



**Region V EMS Advisory Council
General Membership Meeting Agenda**

Prince George's County Fire Services Building
6820 Webster Street Landover Hills, Maryland 20784

January 26th, 2017
01:00 pm - 03:00 pm

Conference Number: 866-247-6034
Participants Passcode: 2757435356
Adobe Connect: <https://share.dhs.gov/r5emsac/>

- I. Welcome and Introductions
- II. Review of Minutes
- III. Report of Chairman
- IV. Medical Director's Report
- V. MIEMSS Report
- VI. Old Business
- VII. New Business
 - a. MIEMSS Licensure and Certification Database
 - b. Nominee for Volunteer Representative to SEMSAC
- VIII. Announcements
- IX. Regional Round Table



Region V EMS Advisory Council

Thursday, January 26th, 2016

Prince George's County Fire Services Building
6820 Webster Street, Landover Hills, Maryland 20784

Meeting Minutes

Attendance: Alan Butsch, Cindy O'Brien, David Goroff, David Stamey, Heather Howes, Mark Pettit, Michael Somers, Michelle Paul, Pat Gabriel, Tessa Smith, Lori Cherry, Terrell Buckson, Bryan Spies, Karen Baker, David Hurley, David Lane, Emily Wagner, Susan Femia, Amy Schwartz, Cyndy Wright-Johnson, Guy Yesse, Phil Smith, Nicole Duppins, Karen O'Connell

Welcome and Introductions

- Chief Alan Butsch (MCFRS) welcomed EMSAC participants and thanked PG F/EMS for hosting.

Review of the Minutes

- The minutes from the November EMSAC meeting were reviewed. Tessa Smith (PG Hospital) made a motion to approve the minutes, which was seconded by Mark Pettit (St. Mary's County). The EMSAC unanimously approved the minutes.

Medical Directors Report

- Dr. Michael Somers reported that the Maryland chapter of the American College of Emergency Physicians, EMS Committee had not met since the EMSAC charter revision was approved, and therefore had not yet appointed an EMSAC representative.

Report of Chairman

- Chief Alan Butsch reported that Charles county had requested and been approved to repurpose funding under SHSGP. He also reported that all jurisdictions should have received their 50/50 grants letters, and asked that jurisdictions report to MIEMSS if they will not be able to spend all the allocated funds as soon as possible, so that the funding can be repurposed for another jurisdiction's project.
- Chief Butsch also expressed his thanks to all those personnel and jurisdictions that participated and assisted with the recent inauguration and associated events.

MIEMSS Report

- David Goroff (MIEMSS) gave a brief update on the State Homeland Security Grant Program (SHSGP), and reported that expression of interest requests will be released in the next 60 days. \$250,000 will be available. He reported that priorities for this year's grants are Complex Coordinated Attack and IMT Position Specific Training.
- Goroff also gave an update on EMT Students in Progress (SIPs), and asked if jurisdictions have any students who have taken and completed an EMT class, but have

not taken or passed the National Registry exam, please have them get in touch with the Region V staff as soon as possible. He reported that MIEMSS is making a concentrated effort to work closely with these students and identify their needs and provide support to help them achieve NREMT and Maryland certification.

- The group discussed the recent CHEMPACK sustainment visits, during which the CDC identified several preliminary areas for improvement for Maryland hospitals and CHEMPACK sites, specifically regarding cache placement and access. Once the formal report is received from the CDC, the Region V staff will be reaching out to each CHEMPACK facility to review access documentation and cache placement.
- The group also discussed the use of the Los Angeles Motor Scale (LAMS) for stroke patients. Several Region V hospitals reported that providers are not providing LAMS scales during their consults or when they arrived at the receiving facility. MIEMSS asked that jurisdictions work with your QA officers and training officers to ensure that EMS providers are utilizing and reporting the LAMS score during their care of suspected stroke patients as required in the Maryland Medical Protocols.
- The EMSAC discussed the continued rise in the use of yellow and red alert by Region V hospitals. Chief Butsch shared the criteria for which MCFRS bases its use of blue alert, which he reported has generally been useful in ensuring that patients go to the appropriate hospital based on their catchment area. All hospitals that participated in the discussion agreed that the increased use of diversion was a symptom of increase patient volume and increased use of the EDs for ICU patient boarding. Chief Bryan Spies (Prince George's County Fire/EMS) discussed his jurisdictions view that many hospitals will avoid going on yellow alert and wait to be put on reroute, to avoid the yellow alert hours in their annual totals. Spies also led the group in a discussion of mini-disaster use, specifically the fact that EMSOPs do not have the ability to put a hospital on mini-disaster in a situation, such as an active shooter incident, where the hospital may not be able to call EMRC to declare a mini-disaster. The group agreed that under specific criteria, it would be beneficial to give EMSOPs this ability, and David Stamey (MIEMSS) agreed to bring the proposal to the MIEMSS Medical Director's Office for consideration.

New Business

- MIEMSS L&C
 - The group had an in-depth discussion regarding the new MIEMSS Licensure and Certification system. Chief Butsch emphasized that restoring the features that the new system does not have, that the old system did have, is essential for the successful day-to-day operations of his department, and asked that the EMSAC and EMSOPs be kept informed about estimated times for their restoration.
 - Chief Spies reported that the new system has cost PG FEMS more money and more man hours than they could have imagined. For example, Chief Spies reported that his staff cannot look at their entire EMSOP at a single time, and must drill down to each company individually. He reported that they absolutely need to be able to look at their entire EMSOP in a single view, a function that is essential for a large service with many companies. He also reported that his staff is still finding EMT certifications that have not been processed, and finding that some of his providers have been accidentally removed from the system and must have their credentials restored, whereas there are providers still in the system that have either been deceased or retired for 20 years or more. Chief Spies expressed

his hope that MIEMSS would fix the licensure and certification database to the satisfaction of the EMSOPs engaging in any other projects or activities.

- Heather Howes (Calvert County Public Safety) agreed with Chief Spies assessment, and shared that the system still has providers in the Calvert EMSOP that have certifications that expired in 2002, and EMSOPs cannot filter out those individuals and must scroll through their certifications to find useful information.
- Terrell Buckson (MIEMSS) thanked all the EMSOPs that shared their frustrations with the new system, and gave a brief update on how functionally would be restored through a new contract and statement of work that is currently being finished with ImageTrend, including sortable and exportable reports. He also reported that ALS renewal applications will be available online February 1st.
- SEMSAC Volunteer Representative Nominations
 - The EMSAC reviewed four applications for nominees to SEMSAC for the volunteer representative position. After three rounds of voting, the EMSAC voted to nominate the following candidates (in order):
 - 1) David Siviter
 - 2) Gary Easley
 - 3) Katy Hassler
- 50/50 Grant
 - Chief Butsch discussed a proposal to expand the 50/50 grant to include CPR devices such as the Lucas chest Compression System and similar products. Chief Spies agreed with the concept of the proposal.
 - Dr. Somers shared his belief that while CPR devices are beneficial, they have a side effect of having more patients being transported that meet the termination of resuscitation criteria.
 - The EMSAC unanimously agreed to recommend that CPR devices should be included in the 50/50 grant. MIEMSS staff agreed to forward this recommendation to the appropriate grants managers.

Regional Round Table

- Prince George's Health Department - Not Present
- 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 – No Report
- Prince George's Hospital – No Report
- Doctors Community Hospital – No Report
- Fort Washington – Not Present
- Southern MD – No Report
- Charles Regional – Not Present
- Calvert Memorial – No Report
- St Mary's Hospital – No Report
- WAH – Not Present
- Holy Cross Hospital – No Report
- HCH Germantown – No Report

- Shady Grove Adventist – Not Present
- Suburban – No Report
- MedStar Montgomery– No Report
- Children’s National Medical Center – Dr. Karen O’Connell reported that CNMC held a disaster drill and thanked regional partners for their participation. She encouraged anyone to reach out to her for lessons learned.
- Shock Trauma – Not Present
- Malcolm Grow – Not present.
- Walter Reed – Not Present
- MSP – Not Present
- US Park Police – No Report
- MSFA – Not Present
- MFRI – Not Present
- MCAC – Not Present
- Prince George’s County Fire/EMS – No Report
- Montgomery County Fire/Rescue – No Report
- Calvert County EMS – No Report
- Charles County EMS – Captain Lori Cherry (Charles County DES) reported that Charles County is getting ready to hire two new captains and two new lieutenants, and that they were able to spend the SHSGP money that was reallocated. She also reported that Dr. Michael Somers is the new interim medical director for the County.
- St Mary’s County EMS – No Report