



Commercial Ambulance Services Advisory Committee

Meeting Minutes

Wednesday, November 20, 2019

MIEMSS Room 212

Representatives Present:

CASAC Chair: *Will Rosenberg – Butler Medical Transport*

SOCALR: *Lisa Chervon – SOCALR Director, Marty Johnson – EMS Manager of Ambulance Programs, Deb Simmont – SOCALR Administrative Officer*

MIEMSS Staff: *Terrell Buckson (Director, MIEMSS L & C), Jason Cantera (EMS Apps. Coordinator-MIEMSS), Dr. Tim Chizmar (State EMS Medical Director), Sarah Sette (MIEMSS AAG), Cyndy Wright-Johnson (Director EMS for Children)*

Attendees: *Pete Fitzpatrick, RN, NR-P (Children's National Hospital), Jim Pixton (AAA GM), Gary Rains (Butler), Cory Skidmore (VP of Ops – Hart to Heart), Heather Stamey, RN (Program Director-MedStar), Tyler Stroh (Director of Ops – Med-Care), Chuck Therlfall (AAA QA)*

Remote Attendees: *John Damiani (QA Officer - Christiana Care LifeNet), Jennifer Dannenfelser, RN (PEMAC), and Mike Rosellini (East Coast)*

Introductions:

The meeting was called to order by Chairman Will Rosenberg at 13:08 hours; roll call/introductions were made. Jill Dannenfelser, RN (PEMAC Rep) submitted the following change(s) to September's meeting minutes: "the proposed changes for the heat stroke protocol to add language on Exertion Heat Stroke to encourage EMS to work with an onsite Athletic Trainer or Team Physician to stay on scene for cooling that would include ice baths, not just ice packs, to reduce the patient's core body temperature prior to transport. PEMAC is working with the Protocol Review Committee, OMD, and the Athletic Trainers Association to have inclusive language for all ages. The protocol change would apply when there is either an Athletic Trainer or Team Physician on site and not apply to all heat exhaustion or heat stroke cases outside of organized sporting/athletic events".

A motion by Jim Pixton from AAA was made to accept the minutes with the aforementioned changes. Motion was seconded by Cory Skidmore (Hart to Heart) and passed.

State EMS Medical Director's Report – Dr. Timothy Chizmar

The following protocol revisions have been recommended by the Protocol Review Committee and are being submitted to the EMS Board for approval:



Commercial Ambulance Services Advisory Committee

- Protonix to change from an SCT to an ALS medication. This change was necessitated by the increased number of GI transports for endoscopy, as hospitals drop their GI services.
- the removal of Dopamine from the protocol with the substitution of Epinephrine, both as a drip and push dose in the pediatric population.
- a decrease in the amount of Epinephrine given to patients during cardiac arrest to four with the provision that if there is a repeat arrest, up to two additional doses can be given

Will Rosenberg and Children's National Medical Center provided Dr. Chizmar additional requests for protocol revisions to be discussed under New Business.

There was a Quality Improvement Summit for the 9-1-1 jurisdictional services last week which Lisa Chervon attended. Lisa and Dr. Chizmar have had preliminary discussions about developing the commercial measures as well. Dr. Chizmar encouraged CASAC members to begin thinking about it and is open to suggestions for measures. Several key performance indicators have been proposed for 9-1-1 services (time to EKG, on-scene time for trauma patients, respiratory assessment, etc.). Lisa asked that anyone interested in participating in the development of QA performance metrics please contact her. Heather Stamey, Tyler Stroh, and Mike Rosellini expressed an interest.

Maryland EMS Plan – Dr. Timothy Chizmar, Medical Director

The EMS Plan Summit is scheduled for Wednesday, December 18, 2019 at the Double Tree Hotel in Annapolis and will be hosted by Dr. Ted DelBridg. We genuinely would love to have the participation of the commercial services and have capacity for up to 300 participants. There are sixteen different components to the EMS Plan. Participants will be breaking into small groups to discuss each component. It is important to us that everyone's opinions are represented. If you would like to join us that day, there is a link on the MIEMSS website to register and Barbara Goff is the contact person. This is the place to get your thoughts, opinions and ideas into the Plan, which is the working document for the EMS Board.

SOCALR Report – Marty Johnson, EMS Ambulance Program Manager

Marty discussed the SOCALR invoicing process and reiterated the importance of waiting until an invoice has been received before submitting a payment. L&C will no longer be accepting payments as they relate to SOCALR.

There will be a slight change to the renewal process as it pertains to payments asking the commercial service to identify the way in which they are going to pay as part of the renewal application. The choices for payment remain the same using a wire transfer, ACH or credit card payment. This will assist SOCALR in identifying payments once received.



Commercial Ambulance Services Advisory Committee

SOCALR Report – Sarah Sette, Assistant Attorney General

Sarah shared that we are working on a comprehensive revision of the commercial ambulance regulations including the neonatal regulations. As a result of the concerns that have been recently expressed regarding staffing and the shortage of EMT's, The EMS board has approved moving forward with a request for an emergency regulation that would allow EMR's to staff ALS, SCT, and NEO ambulances as drivers, as they currently have the option to do with BLS ambulances. This change will not become effective until approved by of State Office of Administrative, Executive, and Legislative Review (AELR). A notice and updates regarding this process will be published on the MIEMSS website.

SOCALR Report – Lisa Chervon, SOCALR Director

Lisa recapped the ongoing discussions regarding the neonatal regulatory language changes. A workgroup comprised of stakeholders from commercial ambulance services and hospital NICU personnel worked to develop proposed revisions to the neonatal regulations, which were submitted to MIEMSS leadership for review. The suggested revisions from MIEMSS leadership were forwarded to the neonatal workgroup, and were presented to CASAC. Responses with questions and concerns have been received from both those who have been involved with the workgroup, and from those who have not. Dr. Chizmar commented that the revisions were developed to emphasize the desire for physician to physician communication as it pertains to the appropriate level of care required for transport. Also, we do not want the regulations to indicate or suggest that this level of care can be provided by a BLS transport unit. The floor was opened for the input of the commercial services to take back to leadership for review.

Jim asked for clarification regarding the transfer of a patient that is >28 days old and < one year old who is now suffering with an ear infection in a hospital doesn't treat infants, as he believes that this type of transfer can be done with a BLS transport unit. Discussion ensued regarding this topic with Dr. Chizmar and the members of CASAC. In summary, the purpose for the change in language is to have safeguards in place and have a mandatory screening process via physician-to-physician, and then hospital to service. The group has agreed that more detail is better when addressing the transport of neonates and infants. Also, the group was reminded that the hospitals are the ones who are liable and also decide the level at which an infant or neonate is to be transported.

Will called for a vote on the changes made/discussed regarding the proposed revisions to G, H, and I of the neonatal regulations. It was agreed upon by the majority of those present that the detailed version developed by the Neonatal Stakeholder's Workgroup is the preferred version.

MIEMSS Licensure and Certification Report – Terrell Buckson, Director

Terrell stated that he is still receiving questions regarding the initial ALS affiliation process for clinicians. If you have an ALS clinician who applies to become licensed in Maryland, once they have submitted their application, a protocol review form will go out to Service Directors to sign off and return once a protocol review is completed. MIEMSS will then send out a letter of authorization to test. Once the exam is successfully completed, an affiliation form will be forwarded for service approval. Once approved, the service Medical Director will be asked to approve and sign off on ALS affiliations. The affiliation form



Commercial Ambulance Services Advisory Committee

does NOT go out prior to the clinician successfully completing the exam. The BLS renewal cycle has begun and there are still have roughly 1900 clinicians that need to renew. Please encourage your BLS clinicians to log in and complete the renewal process. As a reminder, after 12/31/19, there will no longer be a National Registry Exam for CRT to get to the “I” level. If you have people that still need to test, please encourage them to do so.

MIEMSS EMS for Children – Cyndy Wright-Johnson

Cyndy Wright-Johnson provided handouts from PEMAC, and Deb will send them out with the meeting minutes. We have educational trainings coming up, we are offering a review course for CPEN (Certified Pediatric Emergency Nurse) at Miltenberger in March of 2020; a “Save the Date” flyer will be attached to the minutes. EMSC’s 2019-2020 Educational opportunities. and the Maryland EMS for Children Department Update for November 2019 will also be attached to the minutes.

Committee Report – SCT Subcommittee – Will Rosenberg

No report.

Committee Report – PEMAC Report – Jill Dannenfelser, RN

The revised 2019 Interhospital Transfer Resource Manual has been distributed to all Maryland hospitals.

There was a very lengthy discussion on protocols at the last PEMAC meeting. The pediatric population will be added to the Termination of Resuscitation protocol for the next year, pending the approval of the Protocol Review Committee. The final wording is still being revised.

PEMAC is currently working on writing a non-invasive protocol for pediatric patients for CPAP, BIPAP and high-flow oxygen. It is in the very beginning stages of the protocol development.

The MATC conference will be moved to October 2020. In the meantime, there will be monthly educational offerings for commercial ambulance providers. These dates have not been released but will be available by distance learning.

Committee Report – SEMSAC – Mike Rosellini

Mike Rosellini has been recommended as the new commercial services representative to SEMSAC, replacing Justin Kinsey. We are currently awaiting approval from the Governor’s Office to make it official.

Committee Report – Ambulance Safety – Cory Skidmore

No report.

Committee Report – Legislative Subcommittee Report –

No report.



Commercial Ambulance Services Advisory Committee

Committee Report – MIH Committee – Deb Ailiff

No report.

Old Business – Open to the Floor

No Old Business

New Business – Will Rosenberg – and Open to the Floor

Officer Nominations: The following nominations were made for CASAC Officers:

- Chair - Will Rosenberg
- Vice Chair - Jim Pixton
- Committee Representatives:
 - PEMAC - Jill Dannenfelser
 - MIH - Deb Ailiff
 - SEMSAC – Mike Rosellini

There was no nominations for the SCT Chair, nor the Legislative Subcommittee Chair.

Protocol Change Discussion: Will discussed the previously mentioned protocol change proposals. They are as follows:

- transport of acute ventilatory patients for adults – proposal to change the new tracheostomy patient down to 3 days instead of 7 days however left the caveat for those who may go into an acute care setting.
- Bipap patients divided into 2 categories, chronic and acute, as are ventilatory patients.
- The Cpap protocol change to include children under the age of 13.
- High-flow nasal cannula is only applicable if adequate resources are available
- SCT requirement for orally intubated patients be restricted to hospital to hospital transports, not hospital to hospice. Jim Pixton suggested that transport requirements for hospice transports and patients be evaluated by the PRC. Dr. Chizmar has encouraged Jim and/or whomever forward him a proposal.

For the Good of the Committee – Open to the Floor

Nothing to report or discuss.

Adjournment – Will Rosenberg, CASAC Chairman

CASAC meeting was adjourned at 14:41 hours. The next CASAC meeting will be on Wednesday, January 15, 2020 at 13:00 hours in Room 212 at MIEMSS.