

MIEMSS Executive Director's Report

June, 2021

Maryland EMS Clinicians and Jurisdictional Programs

COVID-19. The latest information regarding monitoring and caring for patients and EMS clinicians, including COVID-19 EMS Guidance documents, may be found on the Infectious Diseases portion of the MIEMSS website. Recognizing that guidance regarding COVID-19 is ever changing, MIEMSS will post new documents to the <https://www.miemss.org/home/infectious-diseases> website as updates occur. MIEMSS would like to thank all Maryland's emergency services personnel for the continued dedication to caring for patients during the pandemic.

Requirements for Transition from EMS Provisional Status to Full Certification or Licensure.

Maryland has added a significant number of Provisional EMS Clinicians to its emergency medical services workforce in response to COVID-19. Provisional EMS clinicians include individuals whose Maryland license/certification previously expired; clinicians who are licensed/certified in other states; and Maryland EMT and Paramedic students who have completed coursework but have not had access to the necessary practical experiences or a test.

MIEMSS is encouraging Provisional EMS Clinicians to remain part of Maryland's EMS System by using the process for Provisional Clinicians to obtain full Maryland certification or licensure. The requirements for obtaining full certification/licensure status vary by level of EMS clinician and the specific criteria by which the individual qualified for provisional status. The requirements by level of clinician may be accessed at <https://www.miemss.org/home/ems-providers> by clicking on the specific clinician level. Requirements for all EMS clinician levels are detailed in COMAR at <http://www.dsd.state.md.us/comar/comarhtml/30/30.02.02.13.htm>

Please keep in mind the following:

- 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.

For further information about transitioning from Provisional to full certification or licensure in Maryland, please email licensure-support@miemss.org.

2021 Maryland Medical Protocols for EMS Educational Updates. The 2021 EMS Educational Updates for BLS and ALS are available through the MIEMSS' Online Learning Center. All BLS and ALS clinicians in Maryland are required to obtain this training **before July 1, 2021**. Upon completion of the course, the Online Training Center will provide you with a certificate of completion for your records and reference. If you have any further questions, please contact the MIEMSS Office of Licensure and Certification at 410-706-3666.

2021 Maryland Medical Protocols for Emergency Medical Services. The all new look 2021 *Maryland Medical Protocols for EMS* document is available on the MIEMSS web site as the full document. Full books, spiral versions will be available for purchase through the MIEMSS Office of Licensure and Certification at 410-706-3666.

Critical Care Coordination Center Assists in Critical Care Transfers. MIEMSS continues to utilize the Critical Care Coordination Center (C4) to help physicians identify available hospital critical care resources when patient transfers are necessary. C4, which is located within the Emergency Medical Resource Center at MIEMSS, is staffed with a critical care coordinator and virtual Central Intensivist Physician (CIP) 24/7. Any Maryland hospital seeking a critical care transfer can contact the C4. The C4 coordinator has a near real-time view of statewide hospital critical care bed capacity. The CIP then works with referring physicians to identify patients' anticipated critical care needs. The coordinator and CIP, working jointly with the sending and receiving facilities, match the patients with available critical care resources that can manage the patients' conditions.

At Hospital Ambulances (@HA). MIEMSS developed and released a web-based application showing ambulance activity at the many hospitals utilized by Maryland's jurisdictional EMS clinicians. The application is known as the At Hospital Ambulances (@HA) Dashboard. This application runs on iOS, Android, and Windows mobile devices and well as on desktop computers. The application displays the hospital name, number of ambulances at a hospital, as well as the minimum and maximum length of stay of a unit or units at the hospital. The information may be sorted by Length of Stay, Alphabetically, or by Unit Count. If there are no units at a hospital, then the hospital is not listed (unless there is an associated CHATS Alert). Not all of the jurisdictions are participating. A map, available on the dashboard, shows which jurisdictions are supplying data and those yet to come onboard. Access to the @HA dashboard is available to clinicians via a link on the eMEDS patient care reporting system dashboard. It may also be viewed at <https://aha.miemss.org/>. Jurisdictional EMS administrators have credentials to login to view additional detail, including the ambulance's unit number and jurisdiction. At this time 16 jurisdictions are submitting the necessary data to support the dashboard. MIEMSS continues efforts to improve the utility of the application.

2021 EMS Week. National EMS Week was observed May 16 - 22, 2021. This year's theme for EMS week was: "***THIS IS EMS: Caring for Our Communities.***" This theme was particularly meaningful now, to remind people that every day EMS clinicians are still there to respond, support, and care for the needs of our communities. MIEMSS sends sincere wishes for the constant safety and good health of all EMS personnel on the first lines who continue to take care of Maryland's citizens. In recognition of EMS Week, Governor Hogan issued a proclamation honoring the courage and commitment of the Maryland's EMS clinicians.

Specific Theme Days for 2021 were observed:

Monday - Education

Tuesday - Safety Tuesday

Wednesday - EMSC Day

Thursday - Save-A-Life (CPR and Stop the Bleed Challenge) "National Stop the Bleed"

Friday - EMS Recognition Day

MIEMSS held the annual recognition of the Stars of Life and EMSC Right Care When it Counts Awards. MIEMSS Executive Director Dr. Ted Delbridge, State EMS Medical Director Dr. Tim Chizmar, Associate State EMS Medical Director for Pediatrics Dr. Jen Anders, and EMSC Program Director Cyndy Wright Johnson traveled around the state presenting awards to citizens, clinicians, and programs. EMS Board Chair Clay Stamp accompanied them to several presentations. Detailed information regarding the awards may be found in the May issue of the *Maryland EMS News*.

EMS Vision 2030. Maryland EMS Vision 2030 is Maryland's EMS plan to help move the EMS system forward. It presents a meaningful opportunity to chart a visionary path for Maryland's statewide EMS system. Maryland EMS Vision 2030 lays out the paths to follow through the coming decade to get us to where we want to be at the dawn of the next one. Printed copies are available by request and it may be found on the MIEMSS website:

<https://www.miemss.org/home/Portals/0/Docs/OtherPDFs/Vision-2030-Marylands-EMS-Plan-202010.pdf>

MIEMSS Online Training. The Office of Certification and Licensure and Certification continues to provide oversight of 71 EMS Education programs. This number includes Paramedic, EMT, EMR, LEEMCC, and Refresher programs all across the state. While the pandemic has created obvious hardships to our state's education programs, the office has seen these programs step up and continue to educate the next generations of EMS clinician in one of the greatest times of need in recent memory.

The office has also been busy in the development and management of online educational content for the Online Training Center while working with the MIEMSS IT professionals to update and improve the host learning management system. The most recent addition to the education content are the 2021 EMS Updates for both ALS and BLS clinicians. With major changes to the protocol design this year, this educational material will go far in providing for a safe transition to the new care standards on July 1, 2021.

Licensure and Certification. The licensure department continues to facilitate testing for BLS Reinstatement candidates. The department continues to work diligently to assist with augmenting the EMS workforce by processing thousands of applications and other documents to ensure current and entry-level clinicians are properly credentialed. This include hundreds of EMS clinicians that were issued provisional credentials to assist during the pandemic. To date, we have issued over 1600 provisional EMS credentials. MIEMSS continues to process applications for “clinical nurse and respiratory therapist externs”. The number of extern applications continue to increase as we have processed over 1600 extern applications since the start of the pandemic.

Basic Life Support (BLS) Subcommittee. The current evaluation processing continues functioning very well. The system in place has been embraced by the teaching agencies, students, instructors, and evaluators with enthusiasm. The average time to complete the state psychomotor examination has also been reduced. The field internship portfolios are all being electronically imported into the licensure system, which has reduced the use of paper and person-to-person contact.

EMS Educators Symposium. The annual EMS Educators Symposium hosted by MIEMSS every year will be in a virtual format. MIEMSS is currently working to assemble 6 hours of educational content for instructors (PDI approval will be sought from MICRB) and an update from the Licensure and Certification Staff on information valuable to our state’s EMS instructors. The plan is to release the 2021 offering of the EMS Educator’s Symposium on the MIEMSS Online Training Center. Please check social media and the Online Training Center for updates.

Statewide EMS Communication System Upgrade. The MIEMSS EMS Communications System Upgrade Project is in the Implementation Stage of Phase One. Phase One encompasses the Southern Maryland - EMS Region V. The Implementation Stage began in May after the successful completion on Factory Acceptance Testing of the Phase One equipment in March and delivery of Phase One Equipment in April. Headway on the Implementation Stage of Phase One continues as the contractor progresses on microwave installations, works on the integration of the NICE audio recording system with the Intertalk console system, and provides system software enhancements. It is expected that all microwave installations associated with Phase One, along with completion of system core integrations, will be completed in the first quarter of 2021, which are precursors to performing Regional Acceptance Testing. MIEMSS has approved the contractor, OCI, to commence work on the Phase 2 (Region III and Western Maryland) to mitigate timeline challenges. Challenges include Phase I equipment installation delays, COVID-19 impacts (travel ban, personnel) and resolving issues related to new equipment such as tuning, firmware updates, and to address the occasional part failure. The project team continually looks for targets of opportunity to mitigate timeline challenges.

eMEDS Updates. MIEMSS and ImageTrend have been working to minimize the amount of downtime that occurs during periodic updates to the eMEDS® site. It has been decided to stop automatic updates from being pushed and to move to a quarterly update schedule. When these updates occur, the site will be receiving updates to bring eMEDS to the current version available from ImageTrend. There should not be any prolonged outage during these updates as all necessary precautions are in place to prevent this. The updates are expected to last up to 6 hours.

eMEDS®/CRISP Integration. MIEMSS is continuing to cultivate a relationship of mutual benefit with the Chesapeake Regional Information System for our Patients (CRISP), Maryland's designated health information exchange. This ongoing relationship has yielded a number of recent fruitful projects:

- Upgrading the eMEDS® / CRISP data linkage from 138 elements via HL7 to an export that includes NEMESIS data elements via XML
- Designing a capability to export supplemental questions from eMEDS® to external sources
- Constructing a COVID-19 status dashboard that informs Maryland's hospitals and governmental leaders of daily hospital capacity statuses
- Developing a near-real time ICU bed tracking system for COVID-19 response purposes
- Acquiring a mobile integrated health charting module for eMEDS®
- Commencing a project to develop products to serve as replacements for MEMRAD components, including CHATS and FRED (expected completion June 2021)
- Integrating hospital outcomes data into eMEDS® for review by EMS clinicians (expected completion September 2021)
- Creating a portal whereby paramedics can access clinical health data for their patients at the bedside (expected completion September 2021)

eMEDS® / ESSENCE Integration. MIEMSS in conjunction the Maryland Department of Health (MDH) has developed a near real-time data exchange between the State of Maryland's EMS electronic patient care report (eMEDS) and the Maryland Department of Health's syndromic surveillance system. This linkage allows EMS data to be utilized by MDH for the early identification of intentional or natural emerging infectious disease outbreak(s), providing for expedient public health threat and risk assessment for situational awareness, and ensuring prompt applications of public health interventions in the event of a public health emergency. Additionally, MIEMSS has partnered with MDH and the Johns Hopkins University Advanced Physics Laboratory to engage in the development of an EMS data module within the State's syndromic surveillance system. This new EMS module is available to other states for the purposes of integrating EMS data with ESSENCE. These technical aspects of this program were recently completed and access to this data analysis by EMS jurisdictions is expected in the 2nd quarter of CY 2021.

Maryland Fire-Rescue Services Memorial Foundation Service. The Maryland Fire-Rescue Services Memorial Foundation (MFRSMF) held the annual memorial service paying tribute to Maryland's fallen fire and rescue services personnel in-person, in Annapolis on June 6. The service honored 10 heroes who died in the line of duty while serving the residents of Maryland. This year's ceremony was lifting in memoriam those who would have been recognized at last year's ceremony had it not been cancelled due to the statewide, stay-home order associated with the COVID-19 pandemic. The 2020-2021 combined-memorial service recognized the following heroes, starting with the date of their passing:

June 2, 1931: **Charles Wallace Hambrock**, West Annapolis Volunteer fire & Improvement Company, *Anne Arundel County*

June 30, 1934: **Thomas Chew**, United Fire Company, *Frederick County*

May 1, 1948: **Earl Derr**, Independent Hose, *Frederick County*

June 25, 2019: **Michael R. Powers**, Libertytown VFD, *Frederick County*

Oct. 2, 2019: **Kim D. Weber**, Fallston Vol. Fire & Ambulance Company, *Harford County*

Dec. 29, 2019: **Otis L. Isaacs, Jr.**, North East Fire Company, *Cecil County*

May 31, 2020: **Brad A. Scott**, Howard County Department of Fire & Rescue, *Howard County*

Aug. 10, 2020: **Jeffrey L. Schaffer**, Taneytown VFC, *Carroll County*

Jan. 1, 2021: **Bryan P. Hamilton**, Naval District Washington Fire Department, *Charles County*

Jan. 27, 2021: **William A. Sheffield**, Baltimore City Fire Department, *Baltimore City*

Hospital Programs

Trauma and Specialty Centers. The program directors and the Trauma and Specialty Center workgroups have completed updating and revising the following COMAR Regulations:

- Perinatal Standards
- Adult Trauma Center Standards
- Burn Standards
- Primary Stroke Center Standards
- Acute Stroke Ready Center Standards
- Eye Trauma Center Standards
- Neuro Trauma Standards
- General Provisions
- Comprehensive Stroke Center Standards
- Thrombectomy-Capable Primary Stroke Center Standards

The following COMAR Regulation is undergoing revisions and updates:

- Pediatric Trauma Center Standards

MIEMSS has been updating the Maryland State Trauma Registry, Maryland State Eye Trauma Registry, and Maryland State Hand Trauma Registry to the ESO Gen 6 platform. All updates are completed.

Due to COVID-19, Trauma and Specialty Center Program re-designations due in CY 2021 have been moved to a virtual platform. Trauma re-designation surveys due in CY 2021 are completed and the Specialty Center Programs (Stroke and Perinatal) re-designations due in CY 2021 are on-going.

MIEMSS Director, Perinatal Programs will be assisting the Maryland Department of Health (MDH) with the Level I and II Perinatal site reviews.

Cardiac

Public Access AED Program. AED information, including application information, is located in the public information tab under “Maryland Public Access Automated External Defibrillator.”

Cardiac Arrest Steering Committee. The purpose of the committee is to enhance the care of patients experiencing sudden out-of-hospital cardiac arrest in a way that improves outcomes from this disease in all communities and populations in Maryland. The committee is embarking upon an improvement project to evaluate the processes involved in producing data for all three echelons/phases of care. Analyzing strengths, along with opportunities for improvement, provides the best chance of maximizing survival in all communities.

Emergency Operations

COVID-19 Related Response. Focused turned to the pandemic response in late February and continues. MIEMSS continues to coordinate the agency’s response utilizing the incident command system. MIEMSS’ has participated in many planning and response activities, some of these activities include:

- Completed the MIEMSS COVID-19 Vaccination Clinic located at MIEMSS in Baltimore
- High level participation in the Maryland Surge Task Force
- Staffing the State Emergency Operations Center and MIEMSS Department Operations Center for several months
- Daily monitoring and reporting of EMS and hospital data
- Providing up to date guidance to EMS clinicians and EMSOPs via webinars, memos, and other routes
- Coordinating they requests for, managing, and delivering PPE for public safety and commercial EMSOPs
- Facilitating COVID-19 testing for EMS personnel, and patients when resuscitation has been terminated in the field
- Assisting in the response to outbreaks at skilled nursing facilities

- Procuring and managing ambulance strike team
- Coordination of virtual mental health crisis support program for staff working in skilled nursing and group homes. This program has assisted over 1000 people to date.
- Coordination of virtual crisis support training for state agency and EMS personnel
- Currently working with the Maryland Department of Health and other state agencies to ensure EMS clinicians have access to a COVID-19 vaccine now that it is available
- In conjunction with the Maryland COVID-19 Testing Taskforce, MIEMSS is making COVID-19 Antigen Test Kits available for Fire/EMS clinician testing

Virtual Training of Mental Health First Aid. The Maryland Department of Health (MDH), in partnership with the MIEMSS, has launched a new virtual form of Mental Health First Aid (MHFA) Maryland, which is being offered to firefighters, emergency medical personnel, and police. MHFA Maryland has trained over 40,000 individuals and professionals in identifying the signs and symptoms of mental illnesses and substance use disorders so they can respond effectively to individuals in crisis. The first training sessions began in late October. Over the next three years, MIEMSS will coordinate statewide training for hundreds of emergency responders, teaching the skills necessary to provide initial support to those in crisis. Participants receive national certification upon successful completion of the 6.5 hour training program, which includes both self-paced learning and live virtual training with a certified instructor. The shift from in-person to virtual training comes as the result of precautions taken to slow the spread of COVID-19 in Maryland.

For more information about Mental Health First Aid Maryland, visit www.mentalhealthfirstaidmaryland.org.

If interested in attending an upcoming course, please contact MIEMSS at cism@miemss.org.

Active Assailant Interagency Workgroup (AAIWG). In February of 2019, Governor Hogan issued an Executive Order, “Active-Assailant Incident Preparation and Coordination.” The Maryland State Police and MIEMSS continue to co-chair the work group. Meetings have resumed virtually after a short pause caused by the COVID-19 outbreak and continue to focus on the future direction of the workgroup. Participants include representatives from hospitals, public/private education, federal, state, and local fire, EMS, emergency management, and law enforcement and other organizations. Several subcommittees continue to make progress towards completion of identified goals and objectives.

A Field Operations Guide (FOG) has been completed. This document is a quick guide designed to assist emergency services personnel in coordinating the initial response to active assailant events. The development of the AAIWG website is complete and provides access to resources and workgroup related documents.

Regional Programs

EMS Base Station Program. Pursuant to COMAR Title 30.03.06, the EMS Base Station designation program ensures designated hospitals are prepared to provide on-line medical consultation with Maryland EMS providers. Hospitals are designated, by the EMS Board, on a rotating schedule and are awarded five-year designations when found to be in compliance with all applicable regulations. Provisional designations of less than five years are awarded in the event a facility is found to have discrepancies. Regional Programs staff continue to work with EMS base stations to identify mechanisms to ensure compliance during the COVID-19 catastrophic public health emergency.

The MIEMSS Regional Offices are managing multiple projects throughout the state. For more information about any of the items listed below, contact the appropriate MIEMSS Regional Office.

Region I and Region II

- The notice and subsequent prioritization and stratification of the Cardiac Devices Grants have been completed. Garrett, Allegany and Washington counties all submitted requests. Frederick county opted to fully fund their own device purchases.
- “Virtual” Base Station re-certification logistics have been coordinated with the three facilities in the regions due to re-certify this year. Hospital partners have been receptive and supportive to the virtual survey concept.
- Regional staff have been heavily involved with the personal protective equipment requests and distribution to Regions I and II.
- The regional administrators have hosted multiple regional “COVID Townhall” meetings. These augment the statewide informational sessions with information and questions specific to Regions I and II.
- Regions I and II have been active with COVID testing, providing test kits to the regions, testing clinicians who are symptomatic or had an exposure, and encouraging Termination of Resuscitation (TOR) patient testing. With locations in Regions I and II being too far for routine use of the lab’s courier service, the staff has had to ensure test samples are delivered on time to the lab.
- The team is working to ensure the legacy of the Miltenberger Emergency Services seminar. The 2020 seminar was cancelled the day of the pre-conference to ensure the safety of the participants.

Region III

- The Region III Office continues to support our partners and the agencies response to the COVID-19 pandemic.
- The Region III Health and Medical Coalition continues to make strides in ensuring the region is prepared and equipped to respond to the evolving threats facing the medical community.
- The Region III Office continues to support multiple grants including the Cardiac Devices grant program, ALS Funding, and Naloxone.

- The Region III Office continues to schedule and conduct Voluntary Ambulance Inspections across the region.
- The Region III Office continues to conduct virtual base station site surveys for Region III hospitals.
- The Region III Office continues to support our local EMS Operational Programs.

Region IV

- The Region IV Office was pleased to assist with Right Care When it Counts Award presentations in Talbot County and Wicomico County. Congratulations to all award recipients throughout the State!
- Winterfest EMS Conference went virtual this year with presentations and was a huge success.
- The Region IV Office is continuing to assist jurisdictions on the lower shore conducting meetings with departments, communications staff, and medical leadership. This group is identifying concerns and ways to enhance cooperation between departments, communications, and delivery of EMS services.
- Planning is on-going for Tidal Health's 2021 Trauma Conference that will be held this fall.
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Region V

- The Maryland-National Capital Region Emergency Response System (MDERS) is working with stakeholders to gather projects, evaluate grant compliance, strategic plan alignment and project feasibility. Staff also developed a balanced budget recommendation based on the assumption of level funding from last year (\$5.35 million) and reprogramming of FY19 funds. MDERS is supporting a FY19 Fire and Law Enforcement decontamination and a variety of trainings including the Harvard NPLI seminar series, the i.LEAD program development and the USUH WaveLab partnership. MDERS is working on the 2021 Virtual Annual Symposium and has completed the Public Access Trauma Care (PATC) installation process in Montgomery County.
- The RESF-8/RPWG working group and the COG EMS subcommittee are working on HSEC requirements to identify critical regional strategies and emerging threats as part of the UASI funding strategy.
- Region V is working with the COG EMS Subcommittee on several fronts:
 - 1) a consortium purchase of cardiac devices, 2) health information exchanges in the NCR, 3) best practices for MIH programs, and 4) narcotics accountability processes. The committee accepted the CapRAC proposal introduced by USUHS to lead the integration of civilian and military capabilities and regional situational awareness across the NCR.
- The office is engaged with the DC Coalition Notification Center and the Northern Virginia Regional Hospital Coordinating Center (RHCC) to coordinate resources and information sharing capabilities within the NCR region.
- The Region V Office is also part of the Regional Burn MCI Taskforce efforts to strengthen preparedness and response to burn incidents.
- The Region V Office is leading the communications upgrade project for the State and is handling the MEMRAD hospital data reporting and associated quality assurance in collaboration with CRISP, as well as the upgrades to the CHAT system.

- The regional office is supporting and leading research projects with the MIEMSS Research Interest Group (RIG) and other colleagues, including projects in epinephrine use in cardiac arrest, behavioral health, patient safety, quality improvement and coordination of care. We are working with Fisdap to evaluate the International Paramedic Registry test and are also supporting the Tijuana Red Cross in their EMS re-design efforts.
- We presented a session on cardiac arrest management in the 2nd International Congress of Prehospital Emergencies, held in May 2021 in Ecuador.
- The staff is also working closely with the Emergency Planning Committee of the Region V Healthcare Coalition to develop a robust operational surge and disaster plan by evaluating standard reporting and planning tools and coordinating between the state and the hospitals in Region V. The office is actively involved in the medical surge and resource management working groups, as well as with pediatric emergency preparedness.
- Region V staff is leading the updates to the QA/QI Office training program and planning a pilot test for Calvert, Charles and St. Mary's counties, in collaboration with SOCALR and the Compliance Office.

Emergency Medical Services for Children

Emergency Medical Services for Children Department (EMS for Children). The EMSC Department continues to coordinate virtual state Pediatric Emergency Medical Advisory Committee (PEMAC) and Pediatric Data Analysis Research Team (DART) meetings with ongoing subcommittees and workgroup focused on protocol revisions and EMS data analysis. All of the Maryland EMSOP have completed the ***2021 EMS for Children Survey*** that gathered updated information on the performance measures 02 & 03 which focus on Pediatric EMS Champion roles and pediatric educational programs. The ***2021 National Pediatric Readiness Project*** re-assessment of all hospital and free standing EDs launched on May 1, 2021. Maryland EMSC provided an instructional webinar for this survey on April 30, 2021. Recurring online “Office Hours” are held biweekly to guide the ED directors and managers through the assessment and clarify any questions. 100% of Maryland hospital EDs have participated in 2013, 2016, and 2018. The next Pediatric EMS Champions will be on July 20th and feature a clinical update on the pediatric sepsis protocol, PEPP course updates and plans for fall and winter training.

The EMSC Department coordinates four different grant programs that remain funded:

1. EMSC State Partnership Grant (federally funded by HRSA/MCHB) is focused on federal performance measures specific to emergency care in EMS and ED. Education for both EMS and Hospital Clinicians has been virtual since March 14, 2020. PEPP 4th edition hybrid courses were held in Allegany and Talbot counties with reduced class sizes, large room and following all CDC and state precautions. The next course is June 12th in Southern Maryland. Focus of summer activities is the completion of the Pediatric Readiness hospital assessment. The Family Advisory Network (FAN) continues to support local training to prepare children, youth and families on how to be “Emergency Ready”. Contact the EMSC program at PEPP@miemss.org.

2. Child Passenger Safety and Occupant Protection (CPS & OP) healthcare project (federally funded by NHTSA through the Maryland Highway Safety Office [MHSO]): 21st year of funding started Oct 1, 2020. The project continues to provide outreach to health care providers to provide education and parent educational tools on child passenger safety. The project collaborates with local Safe Kids chapters and coalitions and KISS program at MDH. Again, in this year's grant, the MIEMSS EMSC CPS project is able to provide scholarships for EMS clinicians and hospital providers to take the standardized CPS Course. May 1 2021 was the kick off for the national Vehicular Heatstroke Prevention Awareness with ongoing social media education. The project is seeking pictures of EMS Fire and Rescue professionals correctly buckled up in work and personal vehicles. Contact the project at cps@miemss.org.
3. Bike Helmet Safety project (state funded through the MHSO): has been funded for a 5th year starting July 1, 2021. During the 2020-2021 year approximately 900 bicycle helmets were distributed following CDC and state guidelines through Safe Kids coalitions and community partners, Trauma Centers and Pediatric EMS Champions. Bike safety educational materials are available and new display signs are in design for returning to in person outreach and education. Contact bikesafety@miemss.org for more information or to request educational materials.
4. Safe Kids Maryland state coalition continues to provide prevention information through social media and articles in EMS News. Contact at safekidsmd@miemss.org.
 - a. There are now FIVE Temperature Heat Displays available for public education events as part of Maryland Safe Kids campaign to increase awareness of the risks to children in cars. A training video on operating the displays was filmed in June and is posted on the MEMSS YouTube account. Two of the five are redesigned to be lighter weight and easier for transport and assembly. Contact CPS@miemss.org.
 - b. Buckle Up public information has included virtual seat checks in partnership with the KISS program (MDH), social media and print media information, and outreach to hospital EDs.
 - c. June injury prevention social media focus will be on water safety and to avoid fire crackers There will be lectures at the 2021 Virtual MSFA Convention on how to teach medications safety in the community & the engineering of Seat belts and Car seat use.
 - d. Safe Sleep display and educational materials are in development in partnership with the state Child Fatality Review Committee and using CDC and NIH standardized messaging.

Maryland Risk Watch team continues to partner with the MSFA Fire and Injury Prevention/ Life Safety Committee. Steps to Safety prevention education templates are available based upon the interactive training stations typically held at the MSFA Convention each June. The MIEMSS YouTube account has PSAs posted on “What to Expect When You Dial 9-1-1” and “Right Care When it Counts”. Contact Maryland Risk Watch at riskwatch@msfa.org.

Prevention

CPR & AED Awareness Week. June 1-7 each year is National CPR and AED Awareness Week, spotlighting how lives can be saved if more people know CPR and how to use an AED. Approximately 70 percent of out-of-hospital cardiac arrests happen in homes. CPR in an emergency, can save the life of someone you love. By learning and teaching other the two simple steps of Hands-Only CPR if you witness a teen or adult suddenly collapse: Call 9-1-1 and Push Hard and Fast in the Center of the Chest until Help Arrives you can be the difference for your parent, spouse, or child.

June is National Safety Month. Each week throughout National Safety Month is an opportunity to make a difference in your home, work, and community. By identifying risks around the home or improving safety standards at home and in your community everyone is protected. Whether we increase first aid and emergency awareness through drills or provide water safety tips for summer recreation, all are steps to provide a safer neighborhood.

- Report repairs as they are needed
- Hold drills at home to help children know what to do in the event of:
 - fire
 - medical event
 - natural disasters
- Volunteer to participate in community emergency preparedness events
- Put together a first aid kit
- Take a CPR class
- Teach someone to change a tire properly and safely
- Learn about proper storage and disposal of medications
- Learn how to identify fall hazards in a home

COVID Safety Considerations. One of the most common coronavirus symptoms has reaffirmed the need for working smoke alarms in every home. Over the last several months, there have been accounts of people not being able to smell smoke in their home. On January 15, 2021, a teenage girl in Texas, the only family member not suffering from the coronavirus, smelled smoke and was able to get her family and pets out of the home safely. Please remind your community about the importance of working smoke alarms. Smoke alarms not only provide an early warning of the fire, but if you are suffering from loss of smell, it may be the only warning you can depend upon.

Open Container Laws and Cocktails-to-Go. During the pandemic, alcohol deliveries and cocktails-to-go are more prevalent in many establishments. Please remember that, although alcohol is more mobile, it is always dangerous and illegal to drink and drive. There were 10,142 people killed in drunk-driving crashes in 2019. To help save lives and change this terrible statistic, remember that: *Buzzed Driving is Drunk Driving*. If you are transporting alcohol, be sure it is unopened and remember that it is never okay to drink alcohol when driving. Always store alcohol in the trunk or the back seat.

2021 *Click It or Ticket* - Remind Everyone to Buckle Up. State and local law enforcement agencies across the nation are stepping up their enforcement efforts for motorists who aren't wearing their seat belts. Seat belts have been proven to be one of the best ways to save your life in a crash. Yet, many still do not buckle up. Worse still, not wearing a seat belt is a habit that will pass on to impressionable youth who, in turn, will think it is safe to not buckle up. The ***Click It or Ticket*** campaign focuses on safety education, strong laws, and law enforcement support to save lives.

- The national seat belt use rate in 2019 was 90.7%, which is good — but we can do better. The other 9.3% still need to be reminded that seat belts save lives.
- Among young adults 18 to 34 killed while riding in passenger vehicles in 2019, more than half (57%) were completely unrestrained — one of the highest percentages for all age groups.
- Men make up the majority of those killed in motor vehicle traffic crashes. In 2019, 65% of the 22,215 passenger vehicle occupants who were killed were men. Men also wear their seat belts at a lower rate than women do — 51% of men killed in crashes were unrestrained, compared to 40% of women killed in crashes.
- Vehicle type: There seems to be a misconception among those who drive and ride in pickup trucks that their large vehicles will protect them better than other vehicles would in a crash. The numbers say otherwise: 58% of pickup truck occupants who were killed in 2019 were not buckled. That's compared to 43% of passenger car occupants who were not wearing seat belts when they were killed. Regardless of vehicle type, seat belt use is the single most effective way to stay alive in a crash.