

Vol. 31, No. 2 November 2004

Flu Vaccine Information for EMS Providers

Memorandum

To: EMS Providers in Maryland

From: Robert R. Bass, MD, FACEP

Date: October 18, 2004

Re: Flu Vaccine Information for 2004-2005

2004–2005 Flu Vaccine Information for EMS Providers in Maryland

As you are probably aware, there is a shortage of the flu vaccine. CDC has developed recommendations that place health-care workers involved in direct patient care in a priority group that should be vaccinated. **This includes EMS providers.** MIEMSS encourages EMS personnel in this priority group to seek vaccination through their regular sources of flu vaccine and if not available there, through other sources, including their local health departments.

Healthy EMS providers under the age of 50 should be vaccinated with Flu Mist™ whenever possible. Flu Mist™ administration is also allowed under the current MIEMSS approved Vaccination and Testing programs.

For additional information, see the CDC attachment and the links below.

http://www.cdc.gov/flu/protect/vaccineshortage.htm

http://www.cdc.gov/flu/professionals/flugallery/images04_05/notonlyway2.pdf

Further information can be found at the DHMH web site: http://edcp.org/influenza/

For further information or if you have difficulty gaining access to either vaccination or Flu MistTM please contact Lisa Myers at 410-706-4740.



Vaccination with FluMist™.
Photo courtesy of MedImmune, Inc.

Ways to Prevent the Flu

Avoid close contact.

Avoid close contact with people who are sick. When you are sick, keep your distance from others to protect them from getting sick too.

Stay at home when you are sick.

If possible, stay home from work, school, and errands when you are sick. You will help prevent others from catching your illness.

Cover your mouth and nose.

Cover your mouth and nose with a tissue when coughing or sneezing. It may prevent those around you from getting sick.

Clean your hands.

Washing your hands often will help protect you from germs.

Avoid touching your eyes, nose, or mouth.

Germs are often spread when a person touches something that is contaminated with germs and then touches his or her eyes, nose, or mouth.

Other good habits, such as getting plenty of sleep, engaging in physical activity, managing stress, drinking water, and eating good food, will help you stay healthy in the winter and all year.

EMAIS Update

On October 1, Harford County and Aberdeen Proving Grounds began using the Electronic Maryland Ambulance Information System (EMAIS). Currently eight jurisdictions are using EMAIS: Aberdeen Proving Grounds and Allegany, Calvert, Cecil, Dorchester, Garrett, Harford, and Washington counties. The City of Annapolis is scheduled to complete their training in October and go "live" on November 1, 2004. There will be no additional training until January 2005.

The following is a list of frequently encountered questions/comments and their responses received at MIEMSS regarding EMAIS:

- "The system does not respond when I complete a screen and attempt to move to the next."
 Reminder: you must use the mouse and click on the appropriate button to advance within the software. The "Enter" button should not be used when completing an EMAIS
- "I went back to an 'Official Report' and made an amendment but the system did not save my changes." When making an amendment to an Official Report, you must click "continue" at the bottom of the

page to save your changes before you "save and print official report."

- "One of my patient's medications is not in the medications dictionary. How can I add it?" If you encounter a medication not in the medications dictionary, simply type that medication into the narrative. If you email Kathy Paez the name of the medication, it will be added to the dictionary. MIEMSS has been updating the dictionary on a monthly basis.
- "If I forget my password, can I enter reports under another provider's password?" The answer is no! The provider completing the report must be the provider that logs into EMAIS. Entering an EMAIS record like this would be the same as signing another provider's MAIS report. You essentially are responsible for all data in that document.

Passwords continue to be a challenge for the MIEMSS Information Technology staff. Remember that you can only log into the "test" EMAIS site and practice with the passwords given to you at training (for example, wash003, wash004). Your password for the "live" site should be at least 8

digits in length, alpha-numeric, and something you can easily remember. If you forget your password, MIEMSS will not give out passwords over the phone. If you have a new provider in your jurisdiction, he/she must have completed an affiliation form to obtain a password.

There seems to be confusion regarding printing reports on calls with multiple patients. Once you have entered the data for the first patient and completed the report, the screen will display the message Now processing patient 2 of #. When this appears, you have the option of printing the first report. Simply go to the very bottom of the screen and click on the first report and follow the same print process you do for a single report. Once you have printed the first report, you have the option to enter the second patient's data or quit the program.

MIEMSS has been working diligently to get the provider report process online and expects to have the first version completed by October 31, 2004. Two additions have been made to the 'Assist Primary Care' screen; 'decontamination' and 'upgrade ALS' have been added as reasons for dispatching addition first responder units to assist and ambulance.

If you have questions regarding EMAIS please contact Kathy Paez at kpaez@miemss.org or 410-706-7798.

Maryland EMS Provider Workforce Study

Throughout the country EMS services (public service and commercial) are struggling to maintain adequate numbers of EMS providers, especially Advanced Life Support providers (ALS). Over the past year, representatives at the various MIEMSS committees have been reporting that despite continuous training efforts, services are not capable of maintaining adequate staffing. The problem of ensuring adequate human resources is not new to EMS; however, services are facing new challenges to the old problems of recruitment and reten-

To gain a better understanding of these challenges, MIEMSS, in coop-

eration with many EMS agencies and organizations that have a common interest in the delivery of EMS care in Maryland, have completed a survey to gather data on EMS workforce trends. The survey development process was quite extensive, and the data collected will assist Maryland EMS leaders in determining future strategies in the recruitment and retention of EMS providers.

The survey is available in two formats—paper and electronic—and should be completed by all Maryland-certified EMT-B's, CRT's, CRT-I's, and Paramedics.

Paper

Paper copies of the survey will be distributed through various methods statewide. Copies of the survey are available from your MIEMSS Regional Administrator.

Electronic

The electronic version can be completed by going to the homepage of the MIEMSS website and clicking on "Click Here for the Workforce Questionnaire." The URL for the survey is www.miemss.org/survey.

Completing either format will take only a few minutes and all responses will be kept strictly confidential. If you have questions regarding the survey or would like to request copies for a company/county EMS meeting, please contact Phil Hurlock at 410-706-3666. Results of the survey will be complied and published in January 2005 and serve as the starting point for developing specific workforce initiatives for Maryland EMS services.

CRT Update Process

If you are a Maryland CRT licensed before June 30, 2001, this article is for you! Don't get left behind! More than 200 of your CRT colleagues have already upgraded, either to CRT99 or EMT-Paramedic.

Why are we reminding you? Why upgrade?

On **July 1, 2001**, the U.S. DOT EMT-I 99 curriculum was approved by the EMS Board and was implemented for use in Maryland. The curriculum is used to train all *new* CRTs, and is the basis for the approximately "80-hour update course" used to *update* all CRTs licensed before June 30, 2001.

What exactly is the Maryland CRT "update" course?

The CRT update course was designed through the State EMS Advisory Council (SEMSAC) ALS Committee, consisting of representatives from the career and volunteer jurisdictions, training academies, Maryland State Firemen's Association, Maryland Fire and Rescue Institute, community colleges, and commercial services. The update course contains solely information and skills that were *not* in the CRT courses completed by CRTs licensed before June 30, 2001.

What's my timeframe? Is there a deadline?

CRTs licensed before June 30, 2001 have until March 31, 2008 to update to the new curriculum via the update course. The course may be offered by the EMS jurisdiction through:

- a one-time 80-hour update or
- two CRT continuing education licensure cycles (4 years).

What happens after I complete the course?

At the completion of the course, CRTs must take a **practical examination**. Additionally, CRTs must complete *either* the **State CRT Update Written Examination** *or* the **National Registry EMT-199 Exam**. The State CRT Update Written Examination is comprised only of questions specific to content and objectives contained within the CRT Update Course, while the National Registry Examination

contains questions from the entire EMT-199 curriculum.

What do I need to do if I am a CRT licensed prior to June 30, 2001 and have not yet upgraded to CRT99?

Please contact your local jurisdiction or ALS educational program to find out details of update course opportunities. If you have specific questions regarding the CRT Update process, please contact the MIEMSS Office of Education, Licensure, and Certification at 800-762-7157.

What happens if I do not take the upgrade course before March 31, 2008?

CRTs licensed before June 30, 2001, who do not update to the new CRT 99, have the option to apply for EMT-B certification prior to March 31, 2008.

We hope you choose to update and continue your vital participation in the Maryland EMS System serving the citizens of the State. Our goal is to make your transition to the new curriculum as smooth as possible.

Policy for Military Service Members Called to Active Duty

This policy applies to the certification/licensure status of all Maryland prehospital providers (first responder, EMT-B, CRT, EMT-P, and EMD) who are deployed or activated under military orders in the service of the United States Armed Forces. This also includes any reservist called to extended active duty. Recognizing that no entity can jeopardize the rights and privileges of one called into the service of the United States, a "military EMS provider status" is available to these service members, enabling them to return to their established level of function within one year of their return to Maryland.

The date of return will be established based on the service member's certificate of discharge, statement of release, separation orders, or certificate of retirement. The State of Maryland reserves the right to require a photocopy of one of the above as documentation of the service member's date of return.

If the Maryland EMS certification or license is predicated upon current registration with the National Registry of Emergency Medical Technicians (NREMT), maintenance of NREMT registration, including continuing education requirements, is an individual responsibility and must be conducted in accordance with National Registry policies.

In the event of deployment or activation:

1. The EMS provider or his/her designee notifies MIEMSS in writing that the provider has/had been called to extended active duty.

2. The MIEMSS Office of Licensure and Certification places the provider on Military inactive status as a provider.

Upon return of the provider to

 The provider notifies MIEMSS that he/she desires reinstatement to active status and provides appropriate documentation of release from active duty.

The CRT or EMT-P provides documentation of current active registration with the NREMT.

The provider provides verification of EMS affiliation with an approved EMS operational program.

4. If a revision of the Maryland Medical Protocols for EMS providers occurred during his/her absence, the provider must attend a protocol review session conducted by the EMS operational program.

5. The EMS operational program with which the provider is affiliated may elect to conduct a skills review and proficiency demonstration.

6. One calendar year from the date of deactivation is afforded to the provider for completion of steps 1 through 5.

Promoting Child Passenger Safety

Two new posters, "Always Buckle Right" and "You Score—When You Buckle Everyone the Right Way Every Day," available in English or Spanish, can be ordered on the MIEMSS web site at http://www.miemss.org/EMSCwww/CPSHome.htm or by calling 410-706-3178.

The posters were developed by the EMS for Children (EMSC) and Public Information and Media Services staff at MIEMSS and the Maryland Highway Safety Office at State Highway Administration. They are part of the Hospital Child Passenger Safety (CPS) Project, involving the promotion of CPS discharge policies for Maryland hospitals and health care professionals. The CPS Project, awarded to the EMSC program at MIEMSS for fiscal years 2002-2005, was and currently is funded by the National Highway Traffic Safety Administration (NHTSA) and the Maryland Highway Safety Office at State Highway Administration.

Prior to 2002, few hospitals in Maryland had a comprehensive discharge policy for transporting newborns or young children. CPS information provided to patients and parents varied widely. During the first year of the grant, 48 Maryland hospitals that treat young children were sent a survey to determine the type of CPS resources available to pediatric patients, their families, and hospital staff. In the summer of 2002, certified CPS technicians in each Maryland county were invited to serve as technical resources for these hospitals. Certified CPS technicians continue to work with hospitals to identify current CPS policies and procedures, types of CPS information available to families, CPS training available to staff, and opportunities to include CPS in hospital discharge policies.

Year II grant funding focused on the development of a CPS Resource

Kit for hospitals containing current and accurate safety information. In collaboration with the Maryland Child Passenger Safety Advisory Board, CPS model language for hospital discharge policies was developed and CPS outreach efforts were expanded to primary care pediatric practices. During 2003 the MIEMSS EMSC program and Maryland Kids in Safety Seats provided five regional four-hour Special Needs CPS training courses for health care professionals and child safety advocates and hosted the national EMSC workshop on transporting children with special health care needs.

Year III focused on disseminating educational materials to all hospitals in Maryland with intensive care nurseries, specialty care nurseries, and nurseries. The CPS Project webpage was launched with all products posted for downloading or viewing. Year III also includes the development of the two posters shown on this page, slide presentations, and a video/ DVD that covers the entire age continuum and promotes safe transport for all of Maryland's citizens. Entitled "Proper Occupant Protection," the video/DVD provides an introduction to best practice in passenger safety.

The current year (Year IV) of the project will involve follow-up surveys to Maryland hospitals, CPS technician liaisons, and health care newsletters to determine which types of educational resources were most helpful; to identify changes in practices and policies that have occurred over the past three years; and to conduct a statewide Hospital CPS Update conference. Through a partnership with the Maryland chapter of the American Academy of Pediatrics (AAP), an educational conference call will update primary care providers on Best Practices in CPS, new CPS materials, Maryland child restraint laws, and provide local and regional resources on CPS.









Fire Safety Rap

Hey y'all yeah, we gotta message to shout, It's a fire safety rap and that's what it's about,

So don't touch the matches or be foolin' with the lighters, Unless of course you wanna see some firefighters,

Smoke alarm workin' good on ev-er-y floor, Beep-beep-beep you hear that noise, better get out the door,

Always stay outside and wait, never go back in, With smoke and fire in that house your chances are slim,

Never hide in a closet, never under a bed, You gotta get out quick you don't wanna be dead,

So the point to remember if you wanna survive, Is to keep away from fire and you'll stay alive.

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New To Brack in,
Will Smoke and Fire
In that House
You're Channess are Slim
Never Holder a Bee,
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Fire safety is the focus of a poster and a 30-second rap public service announcement produced by the Baltimore SAFE KIDS Coalition at the University of Maryland Hospital for Children and the Baltimore City Fire Department (BCFD), in conjunction with the MIEMSS Public Information & Media Services staff.

According to Karen Hardingham, RN, coordinator of Baltimore SAFE KIDS Coalition who spearheaded the project, the goal of the rap video is to help save lives by educating the public, and children in particular, about fire prevention and what to do in case of a fire. The rap video addresses the danger of tampering with matches and getting out of the house when the smoke alarm beeps. The poster shows the seven children and several firefighters who performed in the rap public service announcement, along with the rap lyrics which were written by members of the SAFE KIDS Coalition and the BCFD Prevention Bureau.

To request a poster, call 410-328-7532. The public service announcement can be seen at the website www.umm.edu/pediatrics/fs_rap.html



Disaster Drills

Disaster Exercise in Ft. McHenry Tunnel

A tunnel fire disaster exercise held October 3 at the Ft. McHenry Tunnel in Baltimore brought together the Maryland Transportation Authority Police, the Baltimore City Fire Department, the Maryland Emergency Management Agency, MIEMSS, and other city and state agencies.

The exercise simulated a motor vehicle collision with fire inside the tunnel and later evolved to include the mitigation of a secondary device. The existing Ft. McHenry Tunnel disaster plans and interagency communications were successfully tested throughout this drill. The event also demonstrated an excellent working relationship between State agencies and City resources.











Disaster Drills

Emergency Drill at Charles County School

The Charles County Sheriff's Office, Charles County Public Schools, and several emergency management agencies, including MIEMSS, conducted an emergency preparedness drill at Thomas Stone High School on October 6.

After school was dismissed, a mock call went out to emergency personnel about a dumpster fire at the school. The crisis escalated to include an emergency inside the school with injured students and employees. (The drill was held on a two-hour early dismissal day and no students, other than the volunteer student and staff victims, were allowed on the campus during the exercise.) Police, fire, and rescue personnel responded to the call as if it were a real emergency. Thomas Stone staff members followed the

school's emergency plans.

The two-hour drill was designed to familiarize school personnel and emergency responders with an Incident Command System and how to respond to a crisis involving numerous casualties, said Carl Rye, supervisor of school resource officers. Earlier in the day, a number of student "victims" were sent to Civista Medical Center as part of an emergency preparedness drill at the hospital. "Victims" participating in both parts of the drill were moulaged by the Port Tobacco Players and by graduates from MIEMSS-sponsored "moulage workshops." Each "victim" was given a role to play and identified to receive specific injuries, which had been made to look authentic.

The purpose of the drill was to provide training for police, school staff, and rescue personnel in emergency situations. It tested the school's emergency response plan and the school's lockdown procedures. It also demonstrated and evaluated how agencies communicate during a disaster as well as their emergency procedures. An evaluation session was held immediately following the drill to determine lessons learned, so that feedback could strengthen emergency response preparedness. Evaluators-professionals from throughout the state-were at the drill to critique it and participate in the evaluation session.









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DATED MATERIAL

Chief Frazier Receives Award

Chief John R. Frazier, a member of the Maryland EMS Board, is the first recipient of "The Chief of Fire Department Special Recognition Award." In honor of his 50 years of service to the Baltimore City Fire Department (BCFD), this award was presented on September 26 at the Marriott Waterfront Hotel at the annual Firefighter/Paramedic Appreciation & Awards Day which recognizes BCFD members for actions beyond the call of duty. Among the attendees at the ceremony were Mayor Martin O'Malley and

his wife Katie, who actually presented the award to Chief Frazier on behalf of the BCFD.

In addition to Chief Frazier, 60 others were recognized for heroic deeds in 18 dwelling fires, water rescues (including the water taxi accident in March), vehicular rescues, giving emergency medical help, and community service. Fire Chief William J. Goodwin, Jr. commented during the ceremony: "For 29 years as a member of the Fire Department, I've watched the men and women of this department perform heroic deeds."



Chief John R. Frazier

MARK YOUR CALENDARS!

EMS Educational Opportunities

Managing the Psychological Consequences of Disasters: A Training for Health Care Providers.

Training sessions are offered statewide through

Training sessions are offered statewide through April 27, 2005. Presented by Sheppard Pratt Health System in collaboration with community partners, including the MIEMSS State Office of Commercial Ambulance Licensing & Regulation. The training is free of charge to commercial EMS providers and is approved for EMS CEUs (ALS: 6 hours Medical; BLS: 6 Hours). Contact Iris Fisher at Sheppard Pratt at 410-938-3157.

27th Annual Mid-Atlantic Burn Conference (Dec. 5–6), Sheraton Baltimore North Hotel, Towson. Sponsored by Johns Hopkins Bayview Medical Center, Baltimore Regional Burn Center. Contact Carrie Fox, RN, 410-550-4791.

Miltenberger Public Safety Seminar (March 2005), Allegany County. Contact MIEMSS Region I Office at 1-800-762-7157.

Maryland Chief Officers Seminar (March 12–13, 2005), University of Maryland–Shady Grove.

Maryland Public Life Safety Educator Seminar (April 2, 2005), MFRI, College Park. Contact MFRI to register on-line at www.mfri.org/seminars.

EMS Care (April 29–May 1, 2005), Bethesda Marriott Hotel. Contact MIEMSS Region V Office at 301-474-1485 or toll-free 1-877-498-5551.