AGENDA
January 17, 2017

1. Call to Order
2. Approval of Minutes
3. Regional Medical Director’s Report
4. Pediatric Medical Director’s/EMS-C Report
5. EMS Board Report
6. SEMSAC/Regional Affairs Report
7. MIEMSS Report
8. Agency Reports (Circle “yes” on the roster if you want to make a report)
9. Old Business
10. New Business
11. Adjournment
REGION IV EMS ADVISORY COUNCIL
January 17, 2017
Minutes

Attendees: Scott Wheatley, Mark New, Barbara Steiner, Paul Massarelli, Michelle Lloyd, Doug Walters, Sgt. Mike Mann, Tom Chiccone, MD, Joseph Ciotola, MD, Alana Long, Olivia dorman, Andy Robertson, Anna Sierra, Pete Brelia, Falon Beck, Denise Hill, Dan Ochsenschlager, MD, Cyndy Wright-Johnson Steve White

The meeting was called to order by Scott Wheatley.

Approval of Minutes: A motion was made by Dr. Ochsenschlager to approve the November 2016 minutes as written, seconded by Denise Hill and passed.

Regional Medical Director’s Report: Dr. Chiccone: Protocol Review Committee - Movement from uncuffed to cuffed pediatric endotracheal tubes. The actual tube cuffs may be elongated to be less traumatic in pediatrics. Fentanyl as primary medication for pediatrics. So far this has not been an issue. No crew has come under attack to steal Fentanyl. Working on ventilator protocol changes. • Dr. Urutia gave a presentation that was passed for research protocol in Baltimore. High risk large vessel strokes. Protocol that passed is a transportation protocol to take patient to appropriate endovascular intervention center. Still needs to go to EMS Board. Dr. Seaman gave an update - to be discussed at next meeting - high performance CPR and streamlining emergency medical dispatch to try to decrease time it takes to get the hands on patient's chest. Simultaneously - airway committee for suggestions of multiple levels of airway intervention. • Elite platform will not meet deadline.

Anna asked about consequences of not being NEMSIS compliant with regard to federal grants that are available or lack thereof. Dr. Chiccone mentioned loss of federal funding with regard to Image Trend Elite Program. Doug Walters stated that Delaware and Virginia have Elite and is running efficiently and he does receive reports from them. John Barto stated that this needs to be addressed by Dr. Alcorta and Jason Cantera. Dr. Ciotola stated that QA County is waiting on Image Trend regarding PCR of MIH.

Pediatric Medical Director’s/EMSC Report: Cyndy Wright-Johnson - Discussed upcoming PEMAC meetings. Highlighted November 2017 meeting which will discuss EMS for Children Research Update. May 3, at ENA by the Bay, they will be rolling out - Emergency Ready Families. Goal is for families to understand what is reasonable/unreasonable when they have a child that needs transportation in an ambulance. International Safe Kids Conference will be in Baltimore this year. New Federal EMS for Children Guidelines were discussed and new performance measures. Working on high performance CPR, termination of resuscitation, ventilation. Pediatric binder protocol was approved for 2017 rollout.

SEMSAC/Regional Affairs Report: Scott Hass was not present. John Barto - Pat Gainor, MIEMSS, sent out a request - SEMSAC is looking for representatives from the volunteer field providers. Need a couple of names that would be willing to join Scott on SEMSAC. John has all necessary paperwork. No later than January 30, 2017.
EMS Board Report:  Mary Alice Vanhoy was not present.

MIEMSS Report:  Mark New – Dr. Rick Alcorta announced at protocol review committee and regional medical directors meeting that there was a glitch in the manpower system, especially regarding EMTs renewing in December 2016. The small glitch turned out to be about 2500 people. All 2500 have been manually processed. Still finding some providers that have not received a card, but have completed all criteria for recertification. Finding that email addresses, street addresses, etc. have not been updated. Reciprocity is group that they are having the most problems with tracking. If they are in you jurisdiction, please do follow up to make sure they are in the system. Switch for on-line affiliation documentation has not been thrown yet. Dr. Chiccone said that as a medical director, all organizations under his jurisdiction are in his que. Once the switch is thrown, he will be able to see everyone under his medical direction.

Question: Scott Wheatley - Con-ed - Can roster still be submitted for con-ed? Answer: Some discussion on how this will be done going forward. All administrators/instructors should go in to see if they can get all of the information. Make sure your personnel are using the new system.

That is the only way they will find all of the glitches. Verbage is different, ie. instructor is listed as trainer. Question: Affiliation lists - What is easiest way to clean up the list? Answer: Easiest is to call Michelle Bell. She is the main person to do this. Question: As a system administrator - Will be able to see everyones training, the way we used to? Answer: Not until the glitch that allows administrators to add and delete information without going through MIEMSS is corrected.

John Barto, Region IV – The Council meetings will be moving back to 605 Port Street for the March 2017 meeting. John mentioned the need go to a conference line availability for Council Meetings. There is now a requirement that all Base Station Coordinators and Base Station Medical Directors attend at least half of the Council meetings. MIEMSS will again be getting SHGP grant money. #1 priority is Active Assailant Programs.

Jurisdictional Reports:  Michelle Lloyd - DRHMAG - Kristin is no longer coordinator for Region IV. They have received funding. Once dates for upcoming classes are confirmed, will send out notice. Reviewed upcoming classes and drills. Working with MEMA for tabletop to strengthen county plans in Wicomico, Worcester and Somerset.

Old Business:  Dr. Chiccone - By now all jurisdictional medical directors should have received notice of 2017 Medical Director's Symposium.

New Business:  Anna Sierra - Rural Health Working Group update - Met 3 times. Interesting meeting - presentations general global payment models we work under. Routine address incentives. EMS is still largely considered as a mechanism to move patient to hospital. There is no EMS representative on HSCRC or Maryland Health Care Commission or Community Health Care Commission. It is of interest to EMS providers that EMS lobby to be placed on at least one, if not all three, of these commissions. The critical piece - This process decapitated a waiver and does not really have any way of compensating rural health systems. The money is going to the hospitals. EMS is critical part of population health and is being ignored. Dr. Ciotola also
commented on this issue. This Council needs to be up to date on what this Rural Health Care Study is recommending. These three commissions set the standard on how health care is delivered in the State of Maryland. Dr. Ciotola stated that next meeting March 6th, for Rural Health Committee, in Annapolis. Because of the fact that Dr. Seaman is no longer at MIEMSS, there is no longer senior executive representation at these meetings.

Scott Wheatley - The Council worked on an alert package from Region IV. Last we heard MIEMSS had a Diversion Group to study this issue...that was about nine months ago. John Barto stated that as of today he is not even sure who is on the group or if they have even met. MIEMSS Regional Administrators have been called together to meet on this issue.

Discussion included concerns about hospitals on red alert for lengthy periods of time. Ambulances transporting outside their normal areas on a regular basis. Transporting to out of state hospitals.

Scott asked if he had the backing of the Council to writing a letter addressing the alert status. A motion was made by Anna Sierra and seconded by Pete Brelia. John Barto suggested that we reconvene the Region IV Alert Committee to continue updating the alert document.

Sgt. Mike Mann, MSP/AV - Trying to capture information on transports for call-backs for additional follow up to improve the system and build relationships.

**Adjournment:** The meeting was adjourned at 3:30 p.m.