



State of Maryland

**Maryland  
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Emergency Medical  
Services Systems**

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## ***State EMS Advisory Council (SEMSAC)***

July 2, 2015

### **Meeting Minutes**

**SEMSAC Members Present:** Roland Berg, Chairman, Eric Smothers; Steve Edwards; Jeffrey Fillmore, MD; Frank Lioi; Roger Simonds; Tim Chizmar, MD; Murray Kalish, MD (phone); Lisa Tenney; Jennifer Anders, MD; Joe Brown (phone); Jack Markey; Tom Gianni; Kathleen Grote; Jay Fowler; Karen Doyle; Linda Dousa; Wayne Tiemersma; Elliott Ganson; Melissa Meyers.

**Members Absent:** Jim Scheulen, Vice Chairman; Michael DeRuggiero; Nathaniel McQuay, MD; Alan Faden, MD; Wade Gaasch, MD; Scott Haas; Marian Muth; Wayne Dyott.

**Others Present:** Bill Dousa; John Mark Hirshon, MD for Alan Faden, MD.

**OAG:** Fremont Magee; Sarah Sette.

**MIEMSS:** Kevin Seaman, MD; Richard Alcorta, MD; Rae Oliveira; Jim Brown.

Mr. Berg opened the meeting at 1:05 pm.

**Action:** Upon the motion made by Dr. Kalish, which was seconded by Ms. Dousa, the SEMSAC unanimously approved the minutes of the June 4, 2015 SEMSAC meeting.

**MIEMSS Report:** Dr. Seaman

The written Executive Director's report was disseminated.

Dr. Seaman said the Institute of Medicine's report on Cardiac Survival, "Strategies to Improve Cardiac Arrest Survival: A Time to Act", was released on June 30, 2015; the Report / Brief will be distributed to SEMSAC.

Dr. Seaman said that Ms. Doyle will be reporting on the SEMSAC Mobile Integrated Healthcare Workgroup which had its first meeting on July 1, 2015. He added that he anticipates a positive partnership amongst EMS, Hospitals and Public Health on this initiative.

**SEMSAC Chairman's Report:** Mr. Berg

Mr. Berg said the EMS Board approved corrections to the Perinatal Standards regarding therapeutic hypothermia as optional for Level III Perinatal Centers. The Board also approved 2015 Protocol corrections submitted by the Office of the Medical Director on June 8, 2015 memo (attached) regarding trauma in children and magnesium sulfate.

Mr. Berg reported that the EMS Board approved the following Educational Programs for five years:

- The Baltimore County Fire Rescue Academy CRT-I99 ALS Education Program; and
- The Ocean City Fire Department EMS Refresher Program at the ALS and BLS levels

**National Study Center (NSC):** Dr. Jon Mark Hirshon for Dr. Allen Faden

Dr. Hirshon reported that the NSC has received an additional \$1.9 million in funding and two additional Air Force grants.

Dr. Hirshon added that through a National Institutes of Health grant, the NSC has hosted trainees from the Middle East over the last eight years. The next group will be arriving at the end of July from Egypt and Sudan (and perhaps one person from Iran if Visa issues are satisfied) for a seven-week EMS and Research training program.

Mr. Berg asked if trainees had ever participated in EMS ride along programs. Dr. Hirshon said that there may be one person who is interested with the new group and thanked Mr. Berg for the suggestion.

**NREMT Testing:** Ms. Oliveira

Ms. Oliveira, Director, Office of Licensure & Certification, disseminated and reviewed detailed written student instructions/timeline (attachment) regarding the processes for initial EMT Courses through NREMT testing. Ms. Oliveira also provided the current list of Pearson VUE testing sites. Ms. Oliveira said students can schedule to test with Pierson VUE approximately 48 to 72 hours after completion of the practical. If students have any issues during this process, please have the student call MIEMSS Licensure and Certification at: 410 706-3666.

Mr. Edwards said the instruction sheet was confusing regarding how payment was handled for affiliated and non-affiliated students.

Ms. Dousa said that at the MSFA Convention, the MSFA EMS Committee asked membership to survey companies with EMS students for any issues students are experiencing with NREMT testing. The results will be reported back to MIEMSS. Ms. Dousa added that, thus far, the entire process for NREMT testing has been confusing.

Dr. Seaman said that MIEMSS is committed to working with our partners to improve student awareness of the process of NREMT testing and is focusing on current students who are eligible but have not tested. Dr. Seaman said there should be a check list given to each student the first day of class

showing what need to be done by what date. There needs to be someone to assist the students to maintain accountability for the process. Assuring student follow-through will avoid delays in testing.

Ms. Oliveira said that currently students were given a power point presentation explaining the testing process on the first day of class and were given the testing process sheet at the practical, but copies are now being sent to the teaching agencies to include in the student packets.

Mr. Smothers asked who should be responsible for assuring the students follow through with the testing process. Mr. Edwards said once the class is completed, the instructor's job is finished. Ms. Grote said there needs to be a coordinator for every department that sends personnel for EMT instruction who will assure the students complete the testing process. It was suggested that Company level training officers take on the role as coordinators/liasons. Ms. Grote said she has been doing this for Anne Arundel County Fire Department and is willing to share best practices. Ms. Grote added that Coordinators need to be trained so they can navigate the system. A lengthy discussion ensued regarding the responsibility of all the partners to assure testing is completed. Dr. Seaman said he has asked the BLS Committee to review and make recommendations to assure understanding and compliance with testing.

Ms. Oliveira reviewed the process to be followed once a class is finished.

Ms. Grote said it would be beneficial for National Registry to notify Coordinators when ATT (Authority to Test) letters are sent. Mr. Edwards suggested sending electronic feedback to students notifying them of where they are in the process and what steps they need to complete at regular intervals during and after course completion.

The necessity of redundant signing of affiliation forms at the beginning of class and after completion of testing was discussed.

Mr. Roth said something needs to be done to assist the students who have taken the course but have been unable to test. He noted that EMT students have to compete for testing space with every other type of licensure tested at the Pierson VUE sites. .

Ms. Oliveira said that MIEMSS sent a survey to students who are eligible to test, but who have not yet tested; and said that early results showed as the primary reasons for not testing: 1) student confusion regarding testing process and 2) students not feeling ready to test. Test site availability was not frequently cited as a reason for students not taking the test. Compilation of the narrative section of the survey will be completed and available by the end of July.

Mr. Edwards said there could be a fear factor regarding taking the National Registry test as it is known that the pass rate is lower than when MIEMSS administered testing. He said that with the upcoming adoption of "MY Brady," students will receive more feedback on how they are doing during the course and will be advised of content which needs more review. This should also help with test anxiety.

Mr. Berg said the BLS Committee is a Standing Committee under SEMSAC, and developing the Best Practices for the National Registry Testing process, and is seeking a volunteer to Chair. Please let Mr. Berg and Ms. Goff know if you would like to take on the Chair position. Dr. Kalish asked for the list of SEMSAC Standing Committees to be sent to SEMSAC members prior to the next meeting.

EMD Committee: Minutes from the last meeting were submitted.

ePCR Workgroup: Dr. Anders

Dr. Anders said the survey for pre-hospital providers to determine what is and is not working regarding patient handoffs and documentation will be sent once server issues at MIEMSS have been fixed. Dr. Anders anticipates the survey being open a few weeks, with results reported at a subsequent SEMSAC meeting. Chairman Berg recommended sending to all providers, not a limited number.

Dr. Anders added that there is an IRB / MIEMSS staff approved Research Study survey regarding Pediatric Trauma Triage survey being sent to a random set of pre-hospital providers.

Mobile Integrated Healthcare (MIH) Workgroup: Ms. Doyle

Ms. Doyle said the Workgroup is comprised of EMS Board and SEMSAC members, EMS jurisdictional personnel, EMS medical directors, hospital representatives and MIEMSS staff.

The Workgroup's mission is to make recommendations based on the objectives in the EMS Plan to prevent illness or injury by utilizing EMS providers to prevent acute and exacerbations of chronic illness and injury in the community. The Workgroup will investigate and develop recommendations for Mobile Integrated Healthcare programs to provide non-emergent care to residents with chronic illness and health risks to reduce the need for unscheduled emergency department visits and calls to 9-1-1 for service and to identify health risks in the home and the community.

Ms. Doyle said that she and Scott Haas are excited to be co-chairing this workgroup of energetic and committed partners and look forward to working on the recommendations for Mobile Integrated Healthcare. The MIH Workgroup meetings are scheduled for the first Thursday of every month at 10am.

Dr. Seaman said our healthcare system is changing, and there is a subgroup of patients whose needs could be met through alternatives to the regular health system. Mobile Integrated Healthcare is a way for EMS, Hospitals and Public Health entities to collaborate to assist these patients and improve health outcomes.

Minimum Equipment Standards Workgroup: Mr. Simonds

Mr. Simonds said the next meeting for the Minimum Equipment Standards Workgroup is July 23, 2015, at 1:00pm in room 212 at MIEMSS. No comments have been received on the proposed equipment list that was submitted to SEMSAC members for review. The mechanism for compliance of the proposed standards is on the agenda for the next meeting.

JAC Update: No Report

## **MSFA**

President Roth congratulated Ms. Goff on being inducted to the MSFA Hall of Fame at the MSFA Convention in Ocean City.

President Roth thanked Dr. Seaman for attending the MSFA Executive Committee meeting after the Convention and listening to the concerns regarding NREMT testing. The MSFA is committed to getting potential EMS providers trained and on the street to serve the residents of Maryland.

President Roth said he and the Vice Presidents will be meeting with all of the partners in the coming months.

The Cumberland Valley Presidents Council will be meeting on July 31, 2015 in Delaware City, DE. All of the partners should have received invitations to attend.

Mr. Berg congratulated President Roth on his election.

**MSP Aviation Command:** No Report

**OLD BUSINESS:** None

## **NEW BUSINESS**

MFRI 2015 Strategic Plan. Mr. Edwards

Mr. Edwards gave an overview of the MFRI 2015 Strategic Plan which was distributed to the members in attendance.

Mr. Edwards said that MFRI is celebrating its 85<sup>th</sup> year of providing fire, rescue and EMS training.

Mr. Edwards reviewed the process by which the plan was developed and said input from students, instructors and organizations throughout Maryland was incorporated.

Mr. Edwards highlighted MFRI's goals for student success, safety, infrastructure, human resources and partnerships.

The MFRI 2015 Strategic Plan can be found on the MFRI web site at: [www.mfri.org](http://www.mfri.org)

The SEMSAC adjourned by acclamation.