



Region III Emergency Medical Services Advisory Council

Providing Emergency Medical Care to Metropolitan Baltimore

Region III EMS Advisory Council September 28, 2016

Agenda

- I. Welcome & Introductions
- II. Chair Report Chief Alex Perricone
 - A. Review of Minutes
 - B. Correspondence
 - C. Next Meeting – November 30, 2016 at 1:00pm at MIEMSS, Rm .212
- III. Program Reports Roger Simonds
 - A. SEMSAC/Legislative Update Dr. Richard Alcorta
 - B. State EMS Medical Director Report Lisa Chervon
 - C. MIEMSS Region III Report Cyndy Wright Johnson
 - D. EMSC Report Randy Linthicum
 - E. MIEMSS Emergency Operations Jon Bratt
 - F. MIEMSS Regional Programs
 - G. MIEMSS Licensure and Certification
 - H. Maryland eMEDS Jason Cantera
- IV. Committees Paul Massarelli
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 - C. Region III Medical Directors
- V. Prevention Activities Council Membership
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 - F. Training Institutions / MFRI
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Region III EMS Advisory Council Meeting September 28, 2016

Minutes

Attendees: Richard Alcorta (MIEMSS), John Alexander (MFRI), Terrance Baker (Region III EMSAC Secretary/ Good Samaritan), Jon Bratt (MIEMSS), Joe Brown (Carroll Hospital), Jason Cantera (MIEMSS), Lisa Chervon (MIEMSS, Tim Chizmar (Region III Medical Director), Nancy Cimino (Union Memorial), Susan Cochrane (BWMC), Christine Deckard (Harford Memorial), Sara Delkhood (UMMC Midtown), John Donohue (MIEMSS), Charles Dorsey (MIEMSS), Steve Doyle (Union Memorial Hospital), Mark Dubel (Anne Arundel County), Tracy Ellis (St. Agnes), Pete Fiakos (MIEMSS), Pat Gainer (MIEMSS), Christian Griffin (Baltimore County), Dan Grimes (Annapolis City), Les Hawthorne (MCAC), Jeffrey Huggins (MIEMSS Region III), Dick Johnson (Consumer Representative), Christina Hughes (Region III Healthcare Coalition Chair/ Franklin Square), Paula Justice (Johns Hopkins Adult), Matt Levy (Howard County), Amy McClellan (Howard County General Hospital), Darby Linder (GBMC), Randy Linthicum (MIEMSS), Paul Massarelli (Emergency Education Council President/ Baltimore County FD), Jennifer Osik (Upper Chesapeake), Chad Packard (Region III EMSAC Vice Chair/ BWI Airport Fire and Rescue), Cathy Park (Johns Hopkins Peds), Alex Perricone (Region III EMSAC Chair/ Baltimore City), Lisa Puett (Johns Hopkins Peds Trauma), Kevin Reed (Harbor Hospital), Tim Rostrowski (Baltimore County), Patty Sherman (AAMC), Roger Simonds (Consumer Representative), Lauren Smith (Sinai), Roger Stone (Carroll County), Laura Taylor (Johns Hopkins Bayview), Jon Wendell (Anne Arundel County FD/BWMC), Dianne Whyne (Johns Hopkins CEPAR), Curtis Wiggins (Carroll County), Jim Wilkison (Anne Arundel County), Cyndy Wright-Johnson (MIEMSS EMSC)

I. Welcome & Introductions: Chief Alex Perricone welcomed everyone to the meeting and introductions were done in the room and over the phone.

II. Chair Report - Chief Alex Perricone: The minutes from the May 25, 2016 meeting were distributed to everyone electronically and in the room for review. The minutes were motioned to be approved by Terrance Baker and second by Christian Griffin. During discussion, Dick Johnson moved to change the sentence in Section 6 – State EMS Medical Director’s Report, paragraph 6 in reference to MIEMSS having an MOU with the US Navy: “...Dr. Alcorta responded that we do not, but that they are a Federal asset.” Mr. Johnson suggested that it should be changed to “military” asset. The motion was approved and passed. The minutes were approved with the correction. Chief Perricone read two items of correspondence from the following: a memorandum dated September 8, 2016 from Jon Bratt regarding Region III staff transition. Jeffrey Sexton resigned and Lisa Chervon will be acting as Director of Commercial Ambulance and Licensing Registration (SOCALR). Jeffrey Huggins will serve as Acting Region III Administrator; a letter dated August 29, 2016 from Donald DeVries, Jr., Chair of EMS Board on Dr. Kevin Seaman’s resignation to pursue cardiac survival opportunities through the resuscitation academy. Pat Gainer mentioned that she and Dr. Richard Alcorta were Co-



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Executive Acting Directors of MIEMSS. A national search has begun for a new Executive Director. The next meeting is scheduled for Wednesday, November 30, 2016 at 1:00pm in MIEMSS Conference Room 212.

III. Program Reports

A. **SEMSAC/Legislative Update - Roger Simonds:** Senate Bill 707 has been introduced. The bill looks at the regulations regarding conversion of a hospital to a freestanding medical facility. The bill went to legislature and was passed back to MIEMSS to look at some alterations. The proposed regulations are on the MIEMSS website for informal comment. Phase I of the Mobile Integrated Health project was passed on to the EMS Board. The next phase would be to put together a protocol for personnel use for the field before moving to the next phase. The draft for the VAIP was reviewed by SEMSAC. The changes that were made came from protocol, everything else remained the same. The draft now goes to the EMS Board for consideration. Work continues on the minimum ambulance equipment requirements for ambulances. The process has been complete and has been presented to SEMSAC. The draft document has been forwarded to various state organizations for comments before moving forward.

B. State EMS Medical Director Report - Dr. Richard Alcorta:

1. Dr. Kevin Seaman has resigned from MIEMSS but will continue to assist with the agency on cardiac resuscitation and improving survival as well as continue to serve as Chair on the Cardiac Arrest Steering Committee. He will also help in the completion of the implementation of CARES.
2. MIEMSS has sent out an update on recognition of MOLST form in electronic format. The electronic signature is accepted. It is the responsibility of the nursing facility to send a copy to the healthcare facility.
3. The National Registry has modified its continuity education requirements: it is 60 hours for a Paramedic, down from 72 hours. Maryland has modified their requirement to 60 hours for CRTs.
4. Prince George's County and their hospitals will go live on CARES on November 1st and Montgomery County and their hospitals will go live on December 1st. Every hospital and EMS Operational Programs will have CARES participation. The National Association of EMS Officials (NASEMSO) has completed a resolution that (1) CARES will be the national recommended cardiac arrest dataset, (2) vendors will work to implement the mandatory required elements in the dataset and (3) work with NEMSIS in alignment.
5. EMS Board approved the expansion of the Mobile Integrated Health pilot that demonstrated a significant reduction in using of the emergency department. Contact the Office of the Medical Director if anyone is interested in following the pilot.
6. MIEMSS is working with CRISP, Maryland's health information exchange and has received approval from the CRISP Board to run a pilot program in Prince George's County to access patient outcomes from the transports in that county.



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7. The Active Assailant Sub-Committee visited the Aberdeen Proving Grounds to see how the representatives from the military test and evaluate ballistic armor. It is the same equipment that is currently used by military and law enforcement

8. 2017 protocol updates: Changes to freestanding medical facility – all stable priority 2 patients to be transported to a freestanding medical facility also require consultation. Terbutaline will be removed. There will be a new protocol for syncope emphasizing the need for 12 lead kg. A modification will be made for the old inhalation protocol to include CO and smoke inhalation component. The Sexual Assault Protocol will be modified based on the sexual assault task force that has been working across the state to get right patient to the right destination at the right time. They will be able to go to a recognized Maryland Coalition Against Sexual Assault (MCASA) hospital. 12-lead program is moving from pilot (for EMT-Basic) to an optional program. Pelvic binder will be allowed for PEDs as long as the device fits the patient properly. It is an option if providers want to purchase these in other sizes. Mark 1 protocol has been adjusted to align with the existing Chempack flyers. IO site terminology for the insertion site has been adjusted to improve its accuracy with vendors' advertisement and operation. Modification of PEDS termination of resuscitation protocol will allow consultation to pediatric basestations to allow EMS provider to withhold or stop resuscitation on the child.

C. MIEMSS Region III Report – Jeffrey Huggins: A written report was sent out in the meeting and distributed electronically.

D. MIEMSS Licensure and Certification - Pete Fiackos: Pete explained to the group how to get into the new system and who should be accessing it. The website to the new systems is www.miemsslicense.com. Those who are current or previous Maryland providers that have records in the old system will be in the new system. This will replace the provider login. Students that want to get into the system would need to create an account. Providers and students will be able to update their information. For questions and support, e-mail licensure-support@miemss.org or contact the support line 410-706-7381.

E. Maryland eMEDS - Jason Cantera: A handout was given to everyone in the meeting on restriction of access for service administrators to add personnel. After an investigation, people are adding providers in eMEDS without going through the proper affiliation process. The current process is the provider signs the form, all the appropriate boxes are signed, if ALS, the last box is signed, the form then goes to Licensure and Certification to go through their process then it goes to the eMEDS group to enter the form. For any questions on a provider's access to eMEDS, send a ticket to eMEDS Support Team. Change management requests that come through the eMEDS Steering Committee follow a standard process. The request is sent to Jason to see if it can be done in the system. Then it goes to an internal group at MIEMSS to see what the impact of the change based on the current and past data and potentially future data. It is presented to



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the committee for approval, denial or to go back to the internal group at MIEMSS. The Elite upgrade status is ongoing. There are some services that have not completed their agreement. Anne Arundel, Baltimore and Howard counties completed their agreements. Carroll is working with ImageTrend. Jason is working with ImageTrend to get additional information for Annapolis City. The next Steering Committee is Tuesday, November 15th from 1:00pm to 3:00pm at MIEMSS Conference Room 212.

F. Maryland EMSC Report - Cyndy Wright Johnson: A written report was sent out electronically and available online. The hospitals had 100% participation in the national pediatric ready assessment. Some hospitals went up 20 points and some went down 20 points. EMSC will do an itemized analysis on the questions that changed. An extension was granted for large states to extend the survey. The analysis was not available at the time of the meeting. Information will be given out on a bi-monthly basis to help make hospitals more PEDS ready. The performance measure has been extended until 2022 by the federal government. There will be performance measures that will take effect in 2018 to focus on NEMESIS data entry, EMS skills and having pediatric expertise. APLS Course will be held for physicians on Friday, September 30th and another course in November in MIEMSS. PEPP courses will be held on Friday, October 28th at MIEMSS, November in Washington County and December in Southern Maryland. There are a couple of EMS counties are slow to return information on quality improvement. It is a requirement for hospitals to turn their information in on a regular basis. A child passenger safety event was held last week as part of National Child Passenger Safety Week. Questions on pediatric termination of resuscitation (TOR) should be referred to Cyndy Wright-Johnson. EMSC will work with the regional offices on the fall focus groups. The groups will include law enforcements and medical examiners from each region. There will be clean up some typos in the CPR protocol. The office is working with Howard County for 2 months to develop the pilot for high-performance pediatric CPR for potential 2018 protocol rollout

G. MIEMSS Emergency Operations - Randy Linthicum: Randy gave update on upcoming events: October 10th-17th – Fleet Week including the Baltimore Running Festival on October 15th and the Air Show on October 15th and 16th. November 6th – Across the Bay 10K at the Bay Bridge. January 20, 2017 – Presidential Inauguration – it is unknown at this time what resources will be requested. May 2017 – BWI EPLEX Exercise. MEMA conducted a conference call on the update of Tropical Storm Matthew.

H. MIEMSS Regional Programs - Jon Bratt: Jon thanked Jeff Huggins for assuming the role as Acting Regional Administration and asked the group for their understanding as the transition takes place. Jon announced Andrew Naumann as the new Region II Administrator. The Region IV Associate Administrator position is currently vacant and the recruitment process is ongoing. The position is planned to be filled by the end of the year. Jon thanked everyone for participating in the Annual Resource Survey. The survey helps support future grant guidance and priorities. It is included in the Governor's report, which is due in October. Expenditures for the State Homeland Security Grant Program



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(SHSGP) are due by the end of the calendar year. Any monies not spent as of January 1, 2017 will be reallocated with the approval from the Regional Affairs Committee.

IV. Committees

A. **Emergency Education Council - Paul Massarelli:** ALS funding was approved this past week and will be sent out by Licensure and Certification. Planning has begun for EMS Care 2017. The next meeting is scheduled for Thursday, November 10th at 10:00am in MIEMSS Conference Room 212.

B. **Maryland Region III Health & Medical Coalition - Christina Hughes:** A written report was sent out in the meeting and electronically.

C. **Region III Medical Directors - Tim Chizmar, MD:** The Medical Directors met this morning. All jurisdictions have completed their quality assurance reports and are doing very well. The group decided to extend their review to more clinical relevant areas in seizure and measuring whether the EMS agencies area assessing and treating patients appropriately. There have been a few issues in the state regarding patients with MOLST forms maybe incorrectly categorized as MOLST B and should be MOLST A and want the appropriate treatment. Dr. Chizmar and Dr. Alcorta will work with the Board of Physicians and DHMH to address the issue. Triage Tag days are October 3rd and 7th. BWI and Anne Arundel have requested to change dates to cover all shifts.

V. **Prevention Activities - Council Membership:** no activities to report

VI. **Old Business:** no report

VII. New Business:

HCID (High Consequence Infectious Disease) Grant Update - John Donohue: A state plan has been developed and there will be 4 levels of hospitals: frontline, assessment, treatment and regional treatment centers. The assessment hospitals are Prince George's, Holy Cross in Silver Spring, Anne Arundel, Frederick Memorial and Peninsula Regional. The treatment centers are Johns Hopkins and University. The other hospitals are listed as frontline. MIEMSS received funds from DHMH which will help establish an EMS HCID Advisory Panel to look at ID on a daily basis, what PPE we should use, training, waste management, standards, procedures and updates on any protocols. The panel will include representatives from DHMH. The process has begun in hiring an Infectious Disease Coordinator for two years full time and part time for the third year. The position is posed on the MIEMSS website. The closing date is Monday, October 10th. The grant will also help in putting together HCID transport teams. There will be the regional 911 response teams and interfacility transport teams. The definition of the teams is unknown at this time. Four commercial companies have received waivers. Once a panel is established, the standards will be established. The amount of money to be spent will depend on the number of teams that are designated. It is estimated that there may be between 6 and 7 teams. John asked the council to discuss what they want to do. The teams will be required to do annual exercises and regular training. Support form



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healthcare coalitions, emergency managers, state and local health departments will also be required to keep collaboration going.

VIII. Regional Roundtable Reports

A. EMS

1. Annapolis City – no report
2. Anne Arundel
 - a) Currently have a class of 75 recruits with 8 ALS providers to graduate in December
 - b) Focusing on obtaining information on eMEDS
 - c) Recently rolled out a new way to do IV treatment
3. Baltimore City
 - a) Graduating 26 recruits on October 4th including EMTs and Paramedics
 - b) Begin a class of 27 EMTs and Paramedics recruits on October 19th
 - c) Chief Fletcher is working on putting the last 2 transport units #35 and #36 in service sometime in November-December
 - d) Preparing for during fleet week
4. Baltimore County
 - a) Hiring process for an EMS class to start in November
 - b) Battalion Chief Joe Brown retired last Friday after 35 years of service
5. BWI
 - a) Currently have 6 ALS providers in the Anne Arundel County academy class
 - b) Lieutenant interviews were completed, waiting on approval to officially announce
 - c) Permission was granted to hire an EMS Captain
 - d) The CPR kiosk has doubled the use of the other airports
 - e) Planning has begun for the EPLEX Exercise in May 2017
 - f) A committee has been working on the homeless problem at the airport
6. Carroll County - no report
7. Harford County – not present
8. Howard County – no report

B. **Health Depts.** - did not attend today's meeting

C. Hospitals

1. AAMC
 - a) Planning for 10k Across the Bay event
 - b) Increase in elderly care beds
2. BWMC - no report
3. Bon Secours - not present



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4. Carroll - no report
5. Franklin Square
Seasonal flu drive thru event on Sunday, November 6th from 8am to 12pm
6. Good Samaritan - no report
7. GBMC
Charge nurses expressed concern with Baltimore City medics recently not consulting for priority 1 patients. Baltimore City to follow-up directly with GBMC.
8. Harbor - no report
9. Harford Memorial
Seeking candidates for ED Nurse Manager position
10. HCGH
Thanked Good Samaritan for staffing basestation classes
11. JH Bayview
 - a) Free EMS Education Day on November 28th
 - b) Sinkhole being worked on at the ambulance entrance
 - c) Backboards are available for pickup
 - d) Christine Snow was named the new ED Nurse Manager
12. JHH - no report
13. JH Peds - no report
14. Mercy - no report
15. Northwest - no report
16. Shock Trauma – not present
17. Sinai
Helicopter training with Maryland State Police on October 5th
18. St. Agnes – no report
19. St. Joseph's – no report
20. Union Memorial



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The intensive psych unit will be transitioned to Harbor Hospital and will open in a new unit at that location in November.

21. UMMC – not present

22. UMMC Midtown

Is aware of their long alert times and are working to shorten them

23. Upper Chesapeake

a) Dr. Fermin Barrueto is now the Senior Vice President of Medical Affairs and Chief Medical Officer

b) Dr. Michael Abraham is now the Department of Emergency Medicine Chairman

D. Commercial Ambulance – no report

E. MSP:

Roger Simonds reported on the change of command: Major Frank Lloyd move to Field Operations. Major Scott Lowman is the new Commander of Aviation. Elizabeth Beck is the new Captain.

F. Training Institutions / MFRI: no report

G. MEMA: no report

H. MCAC:

1. Les Hawthorne reported on the staff relocating to the FBI building temporarily due to renovations.

2. Those who are not receiving MCAC alerts for Fire/EMS/Public Health and wish to should contact lester.hawthorne@mcac.maryland.gov.

3. A meeting was held last week with the Metro Chiefs requesting consideration to send a liaison officer to the MCAC.

4. Working with MEMA on an events calendar as DHS is requesting additional information on events.

IX. Meeting Adjourned



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IX. Adjourn

Call-in information:

Please join my meeting. <https://global.gotomeeting.com/join/230277713>

Join the conference call. Phone: 866-247-6034 Conference Code: 2757435356