JAC Meeting – June 12, 2019

The Jurisdictional Advisory Committee Meeting was called to order by Chair, Christian Griffin. He welcomed everyone in attendance and asked for introductions of both those attending here in Baltimore as well as on the phone.

Members attending via conference line were asked to introduce themselves: David Chisholm, Washington County; Denise Hill, Cecil County; Dwayne Kitis, MIEMSS Region I; Chief Tim Mikules, Anne Arundel County; Zach Yerkie, Queen Anne’s County; Michael Cole, Frederick County; James Richardson, Calvert County; Barry Contee, Calvert County; Mike Cooney, MIEMSS Region V; James Matz, Baltimore City FD; Aaron Edwards, Annapolis City; David Coe, Carroll County; Bill Dousa, MSFA; Linda Dousa, Harford County; Chief James Brothers, Howard County.

Meeting Minutes from February 2019 were approved with the recommended change by Baltimore County.

OMD Report, Dr. Chizmar: Introduced Mark Bilger who is the new Ombudsman for MIEMSS. Medication shortages discussed, i.e. EpiPens. Announcements: The next PRC meeting is scheduled for July 10th at 9:30 am and the next eMeds Change Management meeting is scheduled for August 13th. A MIEMSS clarification memo regarding the 2019 *Maryland Medical Protocols for Emergency Medical Services Providers* was sent to all EMSOPs, medical directors, SOCALR, and clinicians on July 1st, 2019. Please make clinicians aware of the time error in the stroke protocol in the Abridged Pocket Version.

JAC members were asked to look at the EMS Plan 2020 Committee List that is being circulated around the room. Please sign up to participate on one or more of the 17 committees that fall under the EMS Plan 2020. You will be contacted regarding meetings by the Lead of these committees at a later date.

CMS: going to start reimbursing certain jurisdictions for ET3 care on scene or the transport to an alternative care destination. Aside from ET3 reimbursement, also working with other payers.

Dr. Chizmar displayed the Alternative Destination Protocol for 18 years of age and older, approved by the EMS Board. This does not include Priority 1 or Priority 2 patients. Included in the Alternative Destination Plan, jurisdictions may submit a plan to transport low-acuity patients to an alternative destination. The resources will be different by jurisdiction.

Stabilization and Crisis Centers will become bigger. In rural areas, may have a well engaged primary care physician. Requires 7500 transports. Dr. Chizmar asked for a show of hands as to how many in the room are interested and all expressed interest.

Mechanism to share facilities, prevent redundancy, identify places, talking to those places that may be able to take your transports. It is appropriate to start having local level talks. There is going to be a need for legislative work. Baltimore County, Rich Schenning asked if there has been a discussion with Patient First for example. Dr. Chizmar responded there has at a high level ad they are asking for a well laid out plan.

Michael O’Connell: Spoke on CHEMPACK and fireproofing of lockers. There are new emergency treatment guides for CHEMPACK Adult and Pediatric Nerve Agent Exposure now available on one sheet of paper, color-coded. Handouts were provided.
Sidik Mustafa: The Infectious Disease web page can now be found on the MIEMSS website. To date, 1000 cases of measles have been diagnosed in the country, five in the State of Maryland. MMR vaccine for those born before 1957.

Emergency Ops: The Veterans Administration will be conducting a full scale exercise on September 14, 2019 at BWI. The exercise storyline is a hurricane has struck North Carolina with severe infrastructure damage. Patients from damaged hospitals will be distributed to hospitals in non-affected areas. Air Guard will transport 30 patients into BWI where VA and MIEMSS will triage and determine the appropriate hospital and arrange transportation. For the drill, St. Agnes and Bon Secours will be used. To reflect reality, commercial ambulances will transport the NDMS patients.

Terrell Buckson (E&C): Currently in the BLS renewal cycle. There are still over 1000 clinicians with current certifications due to expire on June 30th. Consistent with COMAR Title 30, MIEMSS sends out an expiration reminder notice to clinicians within two months of the certification’s expiration date. Committee was asked to encourage clinicians to log on to miemsslicense.com to either submit a renewal application, if requirements have been met, or submit an extension application.

The licensure system affiliation process for new, or returning ALS clinicians has been changed. When ALS candidates submit for state licensure, he/she must complete a protocol review, and receive approval by the sponsoring jurisdiction. Once the candidate successfully completes the ALS protocol examination, affiliation verification will follow. This is a change that is supported by medical directors as it allows them to only sign off on a candidate once he/she has met the state’s requirements, and now eligible for credentialing.

Susanne Ogaitis-Jones (EMS-C): Susanne is MIEMSS’ child passenger safety and occupant protection coordinator who reminded JAC attendees of resources they can use for their communities to educate on car seat and seat belt use. Maryland has had several horrific car crashes in the last few months resulting in child fatalities; children were not buckled up or in their car seats. There are free flyers, brochures, posters and activity ideas/materials available. Additionally, public information officers or agency educators can obtain the “Child Passenger Safety Rapid Educational Response Kit.” This kit supplies materials ready to be personalized and released to the media after a local crash to educate the community on buckling up. Susanne contact information if you would like more information:
cps@miemss.org

The next JAC meeting is scheduled for August 14, 2019.