SEMSAC Meeting Minutes April 1, 2010

Members Present: M. Kalish, Chairman; S. Haas; P. Dischinger for A. Faden; M. Meyers; J. Brown; K. Grote; R. Simonds; S. Edwards; L. Dousa; R. Berg; R. Lipps; J. Fowler; A.J. McAndrew; D. Crane; W. Gaasch; J. Markey; B. Fosler-Johnson for J. Spearman; W. Baxter.

Members Absent: S. Henry; J. Scheulen; A. Walker; K. Yamamoto; K. May; C. Mays; G. Delaplaine; J. Fillmore

MIEMSS: R. Bass; L. Myers; C. Hyzer; R. Alcorta; J. Brown; J. Davis; D. Balthis; W. Seifarth; R. Dubansky; J. New; A. Aycock; J. Barto; P. Trissell; C. Wright; J. Darchicourt; R. Fechter; D. Kitis.

OAG: E. Fremont Magee

Shock Trauma: J. Huggins

MSFA: D. Cox; D. Lewis

The meeting was called to order by the Chairman at 1:05 pm.

Approval of the March meeting minutes was postponed because there was not a quorum.

Executive Report-Dr. Bass

<u>700 Megahertz project-</u>Dr. Bass gave a brief update on communications projects including the build out of the new statewide 700 MHz system.

<u>Comprehensive Stroke Center Standards:</u> MIEMSS is in the early stages of working on designation standards for comprehensive stroke centers for stroke patients requiring complex care. Currently MIEMSS designates primary stroke centers.

<u>Ambulance Safety:</u> A presentation was given at the Miltenberger conference that received good feedback. A presentation will be scheduled for SEMSAC as well. <u>Trauma Triage of the Elderly:</u> A study published several years ago on trauma triage of the elderly showed that elderly patients are under triaged when compared to younger patients with the same or similar injuries. Maryland EMS providers were targeted with an education campaign and the problem temporarily improved, however it seems to be worsening again. MIEMSS will be working to develop strategies to readdress the issue, which is not unique to Maryland.

<u>EMAIS RFP:</u> The top two prospective vendors have been asked to give demonstrations on their products to the EMS community as well as the technical committee which includes several members of SEMSAC, however any member of SEMSAC may attend if they wish to do so. All jurisdictions have been invited to send an ALS and BLS rep. The project management team will then review the financials at which time it will be determined if the 50:50 grant funds currently being held will need to be used for the purchase of the new EMAIS product. If the funds being held are not required for to be used for the purchase of the new EMAIS product, the matching grant funds will be released as soon as possible and distributed to the jurisdictions that requested funds this fiscal year, but have not yet been awarded.

<u>Sudden Cardiac Arrest:</u> For the first time in decades, improved outcomes from sudden cardiac arrests are being reported in certain states where an organized approach to the treatment of sudden cardiac arrest patients is being implemented. A presentation on sudden cardiac arrest and the Maryland AED program was given at Winterfest 2010. The AED Task Force is scheduled to meet again on April 26, 2010 and is going to be shifting their focus to a more comprehensive approach for the treatment of sudden cardiac arrest patients, rather than only focusing on AEDs. Arizona has a model program called "Save Hearts in Arizona Registry and Education" (S.H.A.R.E) which is having good outcomes.

<u>Star of Life Awards:</u> May 16-22, 2010 is EMS week. A tentative date of May 20 has been scheduled for the Star of Life Awards ceremony. Nominations for the Star of Life awards are due to Jim Brown by April 2, 2010.

Legislative Update

- The House EMS Workgroup update went well.
- HB 1389-would expand the \$ 7.50 surcharge added to court costs for traffic cases where points are assessed, to all moving violations, 50% of which would be applied to the Volunteer Company Assistance Fund (VCAF) and 50% to the Helicopter Replacement Fund. Amendments have been offered however, that would apply up to \$20 million of the funds collected to the VCAF, after which the remainder would go to the general fund. A senate committee hearing is scheduled for April 8.
- HB 497 would add two positions to SEMSAC-one would be a helicopter pilot and the second would be a member at large.
- HB 1282 would have allowed exceptions to the existing motorcycle helmet law. The bill received an unfavorable report.
- SB 593 would require the Health Services Cost Review Commission to set rates for freestanding medical facilities. The bill has been amended and is scheduled to be heard in the House.
- SB 634 would require EMSOF to pay for private scene helicopter transports when MSP Aviation is not available. The bill is still in committee.
- SB 745-would require ambulance companies and jurisdictions that bill for services to be reimbursed directly. The bill is still in committee.

Meeting Minutes Approval

The March 4, 2010 meeting minutes were unanimously approved.

SEMSAC Chairman's report-Dr. Kalish

<u>New Emergency Numbers System Board Member-</u>Welcome to Jack Markey who has been newly appointed to serve on SEMSAC.

<u>Meeting call-in line</u>-A meeting call-in line can be made available to members who can not attend meetings in person in accordance with the SEMSAC Bylaws.

March EMS Board Report-Three action items from the March 9, 2010 EMS Board meeting were included:

- The revised Volunteer Ambulance Inspection Program (VAIP) was approved by the EMS Board.
- Civista Hospital was approved for a five-year designation as a primary stroke center.
- Three EMS refresher education programs were approved:
 - University of Maryland Express Care
 - All-American Ambulance
 - MSP-Aviation Command

National Study Center Report-Pat Dischinger for Dr. Faden

- The NSC has expressed interest to the United States Air Force Broad Agency Announcement that would generate continued funding for the Shock Trauma Center simulation program.
- There is a new DOD initiative for the evaluation and treatment of military personnel with traumatic brain injury about which the National Intrepid center of Excellence recently met with NSC.
- NSC has received funding for 2 NIH ETOH grants; one is a mortality follow-up of a cohort of former trauma patients and the second is a study using a new biomarker to detect hangovers, even among patients who may have a negative blood alcohol content on arrival at a trauma center.

Committee Reports

BLS-William Seifarth

- The revised EMT refresher curriculum becomes effective July 1, 2010. Rollouts are being conducted prior to the effective date.
- Positive feedback has been received on the national registry testing proposal for EMT. There will be additional testing sites to accommodate the new testing mechanism if implemented. The initial BLS test would be paid for by MIEMSS; the cost of retesting for individuals that do not pass the initial test would not be covered. Mr. Edwards expressed concern about retesting and stated he believes individuals that do not pass the initial test should be required to complete a 12hour skills course.
- Policies and procedures for the testing out option in the proposed licensure and certification regulation are being discussed.
- Captain Berg inquired about the mechanism for funding for the BLS testing. Mr. Seifarth emphasized ALS testing will not be paid for by MIEMSS and that the funding for BLS testing will not come from EMSOF, but will be used from existing budgeted funds and may offer a potential cost savings to MIEMSS. The Regional Affairs Committee also monitors fund utilization by the regions and reallocates funds not used when there is a surplus, however jurisdictions and regions are currently utilizing the full amount of allocated funding.

ALS-Scott Haas

- Met on March 17, 2010
- A disparity has been identified between the number of hours being taught for EMT-I and CRT 99. A survey is being distributed to all programs regarding the number of hours currently being taught.
- The next meeting will be held on May 19, 2010 after which time meetings will be held bi-monthly.

EMD Committee-No report

Education Standards-No report

Regional Affairs-No report

Old Business

Licensure and Regulatory Changes-Action-COMAR 30.02.02.07-Approved

Cardiac Interventional Center Regulations Update-Lisa Myers

- The Cardiac Interventional Center regulations' public comment period is complete and the regulations will be taken forward to the EMS Board at the April 13, 2010 meeting for final approval.
- The American Heart Association and American College of Cardiology Maryland Chapter will be holding a Statewide STEMI meeting on May 22, 2010 at Anne Arundel Medical Center entitled, "Mission: Lifeline-STEMI Systems of Care in Maryland". All are invited to attend.

New Business

Two hospitals in region 5 are interested in becoming primary stroke centers however, the application period is closed. MIEMSS will consider how those facilities should apply.

The MSP Aviation Command is awaiting a hearing at the Board of Public Works before the move from Centreville to Easton can be completed.

The meeting adjourned at 1:55 pm