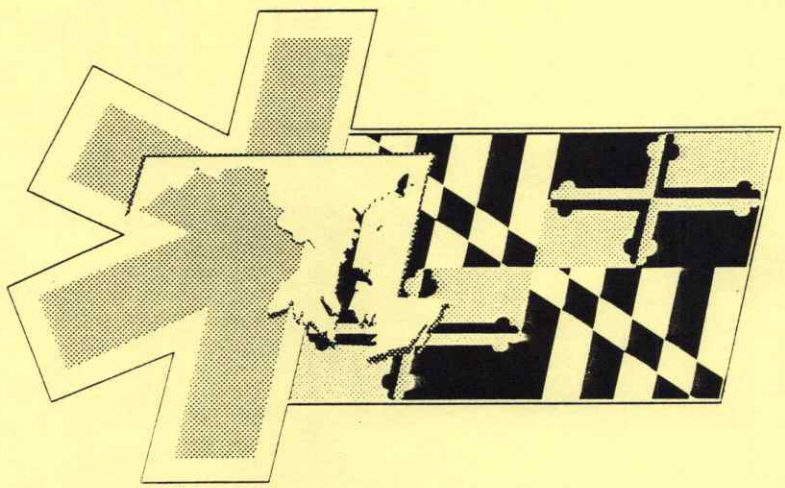
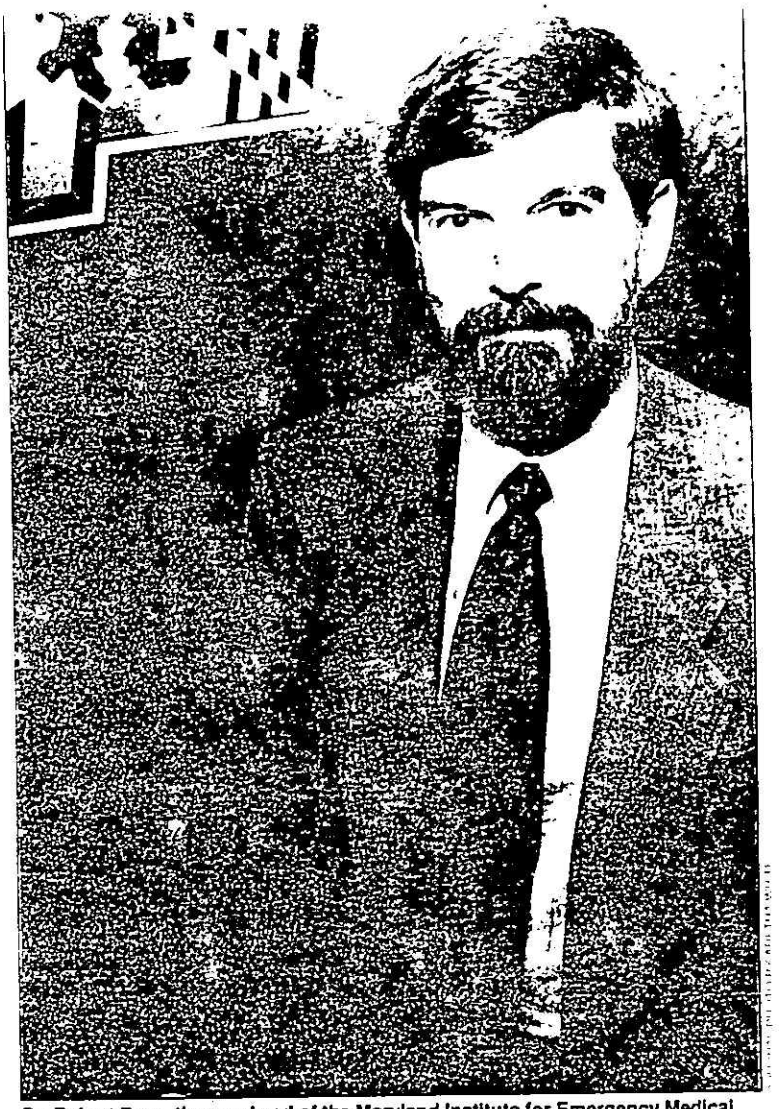
MIEMSS
Press Report

September & October, 1994





Dr. Robert Bass, the new head of the Maryland Institute for Emergency Medical Services System, sees great things ahead for the system.

New EMS leader poised to take system to next level

By ADINA R. GEWIRTZ
Special to the Business Journal

The teary-eyed references did it.

After an exhaustive, seven-month search to find the perfect candidate to run the Maryland Institute for Emergency Medical Services System (MIEMSS), Dr. Robert Redwood Bass got the job, simply because he inspired such intense feelings in his colleagues.

"We met with four of his deputy chiefs, and they won us over," said Dr. Sheila Rhodes, a member of the search committee that chose Bass. "We were impressed by their dedication, their admiration for Dr. Bass, their loyalty toward him. When we went in to talk to these four individuals, several of them had tears in their eyes; they did not want to lose Dr. Bass."

Bass, 46, had taken over the Washington, D.C., emergency system in 1991, after its ambulance service had made several humiliating appearances in the news for its slow response time to emergency calls. The pre-hospital emergency system was, by all accounts, poorly run and ill-equipped.

Bass came in and yanked the service out of the spotlight with better training, improved equipment and a general heightening of morale.

"He came into a very difficult situation," said Stephen Rickman, director of the office of Emergency Preparedness in Washington. "He took over an emergency medical service that had been greatly criticized by the media and the public and was experiencing turmoil within the ranks, and in a relatively short period of time Dr. Bass improved morale ... I think he showed great leadership."

A system in flux

In his new job, as head of the organization that oversees all pre-hospital emergency care in the state, Bass faces a system that's been in a different kind of turmoil.

The Maryland EMS system has been in administrative flux for more than a year, since the ouster of Dr. Kimball Maull from the high-profile Shock Trauma Center and subsequent legislation separating the center from the MIEMSS system.

Since then, the state's fleet of pre-hospital emergency workers has been run by an 11-member board reporting to

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Baltimore Bussiness Journal 10/21-1/2

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Gov. William Donald Schaefer, but they lacked one leader who had the knowledge and the time to coordinate the varied groups within the system.

At the same time, the MIEMSS board and its 27-member advisory council were charged with developing a long-range plan to guide the state's EMS system into the next century.

And to do that, they needed the cooperation and input of all the groups providing emergency care and transport across the state.

Reshaping the system

That's why Bass got the job of executive director. His credentials as an academic who lectures at George Washington and Georgetown universities and a manager who successfully revamped the Washington system qualified him for the $200,000-a-year job. His personality clinched it.

"They wanted someone who would be acceptable to the entire community," said MIEMSS administrative director John Murphy.

He described a multi-stage interviewing and selection process that sought input from organizations of both volunteer and paid emergency workers, the state police, Johns Hopkins Hospital and representatives from each county.

"We were trying to develop a consensus because this individual is going to have to transcend all this," Murphy said.

Bass himself knows that building a working team is the essence of his new role.

"Consensus is the name of the game," he said. "There's certainly not going to be any fewer of us in the future. We're getting more populated [and] we have to learn to get along with one another."

Bass has spent his first month at MIEMSS traveling around the state and meeting with the various constituencies that make up the emergency medical service. He said there will be no great shake-ups in the MIEMSS system, but he will be working on the board's EMS plan.

"That will be the template that we'll use to guide us in terms of our continued evolution," he said. "We will ... look at our mission, look at our goals and see if our administrative system will get us where we want to be."

In the short-term, Bass plans to work on improving the collection and analysis of data and the way the system performs quality assurance checks, he said. In the long run, the broad EMS plan might require some organizational changes.

But for now, Bass is learning a system much larger than the one he left — Baltimore alone is the same size as Washington's EMS system. And the system is learning about him. His former colleagues say this is the way he works — encouraging inclusiveness.

"He had a very good knack for being able to work with all agencies, that's both the firefighters, the EMS personnel, the medical community and the community at large," said D.C. Fire Chief Otis Latin, Bass's former boss.

But Bass also has the will to reshape a system as much as it needs, according to his Georgetown University colleague Dr. Thomas Stair, an emergency physician at Georgetown Hospital.

"He fought to maintain his budgets," Stair said, adding that he created an emergency system with staff better trained in medicine and with the equipment it needed.

"He was able to get along with all the disparate constituencies that he needed to, and he was able to accomplish what he could with whatever resources were available. He was very flexible and resourceful."

Stair predicted that with the advanced resources he'll find in Maryland, Bass will be able to accomplish much more. As for his new peers, most are cautious but hopeful that Bass can keep a good system from losing its edge.

"I think they chose Bob Bass over other candidates primarily because they felt they couldn't deal with another bull in a china shop and they were very much trying to select somebody with a management style that was [focused on] consensus development. [They wanted] a good listener, somebody that didn't manage by edict and flamboyance. And I think they got that person," said Brad Cushing, acting director for the National Study Center for Trauma and EMS.

"Part of the general feeling is that the MIEMSS has been leaderless for a while now ... what we were really dealing with was a demoralized staff ... the gang got the blahs and I think now it's kind of a reinvigoration." ●

Adina Gewirtz is a contributing writer in Silver Spring.

Battle brewing over rehab center

It looks like a battle between two partnerships both planning to build a rehabilitation hospital in Montgomery County.

Two weeks ago, an alliance between National Rehabilitation Hospital, Holy Cross Hospital, Montgomery General Hospital, Suburban Hospital and Pennsylvania-based Continental Medical Systems announced plans to build a $10 million, 55-bed rehab hospital in Olney.

But rival Adventist HealthCare Mid-Atlantic plans to build its own rehab hospital in Rockville.

Adventist HealthCare is part of the University Rehabilitation Network, which consists of a number of Maryland hospitals that plan to build a nearly identical facility near Shady Grove Hospital.

The race to build a new hospital came after state health officials recently identified the need for a 55-bed rehab hospital in Montgomery County.

The battle will center on which group can win the all-important certificate of need from the state.

Hearings are scheduled to begin this fall and a decision is to be made in early 1995. ●

— John Lombardo

Bigger Isn't Necessarily Better

By PETER A. JAY

Havre de Grace.

A visitor to our farm had a nasty fall the other day, and when it became clear that she was going to need something more than a helping hand to get back on her feet, we naturally dialed 911.

The ambulance from the Level Volunteer Fire Department a couple of miles down the road was there in minutes. It was staffed by Jenny Blakeley, a college student who wants to be a veterinarian; Eric Polk, who works for the Havre de Grace city government; Russell Gallion Jr., who works on his family's farm; and Alan Rudd, a construction worker.

The all-volunteer crew handled the situation with the kind of calm professionalism that at once inspires confidence, and within a very few minutes the bruised visitor was off to Harford Memorial Hospital.

Such a fast, skilled response to an emergency isn't a surprise — not in Maryland and not in most other states. It's the norm. Whatever our national problems with health care overall may be, if you're going to fall down and hurt yourself in the United States, you're going to get remarkably prompt medical attention. That's true whether you live in the city or the country, or whether you're rich or poor.

Governments like to take credit for this, and up to a point they're entitled to. In the cities and the big suburbs emergency services are fully supported by taxes, and even in the countryside, where the volunteer tradition still prevails, government at various levels plays a significant role.

Our call to 911 was handled by a county employee at Harford County's round-the-clock emergency communications system in Hickory, then relayed to Level. The well-equipped ambulance that was dispatched was not a government vehicle; it was purchased with privately-raised money and staffed by volunteers. But although Mr. and Mrs. Taxpayer didn't directly underwrite this service, they made various indirect contributions.

While volunteer firefighters and emergency medical technicians donate their time — hundreds of hours a year in some cases — public funds help pay for their training. The volunteers also can, and do, call on sophisticated state services to back them up. If the accident on our place this week had been more serious, a state Medevac helicopter might have been dispatched to airlift the victim to a special trauma center.

What this routine accident clearly demonstrates, though, is that successful systems for dealing with emergencies are built from the bottom up and not from the top down. Most of the volunteer fire and ambulance companies in Maryland could provide decent support for their communities with no government contribution at all. But if the state and county governments tried to replace the volunteers with paid employees, the tax burden would soar and the vital spirit of community participation would wane.

Volunteer fire companies are the most visible vestige of the frayed old principle that the best communities are the ones that can identify and deal with their own problems, rather than relying on help from outside. The size of the community doesn't necessarily determine that, but it can be a factor.

Experience shows that when a rural community grows beyond a certain point, especially if the growth changes its nature so that most of the residents no longer work nearby, a couple of things are likely to happen. First, the local volunteer fire company will find itself with more property to protect and fewer people to do the protecting. And then, very gradually, the awareness begins to dawn that what was once a cohesive community has now become something different, something less personal, less independent and less self-reliant.

Level doesn't have a government, or specific boundaries that say where it begins and where it ends, or a tax rate. But it's still a genuine community. That's why service with the fire company is still considered not only a duty but a privilege, and why when there is a campaign for a new piece of equipment the response is so broad and so generous.

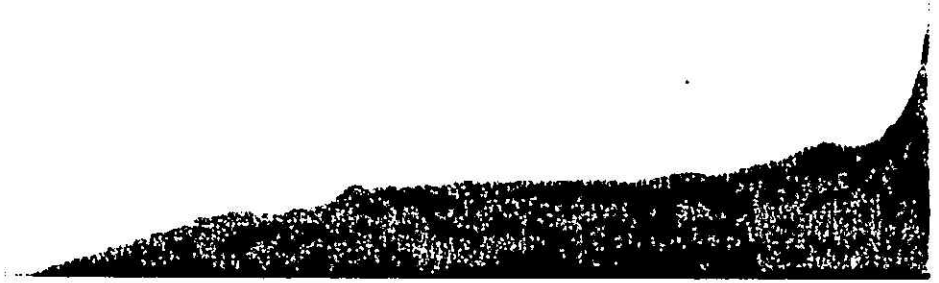
Not so many years ago, it was normal for small American communities to take on responsibility not just for fire protection and ambulance service, but for their schools, their law enforcement, and their social services. It wasn't a perfect system, but it worked reasonably well, and the stronger the community the better it worked.

No more, though. Schools, law enforcement and social services are now nominally handled at the county level, with the state and federal governments exercising ever more influence. This has been brought about partly by the increased complexity of modern society, and partly by the inexorable tendency of large governments to usurp the authority of smaller ones.

One day, perhaps, in semi-rural places like Level, there will no longer be a role for a volunteer fire company. Paid professionals will staff the ambulances and the cost will be shared by all the taxpayers in some much larger region. Residents will still be able to dial 911 and get an ambulance when they need one, and the equipment and technology may be even better than today's. Everything will be modern and sophisticated, but some of us will find it hard to call it progress.

Peter A. Jay is a writer and farmer.

The Sun
10/23/94



Md Rescue Journal
Summer Issue 1994
Vol. 14 No. 4

Emergency Services Chief Picked

Schaefer Selects Washington Official

By Melody Simmons and Douglas Birch
Sun Staff Writers

A physician and former police detective, praised by supporters as a tactful reformer who overhauled the District of Columbia's ambulance service, was named yesterday to lead Maryland's statewide emergency medical network.

Gov. William Donald Schaefer appointed Robert Redwood Bass, 46, as executive director of the Maryland Institute for Emergency Medical Services Systems (MIEMSS), which orchestrates emergency care by specialized hospitals, paramedics, ambulances, and the state's fleet of MedEvac helicopters.

Since February 1992, Dr. Bass has directed emergency services in Washington, where he sought to improve the poor response time of ambulances and more than doubled the number of paramedic units.

In coming to Maryland, Dr. Bass faces the task of healing a system that, in the past, has been wounded by factional squabbles.

"I don't see any major issues that aren't resolvable," he said. "When I came to D.C., someone said, 'How can you step into this? It's been a disaster.' I looked at it myself and thought it was a winnable situation. And I feel the same thing about Maryland."

After a seven-month search that attracted almost 100 applicants from around the nation, a 22-member committee pared the list to six finalists. Its recommendation were sent to the 11-member MIEMSS board, which last month voted unanimously to give Dr. Bass the $200,000-a-year job.

The Maryland Shock Trauma Center was once a part of MIEMSS, but the General Assembly cut that connection last year, leaving Shock Trauma as part of the University of Maryland Medical System.

The former director of MIEMSS and of Shock Trauma, Dr. Kimball Maull, set off a string of bureaucratic firecrackers in 1992. He fired doctors; cut physician salaries; ordered volunteer paramedics to use new, unfamiliar lifesaving techniques; and alienated officials at other hospitals he feared were trying to build an empire.

Charles W. Riley, past president of the Maryland State Firemen's Association, which represents volunteer firefighters, called Dr. Bass "a competent individual who could communicate with doctors, nurses, legislators" as well as emergency medical service personnel."

Mr. Riley said what the state's revamped emergency system needs is continuity, not change. "We have one of the best emergency medical service systems in the country," he said. "All we need is a leader to keep everything intact and get us ready to lead us into the 21st century."

Louis Jordan, a Baltimore publisher of emergency medical service textbooks who supported Dr. Maull, cautiously praised the board's choice. "Certainly there have been great advances made [by Dr. Bass] in Washington, D.C." said Mr. Jordan, who was not involved in the selection process. But, he warned, "he's moving into a gigantic bureaucracy that has a history."

Dr. Bass is stressing cooperation.

"My sense was that everybody there wants to see the system maintain its level of excellence," he said.

Dr. Bass said he will work closely with the 11-member board to make sure all parts of the state's emergency medical system operate smoothly together. "I'm not like the Lone Ranger out there," he said.

Dr. Bass, regarded as a tenacious advocate for paramedics and other emergency medical workers, was the first physician to become medical director of Washington's ambulance service. He was named by Mayor Sharon Pratt Kelly to reform the service, hampered by misdirected ambulances, equipment shortages and inadequate training.

"I think he's done an excellent job here," said William Eberlin, a paramedic supervisor for the District of Columbia fire and emergency services department.

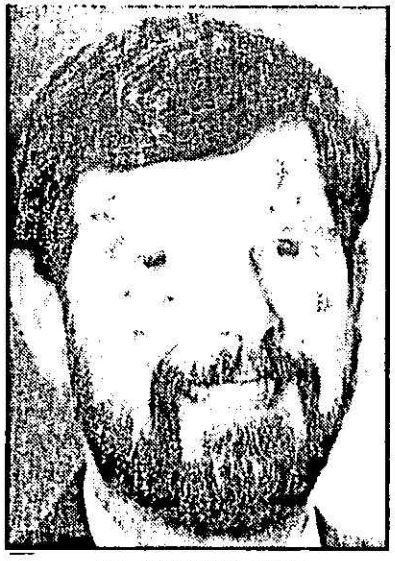
Dr. Bass became a police officer and later a detective for the Chapel Hill, N. C., Police Department after graduating from the University of North Carolina at Chapel Hill with a bachelor's degree in 1972.

He decided to study medicine and got his degree from UNC in 1975. While in medical school, he and a classmate organized a volunteer rescue squad. They would run from class when their beepers sounded.

He begin his emergency medical services career by serving as a member of a rescue squad in Chapel Hill in 1970. Since then, he has directed emergency medical services in Charleston, S. C., and Houston. He also was in private practice in Norfolk, Va., for five years.

Dr. Bass is an associate professor of emergency medicine at George Washington and Georgetown universities.

The Associated Press contributed to this article.



Dr. ROBERT BASS

Post
Frederick, Md.
Cir: 28,393

EMS director wants to pull organization together

By KRISTA GLIELMI
News-Post Staff

As the first executive director of the statewide emergency medical system under the new structure, Robert Redwood Bass said he wants to pull the organization together.

Now only 20 days at his new post, Dr. Bass has been visiting the regions in the state in an effort to get to know the needs of the individual areas. Tuesday, he met with the Region II EMS Advisory Council at Washington County Hosipital. Frederick County is included in that region.

"I want to pull the organization together and set the direction for where it is going," the 46-year-old director said.

An 11-member Emergency Medical Services Board appointed Dr. Bass Sept. 1 to head up the Maryland Institute for Emergency Medical Services Systems. MIEMSS was restructured as an independent state agency last year under legislation passed during the 1993 General Assembly. Dr. Bass is the first executive director under the new structure.

He will be responsible for coordinating emergency medical services throughout the state, coordinating the training of EMS volunteers, developing centers for treating injuries and illnesses, and coordinating research and educational programs.

Enhancing existing programs is one of Dr. Bass' primary goals for his new office.

"We need to address training issues and coordinate plans to make sure all citizens are getting high quality medical care in a timely fashion," he said.

Dr. Bass said he wants to establish funding priorities, evaluate new technology and designate which hospitals are prepared to handle trauma patients.

"Our main focus is to bring a consensus on the future plans for MIEMSS so everybody is singing from the same song sheet," Dr. Bass said. "With a little work we can develop goals we can agree on. I'm prepared to be the leader of evolutionary change not revolutionary change."

Dr. Bass received his undergraduate degree in 1972 from the University of North Carolina at Chapel Hill, and received his doctor of medicine from the university in 1975. Before being appointed as the MIEMSS executive director, Dr Bass served as the director o emergency medical services for th District of Columbia.

Dr. Bass' appointment fills a spo left open when Dr. Kimball Maul resigned as director of the Universit of Maryland Shock Trauma Cente Dr. Maull left amid criticism for hi management style after firing thre top doctors. Dr. Maull was replace by Dr. Richard L. Alcorta who als resigned after just seven months a acting director.

St. Mary's Today
California, Md.

OCT 4 1994

Chopper Finally Comes To Southern Maryland

HOLLYWOOD --- Maryland State Comptroller Louis L. Goldstein presented a facsimile payment check in the amount of $4.2 million to a representative of American Eurocopter for the purchase of one of Maryland's newest Dauphin emergency helicopters. The September 26, 1994 ceremony took place at Martin State Airport in Baltimore County as the first of two new helicopters was delivered. This past Friday a collection of state and local officials gathered at St. Mary's Aiport to dedicate the chopper being based there.

"As a member of the Board of Public Works I have urged that the state purchase new medivac helicopters for Southern Maryland and the Upper Eastern Shore," said Comptroller Goldstein. "This advanced equipment will provide the people of those areas with improved emergency medivac services."

In February, 1994, the Board of Public Works, which consists of Governor William Donald Schaefer, Comptroller Louis L. Goldstein, and State Treasurer Lucille Maurer, approved the purchase of two Dauphin jets to replace the older Bell Jet ranger helicopters, which could not provide sufficient services. The two new Dauphin helicopters will be based at Medivac sites in St. Mary's County and Queen Anne's County. They bring the total number of Dauphin helicopters purchased by the state since 1988 to eleven.

"This equipment will help save lives and make sure that Marylanders in rural regions have prompt access to care both day and night in emergency situations," said Comptroller Goldstein.

The two helicopters cost the state approximately $10.5 million, which will be paid for using Emergency Medical Services funds. The second helicopter will be delivered to the state on November 4, 1994.

U. S. Rep. Steny Hoyer also contributed greatly to bringing a full time chopper to the area with efforts that began three years ago.

Cecil Whig
Elkton, Md.

'Miracle case' credit goes to Maryland's best

If you have to be a victim of a serious automobile accident, you want it to happen in Maryland.

That's because Maryland is the best in the nation when it comes to rescue response for seriously injured accident victims. Helicopters are available to take you to the best trauma surgeons in the state – at the University of Maryland's Shock Trauma Center. And in the field, especially in Cecil County, there are dozens of volunteer firemen and women and professional medics trained and ready to stabilize you at the crash scene and prepare you for quick transport to a hospital. The response system was set up years ago around the concept of the "golden hour," which means if seriously injured accident victims can get expert medical care in the first hour after injury, their chances of survival increase twofold.

That was certainly the case for 17-year-old Michael Lee Peters of North East, who suffered head injuries in a July 14 crash near his home.

Young Peters was rescued by paramedics and emergency medical technicians – Lisa Abbott and Monica Penhollow – and other North East Fire Co. volunteers who responded to the crash scene. A state police helicopter flew Mike to the Baltimore trauma center where medical personnel said he was a "miracle case." Doctors credited the team in the field with saving his life.

Mike was in a coma for some time. Now his is struggling to achieve full recovery. His therapy is intense and includes speech development as well as body and muscle work movement. His youth age will help give him the strength to win the battle against the serious head injury he suffered, doctors said.

Mike's parents, Georgia and Skip Peters, recently shared their story with a Whig reporter to raise awareness among teens to drive safely and simply to say "thanks" to the volunteers and doctors who have performed a true miracle.

Maryland and Cecil County are in the forefront of top-notch emergency medical response. We can all be thankful for that. We thank the Peters family for sharing their heartfelt, touching experience and wish them and Mike the very best!

Enterprise
Lexington Pk, Md.
OCT 5 1994

MedEvac Helicopter Delivered, Giving More Hours of Service

Staff Photos by Thomas Hall

Gov. William Donald Schaefer stands beside the new Dauphin helicopter at its dedication ceremony.

By THOMAS HALL
Enterprise Staff Writer

The number of hours each day that MedEvac help is available in Southern Maryland has doubled.

Gov. William Donald Schaefer joined state and local officials Friday in the dedication of the Southern Maryland MedEvac Base and the new Dauphin helicopter stationed at the St. Mary's County Airport, ending a Southern Maryland campaign for the new helicopter that lasted years.

The Aerospatiale Dauphin II replaces the older, single-engine Bell Jet Ranger helicopter and will provide medical emergency, search and rescue, and law enforcement services via the Maryland State Police Aviation Division.

The Dauphin allows the state police to double MedEvac flight time from 10 hours to 20 hours daily and will also cover neighboring Calvert and Charles counties. Two patients, along with a paramedic, a co-pilot/paramedic, and the pilot can be accommodated.

With an enclosed tailrotor, retractable landing gear, twin engines and an air speed of more than 160 miles per hour, the Dauphin flies much like a fixed-wing aircraft. Other improved technology includes an autopilot, weather radar, global positioning system navigation, a 600-pound-capacity hoist, a 30-million-candlepower spotlight, and a forward-looking infrared system which detects heat and allows people to be located in the dark.

The new Dauphin helicopter prepares to land following a fly-by demonstration at the St. Mary's County Airport.

Since 1970 Maryland State Police helicopters have flown more than 50,000 patients to various hospitals and over 150,000 police missions. Col. Larry Tolliver, Superintendent Maryland State Police praised the work of the police flight and support crews during dedication ceremonies and said that in 1993 MedEvac helicopters logged 8,800 flight hours and transported 4,300 patients.

Gov. Schaefer also praised the joint efforts of state and local officials in acquiring the additional Dauphins and added, "People in this area will now have access to the excellent MedEvac and law enforcement services provided by the combination of modern helicopter technology and the dedicated men and women of the Maryland State Police Aviation Division." Gesturing to the Dauphin on display behind him, he concluded, "You're lucky to have it, you're proud to have it, you deserve to have it."

The French-made Dauphin is one of two helicopters jointly purchased for $10.5 million through American Eurocopter Corp. of Dallas, Texas, and brings the total of Dauphin helicopters purchased by the state since 1988 to 11. The latest contract was funded by $6.6 million from the Transportation Trust Fund and $4 million from the Emergency Medical Services Fund.

Both civilians and troopers currently pilot the helicopters. The Aviation Division has converted 11 trooper pilots to civilian positions and will continue to do so.

Enterprise
Lexington Pk, Md.
OCT 7 1994

Schaefer's Special Delivery

Gov. William Donald Schaefer came down to St. Mary's County last week to deliver a new MedEvac helicopter for Southern Maryland and to lift a shovelful of dirt to start construction of the higher education center in Wildewood.

It could be his last visit to St. Mary's before his successor is chosen in the Nov. 8 election. In any case, it was a vintage appearance for Schaefer as he winds up his eight years as governor. He was in the community to deliver the goods, a perk of the job that he has always relished.

The new, improved MedEvac helicopter is faster, can carry two patients instead of one, and will be available 20 hours a day instead of 10 to transport critically injured people.

The higher education center is scheduled to bring graduate level engineering and computer courses from Johns Hopkins University and the University of Maryland to St. Mary's County in 1996. That's a boon to the present and future workforce tied to Patuxent River Naval Air Station, and the promise of offering graduate courses in education and health care at that site will make it important to others in the community as well.

Governors and other political bigwigs always show up for events like the dedication of the MedEvac base and the groundbreaking for the higher eduaction center. Sometimes the spotlight doesn't shine as brightly on those most responsible for these kinds of projects as it does on the politicians.

However, neither the helicopter nor the higher education center would be here without Schaefer's blessing. That's not to say we have him alone to thank for them. In fact, it took years to persuade him that the need for an advanced helicopter here was crucial enough for him to make spending the money a top priority. Those really responsible for the higher education center deliberately and effectively courted the governor's support; without that support it would still be a daydream.

The governor of Maryland has a powerful job, and Schaefer has personalized that power. Few projects in the state get anywhere without his support, and it takes more than committee reports and feasability studies to persuade him. Despite all the muttering about "the governor of Baltimore" that has dogged him, Schaefer has in fact been receptive to projects in St. Mary's County. He is taken with the idea of an expanding economy here as military bases consolidate their work. St. Mary's College has put itself on solid financial footing, and built a science center which bears Schaefer's name, by persuading the governor to adopt the college's vision of itself.

Soon we will face a new governor and a new way of doing business. Those who have adapted themselves to Schaefer's quirky style are likely to find that they miss him.

Independent
Prince Fred, Md.

OCT 05 1994

Maryland State Comptroller Louis L. Goldstein (right) presents a $4.2 million facsimile payment check to Jim Shirey, pilot and representative of American Eurocopter. This new helicopter will be based in St. Mary's County and serve Calvert, Charles and St. Mary's Counties.

First new medevac helicopter arrives

Maryland State Comptroller Louis L. Goldstein presented a facsimile payment check in the amount of $4.2 million to a representative of American Eurocopter for the purchase of one of Maryland's newest Dauphin Emergency helicopters. The September 26, ceremony took place at Martin State Airport in Baltimore County as the first of two new helicopters was delivered.

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"This equipment will help save lives and make sure that Marylanders in rural regions have prompt access to care both day and night in emergency situations," said Comptroller Goldstein.

The two helicopters cost the state approximately $10.5 million, which will be paid for using Emergency Medical Services funds. The second helicopter will be delivered to the state on November 4.

Md. Independent
Waldorf, Md.
OCT ? , 199

State sends two major projects to Southern Maryland

With just a few months remaining in his administration, Gov. William Donald Schaefer has delivered two hefty projects to Southern Maryland that have been in the works for years.

While our neighbor to the south - St. Mary's County - hosts both of these projects, Charles County residents will reap their benefits in the form of more higher educational opportunities and better emergency care.

Ground was broken last Friday for a $2 million higher education facility. When completed, the center will offer graduate level courses from the University of Maryland and Johns Hopkins University. Engineering, math, computer science, health and education courses are hoped to be offered.

Our view

The idea for the Southern Maryland Higher Education Center began a few years ago when the Navy decided to close its military installation in Warminster, Pa., and transfer its workers to Patuxent River Naval Air Station in St. Mary's. When the relocating workers - expected to be in the thousands and many expected to settle in Charles County - were asked of their concerns about the move, many cited the lack of graduate studies and higher education opportunities in this area. Warminster, with its proximity to Philadelphia, provided access to those opportunities. So began the process to bring a center to the area.

What began as a project to convince those naysayers that there really are good reasons to settle here in Southern Maryland will turn out to be a boon for local professionals wishing to continue their education. Instead of fighting traffic in a drive north, residents can commute south. It's a straight shot down Route 5 - with less congestion and a lot less time to get there.

And as not to hurt the enrollments at the local colleges, Schaefer has appointed a board of governors to ensure that the only programs to be delivered by the new center will be those which cannot be offered by Charles County Community College and St. Mary's College.

To make last Friday an even busier day for Schaefer, the new Dauphin MedEvac helicopter was delivered to the Southern Maryland MedEvac Base. It is being housed at the St. Mary's County Airport, but will serve the entire tri-county. We've been told that having the helicopter in the region will double - from 10 to 20 - the numbers of hours each day that MedEvac help is available. The older helicopters used just couldn't provide sufficient services to area residents.

The region has been campaigning for years to bring a helicopter here. Arguments were even made to have it stationed in Hughesville at one time. As we have argued all along, area residents should be afforded prompt access to emergency care day and night just as other Maryland residents living to our north.

Recorder
Pr. Fred., Md.

AUG 31 1994

Southern Maryland to get new MedEvac helicopter on Sept. 23

Brian Blomquist
Special to The Recorder

The state has tentatively planned to bring Southern Maryland its new MedEvac helicopter Sept. 23 and the Eastern Shore its new helicopter Nov. 4.

Maj. John Hughes, commander of the aviation division of the Maryland State Police, said planners are working with schedulers for Gov. William D. Schaefer to arrange the dedication ceremonies of the helicopters.

This spring, the state bought two modern Dauphin emergency helicopters for $10.5 million to replace the aging Bell Jet Ranger helicopters based at MedEvac sites in St. Mary's County and Centreville.

The MedEvac bases at St. Mary's County Airport and Centreville are the only two emergency evaucation bases in the state with the older Bell Jet Ranger helicopters. The state considers them unsafe to fly at night.

Hughes said the twin-engine Dauphin helicopters are still with the manufacturer, American Eurocopter in Grand Prairie, Texas, where they are being fitted for medical use. He said the state has already hired six additional pilots for the two new helicopters.

Additional pilots are needed because the Dauphin helicopters will be in use at night. The Bell Jet Rangers were prohibited by the state to be flown at night in 1991.

Hughes said the existing Bell Jet Ranger helicopters will be kept by the state police and used for criminal surveillance and marijuana eradication.

Hughes said the Bell Jets are less expensive to fly. They cost $150 an hour compared to $500 an hour to operate the Dauphin helicopters.

Cecil Whig
Elkton, Md.

State's EMS work is most worthwhile goal

By Delegate Ethel A. Murray
D-Cecil (Dist. 35B)

RE: The Maryland Institute for Emergency Medical Services Systems - MIEMSS

Marylanders can be justly proud of their emergency medical services system, which has served as a model for other such systems across the nation.

Created in 1973 by Gubernatorial Executive Order, MIEMSS has grown to encompass a coordinated program for training, testing and certifying pre-hospital care providers ... statewide communication and transportation networks...and a multi-level care system, including the R. Adams Cowley Shock Trauma Center, 8 area wide trauma centers, 20 specialty referral centers, 49 emergency departments and 16 rehabilitation facilities.

The system also includes more than 480 ambulances, more than 270 commercial ambulances, more than 31,000 trained and certified pre-hospital care providers, a state of the art communications center, linking ambulances, helicopters, hospitals and central alarms, as well as a Med-Evac helicopter program operated by the Maryland State Police and coordinated with MIEMSS.

All the system's components work together in a continuum of care from treatment at the emergency scene to hospital care to rehabilitation therapy. The goal is to help people return to society as productive citizens.

In my opinion

The multi-level care system directs the transport of the critically ill and injured patients to the medical facility that is best staffed and equipped to treat their injuries. In short, the networking of emergency medical resources ensures that patients in Maryland are seen at the right time, at the right place and by the right people. It is a system saving lives.

My family is one of several thousand Maryland families who have reason to be grateful for our state of the art emergency medical services system. Last June 1993, my husband, Jack, was flown by a Med-Evac helicopter to R. Adams Cowley Shock Trauma Center for treatment of severe injuries he received when he was brutally and repeatedly kicked by a horse. The prompt and effective medical attention Jack received saved his life and was directly responsible for his successful recovery.

As a member of the Appropriations Committee, I was always supportive of proposed funding for MIEMSS. However, after experiencing personally the benefits of MIEMSS, I became more than a supportive Appropriations committee member. I became a legislator who wanted to be strongly involved with expanding and improving MIEMSS.

At my request, Governor Schaefer appointed me a member of the 27-member EMS Advisory Council this past January. I consider it an honor to be able to work to make Maryland's fine emergency medical system even more effective. Let's face it, the bottom line of MIEMSS is saving lives. I know of no more worthwhile goal for which one can work.

Times
Towson, Md.

KUDOS

► A familiar face on the local music scene, folk-jazz stylist **Karen Goldberg** of Towson, recently celebrated the release of her new CD on Corbett Records, "Secrecy," with a concert in Ellicott City. This is her fifth release on Corbett, a Towson-based label.


Karen Goldberg

► **Herbert Davis** of Towson is one of the 1994 recipients of the American Library Association Trustee Citation. Davis, a trustee of the Baltimore County Library Association, has served as president and treasurer of the Baltimore County Public Library, has held positions with the ALTA and the Friends of the Towson Library, and has been a member of the Maryland State Advisory Council on Libraries.


Sister Rita Dolores

► Three Sisters of St. Francis from St. Joseph Hospital recently celebrated jubilees. **Sister Angela Erhard** and **Sister Rita Dolores**, celebrating their 50th jubilee, and **Sister Helen Jacobson**, celebrating 25 years, were honored at a special Mass.


Sister Angela Erhard


Sister Helen Jacobson

► **Kim Boyce**, a junior majoring in early childhood education at Towson State University, was among 26 honored at a "Stars of Life" awards reception held in late May by the Maryland Institute for Emergency Medical Services Systems.

She received a Civilian Certificate of Honor for her work with the "Don't Drink and Drive" program.

The victim of a drunk driver (she had to have one of her legs amputated below the knee), Boyce has told her story to thousands of teenagers.

► **Christianna Nichols Leahy**, an associate professor of political science, has been named 1994 Distinguished Teacher at Western Maryland College. Leahy, known for her work with Amnesty International, is a member of the African Studies Association, the Baltimore Council on Foreign Affairs, and the International Conference Group on Modern Portugal.

She and her husband reside in Cockeysville.


Christianna Leahy


Stephen Scherba


Glennell Smith

► The Kiwanis Club of Towson has named Officer **Stephen Scherba** of the Towson Precinct as Police Officer of the Year and **Glennell Smith**, a paramedic with Station No. 1 in Towson, as Firefighter of the Year.

Scherba was nominated for this award by his commanding officer, **Capt. Roger Sheets**, based on his superb job performance and community involvement, including the resolution of two neighborhood disputes and volunteer work at a youth retreat.

Smith was recommended by **Capt. Ed Watkins**, specifically for saving a woman's life at Broadmead Nursing Home, employing the new Zoll Monitor.

Scherba and Smith were presented plaques and dinner certificates for the Stouffer Windows Restaurant in the Inner Harbor.

► The SERRV International Gift Shop in Towson recently welcomed educator and activist **Gwendolyn Calvert Baker** to their store.

Daily Banner
Cambridge, Md.
Cir: 7,141

AUG 29 1994

Second ALS ambulance in Hurlock marks milestone for better service

By ARLINE CHASE
Staff writer

HURLOCK — When a second Advance Life Support (ALS) equipped ambulance was put in service by the Hurlock Volunteer Fire Co. on Thursday, it marked a milestone in better emergency services for the community, according to the organization's president David Wands.

"Now we are able to put two ambulances on the road if we receive more than one call, and we'll have back-up available here if we go to assist any other fire companies in our area," Mr. Wands said. "Also we're going to put in an automatic defibrillator that will allow emergency medical technicians (EMT) to provide cardiac care if no cardiac rescue technicians (CRT) are available."

The new 1994 Med-Tech Apollo ambulance, which cost $75,000 with an additional outlay for emergency equipment, including $5,000 for the automatic defibrillator, will require an addition to the firehouse structure, but will greatly enhance the department's ability to respond to emergencies in the North Dorchester area, according to Mr. Wands.

"I think that in the upper part of the county we're pretty well covered. We all assist one another," said Mr. Wands, who is also qualified as a CRT. "I'd like to say that Dorchester Emergency Medical Services has been a big help. We count on them and on Eldorado (fire company) to back us up."

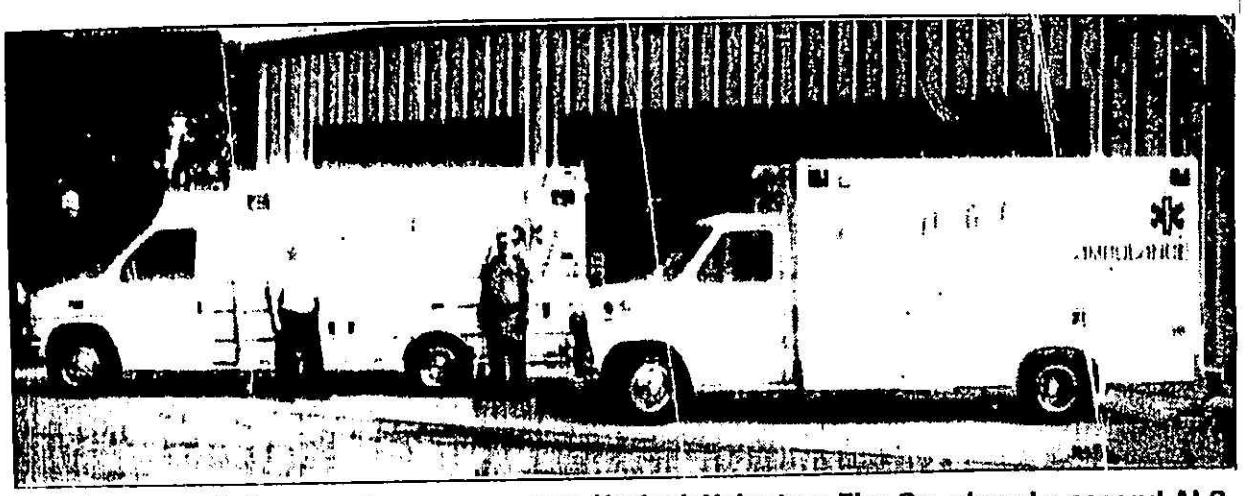
The Hurlock Volunteer Fire Co. was the first in the county to provide Advanced Life Support (ALS) services and provides a paid cardiac rescue technician to be on duty during a regular 40 hour week, according to Kenny Horseman, one of the five volunteer CRT providers who cover the Hurlock fire station during evenings and weekends. In addition to Mr. Wands, other CRTs are Crystal Larrimore, Jane Carrier and David Carrier.

"Many people don't understand the difference between EMTs and CRTs," Mr. Horseman said. "EMTs provide basic life support and render first aid, but to qualify as a CRT requires many mores hours of continuing education and training. CRTs provide advanced life support and can, under orders of an emergency room physician, start medication immediately on the spot and use defibrillating equipment to restart a patient's heart in cases of cardiac arrest."

Hurlock has 16 volunteer EMTs on call for ambulance duty, according to Mr. Horseman.

"We're proud of every one of them," Mr. Horseman said. "Paid providers and volunteers can and do work side by side to provide good emergency care. We've been doing it here for more than three years now."

Please see ALS page 2



Twice as ready to serve in an emergency, Hurlock Volunteer Fire Co. placed a second ALS equipped ambulance in service on Thursday. Fire company president David Wands, left, and first assistant chief John Stichberry said the old ambulance (right) will be used for back-up emergency services. (Photo by Arline Chase)

AL

Continued from page 1

Hurlock's paid provider Larry Dodd recently resigned to take a job in another area, according to Mr. Wands, who said the town of Hurlock has advertised the position and hopes to fill it soon.

"I do want to say that we thank the town of Hurlock and the whole North Dorchester area for their support. I believe they've been very far-sighted in implementing this service," Mr. Wands said. "The town officials have been aware from the first of the life-saving advantages of providing ALS service. The people here and the other fire departments in the area have all been supportive of our efforts."

Funding for the new equipment came partly from donations and the city and partly from billing revenues generated by the service, which answered more than 600 calls last year, according to Mr. Horseman.

"We have implemented billing for our ambulance services," Mr. Horseman said. "We bill people who have no insurance because we have to bill everyone alike, but we will work out a system of payment with anyone who needs help."

When asked for comments about the current 911 situation in the county, both Mr. Wands and Mr. Horseman said whether or not to move the center was not the issue.

"Dispatchers need to have some medical training so they can assess the problems correctly," Mr. Wands said. "There is computer software and charts available to help them give advice until medical people can get there."

"This is not a problem that can't be solved," Mr. Horseman said. "Whether they move the center or not, the solution is for people to take responsibility for what they do and to keep the public's safety in mind."

Daily Record
Baltimore, Md.

BUSINESS PEOPLE

Hirings, Promotions, Appointments in the Baltimore-Washington Area

Brad May, director of operations for May Ambulance Service in Woodlawn, has been elected vice president for the **Professional Ambulance Association of Maryland**. May will be responsible for working with Maryland legislators and the Maryland Institute of Emergency Medical Services System.

Cecil Whig
Elkton, Md.
SEP 0 7 1994

Cecil to put $79,000 toward EMS hirings

By Craig S. Ey
Whig Staff Writer

The Cecil County Commissioners have agreed to hire additional emergency medical personnel to improve the response time in the county's southern end.

"The response time to an emergency call in the lower end of the First (Commissioner) District is about 17 minutes," explained county administrator Edward Sealover. "The national average is about 10 minutes. The situation needed to be corrected."

By mid-October, the county is planning to add two technicians and two paramedics to the full-time Emergency Medical Services (EMS) department staff.

The commissioners passed a $79,000 budget amendment at Tuesday's weekly meeting to pay for the new employees.

The county can afford to hire them largely because the commissioners underestimated this fiscal year's revenue receipts. Basically, they are getting more money from ambulance service fees — which are charged to people who use the county's emergency medical services — than they expected.

Also, by hiring four new full-time employees, the commissioners expect to save about $6,500 on over-time for existing personnel.

Currently, the county has EMS stations in Colora, North East and Elkton. On weekends, EMS personnel work out of the Chesapeake City Volunteer Fire Department station.

By hiring new personnel, the county hopes to increase the staffing of the Chesapeake City station to improve the response time in areas below the C & D Canal.

"This is a very important step in improving emergency services in the lower end of the county," said Commissioners' President W. Edwin Cole Jr.

Perry Hall Avenue
Baltimore, Md.

SEP 21 1994

Tips you can live from Fire Station 12

The Emergency Medical Services (EMS) is a division of the Baltimore County Fire Department. It consists of 23 career and 16 volunteer ambulance/medic units, responsible for 610 square miles and over 680,000 residents.

Each career medic unit is always staffed with one Emergency medical Technician (EMT) and one Cardiac Rescue Technician (CRT).

Units are dispatched using a Medical priority Dispatch in the 911 Center. The 911 operators have guidelines that tell them what minimum level of care is needed at an incident. For example, a motor vehicle accident would indicate to the 911 operator that an ambulance with two EMTs, one with intravenous certification, (EMT-IV) would be appropriate staffing. In the case of a person suffering chest pains, a medic unit with an EMT and a CRT would be dispatched. The 911 operator forwards this information to the Fire Department Dispatch where the call is put out to the proper unit in the field. This system is referred to as the tiered response system and enables the fire department to dispatch the nearest appropriate unit.

With this system the fire department also has District Lieutenant vehicles that can be dispatched on any call in their individual district and as back up units for adjoining districts. All district Lieutenants are EMT-P certified. Their primary purpose is to supervise field units and to ensure proper skills are being afforded to the citizens of Baltimore County. The Lieutenants may also assist the crews with patient care and, if necessary, they will accompany the patient to the hospital care. Minimum medical training for engine crews is at the First Responder level, but in many cases, members of the engine crew are at the EMT or CRT level.

The tiered response system and the cooperation between the volunteer and career services has enabled the Baltimore County EMS Division to provide the citizens of Baltimore County with the most up to date medical care available. The Baltimore County EMS Division is a national recognized system.

Howard Sun
Ellicott, Md.

HOWARD COUNTY

Fire department forms panel to critique its work

Medical services are focus of effort

By Ed Heard
Sun Staff Writer

Howard County's fire department wants to get closer to residents — even when there are no emergencies.

The county's Department of Fire and Rescue has called on citizens for the first time to help it evaluate its emergency-medical services and how it can better reach out to the community.

"We want to modify our services with a people touch," Chief James Heller, the department's director, said yesterday. "Most people only see us when we pick them up off the street. We want to tell people we care about them beforehand."

The department has formed a seven-member panel of county residents and fire representatives to give it feedback and consider medical services it could offer, such as free flu shots and cardiopulmonary-resuscitation training.

The panel met for the first time yesterday at the fire department's headquarters in the Gateway Building in Columbia.

The group is expected to meet at least four more times over the next month and to submit a written report to Chief Heller and County Executive Charles I. Ecker.

Chief Heller said the department's emergency medical services division needed a critique to make sure it is meeting public expectations.

The evaluation won't include the department's approach to fighting fires.

In April, some Highland residents complained about the department's firefighting techniques. They said a jurisdictional conflict between the Clarksville fire team and a Montgomery County squad, along with a defensive firefighting policy — in which firefighters don't directly attack fires — led to the loss of a $260,000 home.

Chief Heller said the department varies its firefighting methods according to the situation. The real challenge lies in providing immediate care to injured people, he said.

See **FIRE**, *10B*

FIRE: Department seeks citizen critique

From Page 1B

"We haven't come up with any new ways of putting out fires. Water still puts them out," Chief Heller said. "The EMS [emergency medical services] is a constantly changing field."

About 70 percent of all Howard County calls — mainly resulting from traffic accidents and heart attacks — require emergency medical services.

Last year, the department received 14,668 service calls, Chief Heller said, of which 10,250 were for emergency medical service and 4,418 for fires. The department has about 435 firefighters, including its career, part-time and volunteer workers.

Chief Heller said he wants the department to be a noticeable force in the community. "We have to look at nontraditional things we can do," he said. "Citizens have to feel like they're getting their money's worth, not just when they call 911."

The department already runs a program in which fire personnel provide inspection of smoke detectors. Fire officials want to expand their community services to providing dietary tips, bicycle safety instructions and even a program in which each of the 11 fire stations would adopt a senior citizens center and visit the residents.

The panels' members are Dr. William Fabbri, an emergency room physician at Johns Hopkins Bayview Medical Center; John Miller, a Baltimore Gas and Electric Co. employee; Bruce Walz, an associate professor at the University of Maryland Baltimore County's emergency health services program; and Ken Brown, a certified state paramedic instructor and former firefighter.

Also, Don Graham, president of the West Friendship Volunteer Firefighter's Association; Andrew Lester, a paramedic at Rivers Park Fire Station; and Battalion Chief Don Howell, head of the fire department's emergency medical services division.

Fire officials said they chose the members because of their interest in the care system and for diversity of opinion. Officials are looking for two more citizens to join the panel.

Republican MDNR
Oakland, Md.

SEP 21 1994

Trauma Seminar Set At The Wisp

A Western Maryland Trauma Seminar will be held at the Wisp Resort, McHenry, on Saturday and Sunday, October 22 and 23 to offer training to all individuals providing emergency services. The seminar is presented by the Western Maryland Regional Office of the Maryland Fire and Rescue Institute, Garrett Community College, and the Region I Office of the Maryland Institute for Emergency Medical Service Systems.

The program provides the 12 hours of continuing education credit needed for EMT/A certification and includes the following topics: "Gaining Access to Patients Using Tools Found on the Ambulance," Tim Lowman, MFRI rescue instructor, Frederick County; "Patient Packaging for Rough Terrain Transfer," Special Medical Response Team, Indiana Co., Pa.; practical workshops for "Gaining Access" and "Patient Packaging; "OSHA-More Than An Appetizer," Dep. Chief Charles Brush, Lebanon, N.H., Fire Dept.; "Post Exposure . . . The Emotional Roller Coaster," Chief Steve Allen, Lebanon, N.H., Fire Dept.; "Supplemental Restraint Systems (Auto Airbags)," James Maxwell, GM Training Center, Pittsburgh; "Fear of the Unknown; It's Not the Danger, The Anticipation Challenge," Dep. Chief Charles Brush, Lebanon, N.H., Fire Dept.

Lodging will be available at the Wisp Resort. Conference rates are available through September 9.

Advance registration is required and is open to all emergency services personnel. Seating is limited to 150 participants. Applications will be accepted on a first-come, first-served basis. All applicants will be notified by letter as to whether they are accepted. Preregistration can be made by sending applications to Garrett Community College, P.O. Box 151, McHenry, MD 21541.

A fee of $40 is charged for Maryland residents and $60 for those out of state. This fee covers program costs including lunch and breaks on both Saturday and Sunday. The registration fee must accompany the registration form with checks made payable to Garrett Community College. Early registration is encouraged. For further information, persons may contact 387-3069.

Enquirer-Gazette
Up. Marlboro, Md.
Cir: 4,822

SEP 01 1994

Emergency Education Council Holds Two-Day Program

The Emergency Education Council of EMS Region V, Inc. and the Maryland Institute for Emergency Medical Services Systems (MIEMSS) will present a two-day program on "Emergency Care in an Increasingly Violent Society" on October 7 and 8, at the Greenbelt Marriott Hotel in Greenbelt.

This two-day conference will offer both pre-hospital and hospital providers practical tips on self-protection while exploring some of the causes of increasing violence in today's society. It will also suggest ways for emergency care providers to become involved in prevention activities.

The program has been approved for continuing education credits for both pre-hospital care providers and nurses. Preregistration is required.

For registration and additional information, contact the MIEMSS EMS Region V Office at 301-474-1485.

Flier
Columbia, Md.
SEP 15 1994

Ho. Co. Times
Columbia, Md.
SEP 14 '94

FOR NURSES

►The **Maryland Institute for Emergency Medical Services Systems (MIEMSS)** will present a nursing workshop entitled "Nurse as the First Responder" at Howard Community College on Oct. 6, 7, 13 and 14, 8:30 a.m.-4:30 p.m.

The course is designed for community, school and occupational health nurses and provides certification in CPR and training in basic principles of emergency care. It has been approved for 20 hours of continuing education credit.

For details and to register, call 410-964-4944.

Flier
Columbia, Md.
SEP 2 1994

TRAINING COURSES

►**Howard Community College** will offer several technical training courses in **allied health fields,** starting this month.

- **Medical records coding,** a 10-week course, will meet on Mondays and Wednesdays, Sept. 26-Nov. 30, 6-8:30 p.m. Cost is $350.
- **Hospital unit secretary training,** a 66-hour course (including a 30-hour externship at a local hospital), will meet Tuesdays and Thursdays, Sept. 26-Nov. 14, 6:30-9:45 p.m. Cost is $245.
- **Phlebotomy technician training, a 160-hour introductory course, will meet Tuesdays and Thursdays, Sept. 26-Jan. 18, 6:15-8:45 p.m. Cost is $450.**
- **Medical terminology for health careers,** an 8-week course, will meet Tuesdays and Fridays, Sept. 27-Nov. 15, 6-9:30 p.m.

The classes will be held at the Hickory Ridge Building in Columbia. For information, call 410-964-4944.

►**The Maryland Institute for Emergency Medical Services Systems (MIEMSS)** will offer a workshop on **trauma life support for nurses** Oct. 11 and 12 at St. Agnes Hospital in Baltimore (Community Center A), 9 a.m.-4:30 p.m.

The program has been approved for 14 hours of continuing education credit. For information and to register, call 410-706-3930.