



**State Emergency Medical Service Board  
December 12, 2017**

State of Maryland

**Maryland  
Institute for  
Emergency Medical  
Services Systems**

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*Larry Hogan  
Governor*

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

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**Minutes**

**Board Members Present:** Donald L. DeVries, Jr., Esq., Chairman; Vic Broccolino, Vice-Chairman; Murray Kalish, MD; George A. Cross, Jr.; Sally L. D. Showalter, RN; Sherry Adams; RN; Dany Westerband, M.D; Mary Alice Vanhoy, RN; Dean E. Albert Reece, MD; Kyrle W. Preis III, NREMT-P; David Hexter, M.D.

**Board Members Absent:**

**Others Present:**

**MSPAC:** Lt. McMinn

**RACSTC:** Ms. Doyle

**MIEMSS:** Ms. Gainer; Dr. Alcorta; Ms. Abramson; Ms. Aycock; Mr. Barto; Mr. Bratt; Mr. Brown; Mr. Cantera; Mr. Darchicourt; Ms. Gilliam; Mr. Huggins; Mr. Hurlock; Ms. Mays; Ms. Myers; Mr. Schaefer; Ms. Goff

**OAG:** Mr. Magee; Ms. Sette

Mr. DeVries called the meeting to order and asked for a moment of silence in honor and remembrance of Deputy Chief Fire Marshal Sander Cohen, FBI Special Agent Carlos Wolfe. He also asked for a moment of silence in memory of Lou Jordan, a 2005 recipient of the Rocco Morando Lifetime Achievement Award and of the Maryland Stars of Life Leon W. Hayes Award for Excellence in EMS, given for lifetime achievement in EMS.

Mr. DeVries said that the EMS Board Executive Search Committee chose Executive Search firm Witt/Kieffer. He added that a consultant from Witt/Kieffer would be contacting Board members for input regarding the Executive Director qualifications.

Mr. DeVries asked for the approval of the minutes from October 10, 2017.

**ACTION: Upon the motion by Dr. Kalish, seconded by Ms. Vanhoy, the Board voted unanimously to approve the minutes of the October 10, 2017, meeting as written.**

**MIEMSS**

A written copy of the MIEMSS Report was distributed.

Dr. Alcorta said he would be providing a comprehensive summary on Maryland EMS research at the January EMS Board / SEMSAC joint meeting.

#### eMEDS®

MIEMSS is transitioning to a new version of software, the Elite Platform. This will improve performance for data collection, reporting and analysis and maintain compliance with data standards from NEMESIS, COMPASS, and CARES. MIEMSS is pursuing additional initiatives that will facilitate presenting hospital outcome information back to EMS Operational programs through eMEDS®. Beta testing is scheduled to begin on December 19, 2017.

#### Communications Upgrade Project

MIEMSS is currently reviewing proposals submitted in response to a second RFP. The review process includes offeror product demonstrations and oral presentations.

#### MEMRAD

MIEMSS is in the planning process for upgrading the MEMRAD platform to meet agency and system needs including mass notification, hospital bed counts, automated messaging, facility alerting, as well as automated resource coordination. The RFP has been approved by the Department of Information Technology.

#### Walter Reed National Military Medical Center (WRNMMC)

Dr. Alcorta said that MIEMSS staff met with WRNMMC to discuss in more detail the four (4) areas in which MIEMSS and WRNMMC will be partnering. These areas of interest are Statewide Disaster Response, Trauma Physician Training, Patient Rehabilitation and Trauma Research.

#### Licensure

MIEMSS continues to work with the eLicensure Steering Committee on issues specific to the handling the affiliation process in the new eLicensure system.

#### Cardiac Rescue Technician (CRT)

Ms. Gainer advised that the National Registry will stop testing for Maryland's CRT licensure in 2019. Discussions on the future for CRT Licensure are in progress.

#### EMR Naloxone Administration Protocol

Dr. Alcorta said that the EMR administration of Naloxone Protocol had become effective on October 1, 2017. EMRs must complete an approved training course before administering naloxone in a clinical environment.

#### EMS Naloxone Grant Program

Currently, EMS is not reimbursed for the cost of naloxone administered to patients who refuse transport to an Emergency Department. The Maryland Behavioral Health Administration, the Opioid Operational Command Center, and MIEMSS are partnering to provide financial relief to EMSOPs that are currently

carrying the increased burden of providing naloxone without reimbursement from the patient or insurance providers. The reimbursement program will be funded by a \$200,000 grant from the Maryland Behavioral Health Administration to MIEMSS. MIEMSS will pass-through these grant funds to EMSOPs based on a previous number of naloxone administrations where the patient was not transported or refused transport to the hospital.

Dr. Alcorta added that through the Department of General Services, EMSOPs can access statewide purchasing contracts for the bulk purchase of EMS medications.

## **SEMSAC**

Dr. Kalish reported that elections for SEMSAC Chair and Vice Chair were held at the November meeting with Dr. Kalish elected to serve as Chair and Karen Doyle elected to serve as Vice Chair for 2018.

Dr. Kalish said that the Region Affairs and JAC By-laws were both approved for recommendation to the Board.

At the November 2018 meeting, SEMSAC honored Steve Edwards on his years of service to the EMS System and wished him well in his retirement as the Executive Director of MFRI.

Mr. DeVries added his congratulations to Steve Edwards and expressed the Board's gratitude for his many years of service to MFRI and the EMS system

## **RACSTC**

A written copy of the RACSTC report was distributed.

Ms. Doyle said the recent loss of two law enforcement officers is hard on the community and expressed the sympathies from Shock Trauma.

Ms. Doyle reported that RACSTC now has a formal policy stating that unless under subpoena, blood draws will not be conducted without patient consent.

Ms. Doyle announced that RACSTC has applied to be a designated Hand Center for Trauma. She said that such designation would be in recognition of work already being performed at Shock Trauma.

## **MSPAC**

Captain McMinn announced the retirement of Major Steve Konold effective December 31, 2018. Captain McMinn will be the point of contact for Aviation Command until a replacement for the Major is appointed.

### Flight Training Device

Captain McMinn said the Flight Training Device has shipped and anticipated delivery is on January 19, 2018. He said installation should be completed by the end of the first quarter of 2018.

### Holiday Party and Commanders Awards

Captain McMinn said that MSPAC will hold their annual Holiday Party at Martins on Friday, December 8, 2017. At this event, MSPAC will be presenting Commanders Award, recognizing employees of the year of their respective disciplines and presenting several new Command members with their wings.

### **MSFA**

Mr. Hurlock said he attended the MSFA Executive Committee meeting the first weekend in December at Kent Island and returned with best wishes for the holiday season from the MSFA leadership.

### **OLD BUSINESS**

#### 30.01.02 Incorporation by Reference – Maryland Medical Protocols for Emergency Medical Services Providers

Mr. Magee asked the EMS Board to adopt as proposed the Incorporation by Reference of the 2017 EMS Protocols.

**ACTION: Upon the motion by Ms. Vanhoy, seconded by Ms. Adams, the Board voted unanimously to adopt the Incorporation by Reference 2017 EMS Protocols as proposed.**

#### ED Overcrowding Legislative Report

Ms. Gainer said that MIEMSS staff has been working with Health Services Cost Review Commission (HSCRC) on the ED Overcrowding Legislative report and introduced Ms. Wunderlich, Principal Deputy Director, HSCRC.

Mr. Wunderlich said that Excessive ED wait times and ambulance diversion has been a long-standing challenge for the Maryland healthcare system caused by a number of factors, including an increase in behavioral health patients, nurse and workforce shortages, the increase in EMS transports and the misalignment of reimbursement between hospitals and the EMS system. She said that although the number of ED visits in Maryland has decreased and fallen below the national average, ED wait time is still a problem. Ms. Wunderlich gave an overview of the Maryland ED wait time and CHATS alert statistics.

Ms. Gainer gave brief history of efforts to address ED Overcrowding over the years and said that ED Overcrowding is still a significant problem that is detrimental to the care and treatment of patients and the operation of jurisdictional EMS systems.

Ms. Gainer said that strategies included in the report to address ED Overcrowding include HSCRC implementing changes to the Quality-Based Reimbursement Program to incentivize hospitals to reduce ED wait times, possible changes to the Yellow Alert System, and development of new models of EMS Care Delivery such as Mobile Integrated Healthcare and Alternate Destinations. Ms. Gainer added that many jurisdictions do not believe that Yellow Alerts are useful due to the inconsistent application of Yellow Alerts among hospitals. MIEMSS will assess and determine whether the use of Yellow Alerts should be discontinued.

Ultimately, to alleviate overcrowding at Maryland Emergency Departments, there must be a comprehensive, multi-faceted solution that addresses the many points in the health care system that discourage the delivery of appropriate care in the appropriate setting for patients. System improvements for pre-hospital transportation, hospital throughput efficiency, and services in the community all need to be incorporated into potential strategies to improve the delivery of care.

A lengthy discussion ensued on ED wait times ensued.

Chief Preis thanked Ms. Gainer and Ms. Wunderlich for their comprehensive report.

**ACTION: Upon the motion by Mr. Broccolino, seconded by Dr. Hexter, the Board voted unanimously to approve Joint Chairmen's Report on Emergency Department Overcrowding for submission.**

#### AED Legislative Report

A copy of the report was distributed.

Ms. Myers gave a brief overview of the requested study by the Maryland General Assembly regarding the placement of AEDs in public venues. She said MIEMSS conducted a study using all available data and in consultation with interested stakeholders about locations where automated external defibrillators (AEDs) could be most beneficial. Available cardiac arrest records were analyzed to identify locations where placement of AEDs could be most beneficial. The study also compiled pricing information for AEDs, including installation and training costs, and summarized of the immunity from liability provisions in State law regarding the use of AEDs. Ms. Myers said that the report does not contain a recommendation for mandatory placement of AEDs in restaurants.

**Upon the motion of Mr. Broccolino, seconded by Ms. Vanhoy, the EMS Board voted unanimously to approve the submission of the AED.**

#### **NEW BUSINESS**

##### 2018 Maryland Medical Protocols

A paper copy of the Protocol changes was distributed.

Dr. Alcorta gave an overview of the proposed changes in the 2018 Maryland Medical Protocols.

**Upon the motion of Mr. Broccolino, seconded by Ms. Adams, the EMS Board voted unanimously to approve the submission of the 2018 Maryland Medical Protocols.**

JAC Bylaws

A paper copy of the JAC Bylaws was distributed.

Dr. Alcorta presented the up-dated JAC Bylaws for approval.

**Upon the motion of Mr. Broccolino, seconded by Ms. Vanhoy, the EMS Board voted unanimously to approve the JAC Bylaws.**

Regional Affairs Bylaws

A paper copy of the Regional Affairs Bylaws was distributed.

Dr. Alcorta presented the Region Affairs Bylaws for approval.

**Upon the motion of Mr. Broccolino, seconded by Dr. Westerland, the EMS Board voted unanimously to approve the Regional Affairs Bylaws.**

Protocol Review Committee By-laws

A paper copy of the Regional Affairs Bylaws was distributed.

Dr. Alcorta asked for the Board to approve the Protocol Review Committee Bylaws as presented at the October 2017 EMS Board meeting. Ms. Vanhoy asked to remove “E” under Article II (Review the fiscal impact of any proposed protocol, protocol revision, or supplemental protocol) in the written bylaws as it is duplicative with “B”.

**ACTION: Upon the motion by Ms. Vanhoy, seconded by Mr. Broccolino, the Board voted unanimously to approve the Protocol Review Committee Bylaws with the requested change by Ms. Vanhoy.**

**Upon the motion of Mr. Broccolino, seconded by Ms. Adams, the EMS Board adjourned to closed session.**

The EMS Board adjourned to closed session to carry out administrative functions, to discuss the appointment of appointees and officials under General Provisions Article §3-305(b)(1), 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; George A. Cross, Jr.; Murray Kalish, MD; Sherry Adams; Dany Westerband, M.D.; Sally Showalter, RN.; Mary Alice Vanhoy, RN; David Hexter, M.D.; Chief Kyrle W. Preis III, NREMT-P; Dean E. Albert Reece, M.D.

**MIEMSS:** Ms. Gainer; Dr. Alcorta; Mr. Fiackos; Ms. Aycock; Mr. Bratt; Ms. Abramson; Ms. Goff; Mr. Schaefer.

**OAG:** Mr. Magee; Ms. Sette.

**In closed session:**

1. The Board considered Base Station re-designations;
2. The Board considered Educational program designations;
3. The Board considered EMS provider disciplinary actions;
4. The Board discussed the Executive Director position; and
5. The Board discussed the status of re-appointments for Board members.

**The Board returned to open session.**

**In open session:**

**Board Members Present:** Donald L. DeVries, Jr., Esq., Chairman; Vic Broccolino, Vice-Chairman; George A. Cross, Jr.; Murray Kalish, MD; Sherry Adams; Dany Westerband, M.D.; Sally Showalter, RN.; Mary Alice Vanhoy, RN; David Hexter, M.D.; Chief Kyrle W. Preis III, NREMT-P; Dean E. Albert Reece, M.D.

**MIEMSS:** Ms. Gainer; Dr. Alcorta; Ms. Goff

**OAG:** Mr. Magee; Ms. Sette.

**The Board approved the following Educational Programs for a five year designation by acclamation:**

- Baltimore City Fire Department's Basic Life Support Education Program and Advanced Life Support Continuing Education Program
- Wisp Ski Patrol's Emergency Medical Responder Education Program
- Talbot County Department of Emergency Service's Advance Life Support Refresher Program for five years

**The Board approved by acclamation the following Base Station re-designations:**

Five (5) Year Designation:

- Atlantic General Hospital
- University of Maryland Baltimore Washington Medical Center
- MedStar Franklin Square Medical Center
- Garrett Medical Regional Center
- Mercy Medical Center
- University of Maryland St. Joseph's Medical Center
- Shady grove Medical Center
- MedStar Union Memorial Hospital

Two (2) Year Designation:

- Howard County General Hospital
- Laurel Regional Hospital

One (1) Year Designation:

- Prince George's Hospital Center

**There being no further business, the Board adjourned by acclamation.**