

# COMMERCIAL AMBULANCE SERVICES ADVISORY COMMITTEE

## Meeting Minutes

Wednesday, September 12, 2018

MIEMSS Room 212

### **Representatives Present:**

**CASAC Chair:** *Will Rosenberg – Butler*

**SOCALR:** *Lisa Chervon, Director; Steven Hoffman, SOCALR Investigator, Marty Johnson, Licensing Specialist and Deb Shaw, Administrative Officer*

**Attendees:** *Sara Sette (AAG MIEMSS), Katie Sinclair (East Coast), Terrell Buckson (Director of L&C, MIEMSS), Richard Alcorta, MD (MIEMSS), Tim Chizmar, MD (MIEMSS) Jill Dannenfels, RN (MD Express Care), Bob Harsh (County Medical), Jim Harsh (County Medical), Justin Kinsey (PLMD), John Oliveira (JH Lifeline), Jim Pixton (AAA), Susan Rainey (Nemours), Steven Hoffman (SOCALR), Venetia Roberts (Lifestar), Cynthia Wright-Johnson (MIEMSS EMSC), Karen Sparks (East Coast), Cory Skidmore (Hart to Heart), Joshua Myers (Hart to Heart), Karli Secor (Urgent) and John Damiani (Christiana Care LifeNet).*

**Introductions:** Meeting called to order at 13:02 hours by Chairman Will Rosenberg and introductions were made. A motion was made by Cory Skidmore from Hart to Heart and seconded by Jim Pixton from AAA to approve the minutes from the May 2018 CASAC meeting.

### **State EMS Medical Director – Richard Alcorta, MD**

- Dr. Alcorta introduced Dr. Tim Chizmar and stated that he will be taking over his position effective November 1, 2018.
- There was discussion regarding the transportation of organs in the State of Maryland as brought to light by Justin Kinsey from the Legislative Subcommittee and the statutory regulations of same. Maryland law now permits organ transport services to operate as emergency vehicles. Current COMAR regulations require commercial ambulance to be fully staffed when transporting organs. Dr. Chizmar will have an opportunity to research the matter and address it in the near future and Dr. Alcorta believes there are grounds for reconsideration of the current COMAR regulations with regard to commercial services transporting organs.
- Executive Director interviews are being held on October 1<sup>st</sup> and October 3<sup>rd</sup>. If you wish to participate please know you are welcome. We are down to two candidates.
- Communications upgrade project is going very well and is a three year project.
- Medication back order issues are a big deal, however, there are alternative medications that can be used in some instances.
- MIEMSS is required to report to ODMAP as a public safety issue the date, time, longitude and latitude of where the person who overdosed was found, Narcan use and survival data. The map is not up to date because we are not submitting ELITE data from the public safety side and we are currently working on improving the integration of that data.

- From a public safety perspective we are working on our volunteer ambulance inspection process and the mandatory process is currently on hold until our new Executive Director is on board to provide direction on this.
- MIEMSS is working with CRISP to integrate eMeds data into CRISP and ensure the core data elements are uploaded accurately. We are also working the health information exchange with eMeds for patient tracking. The systems need to be synced so other agencies can access the patient information. MIEMSS is no longer conducting patient tracking via the EPTS.
- Short Forms - We have a real issue with these being used properly and consistently. There have been continual complaints from hospital staff that they are not getting the records/information they need regarding the patients that are transported to them via commercial ambulances. There was pushback on this statement stating that the information is provided to the RN's at the time of patient transfer, and that it is the stroke coordinators and or trauma coordinators that are having the issue. It was further suggested that MIEMSS IT Department work facilitate the upload of reports from third party vendors to the hospital dashboards. Lisa pointed out that this issue most recently came to light again because aviation services doing inter-facility transports were not supplying the hospitals with the short form. The hospitals have gotten cited by the Joint Commission for not having this documentation as part of the patient medical record. The option to develop an SCT form that is more specific to the type of care required was raised however it was stated that most services require different data elements.
- The National Registry has been established as the entity charged with the administration of the certification examination for EMTs. We do not have, nor will we have an alternate MIEMSS developed test. MFRI has made it clear that they will not be writing an EMT test for state licensure.
- Dr. Alcorta discussed the difficulty that Garrett Regional Medical Center (GRMC) has had in transferring patients out of the facility due to a lack of available commercial transport units. A West Virginia service has applied for a waiver however MIEMSS continues to work with GRMC, licensed Maryland services and Region I stakeholders to reach a solution to the matter. Dr. Alcorta reported that it has been necessary to call on public safety units on multiple occasions to perform interfacility critical care transports.
- Will thanked Dr. Alcorta on behalf of all the commercial ambulance companies for his continuous guidance and support over the years and wishes him much luck and joy in his retirement.

### **Licensure and Certification – Terrell Buckson, Director**

- One of the enhancements to the Licensure System now allows the Licensure System Service Director to log into the service and remove affiliations. It was asked that each service company take a few minutes to update their affiliates so we have the most current information. A handout on the steps was provided. It was advised that services removing affiliations should not do more than 10-12 at once as the bulk process seems to be slowing down the site.
- Please note that once an affiliation is deleted the only way to get it back is to reapply, which requires sign-offs by the Service Director and the Medical Director (if ALS).
- Will Rosenberg asked if there are any plans in the works to improve the speed at which the site functions. As of right now that is just an aspect of this program that they are not able to control. It is a nationwide issue and they are hoping that once they switch to the .net platform that speed/performance will be enhanced.

## SOCALR – Lisa Chervon, Director

- Lisa Chervon recognized that this is going to be Dr. Alcorta's last CASAC meeting and that Dr. Timothy Chizmar, who is the newly appointed Assistant State EMS Medical Director, will be replacing Dr. Alcorta as of November 1<sup>st</sup>, 2018.
- Annual inspections are down to the last few company inspections in September and October which will complete our inspection year and we will resume our inspections in March of 2019. The feedback we have gotten in the field has been positive and has gone a lot smoother than trying to complete all of them in just a two month period. Please note that the fee adjustments were a one-time occurrence, and we will be going back to the regular fee schedule moving forward. Lisa thanked the commercial services for their patience during this transition and welcomes any and all feedback to help make this process even better.
- Marty Johnson addressed the need for the service companies to work in getting their renewal applications back to SOCALR ten days prior to the inspection date so we can process them correctly and efficiently. Inspections will not be conducted prior to receipt of payment.
- Any required licensure documents that have expiration dates (MSI's, registrations, insurance policies, CLIA) will be asked for continuously throughout the year. Submission of all MD and RN licenses will stay as part of the annual inspection process as they are required to be supplied annually in connection with your service company renewal.
- We are currently auditing CLIA waivers for each service requiring one. SOCALR will be reaching out to ensure that these are up to date as well.
- Lisa further advised that we will be sending out reminder emails on or around the first and the fifteenth of each month to those who have MSI's, registrations, insurance policies and the like which are set to expire so we are able to keep all information current.
- Cory Skidmore from Hart to Heart asked about the progress of an electronic application process. Lisa shared that it was much too cumbersome a task for the eMeds product that was originally being investigated as their product does not meet our needs. An in-house system called CALS (Commercial Ambulance Licensing System) has been developed, and phase two of that project is to integrate an online application capability, which we are currently working on.
- Our QuickBooks consultant is meeting with us tomorrow to establish our accounts receivable system. We have our finance department working with the State Banking System to make sure we can establish a payment system through QuickBooks which would allow us to send you an invoice and to receive your payments through this process. Marty Johnson requested that until this new process is up and running that the service companies call SOCALR prior to making payment so we can verify the correct payment amount. This will help to eliminate the mistakes in fees paid moving forward.
- Lisa Chervon addressed the Neonatal Stakeholders meeting which is scheduled for October 18<sup>th</sup>, 2018. SOCALR has spent the last year making rounds to every neonatal service hospital that has an agreement with that service to talk about their operational model and their personnel, training and equipment. The findings of these surveys will be discussed at this meeting. Representation not only from neonatal commercial services, but also hospital NICUs is necessary to make this meeting as beneficial to all stakeholders as possible. Deb sent out an email a few weeks ago asking for RSVP's as to who is coming. If you have not already done so, please respond ASAP. It is envisioned that a couple of smaller taskforce type groups may be developed out of the stakeholders group to address specific topics.
- Lastly, we had hoped to have Randy Linthicum here today, but he is staffing the SEOC at MEMA. There was an email sent out this morning regarding Maryland assets from the commercial

service industry deploying to the Carolinas and neighboring states in response to Hurricane Florence. MEMA has been staffed 24/7 at this point; MIEMSS representatives will be monitoring and responding to any requests for assistance that arise. Randy indicated that it is most likely that they will primarily use the FEMA contract versus an EMAC request.

#### **MIEMS EMSC Report – Cyndy Wright-Johnson**

- Cyndy informed everyone that there were posters and handouts available to take and display. There have been 45 child deaths this year so far as a result of a child being left in a hot car.
- 2 new projects have been launched and Cyndy asked for a head count as to how many of the commercial ambulance services are using the blue baby pods for transports. Pulse and Hart to Heart have been using them.
- Homeland Security Preparedness Project has funded this program on the Eastern Shore and has supplied 5 of these baby pods to the hospitals there that do not have established OB, delivery or nurseries. A condensed reference card is in the works to go with the baby pods.
- The second project pertaining to the high performance CPR has been rolled out and completed. The before and after working knowledge of those who perform child CPR has increased as a result of the training. Cyndy also offered to have the training to all commercial ambulance services, stating that she would provide a training class for them at MIEMSS. None of the services present expressed an interest in attending. Training classes will be rolled out this fall and winter throughout the region.

**SCT Subcommittee** - No report

#### **PEMAC – Jill Dannenfelser**

- Jill acknowledged that Cyndy covered everything in her report. Cyndy added that the Protocol Committee continues to work on the 1-page protocol change proposal on how to transport children properly and safely in an ambulance.

**Ambulance Safety Workgroup** - Nothing to report

**MIH** - No report

#### **Legislative Subcommittee Report – Justin Kinsey**

- The question was asked as to how to go about increasing the enforcement ability of MIEMSS/SOCALR when it comes to those ambulance companies who encroach upon our state. Sarah stated that it was a legislative issue and that if they wanted to increase MIEMSS/SOCALRs enforcement ability, it would be across the board as it pertains to fines and the like.

**SEMSAC** - No report

**Old Business** - Nothing to discuss

**New Business**

It was requested by Will that COMAR be looked at as far as the regulation requirement for PPD's to be every 5 years instead of the current requirement which is annual. Sarah and Lisa will be working on the regs and will take this into consideration.

**Next Meeting**

Meeting adjourned at 1446. The next CASAC meeting will on November 16, 2018 at 1:00 p.m.