

**State Emergency Medical Services Board  
December 11, 2007  
Minutes**

**Board Members Present:** Donald L. DeVries, Jr., Chairman; Victor Broccolino, Vice-Chairman; Edward Cornwell, M.D.; Chief Scott Graham; Roger Simonds; Sally Showalter; Gene Worthington.

**Board Members Absent:** David Fowler, M.D.; David Hexter, M.D.; Dean Albert Reece, M.D.; Mary Alice Vanhoy.

**Others Present:**

**MIEMSS:** Dr. Bass; Ms. Alban; Dr. Alcorta; Ms. Bailey; Ms. Beachley; Mr. Brown; Mr. Coleman; Mr. Donohue; Mr. Dubansky; Dr. Floccare; Ms. Gainer; Ms. Gilliam; Mr. Hurlock; Ms. Magee; Ms. Myers; Mr. Ramsey; Mr. Seifarth; Mr. Schaeffer; Mr. Trohanis; Mr. Young.

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

**Maryland State Firemen's Association:** Paul Sterling, Jr., President; Roger Powell, Second Vice-President; Lee Sachs, Past President; Terry Thompson, Past President.

**Maryland State Police Aviation Command:** Major A.J. McAndrew; Capt. Dan Cornwell; Don Lewis.

**R Adams Cowley Shock Trauma Center:** Robbie Hartsock; Jaime Huggins; Brenda Fosler Johnson.

**INTRODUCTION**

Chairman DeVries called the meeting to order at 9:15 a.m.

**Approval of Minutes. Action: Moved (Chief Graham), seconded (Dr. Cornwell), passed unanimously to approve as written the minutes of the November 13, 2007, meeting of the State EMS Board.**

**EXECUTIVE DIRECTOR'S REPORT**

**Cardiac Centers.** Dr. Bass reported that MIEMSS was drafting regulations for the designation of Acute Cardiac Interventional Centers; he said the draft regulations should be completed and ready for Board consideration in the Spring 2008. He said that these centers would receive ambulance-transported patients with acute ST-elevation

myocardial infarction (STEMI) who need rapid primary percutaneous coronary intervention.

Legislative Reports. Dr. Bass said that MIEMSS submitted required reports to the Legislature on Automated External Defibrillators, injuries from All-Terrain Vehicle crashes, and health care worker exposure to HIV.

Dr. Bass reported that Leonard King, MSFA Secretary and Past President, who had suffered a stroke about six weeks ago, was continuing to make progress in rehabilitation. Dr. Bass also announced that EMS Board Member Ed Cornwell, M.D., had accepted a position as the Chairman of Surgery at Howard University Hospital and had submitted his resignation from the Board. Mr. DeVries said that he had received Dr. Cornwell's letter and congratulated him on his new position. Mr. DeVries said he was sorry to lose Dr. Cornwell as a Board member as he had brought new perspectives and insights to the Board various issues. Mr. DeVries presented Dr. Cornwell with a plaque in honor of his service on the EMS Board. Dr. Cornwell thanked Mr. DeVries.

Dr. Bass announced that Tom Miller, Dave Ramsey and Andy Trohanis were all retiring from MIEMSS at the end of December. He said that MIEMSS would be hosting a reception for them at the conclusion of the Board meeting.

## **MARYLAND STATE FIREMEN'S ASSOCIATION PRESENTATION**

President Sterling briefed the Board on the proposed new position of an Executive Director for the MSFA. He said that Past-President Lee Sachs had served as the Chairman of an Executive Director Workgroup that had studied the need for and made recommendations regarding hiring of an Executive Director. He said that members of the Workgroup included Past-Presidents Gene Worthington, Phil Hurlock, and Terry Thompson. He also said that Craig Moe and Eric Bernard had also worked with the Workgroup. He thanked all the members of the Workgroup for their efforts

He said that the MSFA was in its 115<sup>th</sup> year and represented 377 companies throughout Maryland. He said that the MSFA leadership was 100% volunteer and currently had no salaried employees. He said that the issue of hiring an Executive Director had been raised in July 2006 and that Bobby Balta had created a workgroup to examine the issue. He said that the Workgroup had concluded that the addition of an Executive Director would enhance operations and increase continuity which would benefit all EMSOF partners. He said that the Workgroup had also recommended seeking funding for the Executive Director from the EMS Operations Fund. He said that MIEMSS, the Shock Trauma Center and MFRI had indicated their support, and that he hoped to have the position created and filled by July 1, 2008.

Mr. Sachs said that grants could not be used to support the position, since the grants could expire; rather, he said that a secure, on-going source of funding was needed. He estimated that all the costs for the position, including salary, benefits, office space and

secretarial support, would total about \$245,000 annually. He distributed information on the Executive Director's duties and responsibilities. **Mr. Broccolino made a motion, which was seconded by Dr. Cornwell, to support the creation of the Executive Director position, as well as the necessary funding from the EMS Operations Fund.** Mr. Broccolino asked how the job description was developed. Mr. Sterling indicated that the MSFA had considered information from the Maryland Municipal League, the Delaware State Firemen's Association, and the National Firefighters Foundation in developing the description. He also said that the Workgroup, the past presidents and the others would be involved in reviewing applications. Chief Graham asked whether funding the position from EMSOF would detrimentally affect EMSOF's viability. Dr. Bass said that funding the MSFA Executive Director position from EMSOF would not result in a significant impact on EMSOF. Mr. DeVries said that the MSFA was an invaluable partner and that the new position would be a great asset. Ms. Gainer asked whether funding the position from EMSOF would require a change to the EMSOF statute. Mr. Sachs said that that was unclear at this point. **With Mr. Worthington abstaining, the Board voted to support the creation of the MSFA Executive Director position and to support funding the position from the EMS Operations Fund. The Board approved the motion.**

#### **SEMSAC REPORT**

Mr. Simonds reported that SEMSAC had met on December 6, 2007. He said that three items had been considered at the meeting: Bylaws for Regional Affairs; the Maryland Mass Casualty Plan and the Voluntary Ambulance Inspection Program.

#### **SHOCK TRAUMA CENTER REPORT**

Ms. Fosler distributed the Shock Trauma report to the Board. She said that the patient volume was lower during November than during the same period the previous year and that actual admissions were lower than the number budgeted. She said that the bed occupancy level at 83.56 was lower when compared to the same period as last year. She said there had been no capacity alerts during the month. She reviewed the Shock Trauma Center's key issues for 2008, which included maintaining the integrity of the system, continuing performance improvement initiatives, and meeting capital, equipment and technology requirements.

#### **LEGISLATIVE REPORT**

No report.

#### **OLD BUSINESS**

None.

## NEW BUSINESS

Discharged Military Medics & Corpsmen. Chief Graham said that there were a significant number of active and discharged military personnel who would like to volunteer or seek employment as EMS providers in Maryland. He said that the medic corpsmen were trained to a higher level than EMT-B. He asked whether MIEMSS could provide an EMT-I bridge program for these personnel. Chief Graham said, since June, Montgomery County had turned down more than 100 of these personnel who had expressed interest in providing services in Maryland. Dr. Bass said that MIEMSS would discuss the possibility with the National Registry. Chief Graham said that the military provides a stipend, in addition to VA benefits, to these individuals. Mr. DeVries said that this idea seemed to have substantial merit and that MIEMSS should explore the issue and report back to the Board.

Voluntary Ambulance Inspection Program (VAIP). Mr. Ramsey reviewed the updated VAIP Program for the Board; he noted that the updated Program contained no major changes. He said that work on the revisions had started in the spring of 2007; in the fall, the Regional Medical Directors, had reviewed and approved the updated version. He said that in December, the MSFA's EMS Committee, along with SEMSAC, had reviewed and approved the updated version.

Mr. Simonds said that the VAIP was reviewed for possible changes every two years. He said the goal of the Program was to ensure that ambulances were equipped to provide care according to the Maryland Medical Protocols. **Chief Graham made a motion, which Ms. Showalter seconded, to approve as presented the Voluntary Ambulance Inspection Program. The Board approved the motion.** Mr. Ramsey thanked all those who had been involved in completing the revisions. Mr. DeVries thanked Mr. Ramsey for his service to the citizens and State of Maryland and wished him well upon his retirement.

Mr. DeVries indicated that the remaining items on the agenda would be taken out of order.

Review of Commercial Helicopter MOU and Protocol Performance. Dr. Bass said that it was important to periodically review data regarding the operation of the Memorandum of Understanding (MOU) with the commercial services. He said that a report had recently been televised on a Baltimore station regarding the MOU which may have caused confusion or concern. Dr. Floccare said that the MOUs, which covered the commercial services providing scene back-up to the State Police, was first signed in March 2005 and had been in operation since that time. He said that the MOUs with the various commercial services were in effect for one-year periods. He said that currently MedSTAR and PHI had MOUs in effect with the State, but that STATMedevac had not re-signed the current MOU.

Dr. Floccare reviewed the circumstances under which a commercial helicopter would be called. He also described the Helicopter Medical Review Committee, which was a

quality improvement committee that focused on safety and appropriate medical response. He said that since the inception of the MOU, the commercial services had been called to respond in approximately 50 cases. He said that during the same period, the MSP had responded to 12,214 cases, only 399 of which had response times of greater than 25 minutes. Of the 399 cases, however, only 34 involved “Category A”, or the most serious, patients. For 29 of these patients, the MSP was the closest aircraft. He explained that the remaining 365 patients were of lesser severity. He said that several modifications had been made to the protocol to address unusual circumstances that had arisen, e.g., an incident next to the hanger of a commercial service to which the commercial services responded and provided care.

Mr. Simonds noted that in certain areas, patients were flown by helicopter when the patient should have been transported by ground ambulance. Dr. Floccare said that MIEMSS was addressing this issue through the protocol that provides specific guidance on when a patient should be transported by ground, instead of helicopter. Mr. DeVries said that the protocols would continue to be modified, as necessary, to ensure that patients were appropriately transported.

#### **ADJOURN TO CLOSED SESSION**

**Upon the motion of Chief Graham, which was seconded by Dr. Cornwell, the Board adjourned to closed session to carry out administrative functions and to consult with counsel to obtain legal advice on pending disciplinary actions under State Government Article § 10-508(7), to consult with staff and counsel on pending litigation under State Government Article § 10-508(8), to discuss certain matters subject to executive privilege, to maintain certain records and information in confidence as required by Health Occupations Article § 14-506(b) under State Government Article § 10-508(13), and, thereafter, to resume open session.**

**Board Members Present at the Closed Session:** Donald L. DeVries, Jr., Chairman; Edward Cornwell, M.D.; Chief Scott Graham; Roger Simonds; Sally Showalter; Gene Worthington.

**Others Present:** Dr. Bass, Ms. Bailey, Mr. Dubansky, Ms. Gainer, Mr. Magee, Mr. Seifarth, Ms. Sette, Mr. Schaeffer.

The administrative function was the review of confidential hospital information, the application of provider disciplinary rules to existing cases, and to discuss certain matters subject to executive privilege.

#### **RECONVENE IN OPEN SESSION**

The Board reconvened in open session at 11:02 a.m.

**Approval of Perinatal Re-designation. Upon the motion of Chief Graham, which was seconded by Dr. Cornwell, the Board approved the re-designation of Shady Grove Adventist Hospital as a Level III B Perinatal Center. The Board approved the motion.**

**Approval of Stroke Designation. Upon the motion of Ms. Showalter, which was seconded by Dr. Cornwell, the Board approved the designation of Harford Memorial Hospital as a Primary Stroke Center for a period of five (5) years. Upon the motion of Chief Graham, which was seconded by Dr. Cornwell, the Board approved the one-year provision designation of Upper Chesapeake Medical Center as a Primary Stroke Center.**

There being no further business before the Board, the Board was adjourned by acclamation at 11:05 a.m.