The meeting was called to order at 1:05 p.m. by Jim Scheulen. The meeting Chair requested a moment of silence be observed in remembrance of the victims of the Trooper 2 crash.

Because there was not a quorum, the September 4, 2008 minutes were not voted on. They will be submitted for a vote at the next meeting.

**National Study Center**- Chris Handley
- NSC has two grant submissions being prepared.
- NSC has a new project underway in Southern Maryland that will analyze teenage drivers utilizing in car video.
BLS Committee-Pete Fiackos

- The lower extremity instructor toolkit is scheduled for a peer review Friday October 3, 2008. The peer review will include BLS & ALS Instructors.
- The BLS Committee is updating the EMT recertification packet.

ALS Committee-Scott Haas

- The ALS committee did not meet in September.
- An ALS funding agreement has been reached and returned.
- The simulation technology committee will provide a final report of recommendations at the October meeting. It has been reported that simulation technology is expensive and requires ongoing maintenance and repairs.
- There was discussion among SEMSAC members about existing simulation labs at UMMS and JHU providing input to the committee on setting up a simulation program.

EMD Committee-Chad Packard

- The EMD committee held its third meeting September 29, 2008.
- The committee is forming By-Laws to be presented for review by SEMSAC at the next meeting.
- The committee is discussing the development of an in-state training network to reduce out of state training expenses.

Regional Affairs-Michael FX O’Connell

- Regional Affairs did not meet today.
- Grants have gone out to the regions.
- DHMH bioterrorism grant still has not been funded. MIEMSS is meeting to discuss today.

Old Business

- Chad Packard gave an updated EMS Provider Status Report that indicates there is significant growth in the number of EMS providers in Maryland.
- John Young gave an update on the status of proposed designation fees for trauma and specialty centers not associated with site visit costs. The proposed fee per five year cycle would be $2,500 per specialty center. There was brief discussion and a request that consideration be given to hospitals that have multiple designations. More information will be provided as the proposal continues to be developed.

New Business

- Jim Scheulen reported that the Maryland Health Care Commission has formed an Emergency Department Performance Measures Technical Advisory Committee that has met several times to look at quality measures for ED utilization. The Centers for Medicare and Medicaid Services (CMS) is going to be proposing mandatory measures in the near future and has requested a National Quality
Forums to propose reasonable measures for CMS to consider. The NQF has recommended 12 measures that would be reasonable for CMS to consider such as throughput times and clinical quality measures. Of the 12 measures NQF recommended to CMS, the MHCC ED Performance Measures TAC has chosen 4 to pilot at MD hospitals for ease of collection. Several MD hospitals will be asked to voluntarily collect the data to submit to the MHCC committee in the upcoming months.

Executive Director’s Report—Dr. Bass

Dr. Bass gave a general overview of the events related to the September 28, 2008 crash of Trooper 2 and indicated a decision to transport patients to a trauma center by helicopter appears consistent with the protocol relating to mechanism of injury, in this case a 12 to 18 inch intrusion into the passenger compartment, and a drive time to a trauma center of over 30 minutes, in this case 48 minutes. Weather conditions appear to have played a significant role in the crash however an investigation is being conducted by NTSB and a preliminary report will not be available for a week or more. In the mean time, MIEMSS will undertake a case review next week with the goal to help Waldorf and other jurisdictions with making future decisions about air transport for mechanism of injury patients. Additionally, a panel of national experts will be formed to look at this incident and consider the existing protocol for transporting mechanism of injury patients by air to trauma centers. MIEMSS will keep SEMSAC informed of the report findings and panel recommendations as they become available.

The meeting adjourned at 1:50 p.m.