



**State Emergency Medical Services Board
September 13, 2016
Minutes**

State of Maryland

**Maryland
Institute for
Emergency Medical
Services Systems**

653 West Pratt Street
Baltimore, Maryland
21201-1536

*Larry Hogan
Governor*

*Donald L DeVries, Jr., Esq.
Chairman
Emergency Medical
Services Board*

*Kevin G. Seaman, MD
Executive Director*

410-706-5074
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Board Members Present: Donald L. DeVries, Jr., Esq. Chairman; Vic Broccolino, Vice-Chairman; Fred Cross Kyrle Preis; Dany Westerband, M.D; Sherry Adams; Sally Showalter; David Hexter, MD (phone); Jim Scheulen; Dean E. Albert Reece, MD

Board Members Absent: Mary Alice Vanhoy

Others Present:

MIEMSS: Dr. Alcorta; Ms. Abramson; Ms. Aycock; Ms. Mays; Mr. Schaefer; Ms. Goff; Mr. Brown.

OAG: Mr. Magee; Ms. Sette

RACSTC: Ms. Doyle

MFRI: Mr. Edwards

MSFA: Past President Roth

MSPAC: Major Lioi, Major Lowman, Captain Konold, Captain Beck

UMMS: Ms. Jacobs

Gallagher, Evelius and Jones: Mr. Buck

Mr. DeVries called the meeting to order at 9:10 a.m.

Mr. DeVries asked for a moment of silence in honor of those lost on September 11, 2001.

Mr. DeVries introduced Jim Scheulen as the new Chairman of SEMSAC and welcomed him to the EMS Board.

ACTION: Upon the motion Dr. Hexter, seconded by Dr. Westerband, the Board voted unanimously to approve as written the minutes of the August 9, 2016, meeting of the State EMS Board.

MIEMSS REPORT

Dr. Seaman highlighted progress on various initiatives, including the completion of the SYSCOM/EMRC upgrade and the recent release of the RFP for the statewide upgrade of the EMS communications system. He noted the high rate of jurisdictional participation in CARES, the proposed generic pilot protocol for Mobile Integrated Community Health, the

efforts to increase provider safety through the Ambulance Safety Taskforce and the imminent roll out of the new MIEMSS Licensure system. Dr. Seaman said he has been honored to be part of the Maryland EMS System. He thanked everyone for their support during his tenure as MIEMSS' Executive Director.

Mr. Broccolino arrived at 9:15am.

RACSTC: No report

MSPAC: A paper copy of the MSPAC report was distributed.

Major Lioi announced that after nearly four years in the Aviation Command, he has been transferred to the MSPs Field Operations Bureau effective August 31, 2016. He said that Major Scott Lowman, who previously served as a medic in the Aviation Command, will be the new Commander at the Aviation Command. Captain Elizabeth Beck, who has 17 years prior experience with the Aviation Command, has also been transferred back to the Command.

Major Lioi said due to some minor discrepancies found during the pre-delivery inspection of the Flight Training Device, delivery is now tentatively scheduled for late Fall 2016. In order to meet Code, an elevator and 3 hour fire wall will need to be installed in the Flight Training Building. Construction is expected to begin in September 2016. Recurrent training for pilots is being outsourced to Rotorsim to reduce flight time on the AW-139 fleet.

It is anticipated that the contract for the Master Services Agreements be presented to the Board of Public Works (BPW) on October 5, 2016. If approved by BPW, the five-year contract will commence on October 17, 2016.

Dean Reece arrived at 9:20 am.

MSFA: Past President (PP) Johnie Roth

PP Roth offered congratulations and best wishes to Major Lioi and Dr. Seaman, saying that the MSFA has valued their relationship and friendship. PP Roth also recognized Ms. Karen Doyle for being inducted into the MSFA Hall of Fame at the MSFA 2016 Convention.

PP Roth said that much work had been accomplished since the inception of National Registry testing of EMRs and EMTs. Although Maryland pass rates are now above the national average, MSFA leadership is concerned over the students who are unsuccessful on the first attempt. A lengthy discussion followed regarding whether MIEMSS could absorb the cost of a second test for all students who do not pass the National Registry test on the first attempt.

PP Roth said there has been a persistent rumor that if EMTs do not pass the National Registry test, they will receive an EMR card. The MSFA leadership is aware that this is not a possibility and has done everything possible to squash the rumor.

PP Roth announced that the next MSFA Executive Committee meeting will be held on October 15 & 16, 2016, at the Ridge Volunteer Fire Department in Southern Maryland.

Mr. DeVries thanked PP Roth for continuing to serve as a member on the EMS Board Committee on National Registry Testing. Mr. DeVries said that volunteers are the backbone of EMS, and we could not do what we do without them.

OLD BUSINESS N/A

Base Station Regulations. Ms. Aycock

Ms. Aycock said the Base Station regulations, presented to the EMS Board at the June 14, 2016, meeting and published in the Maryland Register on July 22, 2016, had received no comments. Ms. Aycock requested that the EMS Board approve the regulations as written.

Upon the motion of Mr. Broccolino, seconded by Ms. Showalter the Board voted unanimously to approve 30.03.06.02 Base Station Regulations as final regulations.

Freestanding Medical Facility Regulation. Ms. Myers, Ms. Sette

A paper copy of the proposed Freestanding Medical Regulation regulation was distributed.

Ms. Sette said the proposed regulation “Determination of Adequacy and Appropriateness of Emergency Care Delivery Associated with Conversion of a Hospital to a Freestanding Medical Facility,” which was presented to the EMS Board at the August meeting, had been posted on the MIEMSS web site for informal comments. MIEMSS has received informal comments from a few entities. She said with EMS Board approval, MIEMSS would like to publish the draft regulations as proposed regulations in the Maryland Register for formal comment.

ACTION: Upon the motion Dr. Reece, seconded by Mr. Preis, the Board voted unanimously to publish the draft regulation “Determination of Adequacy and Appropriateness of Emergency Care Delivery Associated with Conversion of a Hospital to a Freestanding Medical Facility” in the Maryland Register as a proposed regulation for formal comment.

NEW BUSINESS

Mobile Integrated Community Health Protocol (MICH). Dr. Alcorta

A paper copy of the proposed protocol was distributed.

Dr. Alcorta gave an overview of the proposed MICH protocol and said that the protocol was a generic pilot protocol based on the Queen Anne’s pilot protocol for mobile integrated health. He said this protocol will allow EMS providers to work with other healthcare providers to meet certain non-emergency needs of patients.

Upon the motion of Mr. Broccolino, seconded by Dr. Hexter, the Board unanimously approved the Mobile Integrated Community Health Pilot Protocol.

Voluntary Ambulance Inspection Program (VAIP). Dr. Alcorta

A paper copy of the VAIP, with changes for 2016, was distributed.

Dr. Alcorta gave an overview of the changes to the 2016 VAIP and said the changes had been reviewed by SEMSAC with recommendation to EMS Board for approval.

Upon the Motion of Mr. Broccolino, seconded by Ms. Showalter, the Board unanimously approved the 2016 Voluntary Ambulance Inspection Program.

On behalf of the EMS Board, Mr. DeVries presented Dr. Seaman and Major Lioi each with a plaque recognizing their outstanding service.

MIEMSS

Mr. Magee advised the Board on the necessity for the Board to appoint acting co-executive directors until a new Executive Director is employed by MIEMSS in order for MIEMSS to function in compliance with existing law pertaining to agency operations.

Mr. DeVries said pursuant to Maryland Code Education Article §13-506(a), the Maryland state Emergency Medical Services Board appoints Richard Alcorta, MD, and Patricia Gainer, JD, MPA, as Acting Co-Executive Directors of the Maryland Institute for Emergency Medical Services Systems upon the departure of Dr. Kevin Seaman.

ACTION: Upon the motion of Dr. Westerband, seconded by Ms. Showalter, the Board voted to go into closed session.

Adjourn to closed session to carry out administrative functions, to consult with counsel to obtain legal advice on pending disciplinary actions under General Provisions Article §3-305(a) (7), and to maintain certain records and information in confidence as required by Health Occ. Art. §14-506 (b) under General Provisions Article §3-305 (a) (13).

In Closed Session:

Board Members Present: Donald L. DeVries, Jr., Esq. Chairman; Vic Broccolino, Vice-Chairman; Fred Cross Kyrle Preis; Dany Westerband, M.D; Sherry Adams; Sally Showalter; David Hexter, MD (phone); Jim Scheulen; Dean E. Albert Reece, MD

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OAG: Mr. Magee; Ms. Sette

MFRI: Mr. Edwards

MSPAC: Major Lioi, Major Lowman, Captain Konold, Captain Beck

In closed session the Board:

1. Discussed EMSOF entity budgets;
2. a Comprehensive Stroke Center designation;
3. a Primary Stroke Center designation;
4. a Pediatric Trauma Center re-designation;
5. a Pediatric Burn Center designation;
6. Base Station re-designations;
7. a Level III Perinatal Center;
8. a Trauma Center and;
9. Considered EMS provider disciplinary actions.

The Board returned to open session.

The EMS Board approved the following designations/re-designations by acclamation:

Base Stations

Children's National Medical Center - Five year re-designation

Holy Cross Germantown - Five year re-designation

Howard County General Hospital - One year provisional re-designation

McCready Memorial Hospital - Two year re-designation

MedStar Good Samaritan Hospital - Two year re-designation

MedStar Southern Maryland Hospital - Five year re-designation

Northwest Hospital - Five year re-designation

R .Adams Cowley Shock Trauma Center- Five year re-designation

Sinai Hospital - Five year re-designation

Suburban Hospital - Five year re-designation

UM Shore Health Medical Center at Chestertown - Five year re-designation

UM Shore Health Medical Center at Dorchester - Five year re-designation

UM Shore Health Medical Center at Easton - Five year re-designation

Primary Stroke Center

Doctor's Community Hospital provisionally designated as a Primary Stroke Center for one year;

Comprehensive Stroke Center

Johns Hopkins Bayview Hospital as a Comprehensive Stroke Center for five years;

Pediatric Trauma Center

Johns Hopkins Hospital Pediatric Trauma Center for the remainder of a five year designation period as a Pediatric Trauma Center

The Board adjourned by acclamation.