipt. This shipment is expected to arrive before September 30th.

The annual 50/50 Cardiac Device grant should be coming out within the next 30 days.

Ocean City is looking for help on September 24th and 25th between the hours of 1600 - 0300 with the unsanctioned H2O event. They have asked MIEMSS to help coordinate help for this event. MIEMSS sent out a notice to all of the HJO’s and Emergency Managers requesting three ALS staffed ambulances from the region. That request has now went out wider than Region IV after we did not get much response within our region. Ocean City has modified their request as of this morning. They are willing to pay the overtime costs to the 911 service organization who provides coverage. They will also take a BLS transport unit in the place of an ALS unit. Fuel will be provided for both the unit and individuals assisting with this event. If you know anyone who is interested, please have him or her contact Michael Parsons at the Region I office. Talbot County has committed their bus and it will be staffed.

Bike week was last week so I asked Michael to run a report on the number of motorcycle accidents. His report showed 21 MVCs involving a motorcycle within our Region during the duration of Bike week. We are not sure if this is up or down from previous years, but I felt it would be an interesting data point to share.
**Chairman Koch:** We are going to break away before we get to the Agency Reports to discuss the special meeting that was held back on August 31st regarding a proposed pilot program to do away with Red and Yellow Alerts at the hospitals. I will defer this to Dr. Chizmar for further discussion.

**Dr. Chizmar:** Anne Arundel County has presented this to their hospital leadership and they have not made a decision on this yet. I know that it is this group’s desire was to do this in coordination with Anne Arundel County because of the concern for the Queen Anne’s Emergency Center. I followed up as recently as yesterday with Anne Arundel County and they are still interested in participating, however, they have not defined any timeline yet.

The second follow up piece is that Bryan Ebling has sent out a document to the Council around the metrics that we would look at once Anne Arundel County receives the green light. I believe, along with the Council that without the participation of Anne Arundel County, we will not be able to proceed with this pilot program.

I would say what we need to know is if Anne Arundel decides to put this in play, does the Council want to follow suit?

Prior to the vote, there was a discussion among the Council members regarding what metrics and data points would be most favorable to capture during the pilot program and how long would the pilot last.

Dr. Chizmar suggested a four-week timeframe once Anne Arundel County get the green light. There would also be an understanding that if any of the partners wanted to get out, we are all getting out and re-evaluating. Lastly, prior to going live there will be a brief check in call with the Council.

**Chairman Koch:** A motion was made by Dr. Ciotola to proceed with the pilot program on or about October 1st only if all of the partners are onboard. Seconded by Dr. White, all in favor, none opposed, and passed.

**Agency / Regional Reports:**

**Robert Lisle** – We still need help with the 10K across the bay being held on October 31st. We are looking for 5 Gators, 1 ALS unit and 2 BLS units. If anyone can help us out with that, we would appreciate it.

**Brian LeCates** – Talbot County has several Paramedic and EMT vacancies that we will be attempting to fill in the near future. In addition, the EMS Chief position is vacant and will be advertised shortly.

*Congratulations to Brian LeCates on his promotion to Talbot County’s Director of Emergency Services.*
Dr. White – After the Ironman Maryland event, I can sympathize with the counties regarding their upcoming events especially with the limited resources with both EMS and hospitals. It can be a very scary time and I am not sure it is wise to have such large-scale events when EMS systems are stretched to this limit.

Chris Truitt – The Minor Definitive Care for our MIH went very well running about three days a week for the Nurse Practitioner and the Paramedic. They have got about a 50% enrollment for the folks they see that actually consent to get treatment. We had the Folk festival last week and that went very well. We had like four or five transports but nothing major and we only have one more year which is next year. As in the case of Talbot, we are also going to be hiring soon so if you know of anyone who would like to work in Salisbury send him or her our way please.

Mary Alice Vanhoy - With the new COVID restrictions that go into effect on October 1st at University of Maryland Systems across the State, we will be unable to hold classes there unless everyone is vaccinated. With that being said, I am working with Brian LeCates and Dr. Chiccone on our next two Paramedic refreshers to look at alternative locations outside of the hospital. I do have an RSVP on the invite, I will send it to Dawn, and she can send it out to everybody. Depending on the how many people we have that needs the program will depend on the location where we have it.

Winterfest is being held the weekend of February 18th and it will be a lot of fun! It will be our 25th one, we have many wonderful speakers and we hope to see everyone there!

Dr. Todd - The hospital has decided to extend their policy on elective surgeries until October 1st. It is hard to measure what true effect that it is having but it I can only imagine if it wasn’t in place how much worse we would be.

Doug Walters - I just want to thank all of the EMS crews for their patience during the high volumes and extended turnover times. It has been a very hectic week but the crews have been patient and it was appreciated.

Old Business:

None

New Business:

Nothing following the Red and Yellow Alert discussion, motion, and vote just prior to the Agency/Regional reports.

Adjournment: The meeting was adjourned at 2:55 pm. Motion made by Mary Alice Vanhoy, seconded by Chris Truitt.