

State of Maryland

Maryland Institute for Emergency Medical Services Systems

> 653 West Pratt Street Baltimore, Maryland 21201-1536

> > Larry Hogan, Governor

Donald L. DeVries, Jr., Esq. Chairman Emergency Medical Services Board

Patricia Gainer, JD, MPA Acting Executive Director

> 410-706-5074 FAX 410-706-4768

EMS Region V Office

5111 Berwyn Road #102 College Park, MD 20740

301-474-1485

Region V EMS Advisory Council General Membership Meeting Agenda

ONLINE ONLY 14 July 2022 1100-1300

Conference Number: +1 662-441-3146
Participants Passcode: 547 119 853#
Google Meet Link:
https://meet.google.com/bkq-qmmb-dec

- I. Attendance/Roll Call
- II. Welcome and Introductions
- III. Review of Minutes
 - a. Unavailable due to Technical Issues.
- 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/Randy Linthicum
 - b. Region V, Michael Cooney
 - c. EMSC, Cynthia Wright-Johnson
- VII. Old Business
- VIII. New Business
 - a. Nomination and Election of Officers
 - i. Chair
 - ii. Vice-Chair
 - IX. Announcements
 - X. Clinician Kudos / Save of the Quarter
 - XI. Regional Round Table

Region V EMS Advisory Council Meeting Minutes

ONLINE ONLY 14 July 2022 1100-1300

Attendees:

Michael Cooney, Shawn Davidson, James Laska, Susan Gonzalez, Danielle Joy, Nelson Jones, Adowah Amissa-Robb, Courtney Griffin, Cynthia Wright Johnson, Dawn Moreland, Dr. Tim Chizmar, Emily Dorosz, Heather Howes, James Laska, Jeff Huggins, Kelly Skelly, Dr. Karen Keller Baker, Mark Bilger, Nelson Jones, Patricia Gabriel, Dr. Roger Stone, Chief Terrell Buckson, Tina Kennedy, Virginia Schad, Paul Schneiderhan, Stephanie Cleaveland, David Feist, Craig Smith, Dr. Jason Finklestein, Captain Nicole Duppins, Chief Ben Kaufman

- 1. Attendance/Roll Call
- 2. Welcome and Introductions
- 3. Review of Minutes
 - a. Minutes Unavailable
- 4. Report of Chair
 - a. Nothing to report
- 5. Medical Director's Report
 - a. Dr. Chizmar, State Medical Director:
 - i. 2022 Protocols are out. Fullsize and spiral are out, delay on pocket.
 - ii. Infectious Diseases
 - 1. BA.5 Variant is causing increases in hospitalizations
 - a. Reminder to use full covid precautions in PUI and Cardiac Arrests
 - b. Beware Pandemic Fatigue, Please stay vigilant
 - 2. Monkeypox:
 - a. Maryland has 23, DC 86

- b. Vaccine is being released in limited supply
- c. Not asking EMS clinicians to change transport destination for Monkeypox
- 3. QA/QI officers: Working on having a regular meeting statewide starting in September.
 - a. A forum for them to get on the same page to form a QIC:
 Quality Improvement Committee
- 4. Cardiac Arrest Steering Committee
- 5. Use of Force law/Crisis Scene Collaboration Workgroup.
 - a. Working to maintain our partnership with LE while they are under additional scrutiny while working in the best interest of the patient.
 - b. Our goal is to get patients to treatment versus hurting anyone
- 6. Questions:
- b. Dr. Stone, Region V Medical Director
 - i. BA.5 Sub variant: More highly transmissible if not as virulent.
 - 1. Need to keep an eye on this and encourage EMSOPs to maintain their vigilance as far as PPE.
 - ii. EDAS System:
 - Looks like progress is being made. Dr. Delbridge, do you have comments.
 - a. Defer to my report.
 - iii. Protocol Updates:
 - Remind EMSOPs to make sure clinicians are not practicing until they have completed protocol review. There are significant changes.
 - iv. ESPP Program:
 - Montgomery County was able to enhance EMS offering due to the budget flexibility from the additional funding

- v. Base Station Course:
 - 1. Please reach out to me if you need training
- vi. EMS Care 2022:
 - 1. First time meeting in 3 years.
 - 2. Census went down but it went very well.
- vii. Turnaround time at hospitals:
 - 1. Hospitals & EMSOPs should continue to collaborate
 - 2. Expect hospital census to increase
 - 3. Staffing issues
 - a. Burnout
 - b. Violence vs. Staff
- viii. Commercial Ambulance are having staffing issues as well.
 - 1. Affects downstream services such as 911 services, SNFs, etc.
- ix. Happy Bastille Day
- 6. MIEMSS Report
 - a. MIEMSS, Dr. Delbridge/Randy Linthicum
 - i. Dr. Delbridge:
 - 1. Computer Glitch:
 - a. Licensure system error: Many EMTs got notifications that their cards had lapsed, regardless of their true expiry date.
 - We found out early and jumped on the problem.
 Nobody has lost access to eMEDS or their licensure portal. Kudos to MIEMSS staff who worked over the holiday weekend to fix the issue.
 - 2. COVID:
 - a. 23% increase in the past week in COVID hospitalizations
 - b. About 40% of the patients who are hospitalized are not there for COVID. Find COVID on admissions screenings.

- Most COVID hospitalizations are requiring a lower level of care from previous variants.
- c. We're still tracking PUIs by EMSOPs. That level has been pretty stable since Mid-June. What EMS sees is reflected in hospitalizations 9 days later. Helpful predictor for hospital encumbrances
- d. ESPP: An \$80M windfall to EMS Programs in Maryland. Even smaller jurisdictions are benefiting even after investing the time and money to set up the administrative overhead. Additional jurisdictions can sign on.
 - i. Must Bill Medicaid
 - ii. Must have certified public expenditures for EMS.(Gov't funding EMS & Gov't has to be billing entity)
- EMT Stipend Program, Stipend for Volunteer EMT students, \$2,000
 - a. 400 Students participating, we have funding for \$500
 - b. Providing incentive to stay in the course and push all the way through to the final certification.
 - c. Last half of the stipend comes from passing NR test.
- 4. Hospital Information Request:
 - a. We are grateful for their continued support
 - b. New questions about boarders: this information is closely monitored.
 - Most boarders are waiting for MED surg and Psych beds
 - ii. Moving Medicaid Patients
- 5. EDAS:
 - a. Lots of work being done
 - i. Do away with yellow and red

- ii. Count patients in ED and compare with capacity and rate them on a severity score
- iii. System is working via a validation process.
- b. Further in-person evaluation is ongoing to assess usable treatment spaces and how "busy" a hospital is.
- c. Currently using a complicated calculus for the severity level. That may change.
 - i. We will integrate this information into @HA to look at one place for all the information about the business of an ED.

6. Questions:

- a. Dr. Finklestein: Does the capacity take into account staffing level?
 - i. No: There's no way to adjust on the fly for that level.

ii. Randy Linthicum:

- 1. Annual Survey for EMSOPs: Will be released next week.
 - a. Will also be asking about current non-expired DuoDote.
 - We secured some grant funding to replace expired DuoDotes.
- iii. Jeff Huggins: MEMRAD Replacement
 - 1. Next Generation Product: Mix of products
 - a. EDAS
 - b. Informacast for notifications
 - c. Smartsheet for data entry
 - 2. Will be phasing out the old platform for the new.
 - a. Will be scheduling online meetings to review the systems and the options for notifications
 - i. Text, Email, Standalone Computer app and more

- b. Dorsoz: Will we need additional softweare?
 - Huggins: the additional software will be for Dispatch centers, EOCs and EDs, agnostic of who's logged in or at work.
- b. Region V, Michael Cooney
 - i. With new Region V coordinator. We'll be going around and meeting EMSOPs in person. Have already met many hospitals.
- c. EMSC, Cynthia Wright-Johnson
 - i. Materials sent out prior to meeting:
 - 1. EMSC update:
 - a. Right care/Stars of Life are now open!
 - i. Looking forward to nominations
 - 2. PMAC Meeting happened a week and a half ago
 - a. Working on CA protocols and algorithms.
 - i. Working a lot on HPCPR
 - ii. Data shows that the younger a patient is, the less likely a bystander will start CPR and the less time EMS spends on scene. (largely less than 12 years old)
 - iii. Want to push HPCPR for younger Pediatric Patients.
 - iv. If this is a passion of yours, please contact me, we want informed eyes on this before we go to the board. Aiming for succinct.
 - 3. Thank you to Lexington Park.
 - a. PEPP Course went extremely well, very welcoming.
 - b. Looking forward to an annual Summer course in Southern Maryland.
- 7. Old Business

a. None

8. New Business

- a. Nomination and Election of Officers
 - i. Chair
 - 1. Davidson: Happy to Continue
 - 2. Any further nominations: None:
 - a. Yes by 17 Votes, 0 no, 0 Abstentions.
 - ii. Vice-Chair
 - 1. Currently Lori Cherry:
 - 2. Nominations: Lori Cherry (By Heahter Howes)
 - 3. 17 Yes, 0 no, 0 abstewntions

9. Announcements

- a. Clinician Kudos / Save of the Quarter
 - i. None

10. 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
- UM Bowie Medical Center Nothing to report.
- UM Laurel Regional Medical Center- Kelly Skelly, Nothing to report.
- UM Cap Region Health Nothing to report.
- Doctors Community Hospital Nothing to report
- Adventist Fort Washington Brittany Keys, Nothing to report.
- MedSTAR Southern MD Courtney, Nothing to report
- UM Charles Regional Nothing to report.
- Calvert Health Nothing to report
- MedSTAR St. Mary's Hospital Nothing to Report
- WOMC Adventist Not Present
- Holy Cross Hospital –Ms. Amissah-Robb. Nothing to report.
- HCH Germantown –Tina Kennedy: Nothing to report.
- Shady Grove Adventist Construction has started. ED entrance will be in flux for the next few years.

- Suburban Not Present
- MedSTAR Montgomery Not Present .
- Children's National Medical Center Emily Dorosz, nothing to report.
- Shock Trauma Not present.
- Malcolm Grow/JBA Not present.
- Walter Reed Not Present
- MSP Aviation Not Present
- US Park Police James Laska Nothing to report
- MSFA Not Present
- MFRI –Not present
- Prince George's County Fire/EMS Chief Buckson: Finalizing protocol for 911 diverstion program to shift mental health patients from 911 to a licensed mental health clinicians. Completed documentation to move forward with Midazolam pedi-dose protocol. Looking to implentment nexwt yhear.
- Montgomery County Fire/Rescue Chief Kaufmann,
 - Struggling with hospitals at capacity, long wait times, boarding. WOMC in specific.
 - o At the point of not sending any ambulances uless they can go straight to triage.
- Calvert County EMS Heathdr Howes
 - New openings for Paramedic and EMT
 - o Dr. Finklestein: EMTs will be trained to administer draw up epi.
- Charles County EMS Captain Jones. Steve finch retires on the 18th. Lori Cherry will be appointed.
- St Mary's County EMS- Chief Davidson:
 - For Dr. Finklestein: Happy to share St. Mary's Training program for draw up epi for BLS.
 - Finally scheduled interviews for Medical Director.
 - Career integration continues apace.

•

I. Adjournment

Moved: Skelly Seconded: Howes Adjourned: 1215