

State of Maryland

Maryland Institute for Emergency Medical Services Systems

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> > Larry Hogan Governor

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State Emergency Medical Services Board June 9, 2015 Minutes

Board Members Present: Donald L. DeVries, Jr., Esq., Chairman; Vic Broccolino; Vice-Chairman; Roland Berg (by phone); Fred Cross; Mary Alice Vanhoy; Kyrle Preis; Sherry Adams; Dean E. Albert Reece, MD., (by phone); Sally Showalter.

Board Members Absent: David Hexter, M.D.; Dany Westerband, M.D.

Others Present:

MIEMSS: Dr. Seaman; Ms. Abramson; Ms. Aycock; Ms. Mays; Ms. Myers; Mr. Slack; Mr. Schaefer; Mr. Adams; Mrs. Oliveira; Ms. Gilliam; Mr. Balthis; Dr. Floccare; Mr. Cantera; Mr. Reynolds.

RAC: Tara Carlson

OAG: Mr. Magee; Ms. Sette.

MSPAC: Lt. King

MSFA: President Keller; First Vice President Roth

Mr. DeVries called the meeting to order at 9:05 a.m.

ACTION: Upon the motion of Mr. Broccolino, seconded by Ms. Vanhoy, the Board voted unanimously to approve the minutes of the April 14, 2015, meeting of the State EMS Board as written.

ACTION: Upon the motion of Mr. Cross, seconded by Mr. Broccolino, the Board voted unanimously to approve the minutes of the May 12, 2015, meeting of the State EMS Board as written.

SEMSAC REPORT

Mr. Berg reported that Mr. Scheulen chaired the June 4, 2015, SEMSAC meeting.

SEMSAC voted unanimously to provide a letter supporting MIEMSS application for an HHS grant to partially fund integrating eMEDS[®] with the state health information exchange CRISP.

NSC will be assisting the Maryland Highway Safety Office with the annual Maryland Traffic Records Forum on June 16th. MIEMSS is participating with the Injury Data and Integration workshop.

The Maryland Seatbelt Observation Study is underway this month with a report due at the end of the summer.

NSC continues to work with MIEMSS on the Advanced Automatic Crash Notification (AACN) system with good progress.

NSC is also working with the Highway Safety Office on the ignition interlock's status and effectiveness.

The EMS Research group is working on an analysis of the National Trauma Database and the comparison with Maryland outcomes.

The BLS Committee is surveying students who received NREMT certification to determine where improvements in training and testing can be made.

The Regional Affairs Committee met on June 4 and allocated grant funds on a merit basis for Patient Tracking and eMEDS® Capabilities, Ambulance Strike Team Formation and Training, and Active Assailant projects.

Mr. Preis asked whether the grants were approved as he thought some had been submitted but not signed off by jurisdictions. Mr. Berg stated the grants were approved. Mr. Pries will check with the MIEMSS finance office on grant status.

There is overwhelming interest in participating in the mobile integrated health workgroup from various entities including EMS, Hospitals, Health Departments and Insurance Carriers. The SEMSAC Mobile Integrated Healthcare workgroup will follow the two-stage process that is laid out in the EMS Plan. In the first stage the workgroup will review the internal study that MIEMSS has already completed and identify suggestions and/or recommendations for consideration. Specifically, what roles EMS can fill currently and what roles may require change in regulation or scope of practice. The second stage will broaden the participation to other stakeholders/partners for them to review and determine formal recommendations to go to SEMSAC and then the EMS Board. The two-stage process is particularly important to assure EMS is fully on board and supportive of MIH before taking it forward to other partners, e.g., hospitals, physicians, nurses, etc., in Stage 2. The workgroup is finalizing membership and the first meeting will take place shortly.

The minimum equipment standards workgroup has finalized the list of equipment and submitted it to SEMSAC for review and discussion at their next meeting. After SEMSAC approval the list will go to JAC and MSFA, and when finally approved by all will be recommended for inclusion in Title 30 regulations.

Dr. Reese joined the meeting by phone at 9:11.

MIEMSS REPORT

Dr. Seaman highlighted areas of his written report. He noted that students who have completed NREMT testing for EMT and EMR are being surveyed as to their experience in order to make any needed changes that will assist in achieving the greatest possible participation in training and testing.

EMS week and EMS at Oriole Park were great successes, and Dr. Seaman thanked all who participated.

He noted that the new EMRC/SYSCOM facility on the 5th floor of MIEMSS headquarters became operational on May 27. Renovation of the fourth floor is underway with all projects on budget and on time.

The mobile integrated health program is proceeding in a two-step process. SEMSAC and EMSOPS need to know what EMS can provide under current scope of practice and what changes may be required. Mobile integrated health care received the most comments on the EMS plan – both positive and negative.

Maryland fallen firefighters and EMS providers were honored in a ceremony at the monument in Annapolis on Sunday with a large turnout thanks to the MSFA.

R ADAMS COWLEY SHOCK TRAUMA CENTER

Tara Carlson thanked the EMS community for the understanding shown by the 1600 anticipated guests when the Shock Trauma Gala was canceled at the last moment due to civil unrest. The next Gala is scheduled for April 2016 as it is not possible to reschedule for fall 2015. The hero plaques for this year's honorees were sent out.

MSP AVIATION COMMAND UPDATE

First Lieutenant King reported that the MSPAC application for part 135 certification was still before the Baltimore FAA Flight Standards District Office which has not previously worked on certification of a helicopter ambulance service. When the application review is complete, MSPAC is ready to move to the inspection phase.

All pilots hired at the beginning of the year have completed training and are on station. MSPAC is looking for instructor candidates among current staff. Six new MSP paramedics are now receiving initial EMS training and are expected to be qualified as flight standard rescue technicians by July 4.

The flight simulator is on schedule with anticipated delivery May 2016 and is expected to be operational in the fall of 2016. The building for the simulator has been approved by Augusta and DGS is expected to release the procurement documents in September for construction.

MSPAC is working with the University of Maryland and MDOT to complete an RFP for a master services agreement for heavy maintenance for the new helicopter fleet.

On June 1, 2015, the MSP Aviation Command celebrated the retirements of three sworn employees, and civilian pilot instructor: Lieutenant Colonel Walter F. "Pete" Landon, a former Bureau Chief, and Assistant MSPAC Commander, Medical Operations Commander Lt. Walter Kerr and SYSCOM Supervisor Sgt. Bob Adams. Simon Ayling, MSP Aviation Command civilian pilot instructor at the Frederick Section, also moved on to other endeavors after serving us for 9 years.

MSFA UPDATE

President Keller brought greetings from three MSFA officers. He thanked MIEMSS for the services provided by Jim Brown at the Fallen Firefighters Memorial service and Barbara Goff who has responded promptly to all inquiries to MIEMSS.

Johnie Roth will become MSFA president at the convention which is only a week and a half away. There will be a special opening ceremony featuring a young lady from St. Michael's who survived a crash caused by texting while driving.

President Keller said that it has been a great year, and he appreciates the friendship of the EMS community.

Chairman DeVries noted that the MSFA is the backbone of the EMS system and thanked President Keller for his service.

OLD BUSINESS

None

NEW BUSINESS

Assistant Attorney General Sette presented a correction to the proposed perinatal regulations.

ACTION: Upon the motion of Mr. Broccolino, seconded by Ms. Vanhoy, the Board voted unanimously to correct the proposed COMAR 30.08.12.11 to show the capability of providing therapeutic hypothermia as optional for level III perinatal centers.

Mr. Reynolds presented corrections to the 2015 protocols as shown on the attached June 8, 2015, memorandum (copy attached).

The Board discussed the priority of administering magnesium sulfate for pediatric asthma attacks. Dr. Seaman pointed out it would be a third-line medication behind albuterol and then epinephrine.

ACTION: By acclamation, the Board accepted the protocol corrections presented by Mr. Reynolds.

ACTION: The Chair having executed a closed meeting form, upon the motion of Mr. Broccolino, seconded by Ms. Adams, the Board voted unanimously to move to closed session.

In Closed Session:

Board Members Present: Donald L. DeVries, Jr., Esq., Chairman; Vic Broccolino; Vice-Chairman; Roland Berg (by phone); Fred Cross; Mary Alice Vanhoy; Kyrle Preis; Sherry Adams; Dean E. Albert Reece, MD., (by phone – departed during closed session); Sally Showalter.

Board Members Absent: David Hexter, M.D.; Dany Westerband, M.D.

Others Present:

MIEMSS: Dr. Seaman; Ms. Abramson; Mr. Schaefer; Ms. Oliveira; Mr. Roberts; Ms. Gilliam; Mr. Reynolds.

OAG: Mr. Magee; Ms. Sette.

The Board reviewed reports on eight educational programs.

The Board reviewed the status of developing minimum equipment standards for public safety ambulances.

The Board reviewed provider disciplinary actions.

The Board discussed issues related to publication of the EMS Protocols.

The Board returned to open session.

Return to Open Session:

Board Members Present: Donald L. DeVries, Jr., Esq., Chairman; Vic Broccolino; Vice-Chairman; Roland Berg (by phone); Fred Cross; Mary Alice Vanhoy; Kyrle Preis; Sherry Adams; Sally Showalter.

Board Members Absent: David Hexter, M.D.; Dany Westerband, M.D.; Dean E. Albert Reece, MD.

Others Present:

MIEMSS: Dr. Seaman; Ms. Abramson; Mr. Schaefer; Rae Oliveira; Josh Roberts; Leandrea Gilliam; Mike Reynolds; Dave Balthis

OAG: Mr. Magee; Ms. Sette

Mr. Balthis announced that MIEMSS is applying for an HHS grant which it will use to make eMEDS® data available to CRISP, the State health information exchange. eMEDS® produces approximately 500,000 patient care reports a year via the some 23,600 Maryland EMS providers. The grant is made available to health care providers not otherwise eligible for federal electronic health record assistance. MHA, MHCC, and SEMSAC have provided letters of support, and other letters are welcome.

CRISP currently has 47 hospitals, 7 elective care facilities and 650 health care providers as participants.

The available grant ranges from \$50,000 to \$100,000. The complete cost of the project is estimated at \$230,000. The balance above the grant amount is not yet budgeted, and it is hoped that CRISP will contribute by providing required connectivity if the project moves ahead. Absent receipt of the grant,

MIEMSS has not decided whether it will proceed at this time.

Mr. DeVries stated the Board would be pleased to provide a letter of support.

Ms. Vanhoy works with CRISP data which she finds of substantial benefit to her practice and stated the Emergency Nurses Association would provide a letter of support.

Ms. Adams noted the need to file early to avoid a traffic jam in the federal grants software as sometimes occurs.

ACTION: Upon the motion of Ms. Vanhoy, which was seconded by Mr. Broccolino, the Board voted unanimously for five year approval of the following educational programs:

The Baltimore County Fire Rescue Academy CRT-199 ALS Education Program;

The Ocean City Fire Department EMS Refresher Program at the ALS and BLS levels (Mr. Pries abstained from voting on this program)

There being no further business, the Board adjourned.