

## ***MIEMSS Executive Director's Report April, 2019***

### Maryland EMS Clinicians and Jurisdictional Programs

***National EMS Week - May 19 - 25, 2019.*** This year marks the 45th annual National EMS Week during May 19 - 25, 2019. In 1974, President Gerald Ford authorized EMS Week to celebrate EMS clinicians and the important work they do in our nation's communities. This observation ensures that the important contributions of EMS clinicians in safeguarding the health, safety and wellbeing of their communities are fully celebrated and recognized. This year's EMS Week theme is EMS STRONG - "BEYOND the CALL."

Whether celebrated with an open house, an awards ceremony or even quiet reflection about what it means to be an EMS clinician, EMS Week is the perfect time to recognize EMS and all that its clinicians do for our state and nation. In Maryland, MIEMSS recognizes EMS clinicians, as well as members of the public for their extraordinary actions in caring for others in our state with the presentation of the annual Stars of Life Awards and Right Care When It Cares. Nominations are reviewed by a statewide committee and the award ceremony takes place during EMS Week.

This year, five days of EMS Week have a theme that represents the diverse nature of EMS.

- **Monday** - EMS Education Day
- **Tuesday** - Safety Tuesday
- **Wednesday** - EMS for Children Day
- **Thursday** - Save-A-Life (CPR and Stop the Bleed) - "National Stop the Bleed Day"
- **Friday** - EMS Recognition Day

***EMS Update 2019 including the 2019 Maryland Medical Protocols.*** The printed versions of the 2019 Maryland Medical Protocols for EMS Providers will be available to providers in the near future. The full protocol document will be available on the MIEMSS website. This year, a set of replacement pages, the smaller spiral-bound full protocols, and the pocket protocols will be printed. One pocket protocol will be distributed free of charge to each Maryland clinician. The full binder-sized protocol, set of replacement pages, and spiral version, as well as additional pocket protocols, will be available for purchase from the Office of Licensure and Certification.

The EMS Update 2019, including the new revisions for the 2019 Maryland Medical Protocols for EMS Providers, is in production and will be available through the Online Training Center. Once the training is online, DVD versions may be requested through the MIEMSS Regional Offices for use at company-level drills. Remember, all Maryland EMS providers must complete the EMS Update 2017 **before July 1, 2019.**

The EMS Update 2019 for Hospital Base Stations, that include the new revisions for the 2019 Maryland Medical Protocols for EMS Providers, is also in production and will be available soon.

***The Medicare Emergency Triage, Treat & Transport (ET3) Program.*** The Center for Medicare & Medicaid Innovation recently announced a new 5-year program, the “Emergency Triage, Treat & Transport (“ET3”) Program,” that aims to ensure that Medicare Fee-for-Service beneficiaries receive the most appropriate care, at the right time, and in the right place. ET3 will expand Medicare to reimburse EMS for Medicare patients when those patients are treated / transported under certain new models of EMS care. At the same time, however, ET3 will continue traditional Medicare reimbursement for ambulance transports to hospital emergency departments and other currently permitted destinations. Even though ET3 applies only to Medicare Fee-for-Service patients, Medicare is encouraging multi-payer adoption to support overall success and sustainability. Medicare reimbursement changes under ET3 have three distinct components

**Component 1 – Reimbursement for New Models of Care:** A five-year model program will expand Medicare reimbursement to cover instances where a low-acuity Medicare patient calls 9-1-1 and EMS transports the low-acuity patient to an alternative destination, such as urgent care clinics or doctor’s offices.

**Component 2 – Aligned regional care:** For local governments, designees or other entities that operate or have authority over one or more 9-1-1 dispatch centers, cooperative agreements will be available to establish medical triage lines for low-acuity calls in certain regions where ambulance providers and suppliers have been selected to participate in the new payment options (i.e., Component #1 above).

**Component 3 – Enhanced quality monitoring and enforcement:** Medicare is seeking to build accountability through monitoring of specific quality metrics and adverse events and enforcement to ensure patient safety and program integrity.

**Timing:** Medicare indicates it will issue a Request for Applications from ambulance providers and suppliers (Component 1) this summer and will announce those selected to participate in fall 2019. Also during fall 2019, Medicare will announce a Notice of Funding Opportunity for Component 2, with awards made in early 2020. Information on the ET3 program is available at <https://innovation.cms.gov/initiatives/et3/>

***Initial CRT Licenses.*** MIEMSS is reminding the EMS community that after December 31, 2019, Maryland will no longer license new Cardiac Rescue Technician (CRT) candidates who are seeking an initial CRT license, since the NREMT will no longer offer examinations at the I/99 level. Testing at the I/99 level must be completed by December 31, 2019 as retest opportunities will not be available to candidates beyond this date.

***Clay B. Stamp appointed chair of the Maryland Emergency Medical Services (EMS) Board.*** Governor Larry Hogan has appointed Clay B. Stamp as the chair of the EMS Board. Stamp is currently the Talbot County Director of Emergency Services and Assistant County Manager, as well as Senior Advisor to Governor Hogan for Emergency Management and the chair of the Governor’s Emergency Management Advisory Council. He has a long history with emergency services in Maryland. He is experienced in all aspects of EMS and emergency services management. Mr. Stamp takes over as Chair of the EMS Board as only the second person to fill the position since MIEMSS was re-established as a separate state agency in 1992. Mr. Stamp takes over from Mr. Donald L. DeVries, Jr., Esq., who has served as the Chair of Maryland’s EMS Board since its inception.

***Maryland Flu Cases.*** As of March 29, 2019, the Maryland Department of Health has reported Maryland's influenza -like illness intensity is moderate and there was widespread geographic activity. Influenza vaccine is recommended for everyone over the age of six months. The vaccine is widely available. Maryland emergency services providers should get protected by contacting their health care provider, local health department, or neighborhood pharmacy and getting vaccinated against influenza.

***Reporting of Overdose Information.*** MIEMSS is required to submit information to the Washington/Baltimore High Intensity Drug Trafficking Area (HIDTA) Overdose Detection Mapping Application Program (ODMAP). Patient care reports are identified for submission to ODMAP where there is suspicion a patient is suffering from an opioid overdose based on the administration of naloxone as reported in eMEDS®. Information is reported electronically to ODMAP every 15 minutes; following elements are reported:

- The date and time of the overdose;
- The approximate address where the overdose victim was initially encountered or where the overdose occurred;
- Whether an opioid overdose reversal drug was administered; and
- Whether the overdose was fatal or nonfatal

***Opioid Intervention Teams (OITs).*** Opioid Intervention Teams (OITs) are the local jurisdiction multi-agency coordination bodies established by the OOCC to integrate with the statewide opioid response. OITs are coordinated jointly by the jurisdiction's health officer and emergency manager but rely heavily on coordination of community organizations, local agencies, and community members to develop a unified local strategy to reduce the impact of overdose deaths in their jurisdiction. OITs are set up in 24 jurisdictions in Maryland, including 23 counties and Baltimore City. All jurisdictions have reported EMS as partners with their OIT.

***BeforeItsTooLateMD.org for Opioid Addiction Resources.*** Marylanders grappling with a substance use disorder can find help at [BeforeItsTooLateMD.org](http://BeforeItsTooLateMD.org) or by calling 2-1-1 and pressing 1 or text their zip code to 898-211 to speak with knowledgeable crisis call specialists.

***SEMSAC BLS Committee.*** The new examination process, and scenarios are still working well. We are continuing to update and fine-tune both the evaluation process and scenarios. The new candidate dispatching system has also continued to reduce the time to completion for the EMT psychomotor examinations. As a result, we have been able to offer more opportunities for same day retesting, and reduced the number of re-testers attending at other examination sites. The electronic internship packet is still a work in progress. Some of the various computer programs have caused minor issues that are currently being addressed. We are seeing an increase in the number of instructors that are scanning their students' internship packets and placing them on a flash drive, which allows for seamless transfer of data by the examination coordinator. Candidates requesting to schedule a retest or an initial examination are no longer required to call in the request, for they are now able to select an examination date via the MIEMSS licensure portal. In addition, EMT examination evaluators now have the ability to select evaluation dates via the MIEMSS licensure portal. These efforts have led to more efficient examinations, and processing.

***eLicensure System.*** MIEMSS is working diligently to enhance functionality in the eLicensure’s public portal. This will include functionality that will allow EMS systems administrators to access the public portal to retrieve data, including provider license or certification status, issue and expiration dates, and continuing education credits that will assist with staffing, and other critical decisions during daily operations. The eLicensure Statewide Steering Committee continues to meet quarterly to develop recommendations for modifications and improvements to the new system.

***eMEDS®/CRISP Integration.*** As of January 1, 2019, MIEMSS has completed the technical work and pilot testing of the integration between eMEDS® and the Chesapeake Regional Information System for our Patients (CRISP), Maryland’s designated health information exchange. This integration includes a data linkage between participating jurisdictional EMS operational programs and CRISP, automatically uploading 138 data elements directly from eMEDS® to CRISP. This data, which is available in the CRISP Provider Portal, is designed to provide clinical EMS treatment data to in-hospital and community healthcare partners to better streamline a patient’s care across the entire healthcare system. Additionally, this program allows jurisdictional QA officers and medical directors from public safety EMS operational programs to access the CRISP Provider Portal for quality assurance and mobile integrated health purposes. As of April 1<sup>st</sup>, 2019 there are seven participating jurisdictions (Carroll County, Charles County, Frederick County, Queen Anne’s County, St. Mary’s County, Talbot County and Washington County). The program is open to all of Maryland’s public safety EMS operational programs and MIEMSS has set a goal that all jurisdictional EMS operational programs will be participating by the end of calendar year 2019.

***Voluntary Ambulance Inspection Program (VAIP).*** The Statewide VAIP workgroup has reconvened to conduct a thorough review and update of the VAIP standards in an effort to allow more jurisdictional EMS operational program to participate. The committee is actively seeking feedback from jurisdictions regarding the VAIP equipment standards following the recent VAIP workgroup meeting.

***Electronic Patient Care Reporting – Electronic Maryland EMS Data System (eMEDS®).***  
Public Safety/9-1-1 EMSOP Update

As of January 2, 2019, MIEMSS has completed transition of all twenty-five, public safety jurisdictions (including Baltimore City, & City of Annapolis) to ImageTrend’s Elite platform, now known as eMEDS®. MIEMSS is actively working with the remaining federal, EMS partners to transition them as well. Expected completion time is unknown for these agencies.

Submitted patient care data is available to the hospitals through the Hospital Hub, and is accessible for performance reporting and analysis. Reports are also integrated with other systems such as the MIEMSS’ trauma registry, and the CARES registry. Work continues to expand the integration of eMEDS® data into Maryland’s statewide Health Information Exchange (HIE) known as the Chesapeake Regional Information System for our Patients (CRISP). To date, seven jurisdictions/counties (Anne Arundel, Carroll, Charles, Frederick, Queen Anne’s, Talbot and Washington) have completed all necessary agreements with MIEMSS and CRISP to allow for this transfer of data to occur. MIEMSS is reaching out to the remaining EMS jurisdictions to encourage their participation in CRISP.

***Statewide EMS Communication System Upgrade.*** MIEMSS is upgrading the Maryland statewide communications systems to meet current and future needs. MIEMSS' goal is to have a highly reliable, next generation communications system which is built on a uniform platform, is IP-based, utilizes proven and scalable technology, and integrates with the State's Public Safety Answering Points (PSAPs). The MIEMSS project team went before the Board of Public Works (BPW) on May 16 to obtain approval to award the contract to Overland Contracting.

Overland Contracting (Black & Veatch) and MIEMSS are currently focused on completing the Detailed Design Report (DDR). The DDR is a cohesive, written, document detailing what the vendor is going to provide including details on IP and microwave engineering, configurations, equipment/hardware, software and services; how the vendor is doing to accomplish the work (Implementation Plan and Transition Plan); a clear, realistic, timeline to accomplish the task; and coordination and acceptance test plans. MIEMSS and OPCI continue to have weekly project meetings. The IT workgroup continues to meet regularly on IP network design/detail.

## **Hospital Programs**

***Freestanding Medical Facilities.*** During the 2016 Session, Maryland enacted legislation to establish a process for acute care general hospitals seeking to convert to a freestanding medical facility. As part of this process, the law includes requirements for acute care general hospitals seeking a conversion without obtaining a Certificate of Need from the Maryland Health Care Commission (MHCC). These requirements include that the conversion "will maintain adequate and appropriate delivery of emergency care within the statewide emergency medical services system as determined by the State Emergency Medical Services Board." The EMS Board promulgated draft regulations regarding this determination, including the factors the EMS Board shall consider in making such a determination, as well as a timeline for the process. MIEMSS met with members of the EMS community and other stakeholders to develop draft regulations and asked for informal comments on the draft regulations from the public or other interested parties. The final regulations became effective on July 31, 2017.

Harford Memorial Hospital (HMH) filed notice to the Maryland Health Care Commission (MHCC) and MIEMSS on August 4, 2017 that it intends to convert from an acute general hospital to a freestanding medical facility. In accordance with COMAR 30.08.15.03, the EMS Board was required to consider eleven factors in order to make a determination as to whether the conversion will maintain adequate and appropriate delivery of emergency care within the Statewide emergency medical services system and provide that determination to the MHCC. The EMS Board discussed the eleven factors at the October, 2017 EMS Board meeting and determined the HMH conversion to a freestanding medical facility will maintain adequate and appropriate delivery of emergency care within the Statewide emergency medical services system. The determination was provided to the Maryland Health Care Commission on October 12, 2017. HMH has since filed a modified request to the MHCC of the original notice filed August 4, 2017. A public informational hearing was held December 13, 2018.

University of Maryland Laurel Regional Hospital (UMLRH) filed notice to the MHCC and MIEMSS on April 13, 2018 that it intended to convert from an acute general hospital to a freestanding medical facility. In accordance with COMAR 30.08.15.03, the EMS Board was required to consider eleven (11) factors in order to make a determination as to whether the

conversion will maintain adequate and appropriate delivery of emergency care within the Statewide emergency medical services system and was to provide that determination to the MHCC. The EMS Board discussed the eleven factors at the July 10, 2018 EMS Board meeting and determined the UMLRH conversion to a freestanding medical facility will maintain adequate and appropriate delivery of emergency care within the Statewide emergency medical services system. The determination was provided to the Maryland Health Care Commission on July 17, 2018. Laurel Regional Hospital's conversion became effective January 1, 2019. The Laurel Freestanding Medical Center's name is University of Maryland Laurel Medical Center.

University of Maryland Shore Medical Center Dorchester (UMSMCD) filed notice to the MHCC and MIEMSS on July 6, 2018 that it intends to convert from an acute general hospital to a freestanding medical facility. In accordance with COMAR 30.08.15.03, the EMS Board was required to consider eleven factors in order to make a determination as to whether the conversion will maintain adequate and appropriate delivery of emergency care within the Statewide emergency medical services system and provide that determination to the MHCC. The EMS Board discussed the eleven factors at the October 9, 2018 EMS Board meeting and determined the UMSMCD conversion to a freestanding medical facility will maintain adequate and appropriate delivery of emergency care within the Statewide emergency medical services system. The determination was provided to the Maryland Health Care Commission on October 15, 2018.

***Cardiac Interventional Centers (CICs).*** Because many sudden cardiac arrest patients require intervention in the cardiac catheterization lab, EMS protocols direct EMS providers to begin therapeutic hypothermia when patients meet certain criteria and transport patients to hospitals that can provide continued cooling. Ideally, those patients would go to a CIC if possible. All 24 CICs have reported the ability to provide therapeutic hypothermia.

MIEMSS and the Maryland Health Care Commission (MHCC) obtain data from the Cardiac Interventional Centers. The upload of all required data occurs quarterly and is then analyzed for completeness. Re-verification of the 23 Maryland CIC designations was completed in 2014. MIEMSS Hospital Programs staff also conducted site visits at the four out of state CICs with which MIEMSS has MOUs (Christiana, Bayhealth-Kent General, Nanticoke Memorial, and MedStar Washington Hospital Center). University of Maryland Shore Medical Center at Easton was approved as a CIC in February 2018, giving Maryland a new total of 24 in-state CICs. Re-Verifications and MOU renewals are underway again in 2019. A list of the CICs as well as all trauma and specialty centers is available on the MIEMSS webpage under the Hospitals tab.

As MIEMSS continues to work with stakeholders on the STEMI System of Care in Maryland, efforts will be made to improve the collection of data necessary to support quality improvement initiatives with hospitals and the MHCC. It is important to continue to work to coordinate these efforts across the State and amongst key stakeholders and organizations. The Cardiac Data Coordinators meet quarterly with MIEMSS and MHCC.

***Perinatal Referral Centers.*** The Vermont Oxford Network (VON) which is a national neonatal registry focusing on Perinatal Centers ability to comply with the core metrics of neonatal care has completed the development of the MIEMSS Statewide Nightingale Report. This report will allow MIEMSS to review all Level III and Level IV's compliance with meeting the core metrics of neonatal care. The neonatal and maternal subcommittees have begun meeting to determine areas of focus for improvement based on the Nightingale Report. The Perinatal Clinical Advisory Committee has completed updating the Perinatal Regulations and all perinatal referral centers have received the updated regulations.

***Primary Stroke Centers (PSCs).*** The re-designation process and site surveys for Primary and Comprehensive Stroke Centers is ongoing. The draft COMAR Regulations for designation of Acute Stroke Ready Centers and revisions to the COMAR Regulations for designation of Primary Stroke Center have undergone review by MIEMSS Leadership and have been sent to the Stroke QIC for review and approval. It is anticipated both Regulations will be presented to SEMSAC and the EMS Board in early summer.

***Trauma Centers.*** All Adult Trauma Center re-designations are completed. The Burn Center regulations were presented to SEMSAC in March and will be presented to the EMS Board in April. Pediatric Trauma, Eye Trauma, and Neurotrauma Center regulations are in the review process. The Trauma Quality Improvement Committee has begun to monitor Electric Scooter injuries received in Maryland Trauma Centers.

### **Emergency Operations**

***High Consequence Infectious Disease (HCID) Program.*** MIEMSS has awarded HCID grant funding to four EMSOPs and one commercial ambulance company. Each of these agencies will utilize the grant funds to develop specialized HCID transport teams. In the coming months these teams will purchase necessary equipment and conduct training to meet their outlined capabilities. This project is funded through a federal HHS/ASPR grant which is administered by the Maryland Department of Health.

***Active Assailant Interagency Workgroup (AAIWG).*** Earlier this year, Governor Hogan issued an Executive Order, “Active-Assailant Incident Preparation and Coordination”. The Maryland State Police and MIEMSS continue to co-chair the work group. Recent meetings have focused on the future direction of the workgroup. Multiple subcommittees have been formed and have begun meeting to address their respective focus areas. Participants include representatives from hospitals, public/private education, federal, state, and local fire, EMS, emergency management, and law enforcement and other organizations. The full workgroup continues to meet monthly with a focus on review and coordination of the subcommittees activities. A one-day educational symposium was held in February in Annapolis. This workshop covered a review of recent events in Maryland and Texas and discussions about active assailant related plans, tools and best practices.

### **Regional Programs**

***Hospital Base Station Survey and Re-designations.*** The regional programs staff are currently in the planning process for both the CY2019 re-designation process and the CY2019 Base Station Coordinators Meeting.

The MIEMSS Regional Offices are managing multiple projects throughout the state. For more information about any of the items listed below, contact the appropriate MIEMSS Regional Office.

### ***Region I***

- The Region I Office, in conjunction with the Western Maryland Regional Medical Center Trauma Program, the Garrett County Department of Public Safety, Allegany County Emergency Services, and the Maryland Fire and Rescue Institute Western Maryland Regional Training Center continue to advocate the Stop the Bleed Campaign. This initiative has trained over 3,000 citizens in Allegany and Garrett Counties.
- The Region I and II Healthcare Coalition has completed the development of a medical ambulance bus to support Mid and Western Maryland. The unit is available for response.
- The 17<sup>th</sup> annual Miltenberger Emergency Services Seminar was held on March 8-9, 2019 at the Rocky Gap Casino Resort in Flintstone, MD. Well over 200 Emergency Services attendees participated in the multi-disciplinary educational offerings. Planning has started for the 18<sup>th</sup> annual seminar to be held on March 13-14, 2020.
- Region I has started the roll out of Pediatric High Performance Pediatric CPR in conjunction with MIEMSS Emergency Medical Services for Children Office.

### ***Region II***

- The Region II Office has completed the HCID transport team development process with Frederick County DFRS. Development of a functional exercise is underway.
- The Region II Office is continuing to coordinate training for Frederick County paramedics selected for participation in the pre-hospital ultrasound pilot program.
- The Region I and II Healthcare Coalition has completed the development of a medical ambulance bus to support Mid and Western Maryland. The unit is available for response.
- The Region II Office is working on the 50/50 Grant process.
- Region II held Chempack training for healthcare partners and is planning an exercise on its deployment.
- Region II has started the roll out of Pediatric High Performance CPR in conjunction with MIEMSS Emergency Medical Services for Children Office.

### ***Region III***

- Work is continuing to implement the Region III Ambulance Strike Team.
- The Region III Office is coordinating four active assailant classes through Region III Hospital Preparedness Program (HPP) Funds.

### ***Region IV***

- The Region IV EMS Advisory Council met on March 19, 2019. The Council was honored to have Dr. Ted Delbridge MIEMSS Executive Director, Dr. Tim Chizmar State EMS Medical Director and Mr. Clay B Stamp Chairman of the Maryland EMS Board in attendance. Each spoke briefly and introduced themselves to the Council and look forward to joining us again at future meetings. Various committees of the Council and MIEMSS provided reports so that information could be shared and topics could be discussed with the Council members.



- The University of Maryland Shore Regional Medical Center at Easton's Brain Attack team recently received the golden brain award from the Maryland Stroke Center Consortium. The consortium is comprised of representatives from stroke centers in Maryland, including stroke coordinators and stroke center directors, who get together every other month to review stroke care in Maryland and receive updates in stroke care nationally. Representatives from AHA and MIEMSS also attend these meetings.
- The Region IV staff continues to work with jurisdictions, emergency planners, hospitals, and clinicians on the distribution of information to our communities on the opioid crisis. In addition, efforts continue to insure that data is transferred to the Health Departments on opioid use in a timely manner to help those in need of treatment.
- All of the Region IV Jurisdictions have received information on the Jurisdictional Emergency Medical Services Operation Plan Re-verification process. Mr. Ron Schaefer, Chief Compliance Officer at MIEMSS, sent out this information. Mr. Schafer will be joining us at our May Region IV EMS Advisory Council meeting to further discuss the re-verification process and application. Information is to be completed by July.

### ***Region V***

- The Maryland-National Capital Region Emergency Response System (MDERS) is currently overseeing \$4.6 million dollars in FY 2019 Urban Areas Security Initiative (UASI) funds to support Prince George's and Montgomery Counties with eleven inter-disciplinary, inter-jurisdictional projects involving Fire, Rescue, EMS, Law Enforcement, Emergency Management, Public Health, and hospitals.
- Region V resumed its involvement with the RESF-8 health and medical programmatic working group to support regional collaboration and coordination in the National Capital Region.
- The Region V staff continues to support the Region V EMS Advisory Council including drafting a new charter and bylaws, and supporting the election of new officers.
- Working off of a series of workgroup meetings and workshops, the Region V Staff developed a Mass Casualty Incident Concept of Operations document for Southern Maryland. When implemented, the concept of operations will provide a framework for southern Maryland jurisdictions to use in responding to major incidents that require assets and units from all three counties.
- The Region V staff has taken the lead role, working with the Department of Homeland Security, to develop a HSIN share point site to allow for collaboration across pre-hospital and hospital stakeholders in the region.
- Region V is also working on a pilot program for Stop-The-Bleed training in the region in collaboration with ERS and other regional partners.
- The Region V Office is working on EMS research projects related to mobile health integrated care, behavioral health, and cardiac care at the state and national levels.

### **Emergency Medical Services for Children**

***Emergency Medical Services for Children Department (EMS for Children).*** The state Pediatric Emergency Medical Advisory Committee (PEMAC) met on March 6, 2019 followed by the statewide Safe Kids Maryland and Maryland Child Passenger Safety Board meetings in the afternoon. Highlighted during the meeting were the four Pediatric EMS and ED posters that were presented at the January NAEMS - Physicians conference and the December through March Pediatric HP CPR workshops that were held in every region. EMSC State Partnership

Grant and Child Passenger Safety and the Bike Helmet Safety (new) grants are presented every two months with the most recent update posted on the website under PEMAC Meetings. Safe Kids Maryland and Risk Watch updates are also updated quarterly. FAN Website within the [www.miemss.org](http://www.miemss.org) website includes components of the “Emergency Ready Family” project. Pediatric QIC and DART committee is working on quality improvement projects that include protocol compliance and EMS provider skill/ equipment utilization.

Pediatric High Performance CPR protocol workshops and train the trainer session were completed in March. There is a Learning Management System (LMS) Continuing Education program available online through the MIEMSS “Online Training Center” - <http://www.emsonlinetraining.org/>. The PowerPoint lecture has been converted into a movie format and placed on the MIEMSS YouTube account to be used for company level training - <https://www.youtube.com/user/MarylandEMS> .

The EMS for Children State Partnership Grant current grant award period for 2018-2022 will begin year 2 on April 1, 2019. The work will continue to focus on the Federal EMSC Performance Measures and support EMS and hospital pediatric education.

- EMS for Children continues to offer the Advance Pediatric Life Support (APLS) physician courses for 2019 will be held on May 23, 2019 and December 13, 2019. Flyers and registration will be available soon.
- Emergency nursing CPEN review course will be held at EMS Care in April 2019 – flyers have been sent to every hospital in Maryland and will be opened to neighboring states on Monday 4/1/2019.
- Maryland ENA Pediatric Committee will meet with EMSC to plan for the new 5<sup>th</sup> edition of ENPC course implementation in 2019.
- The Pediatric Education for Prehospital Professionals (PEPP - AAP) hybrid course held on March 15, 2019 at MIEMSS was a full course and included the development of instructors for future courses. A PEPP Course will be scheduled for fall and offered the Pediatric EMS Champions.
- PEARS (AHA) courses as preconferences were held at Winterfest and Miltenberger EMS regional conferences and in Southern Maryland in February with full courses each time and very positive feedback.
- Pediatric Base Station course dates for 2019 have been identified and have been disseminated to all pediatric base stations, pediatric transport teams and neonatal transport teams.
- Safe Transport of Children in Ambulances reference cards on best practices to restrain children on stretchers are available upon request. Safe Transport Learning Management education program is available on the MIEMSS LMS website and has continuing education hours approved.
- NEW and updated Pediatric Reference Cards are now available in the EMSC program office. Email [pepp@miemss.org](mailto:pepp@miemss.org) for copies.

***Child Passenger Safety (CPS) & Occupant Protection Healthcare Project:*** MIEMSS CPS & OP project (19th year of funding DOT/NHTSA) continues to provide outreach to health care providers to provide education and parent educational tools on child passenger safety. The project collaborates with local Safe Kids chapters and coalitions and KISS program at DHMH. Again in this year's grant MIEMSS EMSC CPS project is able to provide scholarships for EMS and Hospital providers to take the standardized CPS Course. Contact the project at [cps@miemss.org](mailto:cps@miemss.org).

- There is now a fourth Temperature Heat Displays available for public education events. Contact [CPS@miemss.org](mailto:CPS@miemss.org) for more information.
- In 2019, this project will host a Nursery and NICU workshop for nurses to promote competency training in child passenger safety and the car seat tolerance test on April 8 2019 hosted by St Agnes Hospital in Baltimore.
- “Rapid Response CPS Education Kits” have been shared with EMS agencies when a child fatality occurs related to car seat misuse or hyperthermia.
- The Drowsy Driving special grant project has ended but the current grant will continue to provide information on the risks in healthcare professionals. MIEMSS has a dedicated website, Public Service Announcements and educational materials for EMS and Hospitals on the risks and the warning signs of Drowsy Driving. Drowsy Driving presentation was part of the September Mid Atlantic Life Safety conference.
- The project continues to support Safe Kids coalitions, the Occupant Protection Emphasis Area Team and the Maryland CPS Board to promote best practices for CPS and educate both professionals and the public. We are working with Maryland Kids in Safety Seats (KISS) program to expand the instructor pool for course on Safe Transport for Children with Special Needs. This course focuses on passenger vehicles with a small segment on school buses and another on public safety vehicles. New in this year’s grant is a special needs update workshop for those who have completed the initial training.
- CPS posters are available upon request and can be viewed on the website - <http://www.miemss.org/home/emsc/cps> including a new poster on Teens in Cars as well as Rear facing longer & Booster Seats. SECURE Ambulance Safety & BUCKLE UP - Every Ride Every Time posters are available from the EMSC & SOCALR offices.

### Cardiac

***The Maryland RA Spring 2019 Two-day Resuscitation Academy.*** The Maryland RA Spring 2019 Two-day Resuscitation Academy has been scheduled for May 1 and 2, 2019 from 8:00am-4:30pm at the Howard County Public Safety Training Center 2200 Scott Wheeler Drive Marriottsville, Maryland. This audience is directed to Medical Directors, EMS supervisors, Fire/EMS Chiefs, EMS personnel of all levels, and Emergency Department staff across Maryland and surrounding regions. Attendees can expect to increase understanding of the interventions important to pre-hospital cardiac arrest survival and learn to implement ways to track and improve survival rates in the community.

***Public Access AED Program.*** AED information, including application information, is located in the public information tab under “Maryland Public Access Automated External Defibrillator.” Facilities whose certificates have expired are not in compliance with Maryland’s AED law. AEDs should be placed in locations where they are clearly visible to anyone who is willing to use the AED, regardless of whether the individual has received training or not, recognizing trained individuals may not always be available to respond before EMS arrives. Labels or signage on AEDs that read “For use by trained personnel only” must be removed.

***Out-of-Hospital Sudden Cardiac Arrest Steering Committee.*** In 1999, the AED Task Force was created to provide guidance on layperson AED legislation that allowed non-health care facilities that wished to place AEDs on their premises to do so to decrease time to defibrillation for individuals suffering from sudden cardiac arrest. Since that time, treatment for out of hospital sudden cardiac arrest has evolved in both the layperson and pre-hospital arenas. MIEMSS has worked to create an out of hospital sudden cardiac arrest steering committee to address multiple components including 9-1-1 dispatch, pre-hospital provider treatment, community response, and data collection and reporting. The committee meetings are held at MIEMSS. The committee last met on March 26, 2019.

EMS and EMD components of the Cardiac Arrest initiative are being addressed is through the Maryland Resuscitation Academy which holds a two day Summit each year in the Spring and a one day Summit each year in the Fall. The Summits are attended by EMS providers and EMS leadership to learn about improving optimal response and treatment to sudden cardiac arrest in the prehospital setting. A component for emergency medical dispatchers was also added to the course to facilitate early dispatch and dispatch assisted CPR instructions to bystanders prior to EMS arrival. A one day summit was held November 6, 2018. Information about the Maryland Resuscitation Academy and registration can be found at <http://ramaryland.org/>. A Telephone CPR Dispatch Academy was held on December 13.

To encourage citizens to learn about sudden cardiac arrest, CPR and how to use an AED MIEMSS has sponsored a campaign advertising on MTA bus tails and during radio commercials airing in October, February, and the first week of June. The months coincide with national Sudden Cardiac Arrest Awareness Month, American Heart Month, and CPR and AED Awareness Week, respectively.

***Heart Rescue Project.*** Maryland is participating in phase two of the Heart Rescue US collaborative. Medtronic Philanthropy's HeartRescue Project began as multi-state collaborative program to measure and improve sudden cardiac arrest (SCA) survival rates. Today, with impressive results in more than six states, the effort is now expanding in the U.S. Medtronic Philanthropy – in conjunction with the current HeartRescue partners - is moving forward with a Phase 2 of the HeartRescue Project. The Phase 2 mantra is to “measure, improve, and expand” with the explicit goal to leverage HeartRescue experience and collective wisdom to work with other interested states to build or enhance statewide efforts to comprehensively measure out-of-hospital resuscitation and ultimately improve outcomes. The ultimate goal is to achieve a representative national registry that will elevate care and outcomes for cardiac arrest

## **Prevention**

***April is National Distracted Driving Awareness Month.*** April is National Distracted Driving Awareness Month and April 8-15, 2019 is the National Enforcement Mobilization event. Distracted driving is any activity that diverts attention from driving, including talking or texting on the phone, eating and drinking, talking to other people in the vehicle, using the entertainment or navigation system—anything that takes attention away from the task of safe driving.

Texting is the most alarming distraction. Sending or reading a text takes your eyes off the road for at least 5 seconds. At 55 mph, that's like driving the length of an entire football field with your eyes closed.

You cannot drive safely unless the task of driving has your full attention. Any non-driving activity you engage in is a potential distraction and increases your risk of crashing.

***U Drive - U Text - U Pay*** is this year's campaign centered on aiding law enforcement officers in keeping distracted drivers off the road. This campaign is targeted to men and women 18 to 34 years old with a skew toward women. It is important to raise awareness in your community about the consequences of texting while driving.

***2019 National Rail Grade Crossing Safety Campaign April 16 - May 12, 2019.*** NHTSA, in coordination with the Federal Railroad Administration (FRA), is launching the 2019 national rail grade crossing safety campaign to increase public awareness about the dangers around railroad tracks in hopes to reduce fatalities at rail grade crossings.

Motor vehicle crashes at rail grade crossings are avoidable. This campaign is a focused effort to reverse the uptick in rail grade crossing fatalities. Motorists must come to a complete stop at least 15 feet from the track if: 1) flashing red lights are activated, 2) a crossing gate is lowered, 3) a flagman signals you to stop, 4) a stop sign is posted, or 5) a train is clearly visible or you hear the whistle of a train. Ignoring signage or attempting to go around a crossing gate that is down can have deadly consequences. It is never worth risking your life by ignoring the law or racing a train. The best way to avoid a collision with a train is to understand and follow the warning signage, and to always stop for a train. The message is simple: "***Stop. Trains Can't.***"

***Maryland RISK WATCH Champion Team.*** The Maryland Risk Watch team led by the EMS for Children Department in partnership with Safe Kids Maryland has already started to plan the prevention education interactive sessions for the 2019 MSFA Convention with volunteers from across the state. The STEPS TO SAFETY interactive displays focus on providing injury prevention information and hands on training for families and infants, toddlers, school aged and teens. The Spring Risk Watch Update is available on the MIEMSS EMSC website. <http://www.miemss.org/home/emsc/maryland-risk-watch>.

Four prevention posters were presented at the Public Educator and Life Safety Seminar on March 23, 2019 along with Stop The Bleed training for all 90 participants.

Training DVDs are available through the EMS for Children office: "What to Expect When You Dial 9-1-1" featuring the Cecil County PSAP and "Right Care When It Counts" featuring children and youth teaching families to be prepared.

***Safe Kids Maryland Coalition.*** Safe Kids Maryland continues to support local coalitions and local community partners in their identified injury risk areas. Safe Kids Maryland has received a Medication Safety mini grant to focus on Over the Counter Medications with middle school children and their families. Safe Kids Buckle Up FY 2018 grants continue in the seven local Safe Kids Coalitions (Baltimore City, Carroll County, Frederick County, Howard County, Montgomery County, Prince George's County, Washington County) and with the support of the Safe Kids community partners in Anne Arundel, Cecil, Garrett, counties and partnerships with Maryland Kids in Safety Seat program. A Maryland Highway Safety Office grant for Bike Helmet Safety education started in May and will run through June of 2019. Plans for Safe Kids activities in the spring have been started in all 7 coalitions and 4 community partners.

A fourth Outdoor Temperature Displays has been funded and is located at Meritus Hospital/ Safe Kids Washington County. These displays are used at EMS and Hospital conferences as well as a number of county Fire & Rescue displays throughout the fall. These displays will educate the public and professionals about the danger of heatstroke to children left in cars. One is located at the MIEMSS CPS office, one is located in Cecil County DES, and one is located in Prince George's Fire & EMS Department in addition to the new one for western Maryland. To request training on how to use these displays and to schedule one for your event - email [cps@miemss.org](mailto:cps@miemss.org).

To join the email notifications, please contact the Maryland Safe Kids Coalition through the EMSC Office at 410- 706-1758 or email: [safekidsmd@miemss.org](mailto:safekidsmd@miemss.org) .

**Dates to Remember:**

**June 16-19, 2019 Safe Kids/ Risk Watch Steps to Safety training during the MSFA convention in Ocean City.**

**September 4, 2019 @ MIEMSS Room 212 from 12:30 PM – 3:00 PM - Safe Kid Maryland**

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## **2019 Educational Programs SAVE THE DATES**

***Delmarva Safety Association's Health and Safety Conference - April 8 - 9, 2019***  
Clarion Resort Fontainebleau Hotel, Ocean City, Md.

***Maryland EMS Care 2019 – April 25-28, 2019***  
Clarion Resort Fontainebleau Hotel, Ocean City, Md.

***The Maryland RA Spring 2019 Two-day Resuscitation Academy - May 1 - 2, 2019***  
Howard County Public Safety Training Center, Marriottsville, Md.

***Maryland State Firemen's Association Annual Conference and Convention 2019 – June 15-20, 2019*** Ocean City, Md.

***Mid Atlantic Life Safety Conference – September 24, 2019***  
Johns Hopkins Applied Physics Lab Laurel, Md.