Statewide EMS Advisory Council (SEMSAC)  
**AGENDA**  
June 7, 2018  
1:00pm – 3:00pm  

**MSP Aviation Command**  
3023 Strawberry Point Road  
Baltimore, MD 21220  

I. Approval of the April 5, 2018 meeting minutes  
II. SEMSAC Chair Report – Dr. Kalish  
III. MIEMSS Report – Pat Gainer  
   • MIEMSS Legislative Update – Ms. Myers  
   • Active Assailant Workgroup – Mr. Linthicum  
IV. MSFA Update  
V. MSPAC Update – Captain McMinn  
VI. National Study Center – No Report  
VII. Committee Reports  
   • ALS – No Report  
   • BLS – Mr. Tiemersma  
   • EMD – No Report  
   • Regional Affairs – Mr. Smothers  
     ○ Mechanical Chest Compression Devices  
VIII. Old Business  
IX. New Business  

Adjourn to Demonstration of the Flight Training Device - MSPAC
State EMS Advisory Council (SEMSAC)
June 7, 2018

Meeting Minutes

SEMSAC Members Present: Murray Kalish, MD, Chairman; Karen Doyle; Vice Chair; Eric Smothers; Jeffrey Filmore, MD; Jay Fowler; Wade Gaasch, MD; Bobby Pattison; Kathleen Grote; Tim Burns; Scott Haas; Keith McMinn; Wayne Dyott; Jason Day; Melissa Meyers; Wayne Tiemersma; Roger Simonds; Lisa Tenney; Karen Vogel; Brian Frankel; Linda Dousa; Tim Chizmar; Michael DeRuggiero.

Members Absent: Jack Markey; Jonathan Lerner; Rosemary Kozar; Jennifer Anders; John Filer.

Others Present: Bill Dousa.

MFRI: Michael Cox; Jim Radcliffe.

MSPAC: Captain Keith McMinn, Acting Commander; Lance Wood, Deputy Director; Mike Gartland, Chief Pilot; John Stevens, Director of Aircraft Maintenance; Lt. Chris Davala, Commander - Mission Preparedness

OAG: Sarah Sette; Fremont Magee.

MIEMSS: Richard Alcorta; Pat Gainer; Lisa Myers; Jim Brown; Barbara Goff.

Chairman Kalish called the meeting to order at 1:02 pm. He thanked Captain McMinn and the MSP Aviation Command for hosting the meeting and providing the demonstration of the new Flight Training Device.

Action: A motion was made by Mr. Dyott, seconded by Mr. Simonds and unanimously agreed upon to approve the minutes of the April 5, 2018, meeting as written.

SEMSAC Chairman’s Report

Dr. Kalish announced that the July 5th meeting of SEMSAC is cancelled.

Dr. Kalish congratulated the SEMSAC members, John Filer, Brian Frankel and Jeff Fillmore, and former member, Allen Walker, who received Stars of Life awards.

Dr. Kalish said the EMS Board approved the following items at the April 10th meeting:

• COMAR 30.08.01 Trauma & Specialty Center Regulations
• Updated “Leave behind” Naloxone Protocol
• Emergency Protocol – Verapamil
• Howard County General Hospital as a Primary Stroke Center for 5 years.
MIEMSS Report
A written report was distributed.

Executive Director Search
Ms. Gainer said that the EMS Board and MIEMSS continue to work with the search firm to identify a candidate list for the MIEMSS Executive Director position.

Annual Stars of Life and Right Care When it Counts Awards
Ms. Gainer said that MIEMSS held the Annual Stars of Life and Right Care When It Counts Awards in Annapolis on Wednesday, May 23, 2018, during National EMS week. Lt. Governor Boyd Rutherford participated in the ceremony with remarks and assisted in handing out the awards. These awards recognized those Marylander citizens and EMS providers who have gone above and beyond in responding to emergencies and providing treatment to patients.

Maryland Incident Management Team
Ms. Gainer advised that MIEMSS staff continues to assist the Maryland Incident Management Team in Ellicott City due to the extreme flooding of the area.

Communications Upgrade Project
Ms. Gainer said that the Board of Public Works has approved the Communications Upgrade Project. MIEMSS has started work under the project and is in the process of setting and conducting tower and hospital site surveys.

eMEDS® Elite
MIEMSS continues instructor training for the ImageTrend eMEDS® Elite Platform.

eMEDS® / Health Information Exchange
The CRISP/eMEDS integration project pilot program has begun. Nine (9) jurisdictions have moved to the Elite platform, with an additional five (5) jurisdictions to be completed in June 2018.

Opioid Crisis
Ms. Gainer said that MIEMSS is in the process of closing out the EMS Naloxone Grant, provided through the Opioid Operational Command Center and the Maryland Behavioral Health Administration, which provided financial relief to EMSOPs that are carrying the increased burden of providing naloxone to overdose patients without reimbursement from the patient or insurance providers to cover the costs of the naloxone.

Personnel Changes
Ms. Gainer announced that Michael FX O’Connell will be moving to the MIEMSS Emergency Preparedness Planner position. He will continue as the Infectious Disease Coordinator until that position is filled.

Ms. Gainer said that MIEMSS will be conducting interviews for the Region V Administrator at the end of June.

Ms. Gainer said that Joseph L. Wright, MD, MPH, FAAP, has been named the new Senior Vice President & Chief Medical Officer for University of Maryland Capital Region Health, effective September 10, 2018. Dr. Wright is the former State Pediatric Medical Director at MIEMSS.
Vermont Oxford Network

MIEMSS has signed an agreement with Vermont Oxford Network (VON) to become an active member which provides to the Nightingale data reporting system for the State of Maryland. Nightingale is an online reporting tool used to provide secure access to confidential hospital data. The Nightingale report will provide MIEMSS with statewide data reports for all of the defined neonatal metrics and allow Maryland to benchmark against national data, as well as comparisons of individual Maryland centers. Review of the data available to date is indicating that Maryland performs well above the national average.

Legislative Report

SB 682 Medical Assistance Program and Health Insurance-EMS Providers-Coverage and Reimbursement of Services

Ms. Gainer said that SB 682 requires the Maryland Health Care Commission and the Maryland Institute for Emergency Medical Services Systems (MIEMSS), in consultation with specified entities, to jointly (1) develop a statewide plan for the reimbursement of services provided by emergency medical services (EMS) providers to Medicaid recipients; (2) identify a process for obtaining Medicare reimbursement for such services; (3) study and make recommendations regarding the desirability and feasibility of reimbursement for such services provided to privately insured individuals; and (4) submit the plan and the study results to the Governor and General Assembly by January 1, 2019. The bill takes effect July 1, 2018.

HB 359 (SB 309) Health-Reporting of Overdose Information

Ms. Myers said the HB359/SB309 allows EMS providers and law enforcement officers (LEOs) to report location information when they encounter individuals suffering from an overdose to help identify geographic areas where higher incidences of overdose are occurring. The information is to be submitted via a secure technology platform, including the Washington / Baltimore High Intensity Drug Trafficking Area (HIDTA) overdose mapping application (known as “OD Map”) or other programs operated by federal, state, or local governments. The bill also requires MIEMSS to submit location information from EMS patient care reports submitted to MIEMSS. The location information to be provided is: 1) date and time of overdose; 2) approximate address where overdose occurred or where victim was encountered; 3) whether an opioid reversal drug was administered; and 4) whether the overdose was fatal or nonfatal. Exact addresses of the overdose location may not be published by LEOs without a valid public safety concern. Information provided may not be used for criminal investigations or prosecutions and providers and MIEMSS are immune from civil and criminal liability. The Opioid Operational Command Center must provide a report to legislature by January 1, 2019. The bill takes effect July 1, 2018. Ms. Myers added that MIEMSS is working on compliance with the Bill.

Active-Assailant Incident Preparedness and Coordination – Mr. Linthicum

Mr. Linthicum gave a history of the Active Assailant Workgroup which was formed in 2013 and which developed the 2014 “Guidance to First Responders for the Active Assailant Incident” document that provides a guide to developing community planning and response for such incidents. He said that after the Parkland school shooting in February 2018, Governor Hogan issued an Executive order entitled “Active-Assailant Incident Preparedness and Coordination.”

The Executive Order requires that each State agency in the Executive branch of Maryland government: participate in a coordinated active-assailant initiative and share threat information between and among all sectors; develop, review, or update internal plans, policies, and procedures related to active-assailant incidents; develop, plan, and collaborate for active-assailant training relevant to each agency's
respective area of responsibility, involving public and nongovernmental participants when appropriate and feasible. Using a "whole community" approach, Executive-agency public-safety officials will conduct annual assessments to determine the need for mitigation, planning, and training appropriate for their agency’s jurisdiction.

Mr. Linthicum said that Maryland's public educational institutions will be encouraged to share and coordinate their emergency plans with Executive-agency law enforcement, emergency management officials, and emergency responders. Maryland's private and nonpublic educational institutions will be encouraged to share and coordinate their emergency plans with Executive-agency law enforcement, emergency management officials, and emergency responders.

The Maryland State Police (Sgt. Travis Nelson) will maintain its position as co-chair and member of the Maryland Active Assailant Interdisciplinary Work Group and use that role to promote the purposes and objectives of this Executive Order. The following Executive agencies will have membership in the Maryland Active Assailant Interdisciplinary Work Group:

- Governor's Office of Homeland Security;
- Maryland Department of Health;
- Governor's Office of Crime Control & Prevention of Maryland;
- Maryland Fire-Rescue Education and Training Commission; and
- Maryland Emergency Management Agency.

The focus of the Maryland Active Assailant Interdisciplinary Work Group will be to update the State's existing "Guidance to First Responders for the Active Assailant Incident" issued October 2, 2014, to incorporate protocols for prevention, protection, information-sharing, community preparedness, outreach, and education; continue to monitor best practices and revise the Active-Assailant Guidance, as needed, to ensure Maryland remains prepared and is resilient; and include in its membership subject matter experts from State and federal departments and agencies including the Maryland center for School Safety, the Maryland State Department of Education and the Maryland Higher Education Commission; the U.S. Department of Homeland Security, the U.S. Secret Service; and the U.S. Department of Defense.

The Work Group will meet quarterly to identify, update, and share best practices and current activities, and maintain the Active-Assailant Guidance. The Maryland Emergency Management Agency (MEMA) is to provide leadership, policy oversight, support, and assistance to Executive agencies and other applicable persons in their efforts to comply with the Executive Order.

Ms. Dousa said the MSFA Convention is from June 16, 2018 to June 21, 2018.

Captain McMinn said that the nationwide search for the MSPAC Deputy Directory has concluded and an announcement is forthcoming.

He reported that the forward deployment of Trooper #1 begins this week.

Captain McMinn thanked everyone for attending and said that MSPAC will demonstrate the Flight Training Device immediately following the SEMSAC meeting.
COMMITTEE REPORTS

ALS Committee – No Report

BLS Committee
Mr. Tiemersma said that the Committee continues to monitor the overall pass rates for EMT providers. Mr. Tiemersma questioned the number of certified providers who are not utilizing their license.

EMD Committee – No Report

Regional Affairs Committee (RAC)
Mr. Smothers said that the RAC had reallocated unspent grant funds for 2016 State Highway Safety Grant Program (SHSGP). He said that, moving forward, “shovel ready” projects will be allotted first and that there will be a more aggressive timeline for completing funded projects.

Upon the approval of SEMSAC, the RAC has voted to add mechanical CPR devices as an allowable item under the 50/50 grant. Mr. Haas said he was opposed to adding the devices as allowable under the grant as the grant was initiated to purchase new cardiac monitors. He said that there should be a re-evaluation of the formula for grant distribution as the formula had not been re-examined since its creation. A lengthy discussion followed regarding re-evaluating population, demand and Regional distribution of grant funds. Ms. Gainer said it was timely to consider these issues as an update of the EMS Plan would be undertaken later this year.

Action: A motion was made by Mr. Simonds, seconded by Ms. Dousa and unanimously agreed upon to approve to allow the purchase of mechanical CPR devices under the 50/50 grant if all Jurisdictional AED needs have been met.

OLD BUSINESS:

Naloxone “Leave Behind” program
Mr. Pattison asked if whether it was mandatory to participate in the Naloxone “Leave Behind” program. Dr. Alcorta said that this is a local Health Department program and participation was up to the jurisdiction EMS if the wish to participate.

NEW BUSINESS – N/A

Action: A motion was made by Mr. Dyott, seconded by Mr. Simonds and unanimously agreed upon to adjourn.