

Region IV EMS Advisory Council

Rick Koch, Chair
Chris Truitt, Vice-Chair
Brian LeCates, Secretary

VIRTUAL MEETING MAY 17, 2022

AGENDA


Joining info Join with Google Meet

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Join by phone

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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
September 20, 2022
@ 1330 hrs.
Location: TBD

REGION IV EMS ADVISORY COUNCIL

May 17, 2022

Minutes

Attendees: Rick Koch, Bryan Ebling, Mike Parsons, Dozia Rahilly, Dr. Ochsenschlager, Dr. Chiccone, Lorenzo Copper, Dr. Chizmar, Cyndy Wright-Johnson, KJ Marvel, Mary Alice Vanhoy, Scott Haas, Mark Bilger, Lisa Lisle, Dr. White, Scott Wheatley, Jon Krohmer, Matt Watkins, Dr. Delbridge, Chris Truitt, Shari Donaway, Mike Bramble, Jonathan Larsen, Dr. Todd, Jason Shorter, Falon Beck, Dyshekia Strawberry, Doug Walters, Wayne Darrell, Andy West-McCabe, Tim Collins, David Rice, Brian LeCates, Wayne Tome, Debbie Wheedleton

The meeting was called to order at 1:30 pm by Rick Koch

Approval of Minutes: A motion was made by Mary Alice Vanhoy to approve the March 15, 2022 minutes as written, seconded by Dr. Chiccone with one correction and passed.

Regional Medical Director's Report:

Dr. Chiccone – First, Happy EMS Week!

I have a few announcements:

- A reminder to my fellow wizards who attended the symposium, CME certificates for medical directors have been sent out. If you have not received your certificate, please contact Chris Hyzer.
- The protocol review committee still has a vacancy; applications are due by the 22nd.
- The recommendation from MIEMSS remains that clinicians should wear a mask during patient encounters.
- The protocol information roll out is in its final stages of production.

I did have a conflict during the protocol review committee so Meg Stein provided me the following part of my report.

- Push dose epinephrine passed as proposed.
- Push dose TXA and IV Nitroglycerine are coming back as protocols with revisions, due to the committee in July.

I was fortunate enough to catch the end portion of the meeting highlighted below:

- Roger Stone gave a presentation of a review paper on endotracheal intubation in which he reviewed three trials and the overall conclusion is that endotracheal intubation does not appear to be tied to survival in cardiac arrests. Which is to say no clinical advantage over for example i-gel or bag valve mask airways.

Pediatric Medical Director's/EMSC Report:

Cyndy Wright Johnson – I sent out our EMS for Children May update and an update for the Child Passenger Safety Project. I also want to wish everyone a Happy EMS week!

I want to recognize that we had on Thursday 28 and on Friday 25 pediatric champions with us at the pre-conference for EMS Care. We had a very good two-day session where our pediatric champions contributed a lot of hard work. We are looking forward to having a July and January virtual meeting and then our in person meeting in October.

In the upcoming EMS newsletter, you will meet the Region I Pediatric Medical Director and our two Pediatric Champions. Over the summer, you will have the Region IV Pediatric Champions introduced most likely in two editions of the EMS newsletter due to having 11 jurisdictions for us to cover.

I would like to recognize Chief Koch for putting together our first part of EMS week awards to hand out two Right Care When it Counts awards to two young ladies for their role in the incident last May on the Route 90 Bridge.

We will be presenting the EMS for Children award this Wednesday to Dr. Bruce Klein at Johns Hopkins.

Both of our Child Passenger Safety and Bike Safety projects are moving rapidly. We have four jurisdictions that have signed on to be our pilot to put car seats into supervisory EMS vehicles for the non-injured child. For Region IV that would be Ocean City and we are going to be scheduling that training very soon.

We should hear soon if the Bike Safety Project will be funded again next year.

EMS care was a huge success. If you have topics that you would like to hear next year, please send those to us.

It is going to be over 90 this weekend and our heat stroke display is available.

EMS Board Report:

Mary Alice Vanhoy – Happy EMS Week! Stay hydrated!

A slight clarification regarding the push of TXA and Epinephrine, that is part of the wilderness only protocol at this time.

Our open forum was very short. Dr. Delbridge gave his report, not a lot out for Shock Trauma or Aviation.

There was discussion about the upcoming MSFA Convention and some changes. There will be multiple educational offerings that will be two hours long.

The two major actions under new business were to approve Frederick County and their paramedic program and Anne Arundel County and their BLS training program and the Secret Service with their BLS Training program.

SEMSAC Report / Regional Affairs Report:

Scott Haas – There was no meeting last month so I have no report.

MIEMSS Report:

Dr. Delbridge – Provided an update on the COVID numbers with an increase 30% over the past week.

We have previously talked about the ESPP program, which is the Medicaid cost reimbursement program. Right now Medicaid pays \$100.00 per EMS transport for a Medicaid beneficiary. With the ESPP deal, the federal government will reimburse EMS operational programs 50% of the balance left after what Medicaid covers. The results after the first year of this program shows that collectively the 13 jurisdictions who participated are getting 80 million dollars. I am telling you all of this because on Tuesday, May 24th at 11:00am we are going to have a conference call inviting anyone who has participated this past year and anyone who is interested in finding out more. If you are interested, please let me know and I will send you the link.

Dr. Chizmar – Happy EMS Week!

I want to clarify that the protocols that are under consideration, the wilderness EMS protocols and the IV Nitro protocols are very far from completion. It does remain to be seen whether those will be adopted.

Regarding the PRC, we are up to 12 nominations for the ALS career clinician onboard. The PRC bylaws allow that to post for a month and an additional 10 days for the Jurisdictional Medical Director to turn in one nomination per jurisdiction. Those are then forwarded to Dr. Delbridge to make a final decision. We also have an alternate position that is also vacant for an ALS career clinician as well.

My goal is to have the video updates and the protocol document itself up as soon as possible. The goal for the internal team, Meg Stein, Patrick Tandy and those who work with me on that is by the end of this week and that is what we are shooting for both the ALS and BLS update. I will as is years past also provide a skimmed down version for the Base Stations.

In the next month, we will have all new ALS state content up working with Melissa Meyers and our office of Clinician Services for continuing education for ALS as we did in the prior licensure cycle.

For the hospitals online, our goal is to migrate the hospital base station course to an online format for hospitals that want to conduct it online. The in-person option will still be available as well.

Bryan Ebling – Happy EMS Week! Today is Safety Tuesday, tomorrow is EMS Children, Thursday is Save a Life, which includes stop the bleed, and CPR and Friday is EMS Recognition day.

Winterfest / Miltenberger will remain online through December 31, 2022. The number of classes being viewed to date are as follows:

- 447 Classes have been completed by EMS Clinicians, with a breakdown of 2 EMR's, 281 EMT's, 47 CRT's and 117 Paramedics.
- The breakdown by Region are as follows: Region I had 8 participants, Region II had 15, Region III had 177, Region IV had 155 and Region V had 92.

The EMT stipend program is still available. You can find additional information and the link on the MIEMSS home page. Out of the 500 available spots, we have had about 280 that have applied and about 250 who have been approved. That breaks down to about 65% are MFRI students and 35% are college EMT classes. If you need more information, please let us know.

Just a small addition to the protocol information Dr. Chizmar provided, the Region IV office provided the ALS and BLS medication list that is required for each unit. If anyone else would like a copy, please let us know.

Our office is reviewing the final VAIP draft of the equipment checklist and we should be getting them uploaded to the MIEMSS webpage around June 1st. They will include all of the information needed for the July 1st protocol rollout.

Bryan deferred to Dr. Chizmar to discuss the Hand on Chest Time

Dr. Chizmar – One of the things we need to redirect our focus towards in working with our partners in the 911 center is capturing the time from the initial 911 call to the time that hands are physically on a patient's chest. When I did an informal poll working with the PSAP group, there are about half of the 911 PSAPs that are looking at their cardiac arrests 911 to hands on chest times. I think even just getting that metric on the radar with your partners in dispatch and telecommunications is valuable. Also, closing the loop with dispatch. There are many cases where we dispatch as a cardiac arrest and it turns out to not be a cardiac arrest and vice versa. Region by Region we want to put this on the radar and at least start a conversation with your PSAPs and if this is not something you are looking at, at least get it on the radar to start measuring that initial call to 911 to hands on chest time. The goal should be less than 90 seconds between the 911 call to hands on chest.

David Rice – The cardiac monitor and AED software from the vendors come up with a chest compression factor. Looking at whether or not we could get those incorporated into cardiac monitor and AED uploads in EMEDS would be a valuable tool across the spectrum for quality care.

Dr. Chizmar – Yes, I believe it lives in the file that is imported, it is just a matter of how it is displayed. We can call with Jim Springer to discuss this further. Anyone in Region IV tracking their 911 to hands on chest time?

Scott Wheatley – We started that about 9 months ago and have made some other moderate changes over the years which has increased our ROSC rate quite a bit.

Cyndy Wright Johnson – The Pediatric Quality Improvement Committee has been looking at this over the last two years. We have noticed two things, One which has to do with PSAP the younger the child the less likely the lay public is to start hands only CPR. We have not done focus groups so we are not sure why. We are also seeing that the younger the child, the shorter the time EMS stays on scene doing CPR and it is a dramatic drop for pediatric patients under the age of 10. We are pushing this out on Saturday and at the MSFA convention. At our PMAC meeting in July, our afternoon discussion will focus on how to get a pediatric cardiac training bundle together.

Bryan Ebling – Thank you for that very important discussion. I do have a few more items to discuss.

The C4 and C4P call volume has slowed; however, they are still operational 24/7 if the hospitals need that service it is still available.

Progress is still being made regarding the @ha application as Caroline and Queen Anne's County continue to work on getting their CADS operational to be able to push that data to the application. There is progress being made by the vendor and we were informed that Queen Anne's County should be testing that change in CAD protocol beginning June 1st and it will be tested for 30 days and if everything goes well it will be rolled out after that.

The cardiac device grant units are starting to be delivered. It seems the supply chain is freeing up a bit. However, we know that we will probably be well into the fall before everyone gets his or her equipment for this grant cycle. If you are a recipient that has not communicated to Region IV or Sherry Alban your status, please do so that we can keep track of that.

Base Station Re-designations: We received Christiana Union Hospital application for re-designation. We are expecting Tidal Health's application very soon.

A few years back the State was able to secure funding for Duo Dotes and at that time, they said it would be the last opportunity that we would be able to fund Duo Dotes. Well the Duo Dotes expired in March of 2022 and the FDA did not extend them. However, MIEMSS was able to secure some funds from the Maryland Department of Health and they are replacing the Duo Dotes for those organizations who received the grant during the last round. As soon as they are delivered to MIEMSS, the regions will be getting them out to those who are eligible.

Agency / Regional Reports:

Jason Shorter – We are actually finishing our last class for the semester. About a month or so ago I sent out course requests to all of the Jurisdictions. So far, I have received four back from Region IV. The schedule is being built so if you want any classes from MIFRI for your jurisdiction please get that in to me ASAP. Have a happy EMS week and be safe!

Tim Collins – We are experience long response times due to lack of Paramedics. At Station 8, we only have two full time Paramedics and Station 5 has had to cover Crisfield on an extended basis. I have reached out to Mike and he is aware. I have no idea what to do, so I am reaching out to you. We have two paramedic opening and we have no one apply. We reached out to the County about putting some EMTs in and we were told that the money was allotted for Paramedics and not EMTs at this time.

Bryan Ebling – One of the things we have asked Tim to do is send us an email which he is working on. I am sure there are plenty of examples of success stories across the shore that can be shared with Tim to help relieve the situation a little bit. It is not going to be an overnight fix no matter what we do. Tim, I appreciate you bring this up here today because it allows the entire Region IV Council to understand your challenges. In the meantime, while we await Tim's email I will be reaching out to the leadership at Somerset County Emergency Services to talk with them about the issues they face.

Tim Collins – There is a huge disconnect between the 911 center, the Somerset County Director and the Jurisdictional Representative. We have dispatch issues, among other things that need to be address by someone higher up than me.

Rick Koch – Not to put anyone on the spot, but maybe the State can help educate so that they can better understand the levels of Clinician care.

Dr. Todd – We are definitely aware of the issues. With Tim bringing it to this level, we certainly need to get to the heart of where the challenges and opportunities are. I will talk with Bryan more about this so that we can dive in deeper and work on a solution.

Dr. Chizmar – Chief Collins please know that I will work with Bryan, Mike Parsons and Dr. Todd to help you in any way that we can.

KJ Marvel – we are happy to report that we have a new Medical Director, Dr. Jeffery Uribe is out of Prince Georges County.

Scott Wheatley – November 13th will be the Bay Bridge Run and I will be looking for assistance from all of you fine folks. If anyone can help, we would sure enjoy your assistance that day.

Wayne Tome – We feel very fortunate here in Cecil County to have been granted a budget that has unprecedented high levels for EMS and the volunteers. We will be replacing four ambulances and acquiring our first new unit for Cecil DES transport services for the Paramedic 3 Station in Chesapeake City and that will give us two reserves. We have been granted \$75,000.00

to pick up the Medical Director's salary to replace the donation that is not coming from Union Hospital. Two new stations are being planned one will be a new location and one will be a relocation which will bring us up to four. We brought Pat Campbell on as our operations deputy director and he is overseeing training.

Chris Truitt – I am going to be sending some stuff out in June / July to get ready for the Folk Festival at the end of August. We are also planning for our 150th anniversary in October and I will get some information out about that.

Rick Koch – For Ocean City, it is continuing to be busy. We are around a 20% increase in calls every month so far this year. We have many events going on and we have told some of the vendors that we are not able to support their event. They will have to supply their own EMS team for their event.

Michael Parsons – Doug sent us a message wanting to remind everyone that PRMC's Trauma Conference is being held on September 23rd in Ocean City.

Old Business: Region IV bylaws update.

Rick Koch – The last approved bylaws were for 2009. They did go through a re-write in 2015 but they never had a final approval. I have asked Scott Haas to lead this up and he has accepted that challenge. He will be looking for volunteers to assist with this update over the summer.

New Business:

Dr. Chiccone – This is for Scott Haas or Scott Wheatley. I came across this article in the Star Democrat from May 12th, Maryland Paramedics to gain access to life saving technology with Backline EMS. It states that you have been doing a 12-month study and that the Governor has now approved a half a million dollars for this project. Would you be able to comment?

Scott Haas – So far it has been a successful program. I think Frederick is also another county in the State of Maryland that is piloting the program.

Scott Wheatley – It has been an awesome and very helpful tool in our toolbox. There will be more to come about this program as we work through it.

Adjournment: The meeting was adjourned at 2:53pm. Motion made by Brian LeCates, seconded by Scott Hass.