



## **Region V EMS Advisory Council**

Thursday, September 15th, 2016

Fire Services Building

6820 Webster Street Landover Hills, Maryland 20784

### Meeting Minutes

In attendance: Michael Somers, Mark Pettit, David Goroff, Alan Butsch, Heather Howes, Christine Haber, Emily Wagner, Mark Arsenault, Karen Baker, Bridget Plummer, Cindie O'Brien, Luri Chemy, Roland Berg, Nicole Duppins, Reginald Singleton, Carlton Archer, Susan Gonzales, Trisha Anest, Will Roder, Mary Jobson-Oliver, Brian Frankel, Bryan Spies, Jon Donahue

Conference Line: Don Mooreland, Susan Femia, Rebecca Vasse, Peter Wild, Jon Bratt, Helen Bradley, Douglas Mayo, David Lane, Cyndy Wright-Johnson

### **Welcome and Introductions**

- Acting Chair Assistant Chief Brian Frankel (Prince George's County Fire/EMS) welcomed participants to the September EMSAC meeting and conducted a roll call.
- The group accepted the minutes from the May EMSAC meeting with minor spelling and grammatical changes. The motion was made by Dr. Michael Somers (Region V Medical Director) and seconded by Heather Howes (Calvert County Public Safety).

### **Report of Chairman**

- Assistant Chief Frankel had no report.

### **Medical Director's Report**

- Dr. Michael Somers (Region V Medical Director) thanked all participants for attending the EMSAC meeting. He reminded all hospital representatives that there will be a mandatory Base station coordinators meeting on October 26<sup>th</sup> at MIEMSS HQ, and emphasized the importance of attendance.
- Dr. Somers reported on a letter from the MIEMSS Attorney General instructing pre-hospital providers that they must recognize electronic signatures on MOLST forms. Dr. Somers expressed a concern that SNF are no longer required to provide printed paperwork and transfer forms to EMS, which will create a challenge for how hospitals and prehospital providers treat patients without having a physical MOLST form or other paperwork. He recommended one possible solution as uploading that information into CRISP, and that the EMSAC and individual jurisdictions look closely at this issue.

### **MIEMSS Report:**

- David Goroff (MIEMSS Region V) reported on MIEMSS/MSP staffing changes, the eMEDS elite implementation, changes to the hospital consult form, and Region V diversion hours. Mark Arsenault (Dimensions Health) asked if there had been any research into the trend downwards in diversion hours. The group discussed the

possibility of flu season explaining the downward trend, and asked for future reports to show diversion trends over a 24-month period so that the group could see larger trends.

## **Report of Special Committees:**

### *Region V EPC*

- Mr. Arsenault reported that the Region V EPC had discussed their draft communications plan, the upcoming inauguration, and January snow storms, and asked that the minutes of the Region V EPC be distributed to the EMSAC.

### *STEMI*

- No report.

### *EMSC/PEMAC*

- Cyndy Wright-Johnson (MIEMSS EMSC) reported on the results of the 2016 Pediatric Readiness Re-Assessment, which had a 100% response rate from Maryland Hospitals with Emergency Departments or Free Standing EDs. The assessment showed that hospitals have made a number of changes since the last assessment was performed, and a focus group will be convened in the Fall of 2016 to look at the results in greater detail. The results will also be discussed at the Base Station Coordinators meeting in October 2016. Ms. Wright-Johnson also discussed a number of upcoming training opportunities, including a PEPP hybrid course, and ENA and physician courses. More information on those courses has been distributed in the Region V Newsletter, and is available on the MIEMSS website or by emailing Ms. Wright-Johnson at [CWRIGHT@miemss.org](mailto:CWRIGHT@miemss.org).

## **Old Business**

- Dr. Somers led the group in a brief discussion on the NEDOCs pilot undertaken by Region V. Dr. Somers thanked Montgomery General, Laurel Regional, and Fort Washington Hospitals for their participation, but noted that not enough data had been collected to form concrete conclusions or perform sound data analysis. Assistant Chief Frankel expressed his belief that even if the group decided not to pursue the NEDOCs study, the EMSAC and the region must address hospital diversion. The group generally agreed. Dr. Somers made a motion for the Region V staff to draft a summary of the data that was collected that includes the limitations of the data, and options for next steps. The motion was seconded by Battalion Chief Alan Butsch (Montgomery County Fire Rescue Service), and was agreed to by the council.

## **New Business**

- Jon Donahue (MIEMSS) reported on upcoming grant funding for EMS capabilities for high consequences disease response and transport. Mr. Donahue reported that MIEMSS will be hiring a high consequences disease coordinator, and once that individual is hired, they will be working to create a CID strike team, and a CID inter-facility strike team. More information will be distributed when grant information is available.
- Chairman SEMSAC Representative Elections
  - The EMSAC discussed elections for the open chairman positions, as well as for the SEMSAC representative. The group agreed that Assistant Chief Brian Frankel would continue to fill both of those roles in an interim capacity until the scheduled elections for the first meeting in 2017.

## **Regional Round Table**

- Prince George's Health Department - Not Present  
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- Montgomery County Health Department - Not Present
- Charles County Health Department - Not Present
- Calvert County Health Department - Not Present
- St Mary's Health Department - Not Present
- Laurel Regional Hospital – Laurel Regional reported that the hospital is open, and in the next few months however, the community will be meeting to talk about the future of Laurel Regional remaining a fully functional hospital.
- Prince George's Hospital - No Report
- Doctors Community Hospital – Doctors reported that they are now a primary stroke center.
- Fort Washington – Not Present
- Southern MD – No Report
- Charles Regional – No Report
- Calvert Memorial – Not Present
- St Mary's Hospital – No Report
- WAH – Not Present
- Holy Cross Hospital – No Report
- HCH Germantown – No Report
- Shady Grove Adventist – No Report
- Suburban – No Report
- Montgomery General – No Report
- Children's Hospital – Children's Hospital reported are still recruiting members for their pediatric medical review committee which will serve the entire NCR when it is stood up. Those who are interested should email Emily Dorosz at [EDorosz@childrensnational.org](mailto:EDorosz@childrensnational.org).
- Shock Trauma – Not Present
- Malcolm Grow – Not Present
- Walter Reed – Not Present
- MSP – No Report
- US Park Police– Not Present
- MSFA – Not Present
- MFRI – Not Present
- Prince George's County Fire/EMS – PG Fire/EMS reported that they, along with MCFRS, have received large quantities of medical cache equipment for CID, and are working on policies and procedures on how that cache may be shared with response partners. PG Fire/EMS also reported that they have placed into service a new rehab unit, which is available for hospital and emergency services, and has already been used.
- Montgomery County Fire/Rescue – MCFRS reported that their behavioral health tracking project is ongoing, and they are continuing to closely track boarders at all Montgomery County hospitals. They reported finding that on certain days there were as many as 25 boarders in ERs for behavioral health issues. MCFRS reported that they wanted to see if there were any hospitals that had extra capacity so they could explore a possible mental health diversion, but we found that there is no capacity in the system. MCFRS also found that there was no correlation with red, yellow alert, or day of the week in terms of the number of mental health boarders. MCFRS thanked its hospital partners for participating. MCFRS also reported on a recent MCI at the Piney Branch Explosion. They thanked PG F/EMS and all hospital partners for their support, and reported that while the incident was overall extremely well managed, they did have some issues related to patient tracking that they will be working to remedy internally and regionally.
- Calvert County EMS – Calvert County reported that they will be holding a county wide tabletop MCI exercise on November 12<sup>th</sup>, and will be reaching out to response partners

shortly looking for participation. The exercise will be followed up with a full scale exercise in the Spring.

- Charles County EMS – Charles County reported that they placed a new ambulance in service Sept 3<sup>rd</sup>, which has been extremely helpful in increasing their system capacity.
- St Mary's County EMS – St. Mary's was pleased to introduce their new Emergency Services Coordinator and QA officer Mark Pettit, who has taken over after Stanley Williams retired. St. Mary's also reported on their recent full scale mass casualty exercise, which had many lessons learned. The county is now working to move towards a table top exercise, and then another drill in the Spring at Southern Maryland College. The AAR from the full scale exercise is available by emailing Mark Pettit at [Mark.Pettit@stmarysmd.com](mailto:Mark.Pettit@stmarysmd.com).

#### **Announcements**

- Ms. Wright-Johnson asked that anyone who is going to be holding a base station course to share the course date and information with all Region V partner facilities who may need to send their providers to trainings.

#### **Next meeting:**

- The next EMSAC meeting will be held November 17<sup>th</sup>, 2016.