



State of Maryland

**Maryland
Institute for
Emergency Medical
Services Systems**

653 West Pratt Street
Baltimore, Maryland
21201-1536

Larry Hogan
Governor

Donald L. DeVries, Jr., Esq.
Chairman
Emergency Medical
Services Board

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Statewide EMS Advisory Council (SEMSAC)

AGENDA

November 1, 2018

1:00pm – 3:00pm

- I. Approval of the October 4, 2018 meeting minutes
- II. MIEMSS Report – Ms. Gainer
- III. SEMSAC Chair Report – Dr. Kalish
- IV. MSFA Update
- V. MSPAC Update – Captain McMinn
- VI. National Study Center – Dr. Kozar
- VII. Committee Reports
 - ALS – Dr. Fillmore
 - BLS – No Report
 - EMD – No Report
 - Regional Affairs – Mr. Smothers
- VIII. Old Business
- IX. New Business
 - 2019 Maryland Medical Protocols proposed changes – INFORMATION - Dr. Chizmar & Mr. Reynolds
- X. Election of SEMSAC Officers
 - Vice Chairperson
 - Chairperson
- XI. Adjournment



State EMS Advisory Council (SEMSAC)

October 4, 2018

Meeting Minutes

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SEMSAC Members Present: Murray Kalish, MD, Chairman; Karen Doyle, Vice Chair (phone); Michael Cox; Eric Smothers; John Filer; Keith McMinn; Jason Day; Melissa Meyers; Wayne Tiemersma (phone); Roger Simonds; Linda Dousa; Lisa Tenney; Rosemary Kozar; Scott Haas; Jay Fowler (phone); Jennifer Anders; Jeffrey Fillmore, MD; Michael DeRuggiero; Wade Gaasch, MD; Kathleen Grote.

Members Absent: Brian Frankel; Karen Vogel; Bobby Pattison; Tim Burns; Jack Markey; Wayne Dyott; Jonathan Lerner.

MFRI: Pat Marlatt

MSPAC: Mr. Wood

Others: Mr. Dousa

OAG: Mr. Magee

MIEMSS: Pat Gainer; Anna Aycock; Carole Mays; Phil Hurlock; Tim Chizmar; Terrell Buckson; Lisa Myers; Jim Brown; Leandrea Gilliam; John Barto.

Chairman Kalish called the meeting to order at 1:01 pm.

Dr. Kalish called for the approval of the minutes, with attendance corrections, from the October 4, 2018 meeting.

ACTION: A motion was made by Mr. Simonds, seconded by Ms. Meyers and unanimously agreed upon to approve the minutes of the October 4, 2018, meeting with attendance corrections.

MIEMSS Report

A copy of the MIEMSS Report was distributed.

A copy of the 25th edition of the MIEMSS Annual Report was distributed.

Opioid Items. The Opioid Operational Command Center will provide another \$200,000 in grant funds for MIEMSS to pass through to EMSOPs to offset unrecoverable naloxone costs.

Ms. Gainer said that MIEMSS is in compliance with the data reporting requirements of HB359, which became law earlier this year, requiring MIEMSS to report drug overdose and survival data to the Washington/Baltimore High Intensity Drug Trafficking Area Overdose Detection Mapping Application (ODMAP).

MIEMSS is in the process of compiling a special edition of the EMS Newsletter focusing on Opioid issues.

Trauma Physicians Fund. Ms. Gainer reported that the Trauma Physicians Fund Report, released recently, shows that the Fund has a 3-million-dollar surplus.

Harford Memorial Freestanding Medical. Ms. Gainer said that MIEMSS had been advised the original site at Bulle Rock for the Harford Memorial Freestanding Medical facility which the

Board approved on October 10, 2017, is no longer viable. The proposed new site is within five (5) miles of the original site.

UM Shore Medical Center at Dorchester – Ms. Gainer said that, at its October meeting, the EMS Board had determined that the UM Shore Medical Center at Dorchester Conversion to a Freestanding Medical Center would maintain adequate and appropriate delivery of emergency care within the statewide emergency medical system.

UM Laurel Regional Hospital – Ms. Gainer said that UM Laurel Regional Hospital’s conversion to a Freestanding Medical Center, which was approved by the EMS Board in July 2018, is scheduled for January 1, 2019.

Conferences

Ms. Gainer said that the Base Station Conference held in October was attended by all but one hospital. The National Stroke Conference, also held in October, had over 600 participants from Maryland and surrounding states.

Elite Upgrade. MIEMSS is actively working with the remaining jurisdictions (Baltimore City, Carroll and Howard Counties) and anticipates completing the Elite upgrade early in calendar year 2019.

Regulations. Hospital Programs and the Stroke QIC are currently working on updating the Primary Stroke and Burn Center Regulations along with developing a proposal for Acute Stroke Ready regulations. Pediatric Trauma, Base Station and SOCALR regulations will be updated in 2019.

Active Assailant. Ms. Gainer said state agencies and schools are working on prevention strategies. An Active Assailant Conference is scheduled for February 2019 in Annapolis.

SB 682. MIEMSS and the Maryland Health Care Commission (MHCC) continue to work with other named state partners on the report to the Legislature on the potential of EMS compensation for mobile integrated health, treat and release, and alternate destination as specified in SB 682.

Ms. Gainer welcomed Dr. Chizmar on his first day as State EMS Medical Director. Dr. Chizmar thanked everyone for their warm welcome.

SEMSAC Chairman’s Report

Dr. Kalish circulated the SEMSAC Committee list for sign-up.

Dr. Kalish reported that at the October EMS Board meeting, the EMS Board approved the following: Hagerstown Community College as an ALS education program for a five-year designation period; and Johns Hopkins Bayview as a Level I Trauma Center for a one-year provisional designation period.

MSFA

Ms. Dousa said that the next MSFA Executive Committee meeting is scheduled to be held December 1st and 2nd, 2018 at the Snow Hill Volunteer Fire Company. She added that President Blair has set up taskforce to address EMT testing.

Mr. Smothers said that the MSFA EMS Committee discussed issues surrounding the dwindling of volunteers throughout the state including the retention of EMS providers, testing site availability and the addition of National Registry testing sites. He added that, after MFRI instruction, EMT students have 2 years to take the National Registry test. Only 50% of the students follow through with taking the test with only 18% of students availing themselves to the MFRI Platinum test.

MSPAC Update

Captain McMinn welcomed Dr. Chizmar.

Captain McMinn said that MSPAC is experiencing manpower challenges. Currently, there are 14 pilot vacancies plus 6 pilots currently on military deployment. There are 5 paramedics in the current Trooper class and 17 paramedic applications for the next Trooper class.

At this time, the Cumberland and Easton Sections are out of service on overnight shifts during weekdays; they will be staffed on weekdays and 24/7 on weekends. SYSCOM Duty Officers have protocols in place to use commercial services as back-up to MSP helicopters. At this time, MSP helicopters have covered all calls.

Mr. DeRuggiero asked what is being done to reduce pilot fatigue. Captain McMinn said that MSPAC's policies regarding pilot fatigue exceed what is required under Part 135.

Mr. Haas asked if the jurisdictions would be notified of out of service section times. Captain McMinn said that since there is a protocol in place for use of commercial service if needed, providers should request helicopter services as needed. When a helicopter in one section is unavailable, MSPAC is able to provide helicopter coverage from other sections.

A lengthy discussion regarding pilot safety, helicopter ETA times and overtime issues for all first responders ensued.

National Study Center (NSC)

Dr. Kozar said that the NSC continues to work with MIEMSS and College Park on transportation data for Crash Injury Research.

Committee Reports

Regional Affairs.

Mr. Smothers said that the Regional Affairs Committee continues to work on the State Highway grants. The MIEMSS Regional Administrators are reaching out to the jurisdictions that still need to submit paperwork.

Securing additional monies, basic and consistent pricing for equipment and changes in distribution for the 50/50 grants was discussed at length.

Old Business – N/A

New Business

2019 Maryland Medical Protocols proposed changes.

A copy of the proposed changes was distributed.

Dr. Chizmar gave an overview of the proposed protocol changes for to include:

- **Adult Tachycardia:** The algorithm has been significantly revised, including the removal of medical consultation prior to the administration of diltiazem and the addition of blood pressure parameters.
- **DNR/MOLST:** The list of acceptable procedures for DNR and MOLST B patients has been expanded to include the use of Magill forceps for obstructed airways and capnography.
- **Fentanyl:** The use of fentanyl has moved to the general patient care section and morphine has moved to an optional supplemental protocol. The preferred route of administration for fentanyl will be intranasal.
- **Needle Decompression:** The flutter valve will be an optional piece of equipment. The preferred location for needle decompression will be moved from the mid-clavicular line to the mid-axillary line.

- **Medical Consultation Requirement:** Changes have been made to the consult requirement for Priority 2 patients. The decision of hospital notification versus medical consultation will be based on the need for procedures or medication that require physician approval.
- **Stroke:** The last known well time window has been changed from 3.5 hours to 20 hours. EMS providers will also be required to relay the last known well time to the hospital with the Stroke Alert, which aligns the Maryland Medical Protocols with the latest science regarding care for stroke patients. A new prehospital stroke assessment for the detection of posterior circulation stroke has been added, which employs the BE-FAST mnemonic.
- **Tissue Donation:** Contact information for Living Legacy and Washington Regional Transplant Community has been added for reference.
- **Trauma Arrest:** The use of epinephrine for ADULT patients in traumatic arrest has been discontinued.

SEMSAC: Election of Officers

Paper ballots for Chairperson and Vice Chairperson were distributed.

Chairman Kalish asked Mr. Simonds to take over the meeting during the election of officers.

Ms. Goff said that there were two nominees for Chairperson, Dr. Kalish and Mr. Haas, with one nominee for Vice Chairperson, Ms. Dole. Ms. Goff asked if there were any nominees from the floor; hearing none, Ms. Goff requested if the Vice Chair could be voted on without written ballot since there was only one nominee. Chairman Kalish called for a vote for Vice Chair of SEMSAC.

ACTION: SEMSAC voted for Ms. Doyle as Vice Chairperson for calendar year 2019 by voice vote. There were no dissents.

Ms. Goff collected the paper ballots for the Chairperson. Mr. Simonds oversaw the counting of the votes. Dr. Kalish received the majority of votes and was elected Chairperson for calendar year 2019.

Chairman Kalish announced that SEMSAC would be going into closed session. He asked for all MIEMSS staff and guests to leave the room.

Assistant Attorney General Magee advised Chairman Kalish that the Maryland Open Meetings Act required prior notice and a statement of the reasons for closing the meeting before a public body could adjourn to closed session.

Chairman Kalish said he disagreed with Mr. Magee's assessment and adjourned to closed session against legal advice.