



## *State EMS Advisory Council (SEMSAC)*

November 5, 2015

### **Meeting Minutes**

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*

*Kevin G. Seaman, MD  
Executive Director*

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**SEMSAC Members Present:** Roland Berg, Chairman, Karen Doyle; Jack Markey; Eric Smothers; Wayne Tiemersma; Lisa Tenney; Jennifer Anders, MD; Linda Dousa; Michael DeRuggiero; James Fowler (phone); MD; Roger Simonds; Kathleen Grote; Scott Haas; Frank Lioi; Murray Kalish, MD; Jeffrey Fillmore, MD; Wayne Dyott; Marian Muth; Melissa Meyers; Joe Brown, (phone); Alan Faden, MD; Tim Chizmar, MD (phone).

**Members Absent:** Tom Gianni; Wade Gaasch, MD; Jim Scheulen, Vice Chairman; Nathaniel McQuay, Jonathan Lerner, PA; Elliot Ganson.

**Others Present:** Michael O'Connell; Bill Dousa; Larry Preston for Steve Edwards.

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

**MIEMSS:** Kevin Seaman, MD; Richard Alcorta, MD; Pat Gainer; Jim Brown; Anna Aycok; Lisa Myers; Mike Deckard; Barbara Goff.

**MSFA:** President Roth.

**MSPAC:** Captain King.

Mr. Berg opened the meeting at 1:00 pm.

**Action: Upon the motion made by Mr. Dyott, which was seconded by Mr. Simonds, the SEMSAC unanimously approved the minutes of the September 3, 2015, SEMSAC meeting.**

**MIEMSS Report:** Dr. Seaman

The written Executive Director's report was disseminated.

**Communications Upgrade:** Dr. Seaman said the upgrade to EMRC/SYSCOM has been completed. The next phase is the statewide communications system upgrade project.

**EMR/EMT National Registry Testing:** Dr. Seaman said that the #1 priority for the EMS Board, MIEMSS, MFRI and the MSFA leadership is to resolve student issues regarding EMT training and the National Registry testing process, and they are working toward having solutions in place by the end of December 2015.

MIEMSS will pay for a subsequent National Registry exam for affiliated students who have failed the exam and have successfully completed a National Registry Test Prep course, or

other approved remedial course. It is anticipated that the Test Prep course will be ready for Instructor training in late November or early December.

Montgomery County Fire and Rescue Academy has been approved as a Pearson VUE testing site and will be providing EMS testing only. There are now 17 testing sites in Maryland.

MIEMSS has written to each EMT student who is eligible to test but has not done so to offer assistance with the application and registration process. MIEMSS met with most of the Educational Programs on October 27, 2015, to share best practices regarding the facilitation of student test registration and scheduling including group scheduling. MIEMSS has encouraged all teaching agencies to be a resource and aid students in the testing process.

MIEMSS is monitoring National Registry testing student pass rates; current student pass rates for teaching agencies are highly variable, ranging from 0% pass rate to 100% pass rates. Programs with average student pass rates below the National Registry average will be required to identify how they will improve their pass rates. Pass rate information will be reported regularly to the EMS Board.

MIEMSS anticipates using similar strategies for resolving issues with the EMR testing.

The EMS Board and MIEMSS are committed to providing the highest level of prehospital care to the citizens of Maryland.

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

Mr. Berg said that at the October 13<sup>th</sup> EMS Board meeting, the Board formed a committee to work on the transition issues of National Registry testing, received information on the proposed 2016 Protocol changes, and approved a two-year provisional designation of Shady Grove Hospital as a Base Station.

**National Study Center (NSC):** Dr. Faden

Dr. Faden said that Shock Trauma Anesthesiology Research (STAR) / NSC and has grown significantly over the last few years and has seen a large increase in Department of Defense grants. Dr. Faden added that a recent agreement has been reached for a \$35 million, five-year Shock Trauma research program.

Dr. Faden mentioned the research paper recently published in the *Annals of Emergency Medicine* on the Maryland emergency medical helicopter experience from 2001 to 2011, focusing on system improvements and patient outcomes.

*The Journal of Neurotrauma* is in the process of publishing a paper on Aero-Medical Evacuation in the military. Findings reveal that 100% oxygen during air transport is not good for the patient, and multiple air evacuations with 100% oxygen during transport over a short period of time is even worse for the patient. Dr. Faden will forward the article to SEMSAC members after it is published.

## **COMMITTEE REPORTS**

ALS Committee: Ms. Oliveira said that Ms. Melanie Miller is stepping down as the Chairperson of the ALS Committee. Mr. Berg will reach out to SEMSAC members for a new Committee Chairperson.

EMD Committee: Ms. Oliveira said that Mr. Deckard will be the MIEMSS staff person assigned to the EMD Committee.

BLS Committee: Mr. Tiemersma said the committee has finalized streamlining the steps for students to submit applications and register for National Registry testing.

The Committee, working with MFRI personnel, composed a “top ten” list of Best Practices for the course educational process.

Mr. Tiemersma added that MIEMSS’ roll regarding National Registry testing is identifying and ensuring the most efficient testing process and to clarify and correct misinformation that students have received. The educational component is MFRI’s responsibility, including assuring its instructors is teaching to the national standards scope and the National Registry type of testing. Pass rates are not the only component that needs to be monitored.

The Committee next steps will include discussions on what is allowable regarding patient assessments as part of the EMT clinical and EMT reciprocity.

The Committee is also recommending the Howard County Fire Department’s Train-the-Trainer session for the National Registry Test Prep course.

ePCR Workgroup: Dr. Anders

Dr. Anders disseminated and gave an overview of the survey results for pre-hospital provider handoffs to hospitals. Dr. Anders reported that 530 providers completed the survey. There is a great variation in jurisdictional policies regarding what is used by providers when handing-over a patient to a hospital.

Dr. Anders anticipates that the committee will have proposed recommendations to present to the SEMSAC at the next meeting.

Mobile Integrated Healthcare (MIH) Workgroup: Mr. Haas / Ms. Doyle

Mr. Haas said the Workgroup had its final meeting and is finalizing the report with recommendations. Mr. Haas anticipates the summary being presented to the SEMSAC at the next meeting.

Minimum Equipment Standards Workgroup: Mr. Simonds

The Equipment list was disseminated for review and will be given to the Metro Fire Chiefs for their comments. Mr. Simonds said the next meeting for the Minimum Equipment Standards Workgroup is November 10<sup>th</sup>; the committee will be working on the administrative processes.

Regional Affairs Committee: Chief O’Connell

Chief O'Connell said the 2015 "50/50" grants have been closed out. The committee has prioritized the FY16 grants with allotments to 16 entities. The committee agreed that all FY17 "50/50" grant monies will be used to support monitor and AED purchases only.

The Regional Affairs Committee will be requesting that the ALS Committee develop a funding model for ALS Training.

Close out for 2014 Homeland Security grants is December 31, 2015; 2015 grants should be released in the first quarter of 2016.

Hospital Preparedness BT12 grant funds have been spent except for \$35,000 awaiting reallocation to Ambulance Strike Team Training development. BT13 application has been submitted to DHMH for approval.

Chief O'Connell announced that he will be retiring May 28, 2016. Chairman Berg said that SEMSAC has valued Chief O'Connell's insight and leadership with Regional Affairs and thanked him for his years of service.

#### **MSFA – Linda Dousa**

Ms. Dousa said MSFA is working with MIEMSS and MFRI to resolve the issues with NREMT testing.

The MSFA EMS Committee will be meeting at 1:00 pm on Sunday at Level Fire Department. The MSFA Executive Committee is scheduled to meet on December 5<sup>th</sup> & 6<sup>th</sup> in Berlin Maryland.

President Roth said that MIEMSS, MFRI and the MSFA (electronically) have sent information regarding National Registry testing. The MSFA will also be publishing the same information and information on the EMS Board Committee on National Registry meetings in the Trumpet (MSFA quarterly publication). President Roth also offered to contact the "limbo" students if needed.

Mr. Haas asked if MIEMSS has received adequate support (financially or additional staff) while working to resolve the issues surrounding NREMT testing and said that MIEMSS seems to be handling the majority of the problems. Dr. Seaman said, although MIEMSS is the regulatory body responsible for licensing and certification, as part of the team, we are working for the success of all current and future EMS students. MIEMSS has not received any additional resources while tackling these issues. Everyone who attended SEMSAC and the EMS Board meetings were educated well in advance regarding what needed to transpire when moving to National Registry testing and both SEMSAC and the Board approved the transition to National Registry Testing.

Mr. Preston, representing Steve Edwards and MFRI, said MFRI does not yet have enough results since switching to the 13<sup>th</sup> edition of *Brady* text and the inclusion of MyBRADYLab, however, the results received, so far is, the pass rate is 5% higher on the module exams to date. Two MFRI classes have successfully completed the EMT course. The first class had 21 students; all 21 student passed the National Registry test on the first attempt the second class had 22 students; 13 students have tested, and 12 of 13 students passed the National Registry test on the first attempt.

Dr. Seaman said although we shared the information regarding the change to National Registry testing had we known then what we know now, we would have been able to anticipate the need for additional resources for instructors to be more effective and found ways to assist students with the process for

testing. Although we cannot change the past, we are all working together to make the process better for the future.

Mr. Tiemersma said it is not just student pass rates that are important, but also the quality of EMT we are certifying and putting on the streets. He said that Maryland did not just transition to a different test; but broadened the scope of knowledge of an EMT to include anatomy and physiology which is a completely different educational model. He said MIEMSS needs to take care of the testing process and MFRI, who is our partner, needs to take care of the educational process.

Dr. Seaman said from a practice analysis, if a student meets or exceeds the pass score, we can be confident that they have the knowledge of what to do for a patient in the field and better serve the citizens of Maryland.

### **MSP Aviation Command:** Major Lioi

Major Lioi reported that effective September 16, 2015, Lt. Col. Anthony Satchell was appointed Chief of the Field Operations Bureau and will be acquiring most of the functional units from the Special Operations which has been dissolved. Major Laura L. Herman was promoted to Lieutenant Colonel, and was appointed Chief of the Support Services Bureau, which, through realignment, now includes the Aviation Command. Captain Steve Konold, a licensed pilot, now commands the Flight Operations Division of the MSPAC and will oversee all Helicopter Sections, the Fixed Wing Section, and the Training elements of the Command. Lieutenant Patrick King was promoted to Captain and has been appointed the Commander of the Support Operations Division of the MSPAC. Captain King, a licensed paramedic, will oversee Maintenance Operations, Materials, Procurement, Human Resources, and other support functions of the Command.

Major Lioi said the FAA Certification Team from the Baltimore Flight Standards District Office visited the Operational Control Center at SYSCOM. MSPAC also had their Part 135 contractual consultants present to answer questions and to assure adherence to the MSPAC Part 135 Operations Manual.

Construction has begun on the Flight Training Device (FTD), and delivery is tentatively scheduled for May 2016, with anticipated operation expected in by September 2016.

The Trooper 2 Memorial is tomorrow, November 6, 2015, at 11:00 AM. Donations are still being sought for the Trooper 2 Memorial Fund. More information on the fund can be found on the MSPAC Facebook page or the Waldorf Fire Department website at: <http://www.waldorfvfd.com/maryland-state-trooper-2-memorial/>

A new academy class started on October 26, 2015, with 48 recruits and includes one Paramedic.

### **OLD BUSINESS:**

Conference call in for SEMSAC Members.

Dr. Seaman said we are having some trouble with the Verizon lines that are being addressed. As far as conferencing in to closed session, Dr. Seaman said that since the Erlich administration, closed session meetings that include review of draft budgets are considered Executive Privilege contained confidential information. Further, according to the SEMSAC By-laws:

SECTION B  
MEETING ATTENDANCE

Paragraph #4

*At the discretion of the SEMSAC chairman, a member may be approved to attend up to two of the meetings held in a calendar year by telephone.*

Dr. Seaman said we can provide a copy of the SEMSAC By-laws if anyone wishes a copy. Chairman Berg said it was his decision to shut off the conference line during closed session due to the conversation regarding budget recommendations.

Hospital Alert Status.

Dr. Seaman said he has asked Mr. Donohue to convene a group to review current diversion policies for any needed changes or updates.

**NEW BUSINESS**

2016 Protocol Updates.

The full set of protocol with changes and summary sheets were emailed to the members, and the changes summary sheet was disseminated at the meeting.

Dr. Alcorta said that the American Heart Association's five-year update, released in October 2015, is being reviewed for any possible changes that might be needed to the Maryland Protocols. Any needed changes will be brought before the SEMSAC at its next meeting.

Dr. Alcorta highlighted some of the 2016 Protocol changes, including the new Burn Protocol, Respiratory Distress Protocol, Excited Delirium Protocol, criteria for sepsis alerts and fluids, revision of the newly born protocol, change in criteria for anaphylaxis, the change in Adult IO site from Tibia to Humeral, and the pilot protocol for using ultra sound in the field.

Dr. Alcorta said that the current protocols reference 42 different pediatric age groups. The 2016 protocols have narrowed these different age groups down to 8 pediatric age groups with 2 adult age groups. The less than age 15 still applies for pediatric trauma patients.

**A motion was made by Mr. Haas, seconded by Mr. Dyott, and unanimously passed to recommend that the EMS Board approve the 2015 Protocol changes.**

Election of Officers.

The current officers Mr. Berg (Chair) and Mr. Scheulen (Vice Chair) were both nominated to serve in the current positions for a second term. There were no other nominees.

**By acclamation, Mr. Berg was elected SEMSAC Chair and Mr. Scheulen SEMSAC Vice Chair.**

There being no further business, SEMSAC adjourned.