



Statewide EMS Advisory Council (SEMSAC)

AGENDA

November 2, 2017

1:00pm – 3:00pm

State of Maryland

**Maryland
Institute for
Emergency Medical
Services Systems**

653 West Pratt Street
Baltimore, Maryland
21201-1536

*Larry Hogan
Governor*

*Donald L DeVries, Jr., Esq.
Chairman
Emergency Medical
Services Board*

410-706-5074
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- I. Approval of the September 7, 2017 meeting minutes
- II. SEMSAC Chair Report – Dr. Kalish
- III. MIEMSS Report – Ms. Gainer
- IV. MSFA Update -
- V. MSPAC Update – Major Konold
- VI. National Study Center – No Report
- VII. Committee Reports
 - ALS – Mr. Buckson
 - BLS – No Report
 - EMD – No Report
 - Regional Affairs –
- VIII. Old Business
 - Regional Affairs By-Laws – ACTION – Mr. Smothers
 - Harford Memorial Hospital Conversion – Ms. Sette
 - MIH Legislative Study – Ms. Gainer
- IX. New Business
 - Jurisdictional Advisory Council (JAC) By-laws – INFORMATION – Christian Griffin
 - Election of SEMSAC Officers



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Meeting Minutes

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SEMSAC Members Present: Murray Kalish, MD, Chairman; Scott Haas, Vice Chair; Karen Doyle; Eric Smothers; Larry Preston for Steve Edwards; Jeffrey Filmore, MD; Melissa Meyers; Wayne Tiemersma; Jennifer Anders; Brian Frankel; Linda Dousa; Jason Day; Kathleen Grote; John Filer; Rosemary Kozar; Jim Scheulen; Tim Burns; Michael DeRuggiero; Wayne Dyott; Tim Chizmar; Jay Fowler; Wade Gaasch

Members Absent: Roger Simonds; Karen Vogel; Jack Markey; Jonathan Lerner; Tom Gianni; Lisa Tenney; Bobby Pattison

Others Present: Bill Dousa, Christian Griffin; Jennifer Guyther

MSPAC: Steve Konold; Keith McMinn

OAG: Sarah Sette; Fremont Magee

MIEMSS: Pat Gainer; Anna Aycock; Phil Hurlock, Carole Mays, Lisa Myers; Jim Brown; Sherry Alban; Dave Balthis; Barbara Goff

Chairman Kalish opened the meeting at 1:01 pm and welcomed everyone.

Action: A motion was made by Mr. Tiemersma, seconded by Mr. Smothers and unanimously agreed upon to approve the minutes of the September 7, 2017, meeting as written.

SEMSAC Report

Dr. Kalish said since the last SEMSAC meeting, the EMS Board: approved the Trauma Center Designation and Verification Standards and Trauma Definitions for publication in the Maryland Register; discussed the integration of eMEDS® and the Health Information Exchange: approved the Phase II MIH Committee Recommendations; approved the MIH Study requested by the legislature; approved an emergency protocol change authorizing EMRs throughout Maryland to administer naloxone (effective on October 1, 2017); and determined that the proposed conversion of Harford Memorial Hospital to a Freestanding Medical Center will maintain adequate and appropriate delivery of emergency care within the Statewide Emergency Medical Services System.

Dr. Kalish added that Ms. Sette will be giving an overview of the MIEMSS report regarding the conversion and Ms. Gainer will be reviewing the MIH Study under old business.

MIEMSS Report

A written report was distributed.

National Registry Testing

Ms. Gainer said that the Maryland BLS pass rates for NREMT testing continue to surpass the national average.

CRT

Ms. Gainer said that the National Registry will cease testing of the EMT-I/99 (CRT) after December 31, 2019. MIEMSS will be organizing a summit of jurisdictions and educational programs personnel to discuss the future of the Maryland CRT.

Opioid Operational Command Center (OCCC)

Ms. Gainer said that currently, EMS is not reimbursed for the cost of naloxone administered to patients who refuse transport to an Emergency Department. Approximately 20% of opioid patients who receive naloxone are not transported statewide. The OCCC has approved a grant of \$200,000 to offset these costs to EMS Operational Programs. MIEMSS will be the administrator for this grant.

MIEMSS is also working with the OCCC to investigate statewide bulk purchasing of naloxone to help jurisdictions keep costs down.

Ms. Gainer said that MIEMSS produced a special newsletter highlighting the opioid crisis in October; a copy was distributed.

Walter Reed National Military Medical Center

Ms. Gainer said that Walter Reed and MIEMSS have identified four areas that MIEMSS and Walter Reed are interested in working on: skill and competence retention; disaster / surge response; research; and rehabilitation. MIEMSS will be hosting WR staff in early December.

Legislative Studies

Ms. Gainer said that MIEMSS submitted the MIH Study to the Legislature on November 1, 2017. The Automated External Defibrillator's study is due on December 1, 2017 and the ED Overcrowding Study is due on December 15, 2017.

MSFA

Ms. Dousa said that the next MSFA Executive Committee meeting will be held on December 2, 2017, at the Kent Island Volunteer Fire Department.

MSPAC

Major Konold said that MSPAC has been working on issues surrounding pilot staffing due to military deployments and light duty assignments. Two Second in Command Pilots have been promoted to Command Pilots.

NATIONAL STUDY CENTER (NSC)

Dr. Kozar said that the CIREN contract has been renewed and began on September 29, 2017. A new programmer was hire to support CODES/CIREN/MIEMSS efforts.

The MIEMSS / NSC contract has been renewed.

Dr. Kozar said that the NSC is starting a project with MITRE that will test the effectiveness of several different software packages used for linking large datasets. The project will run through March 2018.

COMMITTEE REPORTS

ALS Committee

Mr. Buckson said that the ALS Committee is working on data gathering for best practices for improving success rates.

BLS Committee

Mr. Tiemersma said that the application for BLS providers (EMR and EMT) and EMDs who are due to renew by December 31, 2017, is now available in the MIEMSS Licensure System.

The BLS Committee developed the 2018-2021 EMR and EMT Refresher syllabus and objectives. This refresher cycle will go into effect on July 1, 2018.

EMD Committee – No Report

Regional Affairs Committee

Mr. Smothers said that jurisdictions are currently reviewing grant processes.

OLD BUSINESS:

Regional Affairs Committee By-Laws

Mr. Smothers presented for approval the By-laws for the Regional Affairs Committee. He added that the Regional Affairs Committee is seeking a Co-Chair.

Action: A motion was made by Dr. Filmore, seconded by Ms. Grote and unanimously agreed upon to approve the Regional Affairs Committee By-Laws as written.

Trauma Center Designation and Verification Standards and Trauma Definitions

Ms. Sette and Ms. Mays presented the Trauma Center Designation and Verification Standards and Trauma Definitions and recommended approval for publication in the Maryland Register. Ms. Sette said that the Standards and Definitions are the same as was submitted for information to SEMSAC a few months ago; only the format of the standards has been modified to meet publication requirements. Ms. Mays said that consensus on the standards was obtained from all (9) Trauma Centers.

Upon the motion of Ms. Grote, seconded by Mr. Smothers, the SEMSAC voted unanimously to recommend that the EMS Board approve the Trauma Center Designation and Verification Standards and Trauma Definitions.

Harford Memorial Hospital (HMH) Conversion to a Freestanding Medical Center

A copy of the report was distributed.

Ms. Sette gave an overview and a summary of the eleven (11) factors specified by regulation for consideration by the EMS Board that formed the basis of the written report. She said the EMS Board was determined at the October 10th meeting that the proposed conversion will maintain adequate and appropriate delivery of emergency care within the statewide emergency medical services system.

Mr. Scheulen said that the reduction of hospital beds may increase Emergency Department traffic.

A discussion ensued on the ramifications and incentives not to use public safety EMS for emergent interfacility transports. Mr. Smothers said that interfacility transports require specialized care that is not in the scope of most prehospital providers. Dr. Chizmar explained that most interfacility transfers are either OB or STEMI and said that currently a nurse accompanies a public safety that is transferring a patient to a specialty referral center. He added that staffing in rural areas for specialty providers is difficult.

MIH Legislative Study

A copy of the report was distributed.

Ms. Gainer said that MIEMSS was tasked with evaluating the impact of MIH programs in Maryland by November 1, 2107. She gave an overview of the MIH Report / Study Workgroup that included representatives from EMS Jurisdictions with existing MIH Programs (Prince George's County Fire and Emergency Medical Services (EMS) Department, Montgomery County Fire & Rescue Services, Charles County Department of Emergency Services, Queen Anne's County Department of Emergency Services, Dorchester County Department of Emergency Services, and Baltimore City Fire Department) and MIEMSS.

Ms. Gainer gave an overview of the current MIH programs and summarized the report and recommendations for the continuation and sustainment of MIH programs in Maryland. The report concludes that funding for EMS participation in MIH Programs is problematic since EMS reimbursement only occurs if a patient is transported which severely limits the ability of EMS to implement, or even participate in, new service delivery models and innovative approaches to health care. Although the existing MIH Programs have been able to secure funding for the initial establishment of their programs, their future is uncertain without an identified funding source. Further, new MIH programs that could be developed may have less likelihood of success if they are unable to secure seed-money for start-up and funds for ongoing operations.

NEW BUSINESS

Jurisdictional Advisory Council (JAC) By-laws

A paper copy of the proposed JAC By-laws was distributed.

Chief Griffin, JAC Chairman, gave an overview of the proposed changes to the JAC By-laws including mandatory 50% attendance and the publishing of the meeting agenda.

MIEMSS Executive Director Search

Ms. Gainer said that the EMS Board has convened a sub-committee to research and interview Executive Search/Placement Firms.

Psych Bed Availability

Mr. Scheulen said that some hospital Emergency Departments are informing law enforcement and EMS that they are on “psych by-pass” and are diverting transport of patients to other facilities. There is no by-pass for psychiatric patients. A meeting of concerned partners will be convened.

Election of SEMSAC Officers

Nominees for SEMSAC Chair:

- Tim Chizmar
- Scott Haas
- Murray Kalish

Nominees for SEMSAC Vice-Chair:

- Karen Doyle
- Brian Frankel
- Eric Smothers

After a secret ballot, it was determined that Murray Kalish and Karen Doyle had been elected as Chair and Vice-Chair respectively for calendar year 2018.

SEMSAC adjourned by acclamation.