

JUNE 12, 2024 10A – 12P

MIEMSS 653 W. Pratt Street, Room 212 Baltimore, MD 21201

MEETING ID meet.google.com/yzf-urtg-iov

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AGENDA

1000	Welcome and Introductions	Christian Griffin
1005	Approval of JAC Meeting Minutes (Feb. 2024)	Christian Griffin
1005 - 1030	OMD Updates	Dr. Timothy Chizmar
1030 - 1045	Office of Clinical Services Updates	Randy Linthicum
1045 - 1100	EMS Preparedness and Operations Update	Jeff Huggins
1100 - 1115	EMS-C Updates	Cyndy Wright-Johnson
1115 - 1145	Jurisdictional Roundtable	All
1145 – 1200	Closing Remarks and Adjournment	Christian Griffin

NEXT MEETING IS SCHEDULED FOR AUGUST 14, 2024 AT 1000 HOURS

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ATTENDANCE:

Committee Members in attendance:

In Person:

Randy Linthicum (MIEMSS-Deputy Director); Dr. Timothy Chizmar (MIEMSS-State EMS Medical Director); Stephanie Ermatinger (MIEMSS-Administrator); Cyndy Johnson-Wright (MIEMSS-EMS-C); Mustafa Sidik (MIEMSS- Region III); Holly Trego (MIEMSS-EMRC/SYSCOM); Lieutenant White (Annapolis City).

Online:

Wayne Tiemersma (MIEMSS Region I); James Matz (Baltimore City); Amanda Wensel (Baltimore County); Andy Robertson (MIEMSS-Region V); Ben Kaufman (Montgomery County); Brian Ebling-MIEMSS Region IV); Caitlin Ledford (Harford County); Chad Packard (BWI Airport); Christian Griffin (CHAIR) (Baltimore County); Christopher Truitt (City of Salisbury); Danielle Joy (Baltimore County); David Chisholm (Washington County); David Svites (MD State Police); Dwayne Kitis (MIEMSS Operations); Eric Cohn (Howard County); Eric Zaney (Carroll Co); Ethan Freyman (BWI Fire); Heather Howes (Calvert County); Jason Cantera (MIEMSS-eMeds); John Cvach (Anne Arundel Co); KJ Marvel (Caroline County); Logan Quinn (Kent County); Mark Bilger (MIEMSS Ombudsman); Michael Cole (Frederick County); Michael Parsons (MIEMSS Region IV); Mike Salvadge (Allegany Co); Patrick Campbell (Cecil County); Rebecca Gilmore (UM Shock Trauma); Richard Koch (Ocean City); Robert Vaccaro (Anne Arundel Co); Sam Grant (Garrett County); Shawn Davidson (St. Mary's County); Thomas Raley (St. Mary's County); Tina Kintop (Talbot County); Zach Yerkie (Queen Anne's County)

GUESTS:

None

- I. Opening Remarks: Chairman Christian Griffin
 - A. Chairman Griffin called the meeting to order at 1006 hours
 - B. He displayed the February Meeting Minutes on screen for all to review. Chairman Griffin advised the group that the February 2024 Minutes had been distributed to the group two (2) times prior to the meeting. Chairman Griffin asked if there were any corrections. No corrections requested. Motion to approve February Minutes made by Chief Richard Koch, seconded by Chief Zach Yerkie, with no objections. Christian Griffin stated the February 2024 JAC Meeting Minutes are approved as written. (Exhibit A)

II. Chair Reports

- A. State EMS Medical Director's Report (Dr. Tim Chizmar)
 - 1. Personnel
 - a. Dr. Chizmar introduced Stephanie Ermatinger as the new Administrator for the Office of the Medical Director, the Office of Care Integration and the Aeromedical Services departments.
 - b. Bev Witmer is no longer with MIEMSS, and
 - c. Randy Linthicum has accepted the position of Deputy Director of MIEMSS.

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2. JAC Update (Dr. Chizmar) (Exhibit B)

- a. Transfer of Care Times (Slides)
 - i. Dr. Chizmar reviewed the EMS Transfer Times on the comparison chart.
 - ii. He spoke of the EDDIE Initiative that is being run through HSCRC.
 - iii. They are still considering whether/how the 90% EMS transfer of care times will figure into hospital reimbursement.
 - iv. HSCRC is working on the financial methodology and whether there will be a financial penalty or reward attached to this
 - v. Dr. Chizmar described the (3) big areas they are looking at the red, yellow and green areas (as displayed on the diagram)
 - vi. Dr. Chizmar noted that there are more hospitals in the green area (less than 35 minutes transfer of care time) than when we started tracking this in 2023.
 - vii. Dr. Chizmar stated the median time is around 25 minutes, but ideally a good median time is 20 minutes or less.
 - viii. He stated the hospitals are generally making progress towards having times in the green zone.

3. 2024 Protocol Updates (Slide)

- a. Dr. Chizmar stated the new 2024 Protocols have been released and are now online on the MIEMSS website.
 - i. He stated the link still says "preview" next to it, as the "hyperlinked" version of the document is still being worked on by our editor.
 - ii. Dr. Chizmar stated there are twenty-three (23) changes to the protocols this year, but he shared with the group the six (6) core changes.
 - 1. The new medications added to the protocols are esmolol, norepinephrine, and rocuronium.
 - 2. The norepinephrine and rocuronium require Optional Supplemental Program applications and approval.
 - iii. All protocols will go live on July 1, 2024.
 - iv. He stated a full-size book (8"x11" pages/index and spiral bound) are pending delivery and will be available at the MIEMSS store for sale
 - 1. He stated there is no pocket size book this year.
 - 2. He stated these are being distributed to the base station hospitals as well as two (2) copies per jurisdictional office.
 - 3. Dr. Chizmar stated they are \$25 for the full size version, and the spiral bound books are \$10 through the Office of Clinician Services (same amounts as last year, despite increased printing costs).
 - 4. He stated Todd is working on the mobile application (App) for both Android and Apple devices which will be free, and available to our medical directors and jurisdictional leaders first.
 - 5. Stephanie will assist with the distribution of the App notifications when it becomes available to the various departments.

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6. Dr. Chizmar stated that some departments may have strict guidelines for downloading apps so please check with your jurisdiction's IT office prior to downloading any of the apps online.

4. Medication Review

- a. The only new medication for statewide use (ALS level) is esmolol 1 vial (100 mg).
- b. It comes as one (1) milligram per 10 mL vial and has 100 mg which is enough to take care of a patient who weighs close to 500 pounds. The protocol is a single dose of 500 micrograms/kg (no repeat doses).
- c. The other medications that are listed are optional supplemental medications.

5. Language Line (Slides)

Dr. Chizmar highlighted a protocol that is of particular importance at the leadership level. In the General Patient Care section, we now direct EMS clinicians to make use of a jurisdictionally-approved language translation service when there is a perceived language barrier.

- a. Dr. Chizmar stated that over 10% of the Maryland's population do not speak English as a first language.
- b. Dr. Chizmar reviewed the language line options that are available. This topic was presented at several JAC meetings over the past year.
- c. He stated the use of the interpretation line is critical when EMS clinicians and patients speak different languages to ensure appropriate care and destination.
- d. He asked the group to discuss this protocol change with their 911 centers, as field clinicians may access translation services through their centers.

6. T-CPR (Slides)

- a. By way of review, Dr. Chizmar reviewed the efforts to capture PSAP call time to the first TCPR compression interval.
- b. He stated all of your 911 centers had the opportunity to attend additional training with Priority Dispatch, and should be ready to report these times.
- c. He stated PSAP call to recognition of OHCA is within the 60-90 second timeframe and the PSAP call to the first T-CPR compression should be with in the 90-150 second timeframe.
- d. Dr. Chizmar stated our hope is to get our reporting automated in the future. However, this will take time as it involves changes from Imagetrend, CAD vendors and CARES. In the interim, it's very important we start to capture this information to figure out where our opportunities may lie to improve survival from OHCA.

7. Volunteer Ambulance Inspection Program (VAIP) (Slides)

a. Dr. Chizmar reviewed the few changes to the VAIP this year.

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- b. Dr. Chizmar stated that the information is available online at miemss.org/home/vaip.
- c. He reviewed the 2024-2025 Equipment Checklist vs the 2023-2024 items
- i. He stated that the ALS added the Esmolol 100 mg vial and Gum Elastic Bougie
- ii. He stated that the BLS checklist added the PEEP valve, 1st responder units should have four (4) tourniquets and the ambulances (ALS/BLS) should now have six (6) tourniquets, minimum.

8. Legal Considerations regarding Minors as EMS Clinicians (Slide) (Exhibit C)

- a. Dr. Chizmar reviewed the Memorandum from AAG Claire Pierson in detail
 - i. Several questions from the group were asked and answered
 - ii. The group discuss what these minor clinicians can do in the field as it pertains to direct patient care. They can perform interventions specified in the Maryland Medical Protocols for EMS.
 - iii. The group discussed the minor clinicians witnessing refusal forms. There are no laws or regulations that prohibit EMTs under the age of 18 (16-18 years old) from serving as witnesses for a signature.
 - iv. Dr. Chizmar noted that the jurisdictions have credentialing authority and may restrict the participation of EMTs who are minors as deemed appropriate.

9. Maryland Tactical Medicine Course (Slides) Exhibit D)

- a. Dr. Chizmar presented this program on screen for the group to review, if they wish to enroll EMTs or Paramedics for tactical EMS training.
- b. He emphasized the group to read all the qualification and the programs requirements because this course is intense.
- c. He stated for additional information, contact Sgt. William Jansen or Nina Bingham at the email addresses on screen.

B. Office of Clinical Services Update (Randy Linthicum)

- 1. Recruiting
 - a. Randy stated they are recruiting for a Director for the Office of Clinician Services
 - i. He states he is filling in at this point and any questions can be directed to him.
 - 2. EMT Psychomotor Exams
 - a. Randy stated most prospective EMTs pass their first time with average score of 75-80%.
 - b. He stated that most candidates who are unsuccessful the first time are able to pass on their second attempt.

C. **EMS Preparedness and Operation Update** (Jeff Huggins)

1. Christian stated Jeff is absent from the meeting, however, stated he has no updates for the group

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D. EMS-C Updates (Cyndy Wright-Johnson)

- Cyndy stated she sent out two (2) documents this morning for the group to review (Exhibit E)
 - a. Pediatric EMS Champions met on April 24th @ MFRI for their spring in person meeting.
 - Cyndy shared the feedback that the EMS Champions would like to meet with the Pediatric ED Nurse (& Physician) Champions during one of the in person meetings next year.
 - ii. She stated the National Pediatric Prehospital Readiness Project Assessment launched May 1, 2024.
 - Cyndy stated this 207-question survey is the first assessment based upon the 2020 Joint Policy Statement and Technical Report published by the AAP and other organizations.
 - She said as of today's meeting, 80% of the EMSOP in Maryland have completed the assessment and a written GAP report will be available to share within EMS leadership.
 - 3. Individual scores will remain confidential, state and national aggregate will be published by HRSA in the fall of 2024
 - 4. Cyndy and Danielle will reach out for assistance to the EMSOP that have not completed the NPPRP Assessment by July 1st

b. Pediatric Assessment Reference Cards

- i. 2024 Version of these Peds Cards are available for the counties to pass out to their clinicians
- ii. Primary contact is the Pediatric EMS Champion in each EMSOP
- iii. Cyndy asked that the old cards (2018) be cut in $\frac{1}{2}$ and discard as they have out of date protocol references

c. Pediatric Reference Posters

- Cyndy stated the medical assessment posters are complete and will be distributed through EMD and ED Champions
- ii. PEMAC will be working on the Trauma/Burn posters in July with input from both pediatric centers
- iii. Cyndy shared a reminder from Bayview for clinicians not to send patients under 15 and not in cardiac arrest to their ED. There appears to still be confusion about which "Hopkins" burn center receives children it is Johns Hopkins Children Center at main campus on Orleans Street

d. Infant Transport Devices

- i. Cyndy has received questions about a new device for transporting infants that is being promoted by vendors. It is called "KangooFit" and is made by Ferno
- ii. At the national NASEMSO conference, the EMSC Directors reviewed device it places the infant in cocoon that is then secured onto the chest of the mother or other adult. Maine has purchased a set for rural long term (sometimes greater

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than 3 hours) transports with limited EMS vehicles. The device does not allow for ongoing monitoring and should be considered for clinically stable infants only

- iii. As with all pediatric ambulance transport devices, there are no national or international standards for securing an infant or child in an ambulances
- iv. The NASEMSO Safe Transport committee's workgroups are finalizing technical standards this month and will distribute for peer review this summer
- v. We anticipate crash testing in the fall or winter pending additional federal funding

E. Roundtable Discussions (Christian moderating)

- 1. Medical Director's Office (Dr. Chizmar)
 - a. Dr. Chizmar stated there have been several changes in representation in the counties.
 - b. He stated we will be putting out a survey to each county to update their representatives for the JAC.
 - i. Stephanie will put out a survey for updating the representatives for each agency

2. **Allegany County** (Mr. Salvage)

- a. Chief Salvage stated they received a correspondence from Stryker/Physio regarding the use of monitors for dual sequential defibrillation (DSD).
 - i. Physio/Stryker has said previously that they will not put recommendations in writing on the topic, because the actual use of the device is "medical practice" that they don't have authority over.
 - ii. He stated to consult the protocols, because it has to be the same person delivering (or pushing the button) the shocks, and there must be a brief pause between shocks (sequential shocks, NOT simultaneous shocks). The capacitor on most devices remains open for 70-80 milliseconds. So it is critical that the clinician in charge of the defibrillator uses the same hand/finger to press both buttons, so as not to deliver simultaneous shocks.
 - iii. Heather from Calvert Co stated their representative said if the buttons are pushed simultaneously, this will void the warranty.
 - iv. The online protocol update is a starting point to learn about DSD. Jurisdictions are encouraged to do hands-on drills.
 - v. Dr. Chizmar stated it is a good practice to perform a monitor self-test (and ensure the monitor passes it) after it is used for DSD.
 - vi. Eric Cohn of Howard County discussed his county's operations process with the group.

3. Anne Arundel County (Mr. Joe Cvach)

- a. Chief Cvach stated A.A. Co. has a class in session and are actively hiring for EMS personnel.
- b. The applications are due by June 17, 2024

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- c. Chief Cvach had a question in the chat Mrs. Wright-Johnson stated she has a call into Steve and an email follow-up will go out this afternoon to answer his question.
- 4. Baltimore City (Mr. James Matz)
 - a. Chief Matz thanked everyone for their hard work.
 - b. He reports their Tele911 is up to 158 uses, average 10 mins a call, and avg. 30 sec to connect with a doctor.
 - c. He stated Fleet Week is 6/12-6/18.
 - d. He stated they have in the Academy right now two (2) classes of (52) EMTs and our projected to do another class in August or early September.
- 5. Baltimore County (Mr. Christian Griffin) No Report
- 6. BWI (Mr. Ethan Freyman)
 - a. Mr. Freyman stated they have a class in session now.
- 7. Calvert County (Ms. Heather Howes)
 - a. No Report
- 8. Carroll County (Mr. Eric Zaney)
 - i. (inaudible)
- 9. Cecil County (Mr. Patrick Campbell)
 - a. No report
- 10. Caroline County (Ms. Kathy Jo Marvel)
 - a. Ms. Marvel stated Lt. Marie Wieglosz, their training officer, is stepping down.
- 11. Frederick County (Chief Michael Cole)
 - a. No report
- 12. Howard County (Mr. Eric Cohn)
 - a. Mr. Cohn advised the group they have a scheduled Paramedic program starting in December 2024.
- 13. Kent County (Mr. Logan Quinn)
 - a. No report
- 14. Ocean City (Mr. Richard Koch)
 - a. Mr. Koch advised the group that his county is going over the hands-on protocol updates and going through the policies and procedures of doing the dual sequential defibrillation.
 - b. He advised of some changes:

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- i. He stated he has been removed off shift and has been put back into the day-today operations
- ii. Amanda Bunnings has been appointed battalion chief
- iii. He stated there are 14 people currently onboarding with the county
- iv. He stated the testing for the 1st EMT class is later this year
- c. He stated he will see everyone next week at the EMS Convention Week in Ocean City

15. Harford County (Ms. Caitlin Ledford)

- a. Ms. Ledford stated they are hiring six (6) more EMTs
- b. She advised they are still hiring for Paramedics

16. Queen Anne's County (Mr. Zach Yerkie)

- a. Mr. Yerkie advised the group of their staffing updates.
- b. He stated they are having the usual traffic issue with the start of beach season

17. Garrett County (Christian Griffin for Sam Grant)

a. Christian stated it looked like Sam had to go to another meeting. However, his
report is that they have three new paramedics with a fourth pending, passing the
national registry

18. **St. Mary's County** (Mr. Thomas Raley)

- a. Mr. Raley stated they have (5) new EMT's
- b. He stated they are currently recruiting for EMS Lts and Paramedics.

19. City of Salisbury (Mr. Christopher Truitt)

- a. Mr. Truitt advised the group they have (4) new paramedics, (2) are pending national certification
- b. He voiced his opinion regarding the MIH training
- c. He stated they installed their first SAVE Station in the field
- d. Mr. Truitt thanked MIEMSS for for assisting in the SWOT analysis of Wicomico County's EMS system

20. Talbot County (Ms. Tina Kintop)

- a. Ms. Kintop stated they have one (1) new Paramedic and are hiring for a Training Officer.
- b. She stated their MIH program is doing well.

21. Washington County (Mr. David Chisholm)

a. Mr. Chisholm advised the group they are starting training on the new V-Tach/V-Fib protocols.

22. City of Annapolis (Lt. White)

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- a. Lt. White state they are rolling out the new protocols with BLS and ALS trainings.
- b. He stated there are (8) persons in training.
- c. Lieutenant White is in charge of the EMS training for Annapolis. He further stated he is representing Captain Ray McRae.
- d. Lieutenant White stated we are going to be doing BLS for ALS because we run medic units so besides that, we have a couple of medics in the academy coming out in July.
- e. He further stated they have three new personnel who are just starting EMT in PG County's training program.

23. Maryland State Police (Mr. David Svites)

- a. Mr. Svites stated they are starting to recruit EMT-P officers.
- b. He stated the Whole Blood Program has reached 112 patients with 158 units of whole blood.
- c. The group congratulated the MSP for their efforts with this program.

24. MIEMSS e-Meds Administrator (Jason Cantera) (Exhibit F)

- a. Mr. Cantera presented a slide show with the following information:
 - i. @HA Update
 - 1. Allegany County informs that data is available as of yesterday
 - 2. St. Mary's County informs that they are working with vendor with an expected completion date of August 2024
 - ii. Validation Request in the e-Meds System
 - 1. Mr. Cantera discussed the transfer of care comparing the response time to signature of hospital personnel
 - 2. Mr. Cantera provided an example of the validation rule that would allow (5) minutes difference between these (2) fields as a local validation rule option
 - 3. He shared a slide for documenting signatures
 - 4. Dr. Chizmar stated that Jurisdictions can do this in their own counties and that the validation is not a state-wide rule.

iii. Bar Code Parser

- 1. Mr. Cantera discussed the bar code scanning process
- 2. He stated there is a process to scan the patient's wrist band and it will copy hospital demographics and other information into the eMEDS report
- 3. Mr. Cantera discussed the (2) different bar codes on a patient's wrist band.
- 4. He discussed the external report ID Type Protocol
- b. eMEDS Statewide Steering Committee Report and Meeting Dates for 2024-2025
 - 1. Mr. Cantera reviewed the meeting dates for the 2024-2025 calendar years
- c. eMEDS Resource Page
 - 1. Mr. Cantera reviewed the location of the eMEDS Resource Page and various information available on the website
- d. Image Trend Connect Conference
 - 1. Mr. Cantera stated the conference will be held in St. Paul, MN in late July for anyone interested in attending.

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25. EMS-C Program (Cyndy Wright-Johnson)

- a. Cyndy provided the group with updates on the attached (Exhibits G)
- b. She stated if there were any questions, to contact her office at 410-706-1758.

F. Closing Remarks

- 1. Mr. Griffin stated the next meeting of the JAC is August 14 2024 at 1000 hours,
 - a. The group discussed the meeting date with various people's vacation plans in an attempt to determine if this date is feasible.
 - b. After a short discussion, the group decided to keep the August 14th date as the next meeting.

G. Motion to Adjourn

- 1. A Motion to Adjourn was made by Heather Howes, second by Zack Yerkie.
- 2. Chairman Christian Griffin adjourned the meeting at 1125 hours.

Respectfully submitted, Stephanie Ermatinger MIEMSS Administrator Office of the Medical Director Published: July 2, 2024