

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

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State Emergency Medical Services Board May 12, 2020 Meeting Agenda

1. Call to Order – Mr. Stamp

- Call the roll: Ms. Goff
- 2. Approval of Minutes February and March 2020
 - MIEMSS Report Dr. Delbridge
 - COVID-19 Briefing
- 4. New Business

3.

- Licensure Regulation ACTION Ms. Sette
- 5. Old Business
 - Perinatal and Neonatal Referral Center Standards ACTION Ms. Sette
 - Operational Requirements for Commercial Ambulance Services ACTION Ms. Sette

.13 Requirements for Individuals With a Provisional License or Certificate to Obtain a Full License or Certificate

A. A holder of a provisional EMS license or certificate issued pursuant to the Executive Order Augmenting the Emergency Medical Services Work Force, (Order # 20-03-19-03) under authority of the Proclamation of March 5, 2020, as extended from time to time, in which the Governor of Maryland proclaimed that a state of emergency and catastrophic health emergency existed within the entire State of Maryland in an effort to control and prevent the spread of COVID-19, shall receive shall receive a license or certificate under Education Article 13-516, provided the holder submits an application and completes the requirements set forth below within the required timeframe and provided the holder does not have a pending disciplinary matter or is otherwise subject to denial. During the required timeframe the holder will remain provisionally licensed or certificate or complete the requirements within the required timeframe, the provisional certificate or license will expire.

B. Emergency Medical Technicians.

(1) Provisional EMT certification obtained as a student:

(a) A provisional EMT who obtained provisional EMT certification as a student shall complete the requirements of COMAR 30.02.03.03D within 180 days of the expiration or rescission of the Proclamation.

(b) A provisional EMT who obtained provisional EMT certification as a student who affiliated with an EMS operational program and provided EMS during the catastrophic health emergency shall have met the requirement to complete an internship in COMAR 30.02.02.03D (2).

(2) Provisional EMT certification obtained via reciprocity:

(a) A provisional EMT who obtained EMT certification via reciprocity shall, within 180 days of the expiration or rescission of the Proclamation:

(i) If registered with the National Registry of Emergency Medical Technicians (NREMT) as an EMT, successfully complete a protocol review session approved by MIEMSS; or

(ii) If not registered with the NREMT as an EMT,

(a) Document successful completion of 24 hours of EMS continuing education within the past 12 months; and

(b) Successfully complete a protocol review session approved by MIEMSS.

(3) Provisional EMT certification obtained through reinstatement:

(a) A provisional EMT who held an expired EMT certificate and was reinstated with a provisional certificate shall meet the following requirements within 180 days of the expiration or rescission of the Proclamation:

(i) If the provisional EMT has previously passed the NREMT cognitive exam, the provisional EMT must provide documentation that:

(a) While holding a provisional certificate the provisional EMT was affiliated with an EMS operational program and provided EMS during the catastrophic health emergency; and

(b) Document successful completion of 24 hours of EMS continuing education in the past 12 months.

(b) If the provisional EMT has never passed the NREMT cognitive examination, and was lapsed for one year or less, the provisional EMT shall within 180 days of the expiration or rescission of the Proclamation:

(i) Provide documentation that while holding a provisional certificate the provisional EMT was affiliated with an EMS operational program and provided EMS during the catastrophic health emergency; and

(ii) Document successful completion of 24 hours of EMS continuing education within the past 12 months.

(c) If the provisional EMT has never passed the NREMT cognitive examination, and was lapsed for more than one year but less than three years, the provisional EMT shall within 180 days of the expiration or rescission of the Proclamation:

> (i) Provide documentation that while holding a provisional certificate the provisional EMT was affiliated with an EMS operational program and provided EMS during the catastrophic health emergency;

(ii) Document successful completion of 24 hours of EMS continuing education within the past 12 months; and

(iii) Successfully complete the cognitive reinstatement examination approved by MIEMSS.

(d) If the provisional EMT has never passed the NREMT cognitive examination, and was lapsed for more than three years, the provisional EMT shall within 180 days of the expiration or rescission of the Proclamation:

(i) Provide documentation that while holding a provisional certificate the provisional EMT was affiliated with an EMS operational program and provided EMS during the catastrophic health emergency;

(ii) Document successful completion of 24 hours of EMS continuing education within the past 12 months; and

(iii) Successfully complete the cognitive and psychomotor reinstatement examinations approved by MIEMSS.

C. Paramedic

(1) Provisional paramedic license obtained as a student.

A provisional paramedic who obtained provisional licensure as a student shall:

(a) Pass the NREMT cognitive examination within 180 days of the expiration or rescission of the Proclamation; and

(b) Pass the psychomotor NREMT examination and document current active, non-provisional status registration as a paramedic with the NREMT by December 31, 2021.

(2) Provisional paramedic license obtained via reciprocity.

A provisional paramedic who obtained provisional licensure via reciprocity shall within 180 days of the expiration or rescission of the Proclamation: (a) Document current active, non-provisional status as a paramedic with the NREMT; and

(b) Successfully complete a protocol review session approved by MIEMSS.

(3) Provisional paramedic license obtained through reinstatement.

A provisional paramedic who obtained provisional licensure through reinstatement shall, within 180 days of the expiration or rescission of the Proclamation, provide documentation that while holding a provisional license the provisional paramedic was affiliated with an EMS operational program and provided EMS during the catastrophic health emergency; and

(a) (i) Document current active, non-provisional status as a paramedic with the NREMT; and

(ii) Successfully complete a protocol review session approved by MIEMSS; or

(b) (i) Pass the NREMT cognitive examination within 180 days of the expiration or rescission of the Proclamation;

(ii) Pass the psychomotor NREMT examination and document current active, non-provisional status registration as a paramedic with the NREMT by December 31, 2021; and

(iii) Complete a protocol review session approved by MIEMSS within 180 days of the expiration or rescission of the Proclamation.

C. Emergency Medical Responder

(1) Provisional EMR certification obtained as a student.

A provisional EMR who obtained EMR certification as a student must complete the requirements of COMAR 30.02.02.03C within 180 days of the expiration or rescission of the Proclamation.

(2) Provisional EMR certification obtained through reinstatement.

A provisional EMR who obtained provisional EMR certification through reinstatement shall within 180 days of the expiration or rescission of the Proclamation provide documentation that the provisional EMR affiliated with an EMS operational program and provided EMS during the Catastrophic Health Emergency.

(3) Provisional EMR certification obtained via reciprocity.

A provisional EMR who obtained provisional EMR certification via reciprocity shall within 180 days of the expiration or rescission of the Proclamation provide documentation that while holding the provisional certificate the provisional EMR affiliated with an EMS operational program and provided EMS during the Catastrophic Health Emergency.

D. Cardiac Rescue Technicians

(1) Provisional CRT license obtained through reinstatement.

A provisional CRT who held an expired CRT license and was reinstated with a provisional license shall within 180 days of the expiration or rescission of the Proclamation:

(a) Document successful completion of 60 hours of continuing education equivalent to the requirements for National Registry paramedic renewal within the past 24 months; and

(b)Successfully complete a protocol review session approved by MIEMSS.

E. Emergency Medical Dispatchers

(1) Provisional EMD license obtained as a student:

A provisional EMD who obtained provisional EMD licensure as a student shall complete the requirements of COMAR 30.02.03.03G within 180 days of the expiration or rescission of the Proclamation.

(2) Provisional EMD license obtained via reciprocity.

A provisional EMD who obtained provisional licensure via reciprocity shall meet the requirements of 30.02.02.04D within 180 days of the expiration or rescission of the Proclamation.

(3) Provisional EMD licensure obtained through reinstatement:

A provisional EMD who held an expired EMD license and was reinstated with a provisional EMD license shall meet the requirements of COMAR 30.02.02.09D within 180 days of the expiration or rescission of the Proclamation.

EMS Provisional Status to Full Certification or Licensure

- All individuals who desire to progress from Provisional Status to Full Certification/Licensure must file an application to do so within 180 days after the end of the emergency period
- To be eligible to progress from Provisional Status to Full Certification /Licensure, all requirements must be completed within the timeframe indicated
- Provisional Status personnel may provide EMS until end of emergency period + 180 days. Paramedics may continue to provide EMS under their provisional NREMT certification until December 31, 2021.
- ALL Provisional Statuses other than paramedics terminate at end of emergency period + 180 days
- COMAR 30.02.02.09E applies to individuals who are reinstated.

Emergency Medical Responder (EMR) – Provisional Status to Full Certification

- 1. <u>Student</u> Within 180 days of end of the emergency period, complete remaining requirements in COMAR 30.02.03.03 C:
 - Pass cognitive exam (National Registry)
 - Pass psychomotor exam
- 1. <u>Reinstatement</u>
 - Must have affiliated with EMSOP and provided EMS during emergency period
- 2. <u>Reciprocity</u>
 - Must have affiliated with EMSOP and provided EMS during emergency period

Emergency Medical Technician (EMT) – Provisional Status to Full Certification

- 1. <u>Student</u> Within 180 days of the end of the emergency period, complete remaining requirements in COMAR 30.02.03.03 D:
 - Pass cognitive exam (National Registry)
 - Pass psychomotor exam
 - Internship (satisfied if affiliated with an EMSOP and provided EMS during emergency)
 - Affiliation
- 1. <u>Reciprocity</u>
 - If registered with National Registry as an EMT, complete MIEMSS-approved Protocol Review Session
 - If not registered with National Registry as an EMT
 - Completed 24 hours of EMS continuing education within past 12 months; and
 - Successful completion of MIEMSS-approved Protocol Review session.

- 2. Reinstatement
 - If previously passed NREMT cognitive exam
 - Must have affiliated with EMSOP and provided EMS during emergency period; and
 - Completed 24 hrs EMS continuing education in past 12 months.
 - If never passed NREMT cognitive exam and lapsed 1 year or less
 - Must have affiliated with EMSOP and provided EMS during emergency period; and
 - Completed 24 hrs EMS continuing education in past 12 months.
 - If never passed NREMT cognitive exam and lapsed more than 1 year but not later than 3 years:
 - Must have affiliated with EMSOP and provided EMS during emergency period;
 - Completed 24 hrs EMS continuing education in past 12 months; and
 - Pass cognitive reinstatement exam.
 - If never passed NREMT cognitive exam and lapsed more than 3 years
 - Must have affiliated with EMSOP and provided EMS during emergency period;
 - Completed 24 hrs EMS continuing education in past 12 months;
 - Pass cognitive reinstatement exam; and
 - Pass psychomotor exam.

Cardiac Rescue Technician – Provisional Status to Full Licensure

- 1. Reinstatement Within 180 days of the end of the emergency period:
 - Completed 60 hours of continuing education within past 24 months equivalent to NREMT requirements for paramedic
 - Complete MIEMSS-approved Protocol Review Session

Paramedic

- 1. <u>Student</u>
 - Pass NREMT Paramedic cognitive exam within 180 days of the end of the emergency period; and
 - Complete NREMT psychomotor exam and document current, non-provisional status registration as a paramedic with NREMT by December 31, 2021.
- 2. <u>Reciprocity</u> Within 180 days of the end of the emergency period:
 - Document current, active, non-provisional status as a paramedic with NREMT; and
 - Successful completion of MIEMSS-approved Protocol Review session.
- 3. <u>Reinstatement</u>
 - Must have affiliated with EMSOP and provided EMS during emergency period; <u>AND</u>

<u>Either</u>

- Possesses current active, non-provisional status as a paramedic with NREMT; and
- Successful completion of Protocol Review Session.

<u>Or</u>

- Pass the NREMT cognitive exam for paramedics within 180 days of the end of the emergency period;
- Pass NREMT psychomotor exam and document current, non-provisional status registration as a paramedic with NREMT by December 31, 2021; and
- Complete MIEMSS-approved Protocol Review Session within 180 days of the end of the emergency period.



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State Emergency Medical Services Board May 12, 2020 Via Conference Call Only

Minutes

Board Members Present:

Clay Stamp, Chairperson; Sherry Adams, Vice Chairperson; Stephan Cox; William J. Frohna, MD; Dany Westerband, MD; James Scheulen, PA; Sally Showalter, RN; Wayne Tiemersma; Mary Alice Vanhoy, MSN

Board Members Absent: Dean E. Albert Reece, MD;

Others Present:

MSPAC: Major Tagliaferri; Capt. McMinn

MIEMSS: Dr. Delbridge; Ms. Gainer; Ms. Abramson; Ms. Aycock; Dr. Bailey; Mr. Bilger; Mr. Brown; Ms. Chervon; Dr. Chizmar; Dr. Floccare; Ms. Mays; Mr. Naumann; Mr. Linthicum; Mr. Buckson; Mr. Sidik; Mr. Schaefer; Ms. Wright-Johnson; Ms. Goff

OAG: Mr. Magee; Ms. Sette

RACSTC: Dr. Snedeker

MSFA: 2nd VP Mr. McCrea; Ms. Tomanelli

Chairman Stamp called the meeting to order at 9:05am

Ms. Goff called the roll.

Mr. Stamp thanked the Board and members, MIEMSS and partners (MSFA, MFRI and RACSTC) for taking time to meet after over seven weeks of dealing with this health crisis and thanked Dr. Delbridge for the extraordinary efforts undertaken by him and the MIEMSS staff.

Mr. Stamp extended his appreciation for all of EMS especially during EMS week May 16th through May 23rd.

Mr. Stamp asked for approval of the February and April 2020 EMS Board meeting minutes.

ACTION: A motion was made by Dr. Westerband; seconded by Ms. Vanhoy and unanimously approved to accept the Feb 10, 2020, minutes of EMS Board as written.

ACTION: A motion was made by Mr. Scheulen; seconded by Ms. Adams and unanimously approved to accept the April 14, 2020, minutes of EMS Board as written.

MIEMSS REPORT

National EMS Week is May 17th through May 23rd

Dr. Delbridge wished all Maryland EMS clinicians a safe and healthy EMS Week. Although, most normal activities have been curtailed due to the COVID-19, the following designations are given for each day of EMS Week: Monday - EMS Education Day Tuesday - Safety Tuesday Wednesday - EMS for Children Day Thursday - Save-A-Life Day (CPR & Stop the Bleed) Friday - EMS Recognition Day

MIEMSS / Ambulances@Hospitals Dashboard (@HA)

Dr. Delbridge gave an update on the Hospital Dashboard "@HA" (Ambulances at Hospitals) platform to provide real-time information on the number of ambulances waiting at hospital to monitor offload times. He said MIEMSS is working on including additional jurisdictions to provide real time awareness of EMS-ED interface.

COVID-19

Dr. Delbridge gave an overview of the numbers of PUIs treated and transported by EMS public safety and commercial services. He said that the number of ambulance- transported COVID-19 patients is leveling off.

Dr. Delbridge gave an overview some of the current MIEMSS COVID-19 activities, which include: daily morning conference calls with MDH, MEMA, and others for situational awareness and planning); daily surge planning group calls for robust organization planning, clinical awareness and EMS perspective); daily State Emergency Operations Center staffing; weekly calls with EMS jurisdictions, commercial services and medical directors, as well as bi-weekly calls with 911 centers.

Dr. Delbridge also highlighted information available through the MIEMSS Dashboard tracking, including staffed in-patient beds available statewide and Mechanical ventilators in Maryland. He said pending issues include the development of alternative care sites with transportation plans and the rollout of COVID-19 testing for EMS personnel.

Dr. Delbridge said that MIEMSS has processed 603 Clinical Nurse Externs, with another 124 pending and 76 Clinical Respiratory Externs with 1 additional pending.

Dr. Delbridge also provided the current numbers of Provisional EMS licenses and certifications. He also highlighted the components of a proposed regulation that would permit Provisional EMS clinicians to become fully certified or licensed.

Mr. Stamp said that MIEMSS has developed a statewide footprint due to all of the COVID activities. Dr. Delbridge said that some of the data that is being collected has potential for academic use. He thanked Mr. Naumann, MIEMSS' Director of Regional Programs, for his work with CRISP on the hospital data being collected for us on the Dashboard.

Ms. Adams said that the MIEMSS Dashboard is a great resource for situational awareness.

NEW BUSINESS

Emergency Licensure Regulation

(A copy of the proposed regulation with summary page distributed via email)

Ms. Sette gave an overview of the requirements for obtaining full certification or licensure for each level of EMS clinician who received provisional status under the Emergency Declaration.

Mr. Tiemersma said the one-page summary of the regulation was most helpful, and the regulation made sense, as we need to retain as many EMS clinicians as possible. A lengthy discussion ensued on the process for tracking provisional clinicians and processing of licenses.

ACTION: A motion was made by Ms. Vanhoy; seconded by Mr. Cox and unanimously agreed upon to approve the proposed Regulation for EMS Provisional Status to Full Certification or Licensure as an emergency regulation and for promulgation as a regular regulation.

OLD BUSINESS

<u>Perinatal and Neonatal Referral Center Standards</u> (A copy of Perinatal and Neonatal standards distributed via email)

Ms. Sette said the updated Perinatal and Neonatal Referral Center Standards were presented to the Board at the February meeting for information and asked for final approval.

ACTION: A motion was made by Mr. Tiemersma; seconded by Dr. Westerband and unanimously agreed upon to approve the updates to the Perinatal and Neonatal Referral Center Standards.

Operational Requirements for Commercial Ambulance Services

Ms. Sette presented the revised Operational Requirements for Commercial Ambulance Services Regulation, which was approved as an Emergency Regulation at the November 2019 EMS Board meeting, for final adoption as a permanent regulation. Ms. Sette added there were no incidents reported during the Emergency Regulation period.

ACTION: A motion was made by Ms. Adams; seconded by Mr. Scheulen and unanimously agreed to approve the update to the Operational Requirements for Commercial Ambulance Services Regulation as a permanent Regulation.

ACTION: Upon the motion of Dr. Westerband; seconded by Ms. Vanhoy and unanimously agreed upon; the EMS Board adjourned.