

State Emergency Medical Services Board March 8, 2016 Minutes

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

> Kevin G. Seaman, MD Executive Director

> > 410-706-5074 FAX 410-706-4768

Board Members Present: Donald L. DeVries, Jr., Esq. (phone); Chairman; Vic Broccolino, Vice-Chairman; Roland Berg; Fred Cross; Sherry Adams; Sally Showalter David Hexter, M.D. (phone); Dany Westerband, M.D. Kyrle Preis; Mary Alice Vanhoy; Dean E. Albert Reece, MD.

Board Members Absent:

Others Present:

MIEMSS: Dr. Seaman; Ms. Gainer; Dr. Alcorta; Ms. Abramson; Ms. Aycock; Mr. Balthis; Mr. Barto; Mr. Brown; Ms. Mays; Ms. Myers; Ms. Oliveira; Dr. Bailey; Dr. Bass (phone); Mr. Schaefer; Mr. Slack; Ms. Goff.

OAG: Mr. Magee; Ms. Sette

MSFA: President Roth

MSPAC: Major Lioi;

Montgomery County FRS: Dr. Stone; Chief Butsch

Mr. Broccolino called the meeting to order at 9:05 a.m.

ACTION: Upon the motion of Ms. Vanhoy, seconded by Dr. Reece, the Board voted unanimously to approve the minutes of the December 8, 2015, December 17, 2015, January 12, 2016 and February 17, 2016 meetings of the State EMS Board, as written.

MIEMSS REPORT

Dr. Seaman said that all the Students in Process (SIPs) have been contacted to ensure any needed assistance regarding National Registry (NR) testing. There are 12 educational programs conducting the National Registry prep course with 9 courses in process or nearing completion. 203 SIPs have enrolled in a NR test prep course. Pierson Vue test sites have increased to 17 locations.

Chairman DeVries said the EMS Board Committee on National Registry Testing has been working diligently in an attempt to accommodate the MSFA Leadership's request to acquire a written test for the SIPs. Chairman DeVries reported that the number one priority for the EMS Board and MIEMSS has been to find a viable written test; unfortunately, after exhausting every possible testing resource, we have not been able to acquire a written EMT test for the SIPs. Chairman DeVries added that although a written test is not possible, everything effort is

being made to assist the SIPs with acquiring positive EMT testing outcome.

Dr. Seaman gave an overview of the outreach to the alternative testing entities, other states EMS programs and test generation companies and said unfortunately nothing fit the needs of the Maryland for a written EMT test. Ms. Gainer added that a detailed report on these efforts was included in the EMS Board member packets. Chairman DeVries added that although the inability to acquire a written test for the SIPs was very disappointing, the EMS Board Committee on National Registry Testing would be meeting in the near future to assure every other effort is being made to assist the students in process.

President Roth said he also was disappointed in the written test outcome and asked for the current numbers of SIPs and the possibility of an extension to the two year expiration date for completing the EMT course and the NR testing. Mr. Roth said that Director Edwards had previously mentioned the possibility of collaboratively generating an EMT written test and asked if this is still feasible. Chairman DeVries said that every effort is being made to get National Registry to extend the two year limitation on testing.

Dr. Bass said that the possibility of an EMR to EMT Bridge could satisfy the 2year limitation that currently exists between completion of the EMT course taken by the SIPs and National Registry testing.

President Roth asked the Montgomery County FRS representatives to explain why EMR is not a good alternative. Chief Butsch said Montgomery County FRS is a dual role, crossed trained jurisdiction supplying fire suppression and EMS; there are very few EMS only providers. Minimum staffing on any ambulance is two EMTs with a preference of firefighter/EMTs. An EMR or EMT student can ride as a third person on the ambulance. Any discussions regarding changes to the current minimum staffing policies in Montgomery County would not benefit the current SIPs who received EMR because the lengthy process of consultation and negotiation with many stakeholders would be involved. Chief Butsch said Montgomery County FRS has thousands of providers with their own training academy and he did not believe that minimum staffing to include an EMR would be considered. It would add a third track to the training academy requiring additional staffing.

A discussion on different county legislations and jurisdictional policies regarding EMS ensued.

Chairman DeVries said this topic would be discussed at the next EMS Board Committee on National Registry testing.

Dr. Stone, Montgomery County FRS' medical director, said that Montgomery County FRS has just been approved as a Pearson VUE "internal only" testing center. One of the issues regarding NR testing was test site availability; this internal testing center may clear some of the 113 SIPs in Montgomery.

Ms. Gainer said she would like to advocate for Montgomery County FRS to open their testing center to other EMT student candidates in Maryland. Dr. Stone said the request would be taken back to the academy leadership for consideration. Chief Butsch said there are logistical barriers due to Fire/EMS and police use the same area for computer training; the cost of proctoring test will also be a consideration.

Chief Preis said that the Baltimore County Fire Department training academy noticed that students in a recent EMR course were struggling with the content contained in 13th Edition of the Brady EMT textbook provided by MFRI. He said this textbook does not contain the most current (2015) EMT standards. Baltimore County FRA purchased the Jones Bartlett Learning (JBL) online product, which professes a 97% first time pass rate for EMT students who utilize their textbook and online learning system. He said that after 4 weeks of use along with the Brady text, 16 of the 18 students passed the NR

EMR on the first attempt, with 2 students passing on the second attempt. Baltimore County has committed to purchasing the JBL text books and FISDAP online computer adaptive exam, which closely mirrors the National Registry test, for the 2016 summer accelerated EMT course for approximately 30 students. Chief Preis added that the JBL online test questions were a valuable tool that assisted the EMR students.

President Roth recommended scheduled group testing after each course to keep students from waiting too long to test.

MSFA: President Roth

President Roth gave an overview of some of the Bills currently being discussed in the legislature and said that HB 19 (Sprinkler Bill) had not been cross-filed and hopefully will not be heard. He added that the MSFA has two demonstration trailers that contain a side by side video of a burn in identical rooms one with and one without residential sprinklers; there are currently seven scheduled demonstrations throughout the state.

President Roth said that the MSFA Convention is scheduled for June 18 - 24, 2016 at the Ocean City Convention Center and everyone is most welcome to attend.

President Roth added that the MSFA will be holding their first Cancer Awareness/Support Walk to support Firefighters/EMS and their families on May 22, 2016 in Annapolis. Walkers pay \$25 in advance entry fee or \$30 day of the walk entry fee.

President Roth thanked everyone who supported the Polar Bear Plunge.

Legislative Update: Ms. Gainer

EMSOF: Ms. Gainer said that a few days prior to the EMSOF hearings the Legislative Analyst's report was released indicating the EMSOF will only be solvent through 2019. When the fee increase was obtained several years ago, the viability projections indicated solvency through 2022. The report projects lower revenues from the vehicle registration surcharge and higher maintenance and fuel costs for the MSP helicopters. Planning for next steps will begin soon.

Dean Reece said with the increased tax base in Maryland, inquiries should be made regarding the basis for the decrease in projected vehicle registrations. Ms. Abramson said she plans to speak with the MVA to ascertain their reasoning for the projected reduction.

SEMSAC

<u>ePCR Workgroup</u>: Chairman Berg said the SEMSAC ePCR Workgroup submitted a draft report with recommendations for alleviating barriers and issues surrounding patient care handoffs and documentation. After reviewing the report and recommendations, SEMSAC members sent it back to committee to discuss regulation revisions to mandate at the bedside electronic patient care reporting within 24 months, work with MIEMSS IT to investigate costs for the option of an auto-fax or auto-print from eMEDS® to a secured printer/fax at the hospital and develop an action plan for implementation.

MIH Workgroup: Chairman Berg said that a copy of the phase #1 SEMSAC Mobile Integrated Health Working Group Draft Summary Report was distributed at SEMESAC for review and is included in the EMS Board packet. He said this is a very comprehensive report and asked the EMS Board members to review and submit suggested changes.

<u>Minimum Equipment Standards Workgroup</u>: The workgroup is on hiatus until after the legislative session and will be regrouping in May 2016.

Chairman Berg said that Dr. Alcorta presented the proposed Montgomery County Alternate Destination protocol for review.

MSPAC: Major Lioi said in addition to the increase in maintenance and fuel costs for the AW139, increased personnel costs (added employees, collective bargaining and raises) also added to the Aviation Command's increased costs within the EMSOF.

Dr. Reece said these additional costs for helicopter maintenance and fuel should have been anticipated and projected when purchasing the new helicopters. Major Lioi said they should have been considered and anticipated, but MSPAC has been for warning of the increases for the last two budget cycles.

Major Lioi said the Flight Training Device (FTD) remains under construction. Pre-delivery inspection is tentatively scheduled for May 2016 with delivery tentatively scheduled for July 2016. MSPAC has contacted the FAA in order to begin the process to apply for certification of the FTD once operational. The Department of General Services has awarded the contract for construction on the building to house the FTD. Contract approval is on the Board of Public Works agenda for March 23, 2016 and the notice to proceed is anticipated to be issued on April 1, 2016.

Major Lioi added that the Request for Proposals for master services agreements for heavy maintenance on the AW-139 airframes have been submitted to the Department of Budget and Management (DBM). MSP will meet with DBM staff on March 21, 2016 to reconcile proposed recommended changes by DBM

Major Lioi reported that MSPAC advised the Department of Legislative Services analyst that MSP could absorb any incurred training costs through December 2016 if the installation of the FTD is delayed.

A discussion regarding Localizer Performance with Vertical Guidance (LPV) ensued. Major Lioi said that the LPV would be beneficial with patient transport eventually; but, the current priority for MSPAC is an operational FTD.

OLD BUSINESS

None

NEW BUSINESS

Alternate Destination Protocol – INFORMATION

A paper copy of the proposed pilot protocol, including a list of the receiving facilities, was distributed. Dr. Alcorta gave an overview of the proposed pilot protocol for alternate destination for patients transported by EMS to alleviate the disproportionate share of staff and financial resources providing non-urgent care to patients in Emergency Departments. He said that Montgomery County Fire and Rescue Service proposed a three month pilot protocol, which has been approved by the Protocol Review

Committee and agreed upon by the local hospital. There is an option to extend the protocol if deemed safe and appropriate.

Dr. Alcorta said the proposed protocol would consist of certain low acuity priority 3 patients, who match the protocol criteria and are within the geographic bounds and available hours of the pilot, who would be offered transportation to an alternative receiving facility. The receiving facility will be chosen based on the medical needs of the patient, the corresponding capabilities of the receiving facility, and the insurance status of the patient. Dr. Alcorta stressed that this is a voluntary program for patients between the ages of 18 and 60; patients can decline being sent to an alternative destination. Montgomery County EMS cannot bill when taking a patient to an alternate destination.

Dr. Roger Stone, Montgomery County Fire and Rescue Service's medical director, will review all alternative destination patients and submit a monthly report to the Office of the Medical Director at MIEMSS.

Mr. Broccolino commended Chief Butsch and Dr. Stone for moving this concept forward. Dr. Alcorta clarified that if a patient's health deteriorates, a call will be placed to 911 and the patient will then be transferred to the appropriate ED.

Dr. Alcorta said one of the concerns with the proposal is that the urgent care centers that would serve as the alternative destination sites are not regulated.

Dr. Stone said for the purpose of the pilot and in order to maintain good quality control, the pilot is limited to the Silver Spring area. There will be a designated EMT and a BLS ambulance sent to the patient by dispatch.

A discussion regarding transports to an alternate destination and then re-transported to an emergency center, the difference in services at the alternate destinations and the content of the consent form ensued.

Dr. Alcorta said if anyone has concerns or comments regarding the pilot protocol, please email him at ralcorta@miemss.org prior to the next meeting.

Upon the motion of Dr. Reece, seconded by Ms. Vanhoy, the Board voted unanimously to adjourn to closed session.

The purpose of the closed session was to carry out administrative functions under State Government Article §10-502 (b), to obtain legal advice from counsel under State Government Article § 10-508 (a) 7), and to discuss certain site reviews and maintain certain records and information in confidence as required by Health Occupations Article §14-506 (b) under State Government Article § 10-508 (a) (13).

In Closed Session:

Board Members Present: Donald L. DeVries, Jr., Esq. (phone); Chairman; Vic Broccolino, Vice-Chairman; Roland Berg; Fred Cross; Sherry Adams; Sally Showalter David Hexter, M.D. (phone); Dany Westerband, M.D. Kyrle Preis; Mary Alice Vanhoy; Dean E. Albert Reece, MD.

Board Members Absent:

Others Present:

MIEMSS: Dr. Seaman; Ms. Gainer; Dr. Alcorta; Ms. Abramson; Ms. Aycock; Mr. Brown; Ms. Mays; Ms. Myers; Ms. Oliveira; Dr. Bailey; Dr. Bass (phone); Mr. Schaefer; Mr. Slack; Ms. Goff.

OAG: Mr. Magee; Ms. Sette

In closed session the Board:

- 1. Discussed a refresher education program;
- 2. Discussed Perinatal re-designations;
- 3. Discussed Primary Stroke Center re-designations;
- 4. Reviewed EMS provider disciplinary actions;
- 5. Discussed commitment to facilitating transition to NREMT.

The Board returned to open session.

Upon the motion of Mr. Cross, seconded by Ms. Showalter, the Board voted to approve the Queen Anne's County EMT Refresher Program. (Ms. Vanhoy abstained)

Upon the motion of Ms. Vanhoy, seconded by Dr. Westerband, the Board voted unanimously to approve the Carroll Hospital Center for the four remaining years of a five year Primary Stroke Center designation.

Upon the motion of Dr. Westerband, seconded by Ms. Showalter the Board voted to approve Johns Hopkins Hospital and The University of Maryland Hospital Center (as of date of agreement) for a five year re-designation as Level IV Perinatal Centers.

Upon the motion of Ms. Vanhoy, seconded by Mr. Berg, the Board adjourned.