

Region IV EMS Advisory Council

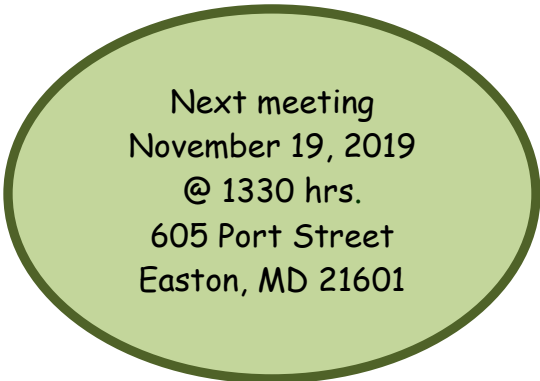
301 Bay Street Plaza, Suite 306, Easton, MD 21601 Phone: 410-822-1799 Fax: 410-822-0861

Scott Wheatley, Chair
Rick Koch, Vice-Chair
Brian LeCates, Secretary

AGENDA

September 17, 2019

1. Call to Order & Introductions
2. Approval of Minutes
3. Regional Medical Director's Report
4. Pediatric Medical Director's/EMSC Report
5. EMS Board Report
6. SEMSAC/Regional Affairs Report
7. MIEMSS Report
8. Agency/Regional Reports (Circle "yes" on the roster if you want to make a report)
9. Old Business
10. New Business
11. Adjournment



Next meeting
November 19, 2019
@ 1330 hrs.
605 Port Street
Easton, MD 21601

REGION IV EMS ADVISORY COUNCIL
September 17, 2019
Minutes

Attendees: Scott Wheatley, Scott Hass, Michael Parsons, Anna Sierra, John Barto, Dr. Joseph Ciotola, Brian LeCates, Dr. Tom Chiccone, David Collins, Shari Donoway, Chris Truitt, Dr. Steven White, Terrell Buckson, Denise Hill, Rick Koch, Bryan Ebling, Mark Bilger, Randy Linthicum, Nicole Leonard, David Rice, MSP Brian Francis, Kenneth Tull, Harvey Booth, Mary Alice Vanhoy, Dr. Daniel Ochsenschlager, Doug Walters, Michael Parsons, Cyndy Wright Johnson.

The meeting was called to order at 1:30 by Scott Wheatley

Approval of Minutes: A motion was made by Mary Alice Vanhoy to approve the May 21, 2019 minutes as written, seconded by Denise Hill and passed.

Regional Medical Director's Report:

Dr. Chiccone reported:

VAIP changes were approved during the 9/11 meeting. Medication list was trimmed in 2016. Double lock narcotic regulations are not a requirement from DEA. Double locks will no longer be required by VAIP as we try to mirror DEA requirements.

Looking at the potential of having an EMS Physician in EMRC to take some of the burden off of the Hospital Base Station Physicians.

Looking into slimming down the protocol books in the way of Treatment vs. Details. Would like to move towards electronic format in the future.

Scott Hass: What is the definition on DEA requirements for lock boxes? John Barto replied that he would cover this in his report.

Pediatric Medical Director's/EMSC Report:

Cyndy Wright Johnson:

PEPP Hybrid will be held on October 10, 2019 at MIEMSS HQ in Baltimore. Target audience: EMS Clinicians - BLS & ALS.

ALPS Hybrid Course with option for Heart Code PALS addition will be held on December 13, 2019 at MIEMSS HQ in Baltimore. Target audience: physicians, physician assistants, and nurse practitioners.

CPEN Review Course on March 12th and 13th 2020 will be held at Rocky Gap Conference Center in Flinestone, Md. as a pre-conference to Miltenberger. Target audience: Nurses who work in the ED.

PEMAC - Looking at the 14 pages on cardo for pediatrics – trying to pull them all together with an emphasis of staying on the scene – goal of Epi in the first 5 minutes.

November protocol meeting will be long with a focus of moving towards shorting them. The two leading deaths under the age of 18 are suicide and unsafe sleeping. Safe Kids received a grant to focus on this.

EMS Board Report:

Mary Alice Vanhoy:

The majority of the EMS Board meeting's focus was on money.

Wayne Tiemersma's report was very good.

Dr.Chizmar's report on Mobil Integrated health was very detailed. He shared information about the data pertaining to the MIH programs.

Budget - Money was tight again this year.

SEMSAC Report / Regional Affairs Report:

Scott Hass:

Capt. McMann reported that many resignations have been received in Western Maryland. We have lost five pilots which could cause some delay in Western Maryland.

50/50 Grant status discussed at SEMSAC – Region IV has nine (9) counties and the grant money that Region IV receives is not even enough to provide one (1) monitor for each county. We normally are only able to fund four (4) monitors in Region IV. There has not been an increase in funds since 1998. We can only fund four monitors with the money we receive today vs. the nine (9) we could fund in 1998.

It was brought to light that Grant money was left on the table last year, yet no Regional Offices were made aware of these funds.

Mary Alice Vanhoy – No one was not happy to hear about these left over funds and wants to know where the money has gone, and where it was spent. Also, would like the possibility of changing the expenditure deadline looked into so that if there are funds left on the table they could potentially be re-prioritized. It appears that all other Grants have been closely monitored except for the 50/50 Grants.

Closed session on budget – The new fiscal year budget was approved.

MIEMSS Report:

John Barto:

Please welcome Mark Bilger who took over for Phil Hurlock, Terrell Buckson and Mark Linthicum. Thank you all for joining us today.

Mark Bilger – Thank you, I look forward to working with everyone.

Terrell Buckson – Thank you, happy to be here.

Randy Linthicum – The request for an EMS Strike team from Region IV was sent out due to the potential impact on Florida and the request from the Florida Governor. Queen Anne County was ready to go and responded very quickly as did Cecil County. However, the efforts to get additional units was unsuccessful. This pointed out again that preplanning to solidify the team is needed. Paperwork needs to be completed and in place so the units will be able to respond on short notice.

John Barto:

Region IV must get a mission ready packet completed with dedicated teams ready to go.

Classes are needed for Strike Team readiness. Region IV is making this a priority. Mike Parsons will be spearheading the Strike Team.

The Region IV Office was advised that the SWIFT program in Wicomico still does not have access to CRISP. Conference calls have been arranged to work through this issue. CRISP needs to know how the lower shore works. They only want to send CRISP Data to the QA Officer, the Medical Director and the HJO. We will have to follow up on this issue.

Queen Anne and Talbot have access but they did it themselves.

Dorchester and Kent Counties need to request access to CRISP.

Two jurisdictions have not completed their paperwork.

Questions were raised and a discussion followed on what will be acceptable for the storage of narcotics. Please see the attached memo from Dr. Chizmar for clarification.

Anna Sierra asked about minimum standards – John Barto responded that MIEMSS is aware that some groups have raised this issue but that discussion was not part of the revision efforts.

Scott Hass - Is there still a need for SEMSAC? It seems that things that used to go through SEMSAC and the EMS Board is no longer flowing through either of them. A discussion started about how the approval process has changed.

Mary Alice - Dr. Delbridge is bringing in new ideas and new processes to try to streamline procedures and policies.

Mark Bilger – At the last EMS meeting a discussion was had to take the word volunteer out and make inspections mandatory. No determination has been made at this time.

John Barto:

The 50/50 Cardiac Devices Grant went out today. There are specific dates and turnaround times so please be diligent. All Grant requests will need to be filled out and completed by October 11, 2019. The prioritization conference call will take place the last week in October. You will submit your 50/50 Grant requests using the link that will be available on the MIEMSS web page by the end of this week.

PRMC and McCready have formed a new relationship. No exact date for the takeover by PRMC has been announced.

EMS plan update – Still looking for volunteers in the development of the new EMS plan. Let us know if you are interested and we will get you on one of the committees. Rick Koch is on the EMS Plan Steering Committee.

JEMSOP update – Region IV still has materials that have not been turned in from some counties. Please get your JEMSOP's completed and turned in as soon as possible.

A warm welcome to Shari Donaway, the new HJO for Wicomico County.

Safe Chain has left handouts and goodies on the back table for anyone who is interested.

Education Certification and Licensure – No complaints on the new processes, great job Terrell.

Terrell Buckson – If anyone needs any assistance, I am more than happy to come out and walk you through it.

Agency / Regional Reports: No Report

Old Business: None

New Business:

Dr. Chiccone: Some protocols changes on Stay and Play vs. Load and Go. Discussion about recital thermometers for overheating of patients and use of a body bag to ice down a patient.

Lori Stone who represents First Net would like to come and speak at our next council meeting in November. A motion to approve her visit was made – Motion was declined.

Anna Sierra: In-service training was held at the Ridgely Fire Department. The Governor's Office of Crime Control and Prevention presented the introduction to Handle With Care, an initiative for recognition of traumatic events in children and it was excellent. Presentation was very law enforcement involved. Would like to see more done for the EMS side.

Chesapeake Multicultural Resource Center presented cultural competency for first responders. This nonprofit organization did a two-hour training course for interacting with people from different cultures. If you are interested, please contact Lorelly Solano at lorelly@chesmrc.org or you can call 410-829-8767.

Mary Alice Vanhoy - Butler transport has acquired Best Care who is affiliated with University of Maryland.

Discussion started about how busy the Eastern Shore has been lately. Butler is looking at resources but we need data.

Rick Koch – Ocean City has a new chief, Ricky Bowers. This is a good change.

Scott Hass – Starting September 30, 2019 there will be lane closures on the westbound span of the Bay Bridge as they start deck work.

It looks like the 10K across the bay will be held on April 26th.

Scott Wheatley – EMS task force will be needed for this event.

Brian – last full weekend in January will be Winterfest.

Adjournment: The meeting was adjourned at 3:19 Motion made by Mary Alice, seconded by Brian LeCates.



State of Maryland

**Maryland
Institute for
Emergency Medical
Services Systems**

653 West Pratt Street
Baltimore, Maryland
21201-1536

Larry Hogan
Governor

Clay B. Stamp, NRP
Chairman
Emergency Medical
Services Board

Theodore R. Delbridge, MD, MPH
Executive Director

410-706-5074
FAX 410-706-4768

To: Highest Jurisdictional Officials
Medical Directors

From: Timothy Chizmar, MD, FACEP
State EMS Medical Director

Date: October 8, 2019

RE: Storage of Controlled Dangerous Substances in Ambulances

Recently, I received a request to clarify the physical security requirements for the storage of Controlled Dangerous Substances (CDS) Schedules II-V on ambulances in Maryland. For our current Maryland formulary, CDS as defined by the Drug Enforcement Administration (DEA) includes the following medications: fentanyl, morphine, diazepam, midazolam, haloperidol, and ketamine.

Federal DEA security requirements for practitioners (21 CFR 1301.75) require that CDS are stored in a "securely locked, substantially constructed cabinet." In addition to effective physical security controls, there must be "additional procedures in place to reduce access by unauthorized persons." The Maryland Office of Controlled Substances Administration (OCSA) requirements (COMAR 10.19.03.12) mirror the DEA regulations. A "double-lock" system may be used, but it is not specifically required by DEA or OCSA. Either agency can be contacted for an evaluation of CDS security measures to ensure compliance with state and federal law.

The Maryland Voluntary Ambulance Inspection Program (VAIP) will conduct an assessment of CDS storage on ambulances during biennial ambulance inspections. In consultation with the Maryland OCSA, at minimum, Maryland EMS services should secure all CDS in:

1. A locked metal safe, which is secured to the ambulance, with a controlled access system (double-lock not required), or
2. A locked container that is stored within a locked cabinet or ambulance compartment ("double-lock system"); ambulance vehicle locks and inventory control tags do not count as a lock.

In addition to this memorandum, EMS services should consult DEA requirements in 21 CFR 1301 and Maryland OCSA requirements in COMAR 10.19.03. Thank you for your assistance in ensuring the security of our medications on Maryland ambulances.