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COVID-19: A Year 1 Retrospective

ON DECEMBER 31, 2019, the first reports emerged of a concerning outbreak of "viral pneumonia" in Wuhan City, in the People's Republic of China. Within a month, Governor Larry Hogan, joining a growing international chorus of concern over a burgeoning public health crisis, would issue his first statements regarding what efforts the State of Maryland was undertaking in preparation for the arrival of novel coronavirus (2019-nCoV).

Maryland EMS clinicians, in addition to other emergency services responders and healthcare workers, have tirelessly worked on the front lines of the state's response to the COVID-19 pandemic since its earliest days. In a salute to their continuing efforts, Maryland EMS News joins the rest of our state, the nation and, indeed, the world in reflecting upon the events of the past year, progress made, and the challenges that still lie ahead.

Maryland Responds to COVID-19

On March 5, 2020, Governor Hogan announced Maryland's first three confirmed cases of COVID-19, all in Montgomery County. That same day, he also declared a State of Emergency, ramping up the state's coordinated response to the health crisis at all levels of government, under the direction of the Maryland Department of Health and the Maryland Emergency Management Agency. Four days later, after signing emergency legislation enabling him to transfer resources from Maryland's rainy day fund to support the state's response, Hogan established a CO-VID-19 response team comprised of both state and public health officials, including MIEMSS Executive Director Dr. Ted Delbridge, to advise his administration in its handling of the ever-evolving situation.

On March 18, 2020, Governor Hogan confirmed the state's first death due to COVID-19. As of April 19, 2021, the disease has claimed the lives of nearly 8,400 Marylanders.

The next day, Governor Hogan issued an Executive Order, "Augmenting Emergency Medical Services",



▲ Maryland Governor Larry Hogan is flanked by Lt. Governor Boyd K. Rutherford (left) and MIEMSS Executive Director during COVID-19 press conference on April 5, 2021, in Annapolis. [Photo courtesy of Joseph Andrucyk, Executive Office of the Governor.]

which authorized the MIEMSS Executive Director and the State EMS Board Chair to suspend the effect of certain statutes in order to augment the EMS workforce, improve the state's response to the state of emergency and catastrophic health emergency, and not endanger public health, welfare, or safety. Over the next six months, Dr. Delbridge and Chairman Stamp subsequently issued a series of public notices to achieve the intent of the Executive Order, including:

■ Authorizing a new EMS Provisional Status Certification / License for applicants who were licensed /certified in other states; students who had completed certain course work, but had not yet completed required testing; and individuals whose Maryland credentials had expired within defined periods. More than 1,200 provisional EMT certifications and over 200 provisional paramedic licenses were issued over the last year. MIEMSS encourages provisional EMS personnel to take necessary steps to convert to fully certified / licensed personnel before the expiration of provisional status;

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▲ Members of the Maryland National Guard deliver PPE to MIEMSS Headquarters in Baltimore for statewide distribution.

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■ Modifying requirements for Mobile Integrated Health (MIH) Programs temporarily to permit a single experienced paramedic to perform certain procedures as part of the program;

■ Issuing Extern Certificates to Health Sciences Students at accredited schools of nursing or respiratory therapy schools who met certain requirements. These Externs augment the clinical workforce in hospitals and auxiliary treatment sites during the catastrophic health emergency. Nearly 1,400 nursing students and 100 respiratory therapy students have become Clinical Externs over the past year;

■ Authorizing EMS clinicians to provide medical care to patients admitted to the Baltimore Convention Center Field Hospital and other established alternative care sites under the direction of an EMS Operational Program medical director during the catastrophic health emergency; and

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■ Authorizing EMS Clinicians to administer influenza and COVID-19 vaccines as part of a public health outreach effort coordinated by a local health department or Maryland hospital / hospital system during the COVID-19 emergency. To date, 19 EMS jurisdictions are participating with their local health departments and hospitals to provide vaccinations throughout the state.

Also beginning in March 2020, MIEMSS issued updated guidance and emergency protocols for the EMS response to COVID-19, focusing initially on COVID screening for 9-1-1 patients; EMS use of PPE, face masks, and N-95 respirators; and infection control guidance for EMS personnel. A Viral Syndrome Pandemic Triage protocol was issued to help EMS Clinicians identify 9-1-1 patients who were appropriate to care for themselves at home, without transport to an emergency department. An emergency protocol was issued to permit COVID testing after termination of resuscitation in the field to help identify potential COVID-19 exposure to EMS personnel and others.

MIEMSS collaborated with the Maryland Department of Health and a clinical laboratory to provide dedicated access to COVID-19 testing for EMS clinicians and other first responders who had sustained a suspected exposure to CO-VID-19 or who had symptoms potentially compatible with COVID-19. To help address the need for PPE (e.g., N-95 masks, gowns, gloves, face shields), MIEMSS also assisted with distribution of PPE to EMS public safety and commercial services that was available through state and federal resources. In order to address the availability of N-95s, MIEMSS obtained access to the Battelle Decontamination System for public safety EMS agencies and commercial ambulance services to decontaminate used N-95 masks.

Individual jurisdictions also worked to meet the demand for PPE: the Montgomery County Fire and Rescue Service (MCFRS) and Prince George's County Fire/EMS Department (PGFD) drew upon a previous partnership with the Maryland-National Capital Region Emergency Response System (MDERS) that helped both departments bolster their capabilities for addressing emerging infectious diseases. When several studies showed the BioQuell disinfection system, which both departments had acquired through the partnership with MDERS, to be effective in decontaminating PPE exposed to COVID-19, MCFRS and PGFD utilized it to periodically disinfect their N-95 masks, thereby effectively extending the service lives of the PPE.

Following a spate of COVID-19 outbreaks in several

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Maryland long-term care facilities, Governor Hogan announced the formation of statewide "ambulance strike teams" to provide support to nursing home facilities. Coordinated by MIEMSS, these strike teams were charged with responding to nursing homes to transport multiple nursing home patients to other health care facilities (e.g., a hospital). Staffing for each of the five units included one ALS clinician and one BLS clinician, under the supervision of a strike team leader.

Early on, it became apparent that the COVID-19 pandemic was affecting the mental health of professionals throughout the spectrum of health care, but in particular, staff at nursing homes and other long-term care facilities. Staff at these facilities had to cope with the illnesses and deaths of coworkers and longtime residents, support and communicate with grieving and upset family members, and deal with the daily fear of taking the illness home to their own family members. In response, MIEMSS collaborated with the Workplace Trauma Center to develop an outreach program to provide support for these health care personnel.

MIEMSS also developed a 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. As of March 30, 2021, the C4 has fielded 763 total requests resulting in 458 transports and 305 tele-ICU consults.

The EMS System

COVID-19 brought change to every level of Maryland's EMS system, from fieldwork to administration. Conferences and educational programs such as Winterfest and EMS Week traditionally held in a live, in-person format adopted alternate models for virtual and hybrid learning. Likewise, in 2020, the annual EMS Awards, traditionally presented each May at a large ceremony during EMS Week, were postponed until September, and presented individually to awardees. A video of the individual award presentations was compiled and posted to the MIEMSS website.

MIEMSS designation of trauma centers and specialty care centers also adapted to the changes necessitated by CO-VID-19. Following the trend of national accreditation bodies, MIEMSS reconfigured its on-site hospital designation visits into virtual site visits. These virtual site visits complied with hospital restrictions due to COVID-19, but still allowed MIEMSS personnel and site surveyors who were located outof-state to conduct the designation process. These virtual site visits have been so successful that they may continue in some manner once the pandemic is over.

Public education and prevention activities also adapted to COVID-19 restrictions. For example, when COVID-19 prevented the United Communities Volunteer Fire Department (UCVFD) in Stevensville, Maryland, from distributing bicycle helmets and bike safety information at its normal venue, Kent Island High School, UCVFD nevertheless found a way to distribute more than 200 helmets and provide bike safety training while still taking necessary precautions.

"It came to me as I was picking up take-out food at one of our local restaurants that we could do the same with the

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IN AUGUST 2020, *Maryland EMS News* profiled Alexa Welch, a student at Towson University and Provisional EMS Clinician. Welch, a student at Towson University, had enrolled in an EMT course at the Community College of Baltimore County – Essex in January 2020 and, upon qualifying for

her Provisional EMT License, joined Butler Medical Transport in Towson in May 2020. Welch explained that field work made the COVID-19 pandemic "more real to me," noting the experience provided "an opportunity to share my firsthand experience" to educate her family and friends.

MIEMSS Executive Director Dr. Ted Delbridge, speaking on behalf of all Marylanders, expressed gratitude for "the commitment and dedication of the skilled and compassionate EMS students" such as Welch in the collective fight against COVID-19. "We hope that all Provisional EMS Clinicians will desire to remain a part of Maryland's EMS system," he said.

Remembering John L. Chew, Longtime EMS Champion

JOHN LOUIS CHEW, JR., passed away on January 10, 2021, following a dedicated life of working in emergency medical services at the federal, state, and local levels.

John started his career in 1969 as a Park Ranger with the National Park Service (NPS). In this role, he worked in law enforcement, desert search and rescue, canyon wall climbing and water rescue, as well as boating. John constantly expanded his knowledge of emergency medical care delivery in difficult areas. He became a scuba diver and an instructor, as well as a National Ski Patrol member and instructor. John also drafted the first NPS EMS Reference Manual.

Subsequently, John accepted a job with the Department of Transportation's National Highway Safety Administration (NHTSA), where he developed a program to assess EMS systems from state and county levels. All 50 states as well as many local jurisdictions completed assessments over a 10-year period. John served as the NHTSA lead for the 1990s revisions of the National Standard Curricula (then First Responder, EMT-Basic, EMT-Intermediate, and EMT-Paramedic). One of John's last projects at NHTSA was the publication of the original 1996 EMS Agenda for the Future, a document that helped to drive EMS to what it has become today.

"I often marveled at how easily he managed these projects, showing his vast experience and knowledge of EMS having served for decades in the National Park Service and at NHT-SA," said David W. Bryson of the NHTSA Office of Emergency Medical Services. "What I cherish most was how John lived his best life. Living along the shore of the Chesapeake Bay in Annapolis with his wife and kids. He would talk about how nice it was to grab the dog, hop on his boat, and 'drag some baits' around the Bay while he watched the sunrise. After returning to the dock and quickly cleaning his catch, he'd grab his suit and tie, refill the coffee mug, and head for the office."

After deciding to retire, he formed the EMSSTAR Group, which provided consulting services for the development of specific plans for the future of EMS systems. His EMSSTAR team administered EMS classes in England and conducted assessments of both



▲ John Louis Chew, Jr. [Photo courtesy of Scott A. Haas, Director, Queen Anne's County Department of Emergency Services.]

Saudi Arabia and Qatar EMS systems.

In 2003, John decided to return to the field when Queen Anne's County was looking for an EMS Director. During his time as Director of the Queen Anne's County Department of Emergency Services, John was appointed by the governor to the Maryland Emergency Numbers System Board, serving in this position until 2011. This was a perfect conclusion to his lifetime involvement in EMS at all levels. ■

The EMS Educators Symposium Returns!

THE COVID-19 PANDEMIC HAS forced many to find new and innovative ways to accomplish things that were once taken for granted. The annual EMS Educators Symposium hosted by MIEMSS every year is no exception. In following with the successful move to online learning by the Winterfest EMS 2021 Conference, MIEMSS is currently working to assemble six 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 (https://www.emsonlinetraining.org/) during the first two weeks of May. Keep checking social media and the Online Training Center for updates. ■

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

MARYLAND HAS ADDED A SIGNIFI-CANT NUMBER of Provisional EMS Clinicians to its emergency medical services workforce in response to CO-VID-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 Certifica-

tion/Licensure, all requirements must be completed within the timeframe indicated.

■ Provisional Status personnel may provide EMS until the end of the emergency period plus 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 the end of the emergency period plus 180 days.

■ COMAR 30.02.02.09E applies to individuals who are reinstated.

For further information about transitioning from Provisional to Full Certification/Licensure in Maryland, please email licensure-support@ miemss.org. ■

At Hospital Ambulance Dashboard (@HA)

MIEMSS HAS NOW IMPLEMENTED THE "At Hospital Ambulance Dashboard" (@HA). @HA is an online tool to assist Maryland's EMS Clinicians providing on-scene patient care, as well as Maryland's PSAP Centers in determining a hospital's current ambulance activity in order to make an informed patient destination decision. The dashboard contains operational information to assist in making patient destination decisions. Detailed individual unit information will be restricted to authorized EMSOP officials who require that specific content.

Please use this URL, which may be bookmarked and saved on devices: https://aha.miemss.org/.

The instructions at right include how to install the website as an application on your desktop or save to your home screen on a mobile device.

Access @HA via URL

- 1. Go to https://aha.miemss.org/ Install @HA on Desktop/Laptop
- 2. Go to https://aha.miemss.org/
- 3. After a few seconds, in the address bar, the "Install @HA" icon () will appear.
- 4. Select "Install" in popup window

Install @HA on IOS Device

- 1. Go to https://aha.miemss.org/
- 2. Select the upload icon at the bottom of screen
- 3. Select "Add to Home Screen"
- 4. Follow the onscreen instructions to install

Install @HA on Android Device

- 1. Go to https://aha.miemss.org/
- 2. Tap "Add to home screen"
- 3. Follow the onscreen instructions to install.

For problems accessing the dashboard, a user may submit a help desk ticket to emeds-support@miemss.org.

COVID-19: A YEAR 1 RETROSPECTIVE



▲ Randy A. Linthicum (left), MS, NRP, MIEMSS Director of Emergency Operations, and Mustafa M. Sidik, EMS Infectious Diseases Coordinator, facilitate a webinar designed to provide tools for emergency services personnel in dealing with CO-VID-19 related stress.

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helmets," UCVFD Paramedic and Maryland EMS Board Member Mary Alice Vanhoy told Maryland EMS News in July 2020. "I ran the idea by my colleagues at the UM Shore Emergency Center in early May, and the idea of the Bike Safety Drive-Thru was born." Held on July 11, 2020, at the UCVFD firehouse, the Bike Safety Drive-Thru enabled participating families to rotate through four separate stations, each featuring hand sanitizer and wipes and staffed by a masked volunteer, all from the safety of their own vehicles.

Influenza and COVID-19 Vaccinations

As summer gave way to fall, it likewise heralded the onset of the traditional influenza season. In an effort to help mitigate the effects that flu season could have on an already overtaxed healthcare system exhausted from months of battling COVID-19, MIEMSS promoted the influenza vaccine among EMS clinicians by establishing a flu vaccine clinic at its headquarters in Baltimore and undertaking a weekslong social media campaign to raise awareness and encourage EMS clinicians to get vaccinated. This set the stage for administering a COVID-19 vaccine to EMS clinicians, as soon as one became available.

"While COVID-19 remains a persistent threat, so does the impending 2020-2021 influenza season," said Dr. Ted Delbridge, MIEMSS Executive Director. "Either illness, by itself, creates demands on the EMS and healthcare system. Overlapping, they could be overwhelming. MIEMSS encourages all EMS clinicians to receive the influenza vaccine." In mid-October, the Hogan administration submitted an initial draft of its COVID-19 mass vaccination plan for the State of Maryland to the Centers for Disease Control and Prevention. Among the plan's first-phase recipients were frontline first responders and healthcare workers, including EMS clinicians.

The first known U.S. vaccine against COVID-19 since the Food and Drug Administration authorized emergency use of a vaccine became available to roughly 145 sites across the country on December 14, 2020. Among those initial recipients was the University of Maryland Medical System, where five healthcare workers became the first people in Maryland outside of a clinical trial to receive the shots.

In January 2021, MIEMSS was tasked with providing COVID-19 vaccinations to State continuity-of-government employees and to EMS clinicians who had not yet received the vaccine. To date, MIEMSS personnel have administered over 9,000 vaccine shots. The vaccination effort will continue through May.

Conclusion

MIEMSS is proud of Maryland's EMS system and clinicians for the critical role they have played since the outset in guiding their patients, neighbors, and fellow citizens through the greatest public health crisis in a century. MIEMSS offers our sincerest condolences to those that have lost a loved one or colleague to COVID-19, and our gratitude and thoughts are with all those emergency services personnel who continue to protect our communities from the frontlines in Maryland.

For the latest EMS-related COVID-19 updates, visit the MIEMSS Infection Control page: http://www.miemss.org/ home/infectious-diseases. For more information on the State of Maryland's response to the COVID-19 pandemic, or to schedule a vaccination, visit https://covidlink.maryland.gov.



▲ Dr. Tim Chizmar (left), MIEMSS State EMS Medical Director, receives his COVID-19 vaccine at the University of Maryland Upper Chesapeake Medical Center.

Maryland EMS News

Wear a Helmet on Every Ride - It Could Save Your Life!



MARYLAND LAW CLASSIFIES BICYCLES as vehicles, and as authorized users of the roadway, bicyclists are required to obey the same traffic laws as all other motorists. However, although bikes have the same right to be on the road as any other vehicle, bicyclists are at greater risk of injury and death than motor vehicle occupants due to the very nature of a bicycle. Because bikes are smaller, less visible, and have no outer protection for the occupant, motor vehicles definitely have an advantage over bikes when both are involved in a crash.

Unfortunately, the total number of bicycle crashes in Maryland is increasing. Between 2015 and 2019, Maryland had an average of over 830 bicycle and pedal cycle-involved crashes each year, with an average of 11 fatalities and 69 serious injuries.

There are well-known, evidencebased prevention measures for bike safety and bike crash survival. While



Above: Kellyann Green's bike helmet was broken in several places when it hit the pavement during a bike crash. Left: Kellyann riding in the SavageMan Triathlon several years ago. [All photos courtesy of Kellyann Green.]

bicycle riding behaviors, bicycle equipment maintenance, motor vehicle driver behavior, and education of everyone on the roadways contribute to decreases in injury and fatality, helmets remain a key intervention. In fact, helmets reduce the risk of head

The helmet did its job! Better the helmet cracked than my head!

KELLYANN GREEN

injury by at least 45 percent, brain injury by 33 percent, facial injury by 27 percent and fatal injury by 29 percent.

So, do bike helmets really protect your head in a crash?

Kellyann Green, an avid biker, triathlete, and marathon runner, found out just how much protection helmets give when she crashed her bike in August 2019. While riding down a steep hill near her home in McHenry, Maryland, a German Shepherd ran directly in front of her. The collision threw Kellyann from her bike and onto the pavement. Her helmeted head hit the ground, breaking her helmet, and her bike, but she did not lose consciousness (and, fortunately, the dog was not injured).

After an ambulance ride to the hospital, a thorough evaluation by a trauma team, and a two-day hospital stay with a broken scapula (shoulder blade) and several other hairline fractures, Kellyann was sent home to recuperate.

"The helmet did its job!" Kellyann said. "Better the helmet cracked than my head!"

The moral of the story is that helmets work, and everyone – even expert riders – need their protection!

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Learn more about bike safety online at www.miemss.org/home/bike-safety-project.

Searching for Pediatric Continuing Education? Look No Further



THE MARYLAND EMS FOR CHILDREN DE-PARTMENT offers multiple online learning modules on a variety of topics in the MIEMSS Online Training Center located at www.emsonlinetraining.org. This month, we will highlight one of these modules.

The Pediatric Tracheostomy Care course reviews special considerations and adaptations needed to perform patient assessments when working with a patient who has special healthcare needs. The course explains the function and anatomy of a tracheostomy and discusses reasons why a patient may have a tracheostomy tube. The course outlines when to perform tracheostomy suc-



tioning as well as when to perform a tracheostomy change. Necessary equipment and steps for performing each skill are also included in this interactive, self-paced course.

The course offers one (1) hour of NCCP Individual credit for ALS clinicians and one (1) hour of Medical credit for BLS clinicians. For more information, please email pepp@miemss.org.

Winterfest EMS 2021 Conference Still Available

THE COVID-19 PANDEMIC HAS forced many to find new and innovative ways to accomplish things that were once taken for granted. The annual EMS Educators Symposium hosted by MIEMSS every year is no exception. In following with the successful move to online learning by the Winterfest EMS 2021 Conference, MIEMSS is currently working to assemble six 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.

Wear a Helmet...

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Although Maryland law only requires those under 16 years of age to wear a helmet while biking, statistics show that everyone on a bicycle should wear a correctly fitted helmet on every ride to prevent head and facial injuries and decrease fatal crashes. In addition to a helmet, safety equipment for biking should include reflective clothing, reflectors on both helmet and bike, and a headlight for low-light riding.

For more information about bike safety, visit www.miemss.org/home/ bike-safety-project.

VISIT MIEMSS ONLINE AT WWW.MIEMSS.ORG

Facebook: @MarylandEMS ■ Twitter: @MarylandEMS ■ Instagram: @maryland_ems

Want a socially-distanced educational display for your safety event?

Pediatric Vehicular Heatstroke Prevention Display & Materials

Available for Free For Use at Maryland Community Events

On average each year, 39 children die from heatstroke when left alone in cars. In 2019, **52** children died this way. Awareness and behavior modification among caregivers are key to preventing the majority of these tragic deaths. The Outdoor Stand-Up Temperature Display is an excellent tool to create awareness of how a vehicle can quickly heat up in the sun to where the inside temperatures would kill a child. This display features:

- A 20" x 78" metal, free-standing frame that breaks down into 3 parts for storage inside a large, plastic case with wheels (case dimensions: 28" W X 48" H X 13" D).
- Two LCD temperature displays attached to the top of the frame: one for the in-vehicle temperature and one for outside/ambient temperature.
- Cable connectors with thermometers to place in and outside the car.
- Large magnet-signs to place on display car to convey message.
- Safe Kids display sign for the middle of the frame.
- 100 foot extension cord.
- How to use display video: <u>https://youtu.be/zGPB8fYatDU</u>
- Handouts and posters for the public.





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To Reserve this display:

Cecil County and Eastern Shore, contact <u>Holly.Trego@ccdps.org</u> Central MD, contact EMS for Children at <u>cps@miemss.org</u> or 410-491-7803 Montgomery/Prince Georges/Southern Maryland, contact tacrisman@Hotmail.com or 240-882-6772

Western Maryland, contact Kelly.Llewellyn@meritushealth.com or 301-790-8378

Guidelines for Use

- Arrange for pick up and return of the large and heavy display in its storage case.
- Return the display within four business days to the pre-arranged location.
- Arrange for an outdoor location for this: a parked vehicle is needed within 10 feet of the temperature display.
- Access to electricity is needed; a 100 foot extension cord is included with display.
- Do not expose the display to rain.
- Allow at least 30 minutes for set up time, with at least two strong people helping.
- Follow the directions for assembly carefully. Call 410-706-8647 if there are questions or concerns, or after hours, call Susanne Ogaitis at 410-491-7803.
- Ensure that someone will be near the display at all times.
- Properly pack and transport the display in its original case.
- Clean the display if needed with a soft, damp cloth.
- If any damages occur, you will be responsible for repairs or replacement.

Additional Activities & Materials to Accompany Display

- Place a doll or stuffed animal that doesn't look real strapped into a car seat inside the hot car. Use a car without dark windows to allow the car seat to be seen.
- Ask local car dealers to loan the vehicle, as a public service.
- Have supplemental materials available: handouts, posters to give away, or incentive items with campaign messages.
- Invite local media to cover the campaign and film the temperature changes.
- Cover the campaign on social media, with frequent updates of temperature changes and what that would mean to a child occupant of the car.
- Simultaneously conduct an inside display on the same subject by borrowing one of the 6' tall stand up posters ("Cars can overheat rapidly..." or "Take action..."). Contact <u>cps@miemss.org</u> to arrange this.

Emergency Medical Services for Children (EMSC) Maryland Institute for Emergency Medical Services Systems (MIEMSS) 653 West Pratt Street, 4th Floor Baltimore, Maryland 21201; 410-706-1758

Maryland Department of Transportation Motor Vehicle Administration's (MDOT MVA)

Maryland Highway Safety Office

The MDOT MVA Highway Safety Office (MHSO) is dedicated to saving lives and working with many partners across the State to reduce the number of crashes each year. In addition, the MHSO looks for ways to reduce crash severity and ways to treat crash victims easier and faster.

Maryland aims to reduce the number of crashes, and the resulting deaths and injuries, to zero by 2030.

Did you know?

For the past few issues we have been showing you who the highway safety office is, and what we do. Beginning with this issue, we want to ask for your help.

If you have ever spoken to a traffic safety professional at some point, you'll hear about the **Four Es of Traffic Safety**. They are **Enforcement**, **Education**, **Engineering**, and **EMS**.

Enforcement comes from our law enforcement partners in the form of citations and warnings. Traffic stops are not only meant to prevent drivers from continuing to act dangerously but to also help educate drivers about safe driving behavior.

Education is our effort to teach the public about traffic safety and ways we can all be safer on our roadways. Education comes in the form of media messaging, outreach, and other direct contact with drivers and passengers.

Engineering is roadway design, repair and maintenance. This segment is critical to designing safe roadways and planning ways to help drivers be safe.

EMS is a critical piece to saving lives. Members of the EMS community are often the first on the scene of a crash. The way crash victims are treated and stabilized can be the difference between life and death.

These **Four Es** are the core of traffic safety efforts. Only by working together, can we decrease the injuries and fatalities on our roadways, and the support of our EMS partners is critical to that mission.

Your specific jobs and skill sets are admired by all Marylanders. Each of you could be a Traffic Safety ambassador by modeling good behavior and serving as educators in your own communities. Beginning with this month's newsletter we will be providing you with calls to action that will help us all reach Zero Deaths!

Click It or Ticket

Every year May is designated as Click It or Ticket month by the National Highway Traffic Safety Administration. The campaign is intended to raise awareness about the lifesaving benefits of wearing a seat belt.

It's no secret that a seatbelt is your best defense in a vehicle crash, but there are still some who refuse to buckle up. The seatbelt usage rate in Maryland is 89.9%. Ten percent of the population of our State might not seem like a lot, but let's look at some crash data.

Seat belts reduce the risk of fatal injury by 45% and moderate to serious injury by 50%. If **ALL** front seat occupants of vehicles buckled up, hundreds, if not thousands, of deaths and injuries could be prevented each year.

What can you do?

- Buckle up, every trip, every time!
- Encourage your family and coworkers to do the same.
- When talking with the communities you serve, let them know how important seat belts are, and why you wear yours.
- Contact us! We have professionals who are ready and willing to help you educate others. Reach out at <u>MHSO@mdot.maryland.gov</u>.

Social Media Toolkits



Visit ZeroDeathsMD.gov/Resources to download the May Social Media Toolkit. From social distancing and hand-washing to wearing a mask and getting the COVID-19 vaccine, stopping a pandemic requires using <u>ALL</u> the tools available. Learn more at https://covidlink.maryland.gov.

Artwork courtesy of Jim Jarboe, a retired Montgomery County career firefighter and member for close to 65 years of the Takoma Park Volunteer Fire Department, where he continues to volunteer.

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