

Maryland EMS News

For All Emergency Medical Care Providers

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FCC Narrowbanding Deadline Rapidly Approaching. Are you ready?

The Federal Communications Commission (FCC) mandate to convert certain radio equipment used in public safety systems to narrowband operation is rapidly approaching. UHF radio equipment used in many jurisdictional EMS Operating Programs (EM-SOPs) and by a number of commercial EMS companies as part of the Maryland Emergency Medical Service (EMS) communications system is affected by this mandate. It is the responsibility of the EMSOP to ensure radio equipment used by their subsidiary companies is compliant with the FCC mandate. All UHF EMS communications equipment—portables, mobiles, and base stations—must be converted to narrowband operation by January 1, 2013. **Counties/companies operating non-narrowband compliant equipment after January 1, 2013 will be in violation of FCC regulations and subject to FCC penalties.**

For the past several years, MIEMSS has been working to modify Maryland's statewide EMS communications system infrastructure to comply with the FCC-mandated migration

to narrowband technology. This replacement of non-narrowband-capable infrastructure to accommodate the mandate was completed in December 2011. MIEMSS continues to focus on statewide replacement of non-narrowband-capable mobile and portable radios through its Radio Grant Program.

Radio Grant Program

In the past, MIEMSS had provided county and volunteer EMS companies with mobile and portable radios through an equipment donation process. In 2010, because of necessary changes in the agency's inventory management system, MIEMSS replaced the equipment donation program with the Radio Grant Program (<http://www.miemss.org/home/miemssradiograntinformation/tabid/186/default.aspx>). All jurisdictional EMS companies (county and individual) are eligible to apply. Through an application process, companies can request reimbursement for new mobile and portable radio equipment essential for

complying with narrowbanding requirements and maintaining a cohesive EMS communications system. The grant program is currently operational but, contingent on the availability of FY12 funding, will end on June 30, 2012. For more information about participating in this program, companies should contact their Regional Administrator.

Under the Radio Grant Program, MIEMSS will reimburse the grantee for the purchase and installation of a Motorola Model CDM 1550 mobile radio or the purchase of a Kenwood TK 390 portable radio and mobile charger provided the radios are **programmed with the approved MIEMSS radio template in its entirety**. The MIEMSS radio template was designed to allow for operation in all jurisdictions and modes necessary in Maryland and also includes the UHF interoperability channels (UTAC) used nationwide. These specific radios were selected because they meet the operational needs of the Maryland EMS communications system and are compliant with FCC requirements. Purchases made under this grant program are capped at \$1300 for each device. These radios are available on the state contract. Please refer to the Two-Way Radio Equipment and Services contract through the Department of Information Technology, 060B9800015, Functional Area I (<http://doit.maryland.gov/contracts/Pages/TwoWayRadioFunctionalAreas.aspx>). **The new radios must be programmed with the MIEMSS-approved channel template**, available at <http://bit.ly/JiSH1m>. In order to be reimbursed for radio purchases, grantees must sign a MIEMSS Radio Cost Reimbursement Grant Agreement.

The MIEMSS Radio Grant Program closes on June 30, 2012. After the closing date, companies should contact their Regional Administrator for guidance.

Narrowband-Capable Mobile Radio



Acceptable narrowband-capable mobile radios are the Kenwood TK 890 (the KCH-11 model is shown) (left) and the Motorola Model CDM 1550 (right). Please note that the only mobile radio reimbursable under the Radio Grant Program is the Motorola Model CDM 1550.

(continued on page 2)

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(continued from page 1)

Narrowbanding Plan

Jurisdictional EMSOPs and commercial EMS companies relying solely on the MIEMSS UHF system (Call and Med Channels) must have UHF radio equipment capable of operating in narrowband mode before January 1, 2013. Operating on non-narrowband-compliant equipment after this deadline will be a violation of FCC regulations and subject to FCC penalties. Once a region is converted to narrowband mode, units operating non-narrowband-capable radios will disrupt EMS radio communications. MIEMSS encourages all jurisdictional companies to take advantage of the Radio Grant Program in order to replace non-narrowband-capable radio equipment by July 1, 2012.

Narrowband-Capable Portable Radio



The only acceptable narrowband-capable portable radio is the Kenwood TK 390, pictured here. The purchase of this radio and mobile charger is reimbursable under the Radio Grant Program.

MIEMSS began converting to narrowband operations in early 2012. On April 4, 2012, Somerset, Worcester and Wicomico Counties became part of the Region IV EMRC operation and are now operating in the narrowband mode. Target implementation dates for converting other counties to narrowband operations are listed below.

- June 7, 2012 at 0800 hours: Dorchester, Talbot, Queen Anne's, Caroline, and Kent
- June 27, 2012 at 0800 hours: Garrett, Allegany, and Washington

Target dates have not been scheduled for Regions III and V at this time, but MIEMSS anticipates completion by late summer 2012. The MIEMSS Communications Engineering Services Department endeavors to make the future conversion dates known as soon as they are established.

Frequently Asked Questions

Radio Grant Program:

- **Does MIEMSS buy and install the radios?** No, MIEMSS's Radio Grant Program allows 100 percent reimbursement to companies to purchase and install the approved radio equipment. Each jurisdictional EMS company (county or individual) is responsible for procuring the radio and having it installed. In order to receive reimbursement, you must follow ALL of the requirements of the grant agreement.
- **If I get a replacement unit, will MIEMSS provide a radio?** If the vehicle being replaced has a narrowband-capable radio installed, that radio would be relocated into the new vehicle. If the vehicle being replaced does not have a narrowband-capable radio, then the new vehicle is eligible for a new radio under the Radio Grant Program.
- **If I get an additional unit, will MIEMSS provide a radio through the grant program?** If an additional unit is obtained to enlarge the field provider's fleet, the field provider may apply for a radio through the Radio Grant Program.

- **Can I purchase a different model or manufacturer's radio under the MIEMSS Radio Grant Program?** No, this equipment was specifically selected to comply with the FCC narrowband mandate and maintain a cohesive EMS communications system.
- **Where must the radio provided under the MIEMSS grant be located?** The patient care compartment of the vehicle is the only acceptable location for the radio purchased through the grant program.
- **Will there be Radio Grant Program funding available after June 30, 2012?** No funds will be available after June 30, 2012 and, depending on demand, may be exhausted prior to that date.

Conversion to Narrowband:

- **I have a narrowband-capable radio; am I ready?** If you have a narrowband-capable radio, you must verify that it is loaded with the MIEMSS Radio Template. The easiest way to determine this is to make sure that the UTAC group is located in channels 151 to 158.
- **How do I know if my radio is narrowband-capable?** Acceptable narrowband-capable radios are pictured on page 1 and left. If you do not have one of these radios, you should contact your Regional Administrator. Note: MIEMSS has deployed two styles of Kenwood mobiles. The acceptable radio has a round microphone connector with an attachment screw located on the front panel.
- **Why do I need all of the channels specified on the MIEMSS Radio Template? Can I remove the ones that I will never use?** The MIEMSS Radio Template was established to create interoperability in the State of Maryland. All of the channels in the template are required in order to receive reimbursement under the Radio Grant Program. In addition, MIEMSS will be reassigning channels in some areas during the conversion.
- **Can I add additional channels to the programming?** Additional channels are allowed in channels 51-100 for interoperability with hospitals outside of Maryland.

(continued on page 4)

Maryland's Marcine D. Goodloe Honored at the 24th Annual National Fire and Emergency Services Dinner

The Congressional Fire Services Institute's Board of Directors selected Marcine D. Goodloe of the Montgomery County Volunteer Fire-Rescue Association as the recipient of the 2012 CFSI/Motorola Solutions Mason Lankford Fire Service Leadership Award. The presentation took place at the 24th Annual National Fire and Emergency Services Dinner on April 26, 2012 at the Washington Hilton, in Washington, D.C.

Established in 1998 and co-sponsored by CFSI and Motorola Solutions, the Mason Lankford Fire Service Leadership Award recognizes individuals who have been proactive at the local, state, or federal government levels to improve and advance fire/emergency services and life safety issues. Representing a cross section of the fire and emergency services, previous recipients have included chiefs, instructors, career and volunteer leaders, and public safety advocates.

Ms. Goodloe was recognized for her 40 years of leadership in advancing the fire service agenda at the local and state levels in Maryland. As the first woman ever elected President of the Montgomery County Volunteer Fire-Rescue Association, Ms. Goodloe is

currently serving her ninth term. During her tenure, she has successfully negotiated a number of agreements between the association, which represents 1,800 volunteers, and the Montgomery County government. In addition, she has advanced a number of key policies relating to training, physical standards, and drug and alcohol abuse testing.

At the state level, Ms. Goodloe has been active in engaging elected officials on matters of policy and legislation. She chaired the Recruitment and Retention Committee of the Maryland State Firemen's Association and, for her many years of service, was voted into the Association's Hall of Fame in 2007.

"Marcine Goodloe's record of achievements embodies the legacy of Mason Lankford," said CFSI President Bill Jenaway. "For 40 years, she has made the fire service her passion, her mission, and her journey. Much of her work has been done at the local level, yet her achievements have resonated well beyond the state of Maryland. She has been both a role model and a trailblazer, who has earned the respect and admiration of many government leaders at the local, state, and federal levels."

"Volunteer firefighting is one of our nation's oldest community services," said Karen Tandy, Senior Vice President of Public Affairs at Motorola Solutions. "Marcine Goodloe's longstanding dedication to the citizens of Montgomery County and the state of Maryland demonstrates the important role of first responders in times of emergency. Fire service members like Marcine are a powerful force multiplier, providing valuable support in the ongoing endeavor to protect our families and friends, and make our communities safer."

New and Improved Provider Cards Available

You spoke and we listened! Many providers have voiced concern over the wear occurring to the provider cards issued as part of the certification/licensure letter. In a continued effort to supply the best cards possible to our EMS providers, MIEMSS will modify the design of provider cards issued after July 1, 2012. The new cards will remain part of the certification/licensure letter, but will have a self-laminating feature to better protect the printed information.

Please make note of the instructions provided in your certification/licensure letter:

- 1. Peel card from liner slowly**
- 2. Place card face down in window**
- 3. Punch card through back of sheet**

Please contact the MIEMSS Office of Licensure and Certification at 410-706-3666 with any questions.

June is First Responders Month at Historic St. Mary's City

Police, fire, and EMS providers can enjoy free admission to the museum though June.

Calling all police, fire, and EMS providers! The folks at Historic St. Mary's City want to thank you for all you do for your communities by offering free admission to active first responders. Throughout the month of June, present your ID card on entry to enjoy a day exploring the site of Maryland's first capital at no charge. Accompanying family members receive \$1 off admission. Allow at least four hours to explore St. Mary's living history sites: the *Maryland Dove*, Town Center, Godiah Spray Tobacco Plantation, the Woodland Indian Hamlet, and St. John's Site Archaeology Museum. Through June 9, St. Mary's City living history sites will be open Tuesday through Saturday, 10 AM to 4 PM. Summer hours, beginning June 13, are Wednesday through Sunday, 10 AM to 4 PM. For more information, visit www.stmaryscity.org or e-mail info@stmaryscity.org.



National EMS Week - May 20 – 26, 2012

New Emergency Departments for Adults and Children Open at The Johns Hopkins Hospital and Health System in Baltimore

At 7:00 AM on April 29, 2012, new emergency departments opened to the public, police departments, ambulance crews, and other public safety agencies at The Johns Hopkins Hospital and Health System in East Baltimore. The new emergency facilities for adults and children are located adjacent to the front entrances of the hospital's new main building, Sheikh Zayed Tower, and children's hospital, Charlotte R. Bloomberg Children's Center, at 1800 Orleans Street. The emergency entrances are highly visible and promise to be easy to find and navigate for patients, caregivers, visitors, and taxis.

A new covered ambulance entrance, serving both the adult and pediatric emergency departments, is located on Wolfe Street between East Monument and Orleans Streets, and is directly across from the Jefferson Street intersection. This new entrance can accommodate up to 28 ambulances and features charging stations for crews to power up their equipment. The former ambulance and emergency entrances, which were located on East Monument Street between North Broadway and Wolfe Street, closed on the same date and at the same time that the new entrances opened.



In the new Emergency Departments, 6 rooms for trauma care and 99 for private exams, including ample accommodations for visiting family and friends, are ready for incoming patients.



The new Johns Hopkins Hospital Emergency Departments for adults and children opened for patients on April 29, 2012 at 7:00 AM. In this image, the Sheikh Zayed Tower is shown on the left. The new children's hospital, the Charlotte R. Bloomberg Children's Center, appears on the right.



EMS vehicles park under the new covered entrance to the Emergency Departments at The Johns Hopkins Hospital.

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(continued from page 2)

- **Will I be able to operate in a wide-band mode after my region has been converted to narrowband?** Operation in wideband mode after a region has been converted will resort in distorted audio to hospitals and low audio from hospitals. It will be a federal violation to operate in the wideband mode after January 1, 2013.
- **Will I be able to operate a non-narrowband radio after January 1, 2013?** After this date, it will be a violation of federal law to operate a radio in a non-narrowband mode. Violators risk fines and other penalties by the FCC.
- **What happens to the wideband channels in the radio after January 1, 2013?** MIEMSS will remove the old wideband channels during voluntary ambulance inspections and at other opportunities. Dedicated funding is not currently available for removing these channels from every radio.
- **We operate off a county 800 MHz radio system for EMS communications, so why do I need a UHF radio?** MIEMSS encourages all jurisdictions to maintain the UHF radio capability to provide for interoperability in all jurisdictions. In addition, radios purchased under the Radio Grant Program are

required to be installed in the patient care compartment. Currently, most 800 MHz radio systems are not installed in this area. Poor portable coverage is a problem for radios not installed in the patient care compartment.

- **Do I need to license, or need to update my license, for the change to narrowband?** While operating in Maryland on the MIEMSS UHF Radio Systems, users are covered under licenses held by the agency. MIEMSS is currently in the process of updating all licenses to support the narrowband transition. No action is needed on the part of the radio operator.

Central Maryland Emergency Response Partners Announce First Regional Hospital Mutual Aid Agreement

State, Local, and Private Officials Say Cooperation is Key

In a first-of-its-kind cooperative arrangement, central Maryland area hospitals have entered into an agreement to share resources during any type of natural or man-made disaster that may occur in the Baltimore region. The voluntary Baltimore Healthcare Facilities Regional Mutual Aid System's Memorandum of Understanding (MOU) agreement has formalized the process of collaborating in the event that one hospital becomes overwhelmed during a disaster. This agreement allows all participating hospitals to work together during an emergency to share staff, beds, equipment, and supplies. Hospitals within the Baltimore Metropolitan region, which includes Anne Arundel, Baltimore, Carroll, Harford, and Howard counties, and Baltimore City, are part of the first region in Maryland to complete such an agreement. Additional hospitals from Montgomery and Prince George's counties have also signed the MOU. The central Maryland agreement is the first step toward achieving a MOU among all Maryland hospitals. "This is a major accomplishment for our emergency responders," said Governor Martin O'Malley. "Cooperation among our first responders, hospitals, and health departments is critical during any type of disaster."

The Baltimore Healthcare Facilities Regional Mutual Aid System agreement was championed by The Johns Hopkins Hospital and Health System and the Region III Health and Medical Taskforce, a subcommittee of the Maryland Institute for Emergency Medical Services Systems (MIEMSS) Region III Emergency Medical Services (EMS) Advisory Council. This council is comprised of representatives from local health departments, hospitals, and emergency responders. These regional initiatives are supported by funds from the Hospital Preparedness Program (HPP), which is administered by the Department of Health and Mental Hygiene (DHMH). The HPP is federally funded by grants from the U.S. Department of Health and Human Services.

Maryland is susceptible to disasters, both natural and man-made, that could exceed the resources of an individual hospital facility. The possibility of a terrorist act in the Baltimore Metropolitan area must be considered because of its geographic proximity to government, military, and high profile public institutions. In the event of a local or regional disaster, the facilities that have signed the MOU will communicate with each other and offer assistance to other facilities in need. Such assistance may include, for example, transferring patients between facilities in the event of an emergency evacuation due to flooding.

Partnerships among the DHMH, Maryland Hospital Association (MHA), Maryland Emergency Management Agency (MEMA), Maryland Institute for Emergency Medical Services Systems (MIEMSS), and Baltimore Metropolitan Council (BMC) helped facilitate this major accomplishment for the region.

Participating hospitals include:

Anne Arundel Medical Center
 Baltimore Washington Medical Center
 Bon Secours Baltimore Health System
 Carroll Hospital Center
 MedStar Franklin Square Medical Center
 MedStar Good Samaritan Hospital
 Greater Baltimore Medical Center
 MedStar Harbor Hospital
 Harford Memorial Hospital
 Johns Hopkins Bayview Medical Center
 The Johns Hopkins Hospital and Health System
 Howard County General Hospital
 Kennedy Krieger Institute
 Kernan Orthopedics and Rehabilitation Hospital
 Maryland General Hospital
 Mercy Medical Center
 Mt. Washington Pediatric Hospital
 Northwest Hospital
 Sinai Hospital
 St. Agnes Hospital
 St. Joseph Medical Center
 Sheppard Pratt Hospital
 MedStar Union Memorial Hospital
 University of Maryland Medical Center
 Upper Chesapeake Medical Center

Montgomery County (MIEMSS Region V)

Holy Cross Hospital
 Suburban Hospital

Prince George's County (MIEMSS Region V)

Dimensions Health System (Laurel Regional Hospital and Prince George's Hospital Center)

Non-private hospital

Veteran's Administration



EMS Care 2012



Dr. Robert Bass, Executive Director of MIEMSS, updates the attendees at EMS Care 2012 with current EMS issues affecting the State. This year's conference was attended by approximately 300 participants. Planning is already underway for EMS Care 2013.



Teams from Calvert County, Charles County, and Ocean City competed in the first EMS Care Bowl at the Beach Contest at Seacrets Restaurant during the conference. Trivia questions included knowledge about the Maryland EMS Protocols as well as trauma and medical care. The Ocean City team was the big winner!

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Governor Martin O'Malley
Lt. Governor Anthony Brown

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