

SEMSAC Meeting Minutes
April 7, 2011

Members Present: M. Kalish; J. Markey; J. Fillmore; J. Fowler; W. Gaasch; K. Grote; W. Bethea; S. Haas; M. Gibbons; M. Muth; M. Meyers; R. Lipps; J. Scheulen; R. Simonds; C. Mays; L. Dousa; M. DeRuggiero; J. Brown via conference call; K. May via conference call; G. Delaplaine via conference call.

Members Absent: K. Doyle; D. Crane; S. Edwards; S. Henry; W. Baxter; E. Mowbray; A. Walker; R. Berg; K. Yamamoto.

MIEMSS: R. Bass; L. Myers; P. Hurlock; C. Hyzer; M. Beachley; J. Barto; J. Brown; L. Hawthorne; J. New; B. Contee; B. Slack; D. Floccare; J. Kelly; R. Alcorta; J. Darchicourt.

OAG: E.F. Magee

STC: R. Hartsock; J. Radcliffe

MSFA: J. Denver

Region III: M. O'Connell

The meeting was called to order by Dr. Kalish at 1:04 pm

The March 3, 2011 SEMSAC meeting minutes were approved.

Executive Director's Report-Dr. Bass

- The EMS Care Conference held in Ocean City, Maryland April 2-3, 2011 was well attended. We have received good feedback on the presentations and speakers. Thanks to MIEMSS staff for all their hard work.
- The Cardiac Interventional Centers press release and memo to the EMS community was sent out on April 1, 2011 and is available on the MIEMSS webpage. Three out of state hospitals have entered into Memoranda of Understanding. The regional councils have been very engaged in planning and monitoring within their regions.
- MSFA has expressed concern regarding untimely completion of protocol updates by some EMS providers. To address those concerns MIEMSS is sending reminders advising that 2011 protocol updates must be completed by June 1, 2011.
- Phase I of the eMEDS pilot is completed and Phase II of the eMEDS pilot is about to begin. Funding from State Highway Administration is available to jurisdictions who are interested for Computer Aided Dispatch interface with eMEDS.
- The new HC Standard dashboard has been implemented.
- Yellow Alerts have continued to decrease as reported to SEMSAC last month. EMS ReRoute utilization and Return to Service times also appear to be slightly decreased indicating hospitals are processing EMS patients more efficiently. MIEMSS will continue to monitor.

- Dave Strickland of the National Highway Traffic Safety Office recently visited MIEMSS and Shock Trauma. Mr. Strickland has been a very strong supporter of EMS.
- HB 215 passed. The bill changes the nomenclature for Maryland EMS providers to be consistent with national terminology. It also recognizes law enforcement officers who have completed: 1) CPR/AED training approved by a nationally recognized program; 2) training that meets national guidelines for emergency medical responders; or 3) training for law enforcement officers that has been approved by the EMS Board as individuals who can provide emergency medical care under certain circumstances without being certified as an EMS provider.
- The Medical Orders for Life Sustaining Treatment “MOLST” bill passed. MOLST is a medical order form for orders related to life-sustaining treatments, including code status. The form standardizes these orders across the health care system. MOLST will combine and replace the current DNR order form and the Instructions for Life-Sustaining Treatments form that is currently used in nursing homes, streamlining the process for patients documenting their wishes for end of life care. MOLST provides greater options for patients wishing to identify treatment options.
- The Maryland EMS Operations Fund (MEMSOF) continues to face challenges keeping up with inflation. The House EMS Workgroup met several times to discuss possible short-term and long-term solutions. For FY 2012 and 2013, revenues up to a specified amount collected from the moving violation surcharge will first be distributed to the Volunteer Company Assistance Fund after which the remaining funds will be distributed to MEMSOF. Beginning in FY 2014 any amount collected from the surcharge after the distribution to the Charles Riley Fire and EMS Tuition Reimbursement Program will be credited to MEMSOF. Long-term solutions are anticipated to include diversification of revenue sources.
- The deadline for nominations for the EMS Star of Life Awards to be presented during EMS week is April 8, 2011.

SEMSAC Chairman’s Report-Dr. Kalish

Dr. Kalish reported on the February and March 2011 EMS Board Meeting Action items as follows:

February 8, 2011 EMS Board Action Items

1. The EMS Board voted to approve designation of the following Cardiac Interventional Centers for a period of three (3) years:

- Baltimore Washington Medical Center
- Shady Grove Adventist Hospital
- Upper Chesapeake Medical Center
- University of Maryland Medical Center
- Southern Maryland Hospital
- Western Maryland Regional Medical Center
- St. Agnes Hospital
- Suburban Hospital
- Howard County General Hospital
- Carroll Hospital Center

- St. Joseph Medical Center
- Frederick Memorial Hospital
- Peninsula Regional Medical Center
- Anne Arundel Medical Center

2. The EMS Board voted to approve the designation of the Johns Hopkins Pediatric Trauma Center for a period of five (5) years.

3. The EMS Board voted to approve the designation of the following Base Stations as follows:

Five-Year Designation

- Civista Medical Center
- Greater Baltimore Medical Center
- Harbor Hospital
- Montgomery General
- Prince George's Hospital
- Shady Grove Adventist Hospital
- University of Maryland
- Washington Adventist Hospital

Two-Year Designation

- Johns Hopkins Bayview Medical Center

One-Year Designation

- Good Samaritan Hospital
- Howard County General Hospital

4. The EMS Board voted to approve the Howard County Fire Department's ALS Education Program for a period of five (5) years.

March 8, 2011 EMS Board Action Items

1. Approved bylaws of the Jurisdictional Advisory Committee

2. Approved additional funding needs of the entities supported by the EMS Operations Fund.

3. EMS Educational Program Approval:

- Lifestar Ambulance Inc. (Salisbury) for a five-year approval for EMS Refresher Program.
- Prince George's Community College ALS Education Program for remainder of a five-year period (until April 15, 2015).

4. The EMS Board voted to approve designation of the following Cardiac Interventional Centers for a period of three (3) years:

- Holy Cross Hospital
- Johns Hopkins Bayview Medical Center
- Sinai Hospital of Baltimore
- Union Memorial Hospital

- Washington Adventist Hospital
- The Johns Hopkins Hospital
- Meritus Medical Center
- Prince George's Medical Center
- Franklin Square Hospital Center

National Study Center-Dr. Faden

- Several grant applications have been submitted and several grants have been renewed.
- NSC is working with MIEMSS on eMEDS and the development of a data dictionary.
- NSC is collaborating on an influenza surge plan with several agencies.
- Opportunities for EMS providers interested in research do not currently exist, however providers may like to attend a regular meeting held on Tuesdays at NSC. Please contact Dr. Faden if interested.
- A presentation at EMS Care 2012 on EMS provider research was suggested for consideration.

Committee Reports

BLS-Rae Oliveira

- The EMTB Practical evaluation form is now available for the 2010 AHA CPR Standards. The form is available on the MIEMSS webpage in the instructor's corner.
- A Skills Competency Verification Update is now available.
- Anne Arundel Community College has conducted back-to-back pilots of a new program to meet the new education standards. MFRI is scheduled to pilot the program in the Fall.
- The next BLS meeting is April 15, 2011.

ALS-no report

EMD-no report

EMS Education Standards Operations-no report

Regional Affairs-no report

Old Business

Comprehensive Stroke Regulations-Mary Beachley

A draft of comprehensive stroke regulations was distributed for information. The regulations will also be presented to the EMS Board for information in April and then in May for approval for publication in the *Maryland Register* for public comment. The regulations have been widely circulated and have achieved a high level of consensus. A limited number of comprehensive centers would be designated and would be available for patients needing more advanced care than a primary stroke center can provide. Prehospital triage decisions will not be impacted.

Early Helicopter Activation Update-Dr. Floccare

A review of the definition and purpose of early helicopter activation was given. The ability for a central alarm center to request helicopter dispatch prior to EMS arrival is not new, but in July 2010 it was explicitly added to Maryland Medical Protocol. A workgroup with statewide representation developed a guidance

document with criteria that 911 center dispatchers can use to request early activation. This guidance was approved by the EMS Board and distributed in November 2010.

A review of trends from January 2010 for total requests, total number of aircraft launched and total number of transports shows no large increase since the implementation of the protocols and guidance document.

The process is monitored using the Helicopter Utilization Database and reviews are conducted every 12 hours. A LMS module is being developed for the MIEMSS webpage. Any jurisdiction may choose to utilize Early Helicopter Activation, but thus far the utilization is highest in areas farthest away from a trauma center.

A recommendation was made to use the term "communication center" in lieu of "PSAP".

The Region III Council previously expressed concerns about not having an opportunity to comment on the 911 guidance document prior to its approval and implementation. Dr. Floccare stated that it was believed that the regions had had sufficient opportunity for review and to provide feedback. Dr. Bass indicated in the future MIEMSS will be more diligent in ensuring that the regional councils are sufficiently aware and engaged on such issues.

New Business

2011 Ventilator Protocol Revision-ACTION-Dr. Alcorta

Changes to the 2011 Ventilator Protocols were approved without questions or discussion to go the EMS Board.

COMAR Title 30 Amendments-Fremont Magee

An overview of several regulation amendments was presented for information to include:

- Update of documents for Incorporation for Reference
- Changes to hospital designation regulations for initial verification and reverification
- Changes to process for approval of EMS Educational Programs

Sports medicine Physician Mark Lovell is lecturing at 4 pm today on comprehensive treatment of concussive injuries for anyone who may be interested in attending..

The meeting adjourned at 1:55 p.m.