Emergency Medical Services Board May 12, 2009 Minutes

Board Members Present: Donald L. DeVries, Jr., Esq., Chairman; Chief Scott Graham; David Hexter, M.D.; Sally Showalter; David Fowler, M.D.; Mary Alice Van Hoy, R.N.; Eugene L. Worthington; Victor A. Broccolino (at 9:15); Dean E. Albert Reece, M.D., PhD.

Board Members Absent: Murray Kalish, M.D.

Others Present

MIEMSS: Dr. Bass; Dr. Alcorta; Ms. Gainer; Ms. Alban; Ms. Myers; Mr. Buckson; Ms. Wright-Johnson; Ms. Bailey; Ms. Beachley; Mr. Dubansky; Ms. Gilliam; Ms. Magee;; Mr. New; Mr. Seifarth; Mr. Davies; Ms. Fechter.

OAG: Mr. Magee; Ms. Sette.

Maryland State Police Aviation Command: Major McAndrew; Mike Gartland; Jimmie Meurrens.

R Adams Cowley Shock Trauma Center: John Spearman; Brenda Fosler Johnson; Jim Radcliffe.

MSFA: Mr. Cox.

INTRODUCTION

Chairman DeVries called the meeting to order at 9:127 a.m.

Action: Moved (Dr. Hexter), seconded (Ms. Vanhoy), passed unanimously to approve as written the minutes of the Board's open session on April 14, 2009 meeting.

EXECUTIVE DIRECTOR'S REPORT

MEDEVAC. Dr. Bass reviewed helicopter transport usage since September 2008.

Mr. Broccolino entered at 9:15.

Major McAndrew reported that a request for proposals (RFP) for 3 replacement helicopters has been issued and proposals are due on June 26, 2009. The RFP leaves

open the possibility of a proposal for helicopters requiring two pilots. MSP will be exploring funding sources in the event a two pilot proposal is submitted which is in the best interests of the State. Two pilot helicopters would cost approximately \$2.2 million additional in salary and benefits per year.

Major McAndrew reported that the MSP has received an informal indication from the regional offices of the FAA that public aircraft, such as the State police MedEvac fleet, are not currently eligible for certification under 14 CFR 135 as commercial aircraft. The MSP has requested clarification of this issue from the Washington office of the FAA.

The consultant Smart Associates is completing a base assessment study and requires more data.

Dr. Reese entered at 9:27.

Major McAndrew said that the MSP is assuming the aviation responsibilities of the Department of Natural Resources (DNR) which is liquidating their aircraft inventory. DNR had operated out of Easton Airport. MSP is currently exploring the possibility of relocating Trooper 7 from its Centreville base, to the current DNR aviation space at Easton airport at a cost of \$37,000 per year. Major McAndrew reported that the Easton facility offers more ground space and safer approach routes. He noted that the Easton location would put the helicopter approximately 6 minutes and 27 seconds flight time further south than the Centreville location. He also noted that population coverage drops .1% and call volume drops .4% in the flight area that would be covered by operating out of Easton.

There was discussion of the impact of the move of Trooper 6 from Centreville to Easton.

Maj. McAndrew asked for EMS Board approval to relocate Trooper 6 from Centreville to the Easton airport.

Chairman DeVries acknowledged the potential advantages of the proposed relocation based on Maj. McAndrew's presentation but felt that consultation with the affected communities should occur before the Board could make an informed decision.

Maj. McAndrew noted that an initial step would be to discuss with the local fire and EMS personnel from the affected communities. He also pointed out that it was his understand that there were 3 other entities interested in acquiring DNR's Easton airport space which will become available July 1 when the DNR lease expires.

Action: Moved (Dr. Reese), seconded (Ms. Showalter), passed unanimously to explore relocating Trooper 6's base from Centreville to Easton Airport with appropriate consultation with the affected communities.

Maj. McAndrew indicated he would be prepared to present follow-up information on community consultations at the next Board meeting. Ms. Showalter and Ms. Vanhoy indicated they would be interested in participating in the community meetings.

Dr. Bass continued with the Executive Director's report.

The "Maryland EMS Symposium," formerly know as "EMS Care," will take place May 14 through May 17 at the Annapolis Sheraton. EMS week begins May 17th which will be the day for the Star of Life awards at the Annapolis Sheraton.

The National EMS bike ride will travel from New York to Roanoke and will stop in Maryland on May 19th at 9 am at Walker Mill Regional Park at the site of the crash of Trooper 2.

Dr. Bass reviewed the current status of the H1N1 flu, the most serious cases of which appear to be most prevalent among younger individuals. Symptoms do not appear to be as severe as first anticipated except for those with underlying health problems. The CDC, FDA, and NIOSH have all indicated that providers should use N95 masks when treating individuals with suspected flu. Several states are concerned with unnecessary depletion of personal protective equipment, however. Further guidance is expected shortly from CDC on this issue. MOSH has stated it will enforce appropriate personal protective equipment requirements, and N95 masks are not certified for reuse. The World Health Organization recommends surgical masks. Dr. Bass noted that while the initial outbreak seems relatively mild, it was important to keep in mind that the 1918 Flu reappeared in a more virulent form several months after its relatively benign initial appearance.

Dr. Bass reported that the Joint Chairmen's Report listed several reports for completion over the next 18 months. He said that MIEMSS and the MSP will submit formal recommendations to the budget committees by December 1, 2010 on the number of bases and helicopters necessary to provide statewide EMS coverage. MIEMSS and MSP must also jointly prepare and submit a report on the status of implementation of each of the findings and recommendations of the Expert Panel and certain recommendations of the National Transportation Safety Board by June 30, 2010. He said that by September 30, 2009, the Maryland Health Care Commission, in consultation with the EMS Board and MIEMSS is to evaluate the network of trauma and specialty centers in Maryland and report on how Maryland's health care system could be improved, including whether the State should consider adding and/or consolidating existing trauma centers. He also said that the MSP is to conduct a review of all available helicopter maintenance options no later than October 1, 2009.

REPORT OF THE R ADAMS COWLEY SHOCK TRAUMA CENTER

Chairman DeVries congratulated the R Adams Cowley Shock Trauma Center on the gala on April 25th which recognized outstanding EMS operations during the past year.

Mr. Spearman reported that some 1800 people attended the Gala. He explained that he would be moving to other areas of responsibility and that Ms. Fosler-Johnson would henceforth deliver the R Adams Cowley Shock Trauma Center report to the Board.

Ms. Fosler-Johnson summarized the R Adams Cowley Shock Trauma Center report which was distributed to the Board.

LEGISLATIVE REPORT

Ms. Gainer said that the Board had received a copy of the language from the Joint Chairmen's Report regarding the various required studies which Dr. Bass had summarized.

OLD BUSINESS

Mr. Seifarth and Mr. New reviewed the current status and future plans for electronic reporting of Maryland Ambulance Information Reports. The current EMAIS® software application was developed by MIEMSS and made available of jurisdictions free of charge. Jurisdictions are now looking for a better billing interface and a more user-friendly product. In addition, interface with various facilities and registries is a concern together with a product that is NEMSIS compliant. The new product is expected to be a customized off-the-shelf product. The estimated cost for the new product is \$800,000 to \$900,000 over the next 3 to 4 years with an up front cost of approximately \$500,000.

NEW BUSINESS

Mr. Magee presented a proposed amendment to <u>COMAR</u> 30.01.02.01 to update the EMS Protocols and the Trauma Data Dictionaries which are incorporated by reference in the MIEMSS Title 30 regulations to incorporate the Maryland Medical Protocols for Emergency Medical Services Providers (MIEMSS July 1, 2009 Edition), the Maryland State Trauma Registry Data Dictionary For Adult Patients (MIEMSS October 27, 2008 Edition) and the Maryland State Trauma Registry Data Dictionary For Pediatric Patients (MIEMSS October 27, 2008 Edition).

Action: Moved (Chief Graham), seconded (Dr. Hexter), and passed unanimously to propose the amendment presented and proceed with the necessary promulgation procedure.

ADJOURN TO CLOSED SESSION

Action: Moved (Chief Graham), seconded (Dr. Fowler), and passed unanimously to proceed to closed session and thereafter return to open session.

The purpose of the closed session was to carry out administrative functions under State Government Article § 10-502(b), to discuss appointment of personnel under State Government Article § 10-508 (a) (1), discuss matters related to the contents of a bid or proposal, if public discussion or disclosure would adversely impact the ability of the public body to participate in the competitive bidding or proposal process under § 10-508 (a) (14), obtain legal advice from counsel under State Government Article § 10-508 (a) (7) 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).

The closed session was attended by:

Board Members Present: Donald L. DeVries, Jr., Esq., Chairman; David Hexter, M.D.; Sally Showalter; Mary Alice Van Hoy, R.N.; Chief Eugene L. Worthington; Chief Scott Graham; Victor A. Broccolino; David Fowler, M.D.; Dean E. Albert Reece, M.D., Ph.D.

MIEMSS: Dr. Bass, Dr. Alcorta, Ms. Gainer, Mr. Dubansky, Ms. Beachley, MS, RN, CEN, Ms. Myers,

OAG: Mr. Magee, Ms. Sette.

The results of site reviews and the status of applications for primary stroke center designations were discussed.

Final disciplinary actions were discussed with counsel.

Matters related to helicopter certification were discussed with counsel.

Matters concerning helicopter basing input were discussed.

The minutes for the April 14, 2009 closed session were approved.

The Board returned to open session.

Based on the results of the site review conducted January 15, 2009, Ms. Beachley asked the Board to approve the designation of the Shady Grove Adventist Hospital as a primary stroke center under <u>COMAR</u> 30.09.11 for the remainder of the 5-year period from the date that a one-year provisional designation had been granted.

Action: Moved (Dr. Hexter), seconded (Ms. Van Hoy), passed unanimously to approve designation of the Shady Grove Adventist Hospital as a primary stroke center under <u>COMAR</u> 30.09.11 for the remainder of the 5 year period from the date that one-year provisional certification had been granted.

Based on the results of the application and the site review conducted on March 20. 2009, Ms. Beachley asked the Board to approve the designation of Frederick Memorial Hospital as a primary stroke center under <u>COMAR</u> 30.09.11 for a full 5 year period.

Action: Moved (Dr. Reese), seconded (Ms. Showalter), passed unanimously to approve designation of Frederick Memorial Hospital a primary stroke center under <u>COMAR</u> 30.09.11 for a full 5-year period.

The meeting was adjourned.