State EMS Advisory Council (SEMSAC)  
May 2, 2013  
Corrected November 7, 2013  
Meeting Minutes

SEMSAC Members Present: Murray Kalish, MD, Chair, Roland Berg, Vice Chair; Karen Doyle; Eric Smothers; Ron Hassen for Steve Edwards, Jeffrey Fillmore, MD; Wade Gaasch, MD; Will Bethea; Scott Haas; Frank Lioi; Marian Muth; Tom Gianni; Wayne Tiemersma; Lisa Tenney (by phone); Linda Dousa; Kathryn Yamamoto, MD; Michael DeRuggiero; Nathaniel McQuay, MD; Alan Faden, MD; James Fowler; Melissa Meyers (by phone);

Members Absent: Elliott Ganson; Kathleen Grote; Joan Fortney; Allen Walker, MD; Jim Scheulen; Joe Brown; Jack Markey; Roger Simonds.

Others Present: Patrick King; Christopher Lovejoy; David Keller.

MIEMSS: Robert Bass, MD; Lisa Myers; Carole Mays; Richard Alcorta, MD; Dwayne Kitis; Dave Balthis; Sherry Alban; Phil Hurlock; John New; Aleithea Warmack; Chris Hyzer; Rae Oliveira

OAG: Fremont Magee.

Dr. Kalish opened the meeting at 1:05 pm.

Action: Moved (Mr. Berg), seconded (Mr. McQuay), passed unanimously to approve the minutes of the March 7, 2013 meeting of SEMSAC.

MIEMSS Executive Director’s Report: Dr. Bass reported that all EMS jurisdictions but one will be participating in eMEDS by the Fall of 2013. Applications for the CAD interface grant must be submitted before June 30, 2013 however a request for an extension until September 30, 2013 has been submitted to MDOT by MIEMSS.

EMS week is May 19-25, 2013 and The Stars of Life Awards ceremony will be held on May 21, 2013 at the Senate Office Building in Annapolis. Dr. Bass encouraged everyone to attend.

The Out of Hospital Cardiac Arrest Committee is focusing on several large initiatives including working with local school boards to provide CPR and AED training to students in school and holding a mass CPR training event in the Fall of 2013.
SEMSAC Chairman’s Report: Dr. Kalish reported that at the last EMS Board meeting the Board approved: an MOU renewing the designation of Christiana Care Health Services located in Newark, Delaware as an Out of State Adult Trauma Center; the Garrett College Paramedic Education Program for a period of five (5) years; the Prince George’s County Fire and Emergency Medical Services Department ALS and BLS EMS Refresher Education Program for a period of five (5) years; and the designation of the Bowie Health Center as a Freestanding Medical Facility.

Legislative Update: Dr. Bass reviewed a handout summarizing various bills of interest considered by the Maryland General Assembly during the 2013 Legislative session and highlighted some of the items. Of special interest, HB 1515, which passed, increases the vehicle surcharge fee for the MEMSOF by $3.50. The addition to the surcharge is projected to increase revenues to the MEMSOF by about $1.4 million in FY 2013 and by about $17 million annually thereafter. Uncodified language in the bill indicates the intent of the Legislature to include appropriations in upcoming budgets to: increase the Amoss Fund; fund the upgrade and maintenance of the MIEMSS communications system; hire 20 additional MPSAC pilots and increase salaries for MSPAC pilots and maintenance technicians; purchase high temperature tiles for MFRI and increase MFRI field instructor salaries; and increase the annual appropriation to the Shock Trauma Center.

Dr. Bass also highlighted the following bills from the handout:

**PASSED**

HB 225 (SB 273) – Veterans Full Employment Act of 2013. (July 1) Requires the EMS Board to credit any training and education provided by the military and completed by a service member toward any training/education requirements for licensure or certification if the training/education is determined by the Board to be (1) substantially equivalent to the training/education required by the Board and (2) not otherwise contrary to any other licensing requirement. MIEMSS is required to submit a preliminary report (due January 2014) and a final report (due January 2015) regarding the approvals of service members’ applications; application processing times; efforts to assist service members in identifying programs that offer required training/education; and recommendations to improve MIEMSS’ ability to meet the needs of service members.

HB 364 (SB 385) – Swimming Pools – Automated External Defibrillator Programs (Connor’s Law). (October 1) Requires counties and municipalities that own or operate swimming pools to develop and implement an AED Program that ensures that an AED is provided on-site and an individual trained in its operation and use is present at each pool.
swimming pool. MIEMSS and DHMH must jointly adopt regulations that assist counties / municipalities in carrying out the bill’s provisions.

HB 778 (SB 899) – Local Government – Fire, Rescue, and Ambulance Funds – Distribution. (July 1) Requires each county to distribute a minimum percentage of funds received from the Amoss Fund to volunteer fire, rescue and ambulance companies. The percentage must be equal to the same total percentage of funds distributed by each county to volunteer fire, rescue, and ambulance companies from the fund in FY 2011 or at least 51% of the allocation received by each county under the current distribution methodology, whichever is great. The bill also creates a Workgroup to study the adequacy of laws / policies related to the distribution of money to volunteer and career companies, recommend options for the distribution of state funds to volunteer and career fire companies, and to submit a final report on December 1, 2013.

SB 610 (HB 890) – Health – Overdose Response Program – Establishment. (October 1) Establishes an Overdose Response Program at DHMH to authorize certain individuals who have completed a training program to administer naloxone to an individual experiencing or believed to be experiencing an opioid overdose when medical services are not immediately available.

SB 815 – Public and Nonpublic Schools – Epinephrine Availability and Use – Policy. (July 1) Authorizes nonpublic schools to establish a policy authorizing school personnel to administer auto-injectable epinephrine to a student determined / perceived to be in anaphylaxis.

FAILED

HB 322 (SB 222) – Motor Vehicle Administration – Yellow Dot Program. Would have established a “Yellow Dot Program” in the Motor Vehicle Administration to provide a means of alerting emergency responders to health and other information that could be used in the event that an individual is involved in a motor vehicle emergency and unable to communicate.

SB 213 – Emergency Medical Services – Automated External Defibrillator Program – Immunity from Liability. Would have specifically included provisions in Good Samaritan law for immunity from civil liability for individuals that use an AED on a victim of sudden cardiac arrest if the assistance is provided in a reasonably prudent manner, and the individual relinquishes care of the victim when someone licensed or certified to provide medical care or services becomes available to take responsibility.
SB 312 – Vehicle Laws – Provisional Drivers’ Licenses. Would have required an applicant for a provisional driver’s license to complete a first aid and CPR course approved by the Motor Vehicle Administration.

SB 989 (HB 1417) – Public Schools – Cardiopulmonary Resuscitation and Automated External Defibrillator Instruction – Graduation Requirement. Would have required, as a condition of graduation, public school students to complete a CPR course that included use of an AED; would have required each local board of education to provide instruction in CPR and AED in every public school that enrolls students in any of the grades 7 through 12; and would have withheld up to 5% of the installment from the General State School Fund from a noncompliant local school board. Dr. Bass indicated that SB 989 failed largely because the requirement is already in the MSDE curriculum. MIEMSS is going work with key stakeholders to address at the local level.

National Study Center: Dr. Faden reported that the end of the fiscal year is approaching and the NSC and STAR have done well and have obtained $12 million in extra-mural support. A key initiative being explored by NSC is incorporating information from Advanced Automotive Crash Notification systems for use by emergency dispatch assistance, EMS response, and hospitals, as well as by NHTSA to build safer cars. Dr. Faden reported other ongoing NSC initiatives of interest including the Pain Genomics Center and the Program for Aging Trauma and Emergency Care (PATEC).

BLS Committee: Rae Oliveira reported that the BLS Committee is working to: develop an EMR to EMT Bridge program and will have recommendations by August 2013; develop 2013 Protocol refresher questions; and revise the BLS refresher program. The next BLS meeting will be May 17, 2013.

ALS Committee: No report.

EMD Committee: Rae Oliveira reported that Charles County is hosting a CTO Workshop in LaPlata on May 15-17, 2013. The June EMD Committee meeting is cancelled and the next meeting will be held in August.

JAC: No report.

MSFA: 2nd VP Dave Keller thanked the MEMSOF partners for their collaborative efforts during the 2013 legislative session. President John Denver was not able to attend SEMSAC because his attendance was required at a bill signing. The MSFA Convention is June 15-21, 2013, in Ocean City, MD.
**MSP Aviation Update:** Major Lioi also thanked the MEMSOF partners for their collaborative efforts during the 2013 legislative session.

Major Lioi reported the delivery of the 7th AW139 helicopter occurred April 30, 2013. The 8th and 9th helicopters are anticipated to be delivered in early July and early December respectively.

Since delivery of the AW139 helicopters began, MSPAC has been focused on Instructor Pilot training; vendor training for specific systems on the AW139 aircraft; and Crew Resource Management training and syllabus development. Trooper 3 should be operational in the AW139 by mid-July, and the plan is for Trooper 4 to be the second section to transition to the AW139 in late July or early August.

The AW139 will have second providers. There are currently 7 second providers with the MSPAC. 14 Troopers will begin training as second providers on May 8th, with 2 Trooper Cadets for a total of 16. Additionally, 4 second providers have been identified within the July Academy Class. The second providers will be sworn members and will be trained as CRTs at a minimum with the goal of having them become paramedics.

It is anticipated that Trooper 2 will be replaced in approximately 14-22 months.

**New Business**

**Proposed COMAR Changes-Information:** Monty Magee presented proposed changes to COMAR 30.08.15.02, Freestanding Emergency Medical Facility, that would allow FEMFs to become base stations and COMAR 30.03.04.04, Maryland Ambulance Information System, that would require all jurisdictional EMS operational programs to be using eMEDS by December 31, 2013.

Mr. Berg asked if Montgomery County EMS is aware of the proposed requirement to participate in eMEDS and how will MIEMSS enforce the requirement. Dr. Bass responded that based on very positive discussions with Montgomery County EMS to date he feels optimistic they will participate in eMEDS. Jurisdictions that are not in compliance will not receive AMOSS funds.

A question was also asked regarding availability of the short form via the Field Bridge. At this time the short form is only available in hard copy and may not be completed using the Field Bridge.

**Maryland’s Strategic Highway Safety Plan Presentation-Tom Gianni**

Mr. Gianni presented an overview of Maryland crash data and trends. The overall objective of the Maryland Strategic Highway Safety Plan is to reduce fatalities and injuries with the
goal of halving fatalities in Maryland by 2030 from the current level of approximately 500 annually using the “Toward Zero Deaths” philosophy that requires EMS to accomplish its goals. The SHSP is available on the Maryland Highway Safety Office webpage at mhso.mva.maryland.gov. MHSO would like SEMSAC to consider putting forth a resolution and adopt the plan for EMS. SEMSAC voted to support the plan and forward to the EMS Board.

**Old Business**

There being no further business, the meeting was adjourned by acclamation.