



Region V EMS Advisory Council

Thursday, January the 21st, 2016 @ 1:00 pm to 3:00 pm
Fire Services Building
6820 Webster Street Landover Hills, Maryland 20784

Conference call in information:

Call in: [REDACTED]

AGENDA

Call to Order

Roland Berg, Chairperson

Roll Call

Review of Minutes

Review of November 19th, 2015 minutes

Report of Chairman:

(Presented by Roland Berg)

Medical Director's Report:

(Presented by Dr. Richard Alcorta, Dr. Mike Somers)

MIEMSS Report:

(Presented by Jonathan Bratt)

Report of Special Committees:

- Region V EPC
- STEMI
- EMSC

Unfinished Business:

(Presented by Roland Berg)

- NEDOCS Update

New Business:

(Presented by Roland Berg)

- Council Officer Elections
- Chempack Project – Randy Linthicum
- Status of Laurel Regional Hospital – Dr. Trudy Hall
- Region V Med Surge Exercise – Marie Warner
- Addition to Region V Alert Status System – Marie Warner

Announcements:

(Presented by Roland Berg)

Regional Round Table:

Next meeting:

Thursday, March 17th, 2016 1:00 pm Fire Services Building

Adjournment



Region V EMS Advisory Council

Thursday, January 21st, 2016 @ 1:00 pm to 3:00 pm
Fire Services Building
6820 Webster Street Landover Hills, Maryland 20784

Meeting Minutes

In attendance: Roland Berg, Kristine Piazza, Carlton Archer, Casey Owens, Katherine Wheeler, Trudy Hall, Cyndy Wright-Johnson, Emily Dorosz, Zachary Marselle, Jon Bratt, David Stamey

Conference Line: Dawn Yeitrakis, Rosanne Herbert, Dianna Clapp, Erin Parks, Dr. Mike Somers, Dr. Terry Jodrie, Stanley Williams, Dawn Mooreland, Pete Wild, Pat Gabriel, Donna Sasenick, Jim Radcliff, Mike Antonis, Heather Howes, Chris Larson, Roger Stone, Doug Mayo, Becky Vasse, Stephen Stowers, Reggie Singleton, Randy Linthicum

Call to Order

Roland Berg, Chair

Minutes: Review of November 19th, 2015 minutes. They were accepted.

Report of Chairman

(Presented by Roland Berg)

- SEMSAC had a joint meeting with the EMS Board. The various EMSOP partners presented their yearly reports. Project reports were provided for the 2015 calendar year, and project outlooks were shared for 2016. The Maryland Highway Strategic Plan was shared and well received.

Medical Director's Report

(Presented by Dr. Somers)

- Montgomery County is presenting a pilot project for alternate destinations.
- April 13th will be the annual Medical Directors Symposium. It will be held in Howard County at their public safety building.
- Information for the upcoming base station reverification process has been sent out. The applications will be submitted online.
- Recently traveled to San Diego for an EMS conference for medical directors. There is a pressing DEA bill that fixes some of the distribution problems that affect medical directors across the country.
- We have roughly a dozen EMS certified physicians in Maryland.

MIEMSS Report:

(Presented by Jon Bratt and Zach Marselle)

- The Region V Education Council has resumed. All of the membership at the first meeting was from Southern Maryland, and we would like to see participation from Montgomery and Prince George's Counties. This meeting was just to "get the ball rolling". Temporary leadership was established. The next meeting date still needs to be established. Providers will be polled to determine what kinds of educational activities they want to see in Region V.

- MIEMSS has offered the Education Council the ability to use their Survey Monkey license in order to help with the various polls.
- Jon Bratt is now the Director of Regional Programs at MIEMSS. Zach Marselle and Dave Stamey will be supporting Region V until the vacant positions have been filled.
- Randy Linthicum presented on CHEMPAK updates.
 - o CHEMPACK Mission: “Implement a nationwide project for the “forward” placement of nerve agent antidotes. To provide state and local governments a sustainable resource that increases their capability to respond quickly to a nerve agent event.”
 - o EMS Container Contents: Designed for first responder use mostly auto-injectors (allows for rapid administration). Some multi-dose vials for repeated doses until symptoms decrease or cease / also allows for dosing for elderly or pediatric patients
 - o The DEA registrant for the EMS Chempacks: Richard L. Alcorta, MD
 - o Requested through EMRC/SYSCOM by EMS Incident commander or designee. EMRC/SYSCOM arranges transport. Goal is to deliver within 30 minutes of a request.

Report of Special Committees:

Region V EPC – presented by Donna Sassenick

- The Region V Evacuation Exercise will take place in April. The exercise date is still to be determined.

STEMI – presented by Zachary Marselle

- STEMI remains on hold.

EMSC/PEMAC – presented by Cyndy Wright-Johnson

- A few kids have been nominated for Star of Life and Right Care When It Counts awards, but not from every jurisdiction in the Region. We are aware of the young woman from St. Mary’s County, and she will receive recognition.
- We had a tragic loss Monday night into Tuesday morning in Prince George’s County in Chillum. A fire killed two grandparents and two children. There were no working smoke alarms in the structure, which was being used as a rental property. This occurred a year to the day of the Annapolis City fire.
- Safe Kids Maryland and ENA are not in support of House Bill 19 which would repeal the mandatory installation of sprinklers in new structures. The Office of the State Fire Marshal and MSFA are providing detailed information on the danger to both civilians and responders if this bill were to be passed and allow local jurisdictions to have lower standards. There is no hearing date at this time.
- New protocol books will be issued this year. One of the major changes will be in the definitions of ages in the Pediatric protocols. There are now a total of nine age groups – seven for pediatrics, adults and senior adults (over 65). Newly born protocol is also changing to allow for the infant to have 10 minutes to transition into extra uterine life – this will bring the protocols into alignment with national neonatal standards and courses. New protocol books will be issued this year.
- PEMAC has started an intentional discussion around the development of a protocol for termination of resuscitation of children in the field. The goal is to develop an algorithm for different situations. . We may do this in a two year rollout. We are not going to do this in a vacuum. The state of Kentucky received a grant for this program, and they are in their

third year. We will probably ask in April or May for a focus group to talk with ED providers and EMS providers to determine what kinds of training and resources everyone will need. Five videos are already available from Kentucky. This protocol needs to be developed with the providers who would be dealing with these kinds of situations.

- EMS for Children will be offering at preconference at the EMS Care 2016 Conference on caring for Children with Special Health Care Needs. This is an 8 hour workshop with hands on that is expanded from the 2004 - four hour in-service. This workshop will be offered at Winterfest, Miltenberger and EMS Care – prices will vary based upon the conference hotel.
- We are looking at over a million calls a year. About half of those are transports, and about 45K of those calls are pediatric calls. We are looking to further breakdown and define those calls.
- We will be meeting in Baltimore in February to write a curriculum to help prepare adults and families for the arrival of EMS and what to expect in the ED. This will include when to call 911, and what to expect when EMS arrives.

Unfinished Business

(Presented by Roland Berg)

- NEDOCS – A presentation was given by Zachary Marselle on the NEDOCS calculators. Five hospitals within Region V are going to be participating in the 90 day pilot program.
 - o Hospitals will continue to use standard diversion policies. This is just a recording pilot.
 - o A concern from Montgomery County is psych patients. Psych patients will be included as high resource patients.
 - o Multiple diversion discusses are ongoing at MIEMSS HQ. We will involve various stakeholders as the group continues to move forward.
 - o Marie Warner, MDERS: Med Surge Planning is ongoing for the entire region. We would like to see region wide surge plans be included as a part of the big picture diversion plan. We would like to see surge activation be included as an alert status. We would also like to see more information provided by a hospital when they go on “Mini Disaster”.

New Business

(Presented by Roland Berg)

- Council Officer Elections
 - o Roland Berg was nominated for Chair of the Region V EMSAC. He accepted the nomination. Roland was elected Chair of the Region V EMSAC for 2016.
 - o Stanley Williams accepted the temporary position of Vice-Chair until April 1st, 2016, when he plans to retire.
- Status of Laurel Regional Hospital – Dr. Trudy Hall
 - o Laurel Regional Hospital is open for patient care.
 - o LRH will transition to an ambulatory care center in three years.
 - o The maternity center closed on 10/11/15. This will affect OB patients who are in labor, under 20 weeks, or are a GYN call.
 - o The following adjustments were made:
 - Critical care beds reduced to 10
 - Med surge beds reduced to 20
 - Observation beds reduced between 4-6 beds.
 - o No changes to the following centers:
 - Acute Rehabilitation
 - Chronic Hospital
 - Acute Inpatient Voluntary Psychiatry Unit
 - Day Treatment Psychiatry Program

- Wound Care Center
 - Infusion Center
 - Lab/Radiology Procedures
- In the process of defining ambulatory center services and community needs.
- No change in Hospitalist or Intensivist physician coverage.
- Marie Warner, MDERS Updates:
 - Two educational opportunities are being offered in May. One is presented by the center for domestic preparedness, and one is from Texas A&M. Flyers were distributed. This is free training, provided on site, and paid for by the federal government.
 - The hospital evacuation workshop will take place on February 29th. We would like to see participation from all hospitals and all jurisdictions.
 - We have created a framework for a med surge and hospital evacuation plan. We are identifying the required resources. We will be testing some pieces of this during a functional exercise that will take place in April.

Regional Round Table

- Prince George's Health Department – Not Present
- Montgomery County Health Department – Not Present
- Charles County Health Department – Not Present
- Calvert County Health Department – Not Present
- St Mary's Health Department - Not Present
- Laurel Regional Hospital – No Report
- Bowie Health – No Report
- Prince George's Hospital – Instituted a new trauma designation on January 4th. The ED is getting integrated.
- Doctors Community Hospital – No Report
- Fort Washington – Not Present
- Southern MD – New semester for CSM starting next week.
- Charles Regional – No Report
- Calvert Memorial – No Report
- St Mary's Hospital – No Report
- WAH – No Report
- Holy Cross Hospital – Not Present
- HCH Germantown – No Report
- Shady Grove Adventist – No Report
- Suburban – No Report
- Montgomery General – No Report
- Children's Hospital – No Report
- Shock Trauma – Broadcast on organ donation is coming up on 2/3/6. A road closure on 1/30/16 will occur.
- Malcolm Grove – No Report
- Walter Reed – Not Present
- MSP – Will not be in service during the blizzard
- US Park – Not Present
- MSFA – Not Present
- MFRI – Effective 1/11, John Alexander will no longer be with ALS programs. Ron Hasset is acting manager for ALS programs. That position is open. The University of MD is closed Friday – Sunday.
- Prince George's EMS – Recruit school is starting EMT ridealongs.
- Montgomery County EMS – Received approval to implement a limited pilot program regarding alternate destinations. This will only involve four facilities. Only a limited number of providers are eligible to make the decision to use an alternate destination.

- Calvert County EMS – No Report
- Charles County EMS – No Report
- St Mary's County EMS – No Report

Announcements

- None

(Presented by Roland Berg)

Next meeting: Thursday, March 17th, 2016

Adjournment

DRAFT