

State of Maryland

Maryland Institute for Emergency Medical Services Systems

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Region V EMS Advisory Council General Membership Meeting Agenda

ONLINE ONLY 10 June 2021 1100-1300

Conference Number: +1 605-937-7213
Participants Passcode: 585071159
Google Meet Link:
meet.google.com/kbj-xzvk-nes

- I. Attendance/Roll Call
- II. Welcome and Introductions
- III. Review of Minutes
- IV. Report of Chair
- V. Medical Director's Report
 - a. Dr. Chizmar, State Medical Director
 - b. Dr. Stone, Region V Medical Director
- VI. MIEMSS Report
 - a. MIEMSS, Dr. Delbridge
 - b. Region V, Dr. Pinet Peralta/Michael Cooney
 - c. EMSC, Cynthia Wright-Johnson
- VII. Old Business
- VIII. New Business
 - a. UM Prince George's Hospital Center move from Cheverly to Largo
 - b. Consult & Destination Workgroup- Dr. Karen Keller-Baker
 - IX. Announcements
 - a. Clinician Kudos / Save of the Quarter
 - X. Regional Round Table

Region V EMS Advisory Council Meeting Minutes

ONLINE ONLY 10 June 2021 1100-1300

Attendees:

Michael Cooney, Mark Bilger, Luis Pinet Peralta, Shawn Davidson, Craig Smith, Cyndy Wright-Johnson, Danielle Joy, Alan Butsch, Linda Rivera, Dr. Karen Keller-Baker, Tessa Livingston, Mike Oxenford, Ben Kaufmann, Robbie Jones, Dr. Joel Buzy, Dr. Roger Stone, Yonia Waggoner, Dawn Moreland, Captain Lori Cherry, Bob McHenry, Sarah Goddard, Emily Dorosz, Dr. Finkelstein, Brittany Keys, Lee Collins, Linda Rivera, Heather Howes, Dr. David Goltz, Dr. Tim Chizmar, Susan Gonzalez, Danielle Joy, David Feist, Jim Richardson, Dr. Karen O'Connell, Jason Shorter, Al Jeffries, Patricia Gabriel, Dr. Ted Delbridge, James Laska, Nicole Norris

- 1. Attendance/Roll Call
- 2. Welcome and Introductions
- 3. Review of Minutes
 - a. Motion to accept: Dr. Keller Baker,
 - b. Seconded by Alan Butsch
- 4. Report of Chair
 - a. Nothing to report
- 5. Medical Director's Report
 - a. Dr. Chizmar, State Medical Director
 - i. 2021 Protocols are online in digital format.
 - 1. Links work within the digital format
 - 2. Printed Protocols are at the printers now. Will be producing all 3 formats.
 - a. Pocket: one copy will be available for each clinician, as before
 - b. Spiral will be available for \$10

- c. Full size will be distributed to all bases station and up to 5 copies to each jurisdiction and commercial service free of charge. Additional copies will cost \$25.
- 3. Base Station Updates: Available online for ALS, BLS and Base Stations.
- ii. QI officer course is being developed as an online LMS course
- iii. Category C & D trauma & aviation use review is ongoing. We are reevaluating over and under-triage as well as aviation usage
- iv. Excellent work with the vaccinations Thank you all.
- v. UM Capital Region Medical Center will be hospital Code 260. 232 will remain in effect for a short while but a new hospital will be set up in eMeds and image Trend.

b. Dr. Stone, Region V Medical Director

- i. Old business
 - 1. Discussion of Maryland Medicaid reimbursement for non-transport work.
 - 2. Discussion of CHATS Replacement: Work is progressing on this.
 - 3. Protocol Committee Meeting is on 2nd Wednesday of the month. All are encouraged to attend.
 - 4. NAEMSP Maryland was well represented at the last meeting.
 - State chapter: Is meeting regularly and have invited DC & Delaware to participate as they don't have their own chapters.
 - i. All clinicians are welcome to participate, don't need to be a physician.
 - 5. 25th annual medical directors symposium went well. Physicians can get CME now.

ii. New business:

1. PSAPS are reviewing COVID Screening questions vs. time needed to screen. Value may be decreasing with decreasing cases.

- 2. Hospitalizations due to COVID continue to trend downward.
- 3. MCFRS Testing on TOR patients have dropped.
- Brand new medical Directors at PGFD & EMS
 - a. Dr. Dan Golz
 - i. Was a volunteer at Wheaton Volunteer Rescue Squad
 - ii. Worked & Studied with Dr. Uribe
 - b. Dr. Jeff Uribe
- 5. EMS Today Conference: 2023 it may come to Maryland.
 - a. 2022 is open to apply as a speaker. Deadline is June 18th
- 6. PGFD is invited to discuss card 37 for alternate destination.
 - a. Chief Lee Collins: Card 37 is a protocol that is a collaboration between Kaiser and PGFD. Analyzing dispatch codes to create a more efficient way to effectively move patients in cooperation with Kaiser.

6. MIEMSS Report

- a. MIEMSS, Dr. Delbridge
 - i. COVID 19 numbers are way down.
 - 1. Baltimore Convention Center ACS is shutting down for inpatient admissions. Will continue testing & Vaccinations.
 - a. Laurel & Washington Adventist scaling back
 - ii. Laurel is one of the largest utilizer of the C4 resources. Clinicians should be aware that Laurel is a FMF for non-COVID Patients when making a transport decision.
 - iii. Declaration of Emergency/Executive orders will eventually end. Sorting out how that affects all that EMS has implemented specifically pursuant to the order
 - Provisional EMS clinicians: will have 180 days from end of executive order to get certified/licensed.

- iv. CHATS: We are still committed to extensive modifications (new system).
 - 1. Held up by COVID and personnel changes.
 - 2. Technical phase: Hospital ADT feeds to CRISP as soon as a patient is registered.
 - 3. Operational phase: Determining, on a per ED basis, what a specific patient census means
 - 4. The intention is to have a more objective measure of how busy an ED is.
- v. Supplemental Payment program for Emergency Transport Services.
 - 1. Current reimbursement from Medicare is a flat \$100.
 - 2. The supplemental payment program aims to narrow the difference between the \$100 and the actual cost
 - 3. Participants must be tax-funded JEMSOPs who bill Medicaid and have "certified public expenses."

vi. Legislative activity

1. Ketamine reporting

vii. Grants:

1. EMD program grants from MIEMSS: We're going to try to be more targeted to get more money for innovation.

viii. TOR COVID Testing

- 1. In the winter, the positivity rates exceeded the rates in the general population.
- 2. Data from EMS tracking PUIs tracked very well with surge in COVID patients 9 days later in the hospitals.

ix. @HA

- 1. Number of ambulances at each hospital. Available online, smartphones, etc.
- 2. Allows a clincian to see units from all participating agencies at a particular hospital. Also shows CHATS alert status.

- 3. Dependent on CAD data.
 - a. Some CAD systems don't work with the system yet.
 - b. Per Chief Butsch: MCFRS has updated their CAD to work with @HA and hope to be working within 60 days.
- x. Personnel Changes at MIEMSS
 - 1. Andrew Naumann has left for MEDSTAR.
 - 2. David Balthis is retiring as of June 30th.
 - a. Positions in QI and data management may be coming open.
- b. Region V, Dr. Pinet Peralta/Michael Cooney
 - i. Dr. Pinet Peralta:
 - 1. Base Station re-designation Process is underway
 - 2. Health & Medical Subcommittee of the COG is planning for 4th of July Celebration. Stay tuned for more planning, participation and requests.
 - ii. Michael Cooney
 - 1. Base station! Apply ASAP! Feel free to ask for assistance.
- c. EMSC, Cynthia Wright-Johnson
 - i. EMSC & PEMAC updates for May.
 - ii. New Champions for Montgomery & Prince George's Counties.
 - 1. Will be setting up training for HPCPR Equipment usage
 - 2. All the software has been updated.
 - iii. National Pediatric Readiness survey is ongoing for Hospitals.
 - iv. 3 Children in Region V received the Right Care When it Counts awards.
 - v. In person PEPP courses are happing for vaccinated people.
 - 1. No lectures. All hands-on with role-play and simulation.

- 2. The cost is the prep-time to do 12 hours of online training before the in-person class. The whole course is brand new
- vi. Child passenger safety update:
 - 1. Resources are being updated.
 - Looking for photos of EMS Clinicians buckling up correctly. For questions reach out to cps@miemss.org
- 7. Old Business
 - a. None
- 8. New Business
 - a. UM Prince George's Hospital Center move from Cheverly to Largo
 - i. Saturday, June 12th is move day. The plan is all patients will be moved by Sunset.
 - 1. 6/11: Noon: re-route
 - 2. 6/12 Midnight: Mini-disaster. Will take walk-ins but not transport.
 - a. Switching over to new EMR system
 - 3. 6/12 8am: UMCRMC goes fully open. Moving patients begin.
 - 4. Bowie and Laurel, that normally feed to PG have discontinued to keep the impact lower on PGHC up until the move.
 - 5. Dr. Jason Finklestein: Is there any way to monitor distribution of calls for the months after the move?
 - a. Dr. Pinet Peralta: that's something we can look at with PGFD.
 - Photos, video tour and other information is available to help clinicians become familiar with using the facilities available on request.
 - b. Consult & Destination Workgroup Dr. Karen Keller-Baker
 - i. Questions about Dual Consults: UM PG is being asked about destination decisions and flight approval by physicians at hospitals in the south.
 - 1. How do we know we're making the right decisions on these calls?

- 2. Are we prolonging EMS & scene times?
- 3. Are there ways we can improve the care provided to the patients.
- 4. Large variability due to personnel and time of day.
- 5. The receiving facility may not be fully aware of the capabilities of the sending hospital & the EMS clinicians.
- 6. Physicians are being asked to make decisions with seemingly incomplete information (transport times, unit capability, etc.)
- 7. Looking for ways to follow up on patient outcomes to QI decision making process
- 8. Dr. Pinet Peralta:
 - a. The process needs to involve hospitals and EMS.
 - i. EMS Medical Directors
 - ii. EMS QA officers
 - iii. Base Station Coordinators and Medical Directors
 - b. Formalize this as a quality advisory group that reports to the EMSAC.
 - c. Working with Data from the trauma registry

9. Announcements

- a. Clinician Kudos / Save of the Quarter
 - i. Calvert health departments recognizes the assistance given my Calvert EMS Paramedics in vaccination
 - ii. Yonnia Waggoner: Wish to recognize the difficult and excellent work by EMS clinicians from Charles County: Triple drowning at a party with 50 attendees. Extracted 3 from the pool, ROSC on 2. 1 ultimately discharged.
 - Chief Butsch, MCFRS: Thanks to MIEMSS for the recognition during EMS Week.
 - Trauma Call in April: Motorcycle Trauma Code. Crew followed the protocol to the letter, decompressed the chest and got ROSC at the trauma center. Could have followed the TOR protocol and called it after 10 minutes but they persisted and got a save.

10. Regional Round Table

- Prince George's Health Department No update.
- Montgomery County Health Department Not present.
- Charles County Health Department Not present.
- Calvert County Health Department No updates.
- St Mary's Health Department Not Present.
- UM Bowie Medical Center Dr. Keller-Baker is reporting for all 3 UM Capitol Regional Health Hospitals.
- UM Laurel Regional Medical Center- See Above
- UM Prince George's Hospital See ABOVE
- Doctors Community Hospital Not Present
- Adventist Fort Washington Not Present
- MedSTAR Southern MD Nothing to report
- UM Charles Regional Nothing to report
- Calvert Health Not present
- MedSTAR St. Mary's Hospital Danielle Joy. Nothing to add.
- WOMC Adventist Not Present
- Holy Cross Hospital –Nothing to report.
- HCH Germantown –Nothing to report.
- Shady Grove Adventist Dr. Joel Buzy, Noting to report
- Suburban nothing to report
- MedSTAR Montgomery Not Present
- Children's National Medical Center Emily Dorosz Nothing to report.
- EMSC Cyndy Wright Johnson: Nothing to add.
- Shock Trauma Not present.
- Malcolm Grow/JBA Not present.
- Walter Reed Not Present
- MSP Not Present
- US Park Police James Laska Nothing to report
- MSFA Nothing to add.
- MFRI Classes are filling up for Fire/BLS and ALS. Updated ALS refresher and Maryland Rescue Task force. Please contact us with questions.
- Prince George's County Fire/EMS Chief Lee Collins: Nothing Further.
- Montgomery County Fire/Rescue Chief Butsch, ET3 Participation is proceeding slowly.
 More in telehealth than alternative destination. Applied for funding for nurse triage line.
 Expanding telehealth to high-risk refusals. Field crews are finding success using it. Often
 having a Dr. on the video is enough to convince the patient to transport. Started POC
 Ultrasound trial to assess carotid flow for patients in PEA. Thanks to Dr. Uribe for the
 training. Deployed the skill within 48 hours of the training. Unintended benefit: Duty
 officers feel a lot more certain in TOR in the absence of carotid flow.

- SEMSAC Rep: SEMSAC would like to delve into what is an EMSOP and have a discussion of that. COMAR 30 is not specific and would like to have the accreditation process refined.
- License & certification expiry & emergency order: The state of grace is coming to an end. Encourage your people to get caught up. Especially relevant if you bill for service.
- Chief Butsch is moving out of EMS but remains committed to SEMSAC
- Calvert County EMS Al Jeffries:
 - Career EMS: Currently putting 4 ALS transport units in service & 1 EMS
 Supervisor. There is a ramp-up time for training & orientation. Currently filling
 the positions with temporary personnel. May expand further as funding is
 available.
 - Heather Howes: thank you to the Health Department for partnering in Vaccination.
- Charles County EMS Lori Cherry: Several promotions: Chief Steve Finch is now the chief. Other promotions and a new academy class is in with 20 people.
- St Mary's County EMS- Chief Davidson: Transitioning over to career. May be issues with funding from county commissioners. Orienting new hires. Goal is to have 16 career BLS clinicians on the street by July 1.
 - New certifications are not populating into Elite. Have to update manually.
 Anyone have this issue?
 - What is the timeline for when people get locked out of Elite.

I. Adjournment

Moved: Heather Howes Seconded: Al Jeffries. Adjourned: 1243