

**Maryland Fire-Rescue Education and Training Commission**  
**Agenda for Regular Meeting**  
**10:00am**  
**Wednesday, August 21, 2013**

**Location:**  
**Annapolis Fire Department –Taylor Avenue Fire Station**  
Upstairs Classroom  
620 Taylor Avenue  
Annapolis, Maryland 21401

**Call to Order/Welcome Remarks**  
**Introduction of Guests**  
**Pledge of Allegiance, Invocation.**  
**Approval of the Minutes and Agenda.**

**Reports from MFRETC:**

- **Chairman's Report**
- **Vice Chairman's Report**
- **Minimum Standards Committee**
- **Higher Education Committee**
- **Special Projects Committee**
- **Driver Training Facility Task Force**
- **MFSPQB Committee**
- **MICRB Committee**

**Reports from State Organizations:**

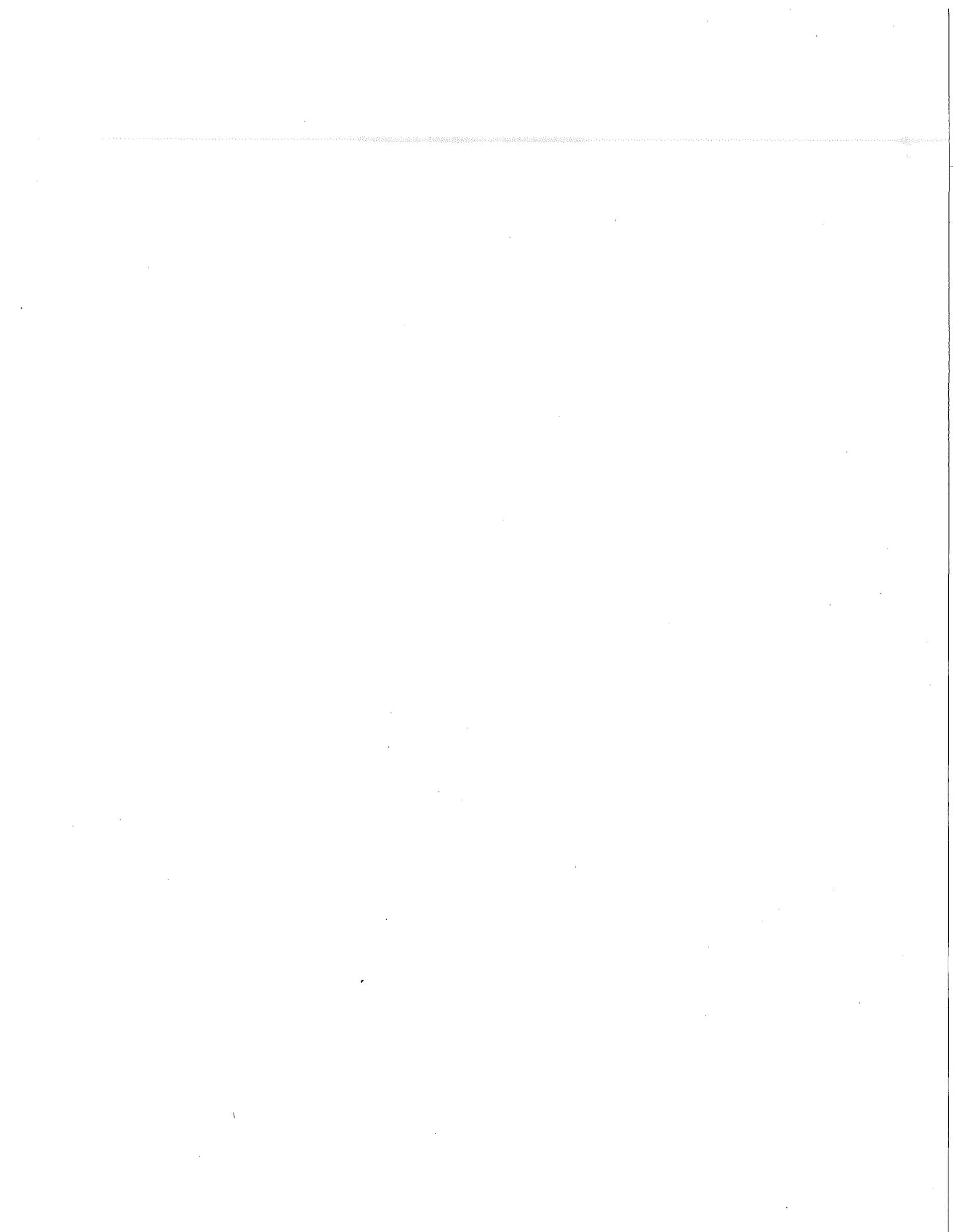
- **Maryland Fire & Rescue Institute**
- **Maryland Institute for Emergency Medical Services Systems**
- **Maryland State Fireman's Association**
- **Maryland Emergency Management Agency**
- **Office of the State Fire Marshal**
- **University of Maryland University College**
- **University of Maryland Presidents Board of Advisers**

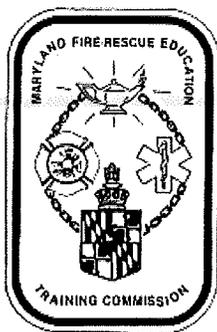
**Old Business:**  
**New Business:**

**Next Meeting:**  
**Adjourn**



**Governor**  
**Martin O'Malley**  
**Chair:**  
**Mike Clemens**





**MINUTES OF REGULAR MEETING**  
**MARYLAND FIRE-RESCUE EDUCATION AND TRAINING COMMISSION**  
**Wednesday, August 21 2013**

Annapolis Fire Department –Taylor Avenue Fire Station  
Upstairs Classroom  
620 Taylor Avenue  
Annapolis, Maryland 21401

Chairman R. Michael Clemens, Presiding

**COMMISSION ATTENDANCE:**

The Commission members present were:

R. Michael Clemens, Chair	Lynn D. Gilroy, Vice Chair	Barbara Knippenburg
Reinhold Strobel	Daniel Stevens	Michael Robinson
John W. Kissar	Kathleen Hartley	John Dulina
John Jerome	Geoffrey Donahue	

Commission members absent were:

Robert Cumberland	Michael Robinson
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Commission staff present:

Stephanie Baker

**CALL TO ORDER/WELCOMING REMARKS:**

Chairman Clemens convened the meeting at 10:00am and announced that the meeting would start with visiting the Fallen Firefighters memorial in Annapolis. At the memorial, Chair Clemens led the Commission in the Pledge of Allegiance and Vice Chair Gilroy led the Commission in an invocation.

After Commissioners and guests returned from the memorial, the business portion of the meeting commenced at 10:40a.m.

**GUESTS:** The Chairman introduced those guests who were present. See attached list.

Chair Clemens thanked the Annapolis Fire Department for hosting the meeting.

## **APPROVAL OF THE MINUTES AND AGENDA:**

Vice Chair Gilroy made a motion to approve the June 2013 meeting minutes, which was seconded by Commissioner Kissler. This motion passed. A motion to accept the agenda was also passed.

## **REPORTS:**

### **Chair's Report:**

Chair Clemens discussed Emergency Vehicle Operator Courses (EVOC) and the policy established by the Commission for approving them in 2004. Chair Clemens shared that the policy is supposed to be revisited every year, but this hasn't happened. Moving forward, the policy needs to be regularly reviewed. Chair Clemens shared that he is working with the minimum standards committee to revisit the policy and work with MHEC's AAG to adopt regulations governing the approval of EVOCs. Chair Clemens shared that the minimum standards committee would meet after the Commission meeting to resolve issues with the approval of EVOCs and take a look at an EVOC offered by VFIS to determine whether it meets NFPA standards.

### **Vice Chair's Report:**

Vice Chair Gilroy shared that he attended an IFSAC meeting with Commissioner Stevens. He also attended an MSFA training committee meeting and that the committee is in the process of reviewing their 10 year plan. Commissioner Gilroy suggested that an alternate representative of the Commission be considered in case he cannot attend a meeting. Vice Chair Gilroy shared that there was a heated discussion on the Senate Bill that passed regarding the Charles Riley program, which will convert the program from a tuition reimbursement program into a scholarship fund. He emphasized the need to share information regarding the scholarship program as it is available with fire/rescue departments. MHEC staff Stephanie Baker noted that she had discussed this with the MHEC Director of the Office of Student Financial Assistance, Pete Tyrell, and Mr. Tyrell had informed her that he would share guidelines for the scholarship program when an initial draft is available. Baker noted that this may take some time as the scholarship program won't be implemented until 2015 and other legislation that passed this session would have to be addressed first.

### **Minimum Standards Committee:**

Committee Chair Dan Stevens echoed Chair Clemens comments regarding the Commission's policy on approving EVOCs. Committee Chair Stevens shared that he will make copies of the MSFA's 10 year plan for the next Commission meeting. The first meeting regarding the 10 year plan will be held in Sykesville on Sunday, August 25. Commissioner Stevens had no further report for the minimum standards committee.

### **Higher Education Committee:**

No report shared. Commissioners and guests discussed online fire science and fire service degree programs and accreditation issues. Commissioners also discussed a shift in higher education towards competency-based higher education and Steve Carter (UMUC) shared information regarding UMUC's efforts to focus on competencies students should gain in their programs.

**Special Projects Committee:**

No report was shared as Committee Chair Michael Robinson was not present.

**Driver Training Facility Task Force:**

Commissioner Stevens shared that the Task Force would revisit Driver Training issues once the minimum standards committee is able to resolve EVOC issues.

**Maryland Fire Service Personnel Qualifications Board (MFSPQB)**

No report was shared.

**Maryland Instructor Certification Review Board (MICRB)**

Steve Edwards (MFRI/MICRB) shared that the MICRB is trying to do more electronic work. All PDI submissions are now electronic. Recertification forms are also electronic.

**REPORTS FROM STATE ORGANIZATIONS:**

**Maryland Fire and Rescue Institute (MFRI)**

Steve Edwards (MFRI) shared the attached report.

**Maryland Institute for Emergency Medical Services Systems**

Rae Oliveria shared the attached report.

**Maryland State Fireman's Association**

No report was shared as no MSFA representatives were present.

**Maryland Emergency Management Agency (MEMA)**

Commissioner Dulina shared the following:

- State Emergency Operations Center (SEOC) update: Scheduled closure date is October 28. Alternate SEOC will be functional
- Preparedness Directorate should be moving to leased office space in Owings Mills in the next few months on a temporary basis vacating their current housing in the trailers at MEMA in Reisterstown
- Learning Management System should be functional in the next few months
- Regional Exercises are being conducted in each MEMA Region in the state

**Office of the State Fire Marshal (OSFM)**

No OSFM representative was present, however, Acting State Fire Marshal Joseph Flanagan shared the attached report.

**University of Maryland, University College**

Steve Carter (UMUC) thanked Commissioners for supporting the new UMUC Public Safety Administration program. Mr. Carter shared that there were already 40 declared majors for the new Public Safety administration program.

**University of Maryland President's Board of Advisors**

Commissioner Cumberland was unable to attend the Commission meeting to share an update. Steve Edwards (MFRI) shared that Commissioner Cumberland resigned as Chair of the University of Maryland President's Board of Advisors.

**OLD BUSINESS**

No old business was discussed.

**NEW BUSINESS**

No new business was shared.

**NEXT MEETING:**

The next meeting of the Commission is scheduled for 10:00 a.m. on Wednesday October 16. Commissioner Knippenburg offered to host at the **Midland Fire Department**. Since this meeting, the location has been rescheduled to the **Maryland Higher Education Commission, 6 N. Liberty St, Baltimore MD 21201 – 8<sup>th</sup> Floor Conference Room 1.**

**ADJOURN:**

The meeting was adjourned at 12:04p.m.

Respectfully Submitted



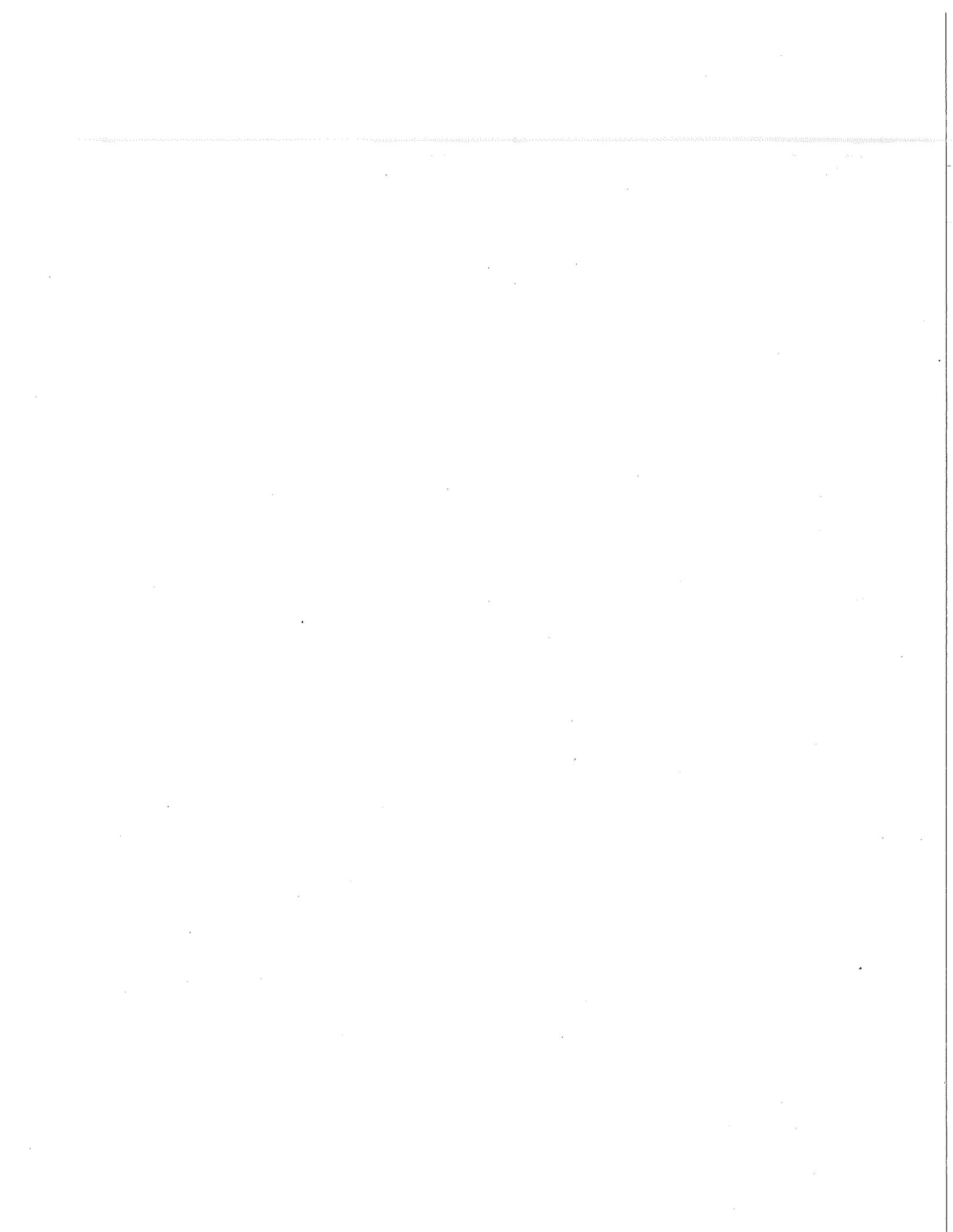
Stephanie Baker  
Administrator

SB

MFRETC Meeting - August 21, 2013

Guest Sign In

	Name	Organization
1	Rae Oliveira	MTEMSS
2	Ted Porter	Retired / MFRI
3	STEVEN EDWARDS	MFRI
4	Stephen Stuart Carter	UMAC
5	Alvo Williams	MFRI
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# **MARYLAND FIRE - RESCUE EDUCATION AND TRAINING COMMISSION**

**Wednesday, August 21, 2013**

UNIVERSITY OF MARYLAND  
MARYLAND  
FIRE and RESCUE  
INSTITUTE

**Steven T. Edwards, Director**

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**University of Maryland**  
**Maryland Fire and Rescue Institute**

**Report To**

*Maryland Fire-Rescue Education and Training Commission*

The following report is a synopsis of significant events that have occurred within the Maryland Fire and Rescue Institute since our last meeting.



**MFRI Student / Program Statistics for FY-2013**

**Maryland Fire and Rescue Institute Statistical Report**

**Emergency Services Programs: 1,534**

Field Programs	1,052
Special Programs	278
Company Drills	148
Seminars	56

**Students by Programs: 32,050**

Field Programs	22,699
Special Programs	5,516
Company Drills	2,455
Seminars	1,380

**Student Hours by Program: 808,535**

Field Programs	726,957
Special Programs	63,011
Company Drills	8,490
Seminars	10,077

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**Students by Discipline: 32,050**

Fire	7,283
EMS	5,794
ALS	1,704
Rescue	2,583
Management	3,714
Haz Mat	2,039
Specialty	5,098
Company Drills	2,455
Seminars	1,381



### EMT / Module 1

MFRI began instructing the new EMT Course in July of 2012, with the majority of EMT classes beginning in the August/September timeframe. Due to the content and length of the new EMT course at 165 hours, several issues have resulted. The following analysis has been completed indicating the results of the first year on this new course, with a focus on EMT Module 1.

#### **Student Success:**

- Approximately 62% of the failures occurred in Module 1
- Approximately 33% of the student incompletes occurred in Module 1
- Approximately 60% of the student drops occurred in Module 1

**EMT Module 1, entitled Foundations, includes the following 3-hour sessions for a total of 21 hours:**

1. Introduction to EMS
2. Medical, Legal and Ethical Issues
3. Medical Terminology, Anatomy and Physiology
4. Anatomy and Physiology Continued and Life Span Development
5. Principles of Pathology
6. Lifting and Moving Patients
7. Module 1 Written Exam

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### EMT Module 1 Improvements

- Quizzes for each of the first module classes will be made available for instructor use for all EMT classes beginning after July 1, 2013. These quizzes will focus on Anatomy and Physiology as well as Pathophysiology.

MFRI Institute Development Section will be conducting training sessions in each region this summer for EMT instructors to review the resources available from Brady that are provided with the Emergency Care text books and are being purchased separately for those text books that have been previously used. The Brady resources provide a number of adjuncts to the text and lecture materials to include the presentation slides, animations to reinforce the text and lecture content, additional learning resources for support student learning.

In addition, instructors can create a class within Resource Central that allows him to track student progress on chapter quizzes and reinforce areas of weakness. Ron will also solicit advice from the instructors as to how to enhance student performance.

- A review and revision of all module exams will be completed prior to the fall semester to ensure the validity and appropriateness of all questions.
- Field Operations will closely track all fall EMT class first module performance to see the effectiveness of the above stated measures.

MFRI in conjunction with MIEMSS will continue to monitor these classes very carefully and will complete a full one year report at the conclusion of the spring semester of classes.



### MFRI Medical Clearance

The MFRI Risk Management Committee closely follows injuries that occur to students in MFRI classes on a regular basis. The new MFRI Medical Clearance Policy for students have been in full effect for over 18 months. The most recent yearly statistics for MFRI student injuries showed a 45% decrease in injuries, which is a substantial decrease.

----- It cannot be proven at this time that this is the direct result of the MFRI Medical Clearance Policy, but I feel that this has been a substantial factor in the reduction of student injuries that we are experiencing. All other factors have remained constant, with the exception of the medical clearance process. The majority of student injuries continue to occur in Firefighter I and Firefighter II classes.



## Volunteer Company Leadership and Administration

At the request of the Maryland State Firemen's Association, MFRI has developed a new course titled Volunteer Company Leadership and Administration. This course is designed to provide information and management skills to the administrative officers of a volunteer fire department. The initial offering of this new course will be conducted in June of 2013.

**Presentation:** Volunteer Company Leadership and Administration provides personnel with the basic organizational skills to effectively manage volunteer company administrative operations. This course is designed for those personnel who have been assigned administrative responsibilities as part of a volunteer fire company. Through the use of discussion and small group activities, the participants will be able to apply the management principles of planning, organizing, directing, and controlling to better enable them to meet their organization's mission and goals.

**Audience:** The target audience for this course is volunteer personnel who have been newly assigned administrative responsibilities within the organizational structure of the fire company; i.e. President, Secretary, Treasurer, Director, etc. The secondary audience is those personnel who seek to refine their skills in these positions or who are looking to development themselves for future responsibilities within the company.

**Prerequisites:** None.



## MSFA Convention Seminars

On Sunday, June 16<sup>th</sup> and Monday, June 17<sup>th</sup>, MFRI coordinated the presentation of, and provided the logistical support for, 25 seminars, each averaging 90 minutes in length. A total of 479 students attended the seminars this year. In comparison to last year's MSFA Convention, the figures were almost identical as to the number of presentations and the number of attendees. In 2012 there were also 25 seminars presented with 476 attending.

Thanks to all for another successful MSFA Convention. During the week MFRI in conjunction with the MFSPQB processed 287 transcripts and 272 certifications. The number of transcripts processed was down from previous years, since students can download these from the MFRI website at any time.



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## IFSAC Reaccreditation Site Visit for Maryland

The International Fire Service Accreditation Congress (IFSC) recently conducted the five year review and approval for the certification system within Maryland. The IFSAC site team had nothing but positive comments about our system and the people who work in it. There were no suggestions for improvement nor were there any requirements. They are recommending to the Certificate Assembly of IFSAC an unqualified endorsement of Maryland's reaccreditation.

Thanks to the Chair Mike Robinson and the MFSPQB for their continued good work regarding the certification of fire service personnel. There is no question that the recognition that these certifications provide reinforce and encourage completion of MFRI training programs.

**Maryland Institute  
for  
Emergency Medical Services Systems**



**Executive Director's Report  
to the  
Maryland Fire-Rescue  
Education and Training Commission**

**August 21, 2013**

Dr. Robert R. Bass, MD  
Executive Director, MIEMSS



***MIEMSS Executive Director's Report***  
***August, 2013***

***Drive Safe and Sober on the Road or Water.*** As the summer vacation season is upon us, if alcohol will be a part of the festivities, remember to plan ahead for a non-drinking designated driver — whether on the road or on the water. As part of the nationwide “Drive Sober or Get Pulled Over” crackdown, law enforcement agencies across the country will be intensifying their efforts to deter and detect drunk driving. Research shows that high-visibility enforcement can reduce drunk driving fatalities by as much as 20 percent.

In addition to the dangers posed by drunk driving on roadways, the United States Coast Guard reports that alcohol use was the leading contributing factor in boating fatalities last year and, it was the leading factor in 17 percent of boating deaths. **Whether you're in a car or on a boat, the dangers of drinking and driving are the same — needless deaths and injuries.**

***MIEMSS is Updating the Statewide Plan.*** The Maryland State Emergency Medical Services (EMS) Plan is being updated and MIEMSS is soliciting input from the EMS community and the general public through a series of public meetings that are being held across the State. Meetings have been held in Regions I, III, and IV, with some excellent feedback and comments. A copy of the draft proposed plan can be downloaded from the MIEMSS web site <http://www.miemss.org/>. For those unable to attend a meeting, written comments may be faxed to 410-706- 2138 or emailed to [EMSplan@miemss.org](mailto:EMSplan@miemss.org). The deadline for comments is September 30, 2013. The last major revision of the EMS Plan was in 2006. The final two meetings will be held:

**MIEMSS EMS Region II (Washington and Frederick counties):**

September 3, 2013 - 7:00 PM – 9:00 PM  
Frederick County Public Safety Training Building  
5370 Public Safety Place  
Frederick, MD 21704

**MIEMSS EMS Region V (Calvert, Charles, Montgomery, Prince George's, and St. Mary's counties):**

September 9, 2013 – 7:00 PM – 9:00 PM  
Prince George's County Fire Services Building  
Multipurpose Room  
6820 Webster Street  
Landover Hills, Maryland 20784

***MIEMSS Congratulates the new MSFA Officers.*** MIEMSS would like to commend the Maryland State Fireman's Association (MSFA) on a successful convention. Congratulations to the new officers; Jackie Olson-President, David Keller, III -1<sup>st</sup> Vice President, and Johnie Roth-2<sup>nd</sup> Vice President. We would also like to recognize Past President John Denver for his effective year as President.

***Association for Professionals in Infection Control and Epidemiology, Inc. (APIC) Guide to Infection Prevention in Emergency Medical Services.*** The *Guide to Infection Prevention in Emergency Medical Services* has been produced. It is intended to assist and guide EMS agencies in providing a safe workplace through effective Infection Prevention programs adapted to the needs of EMS system responders. The guide provides an overview of infection prevention best practices for emergency medical services (EMS) system responders. Topics included are:

- The role of infection prevention in patient and EMS system responder safety
- Infection prevention standards, regulations, and best practices applicable to EMS setting
- Overview of epidemiology and pathogenesis of communicable diseases in EMS setting
- Instruction, examples, and tools to perform surveillance, develop an exposure control plan with post-exposure management, and conduct risk assessments
- Emergency, disaster, and bioterrorism preparedness
- Forms and templates for infection prevention education, training, and compliance monitoring

The Guide may be found at: <http://apic.org/Professional-Practice/Implementation-guides>

***Maryland Medical Orders for Life-Sustaining Treatment (MOLST).*** Beginning July 1, 2013, certain facilities will be mandated to complete the Maryland Medical Orders for Life-Sustaining Treatment (MOLST) form for certain patients, including nursing homes, assisted living facilities, home health agencies, hospices, dialysis centers, and hospitals (<http://bit.ly/Maryland-MOLST-form>).

MIEMSS will continue to provide hard copies of the form for those without access to the internet, as well as plastic bracelets for those patients who want to use the bracelet option. Hard copies and bracelets may be obtained by calling (410)706-4367.

The "Maryland Medical Protocols for EMS Providers" require that EMS providers comply with MOLST forms, as well as any valid EMS/DNR form. Previously completed valid EMS/DNR forms, as well as valid MOLST forms will continue to be honored by EMS providers.

For further information regarding MOLST forms: <http://marylandmolst.org/index.ht>

***electronic Maryland EMS Data System (eMEDS).*** eMEDS implementations continue statewide, for both public safety and commercial services. Charles, Howard, and Caroline Counties are all in the final set-up phases and will migrate in the near future. Implementation has also begun in Prince George's County. MIEMSS has also successfully begun importing legacy data from other electronic Patient Care Reports (ePCRs) vendors into the new Maryland system. MIEMSS is also currently working with several jurisdictions and hospitals to begin a completely paperless EMS to Emergency Department documentation transition. Numerous CAD Integrations have been completed. Stroke, Trauma, Burn, and Pediatric specialty coordinators have also been granted access to eMEDS for immediate record retrieval.

***MIEMSS CAD Interface Grant Program.*** As a component of the eMEDS purchase, MIEMSS acquired the ability to establish a computer aided dispatch (CAD) system interface between a participating EMS Operational Program (EMSOP) CAD system and eMEDS. Establishing a CAD interface will improve data accuracy and reduce data entry work performed by EMS field providers. To assist EMSOPs in establishing a CAD interface, MIEMSS has created the CAD Interface Grant Program. Funds for the CAD Interface Grant Program were provided by the Maryland Highway Safety Office (MHSO) and the National Highway Transportation Safety Administration (NHTSA). The CAD Interface Grant is a 60/40 matching grant program allowing MIEMSS to reimburse the EMSOP 60% of the costs associated with the services performed by Image Trend, Inc., to establish the CAD interface, not including annual maintenance. The maximum grant reimbursement is capped at \$25,000 dollars. The grant program is operational will remain available through June 30, 2013.

Expressions of Interest are currently available both through the Regional Offices and online via the MIEMSS Website under the eMEDS tab, CAD Grant. Under the grant program, MIEMSS will only reimburse an EMSOP for services performed by Image Trend, Inc. No computer equipment, network equipment, or communications services can be purchased with this grant. Purchase of services from ImageTrend, Inc., is the responsibility of the EMSOP through a contract directly between the ImageTrend, Inc., and the EMSOP. Purchase of CAD Interface services should be under the guidance of the EMSOP's procurement procedures. In order for an EMSOP to participate in the CAD Interface Grant Program the EMSOP must be moving from EMAIS® to eMEDS or intending to adopt eMEDS. Additionally, the requesting EMSOP must be part of a jurisdiction/agency which is responsible for receiving 9-1-1 calls and dispatching EMS units via a Public Safety Answering Point (PSAP) using a computer-aided dispatch system.

***Critical Care Module.*** ImageTrend has a contract modification to acquire the Critical Care Module which will permit reporting of Specialty Care Transports. Medical procedures and protocols will be seamlessly integrated with the eMEDS patient care reporting system. With the acquisition this module, MIEMSS is exploring the possibility of developing an eMEDS run report specifically designed for commercial services.

**2013 Maryland Medical Protocols for Prehospital Providers Protocol Training Updates.** The 2013 Maryland Medical Protocols for Prehospital Providers Protocol Training Updates are available at the MIEMSS' Online Training Center. Maryland Paramedics, CRT-99s, EMTs, EMRs, and hospital base station personnel were required to complete this training prior to July 1, 2013. This year providers are only responsible to take the protocol update that corresponds with their level of licensure or certification. For example, if you are an ALS provider, then you will only be required to take the ALS update to meet your training requirements. Once you complete the course, the Online Training Center will provide you with a certificate of completion for your records.

The electronic version of the July 1, 2013 Maryland Medical Protocols for Prehospital Providers is available on the MIEMSS homepage. Pocket protocols are being distributed to all Maryland providers. Spiral bound versions of the full protocols are available for sale.

If you have any questions about the Online Training Center or the 2013 Protocol Update, please contact the MIEMSS Office of Licensure and Certification at 410-706-3666 or 1-800-762-7157.

**Licensure/Certification Management Software.** MIEMSS has received approval to replace the aging MPPR- Maryland Pre-hospital Provider Registry with new licensure/certification management software program. MIEMSS will be working with ImageTrend in creating the program. This software provides tracking of licensing, certification, and continuing education of Maryland's EMS providers. This application will also allow providers, Operational and Commercial programs to update Affiliations on line and will transfer to the eMEDS system. The implementation process has begun. The Office of Licensure and Certification began using the product internally in March 2013. Various aspects of the program will be phased in over the following month to cumulate in online access for providers, Operational and Commercial programs, and EMS Board approved teaching agencies.

**Provider Cards.** The MIEMSS Office of Licensure and Certification has been printing new renewal cards for all EMS providers. These cards are printed on new stock allowing for self-lamination of the provider card. Use the following directions, which will also be included with the recertification letter, to self-laminate your provider card.

- 1. Peel card from liner slowly**
- 2. Place card face down in window**
- 3. Punch card through back of sheet**

Please contact the MIEMSS Office of Licensure and Certification at 410-706-3666 with any questions.

**SEMSAC BLS Committee:** 2012 marked many changes with the implementation of the EMS Agenda for the Future: National EMS Education Standards. 2013 is poised to prove to be another exciting year for licensure and certification. The BLS committee will build on the improvements made in 2012. The committee will continue to develop materials to be used by both instructors and current providers for recertification. The Field Training Coach program is being overhauled to reach more potential EMT coaches and mentors. Additionally, the committee will work to improve the transition from EMR- Emergency Medical Responder (formerly known as FR-First Responder) to EMT- Emergency Medical Technician certification.

**Maryland EMS Providers.** As of August 3, 2013, there are 27,227 certified or licensed EMS providers in Maryland. The providers are broken down as follows:

EMD:	1,171
First Responder/EMR:	3,426
EMT:	18,770
CRT99:	837
Paramedic :	3,023

**Ambulance Safety Task Force.** The subcommittees continue to meet to address the six recommendations from the report. The Task Force report can be found on the MIEMSS web page. A future meeting of the full Task Force is being planned for later this year.

**HC Standard.** HC Standard 3 is currently in operation. Version 3.6 of the application continues to host a more robust County Hospital Alert Tracking System (CHATS) with alert definitions displayed for the public and includes Facility Resource Emergency Database (FRED), County Hospital Request System (CHRS), and Electronic Patient Tracking System (EPTS). HC FRED is operational and in use throughout the state. It continues to receive positive feedback, with many facilities expressing an interest in future enhancements to this system. The CHRS application is being used by hospitals, EMS Operations Programs and EMRC to electronically request diversion status changes. EMRC continues to operate the HC3 EMRC application. The program provides real time situational updates as patients are scanned, triaged, and transported from one site to another. The application provides maps showing where patients are in real time, as well as what facilities they went to, who they were transported by, interventions that were performed, and demographic information. MIEMSS continues to build out new features to our dashboard, incorporating additional functionality. It also allows users to customize their dashboard screen with any windows from HC as well as any websites. This allows users to add local programs accessible through the internet to the dashboard. To date, MIEMSS has conducted multiple training opportunities on HC Standard including: several administrator training courses, dozens of in-person user training courses, six online user training courses, and around two dozen just-in-time training courses. MIEMSS continues to provide support and assistance to facilities as they come online to the new HC Standard 3. MIEMSS is in the process of expanding current EPTS capabilities within the state to allow for more units to be utilized in the field. Many jurisdictions are planning to purchase PTS handheld units using this year's Hospital Preparedness Program (HPP) funds. MIEMSS recently brought the Psychiatric Bed Registry online which is built within HC Standard allowing psychiatric bed availability to be seen statewide, and assists Emergency Departments in matching up patients with needed beds. MIEMSS is currently in the process of scheduling our next upgrade to 3.7 which will add additional situational awareness features to the system.

## ***Regional Programs and Emergency Operations.***

### ***Regional Health and Medical Committees.***

- The Region III Health and Medical Taskforce continues with field implementation of the electronic patient tracking system.
- Site surveys and installations continue statewide for the Public Safety Interoperable Communications Grants through which MIEMSS received funding to connect the remaining hospitals and 9-1-1 centers to the PSInet with VoIP phones.
- The EMS Focus group continues to meet to develop recommendations for the composition of EMS Strike Teams.
- The Montgomery County Emergency Response System completed a tabletop exercise for the National Capital Region on the Hospital Evacuation/ Forward Movement of Patients. Over 120 attendees from across the Region and State attended. Other exercises and trainings are currently being planned.

The MIEMSS Regional Offices are managing multiple projects throughout the state. For more information about any of the items listed below, contact the appropriate MIEMSS Regional office.

- Planning is underway for the 12<sup>th</sup> annual Miltenberger Emergency Services Seminar to be held on April 4<sup>th</sup> and 5<sup>th</sup> 2014 at Wisp Resort in McHenry, MD.
- The Region I Office coordinates the Federal HPP Emergency Preparedness Grant Funding for MIEMSS and includes all regional submissions.
- The Region I EMS Advisory Council has been revamping its overall objectives for the future and has developed a clear mission, vision, and goals. Committees have been implemented to fulfill the goals and objectives.
- The Region II STEMI Committee has finalized the region plan and the process by which data is being collected. The committee will have a plan in place for sharing information in the near future.
- Region II Office received positive feedback from the utilization of the patient tracking system and we are planning to utilize the patient tracking system for events in the near future (Battle of Antietam reenactment 2013).
- Region II Office assisted Washington County in developing a jurisdiction-wide Field Training Program.
- Region II Office and MIEMSS Compliance Office assisted Washington County with the revision of their Quality Assurance Plan.
- Region II is currently working to develop Region-wide pre-designated landing zones that will be utilized for on scene air medical evacuations.
- Region II Advisory Council recently approved a Vision and Mission Statement.
- The Region III Medical Directors continue to meet quarterly to review pre-hospital EMS quality assurance data.
- Reimbursement requests continue to be process for FY2013 50/50 matching grants. FY2014 grant applications will be distributed within the week.
- Planning has begun for EMS Care 2014, which will take place May 1-4, 2013.
- Hospital EMS Base Station redesignation surveys are under way throughout Region III.

- The Office of Hospital Programs and the Regional Offices are conducting meetings throughout the Region with those hospitals that are reporting above average use of hospital alert hours. Collaborative attempts are being made to resolve the issue.
- The Statewide eMEDS Steering Committee has reconvened and met in July.
- A Region III Hospital Evacuation Workshop took place on August 6th at MITAGS. The workshop is a 2013 UASI project sponsored by the Region III Health & Medical Taskforce.
- The Region IV STEMI QA Committee continues to collect and analyze STEMI Data region wide.
- All nine counties of EMS Region IV are now utilizing eMEDS.
- Somerset and Caroline counties have both completed applications for the CAD Grant for their jurisdictions. Upon completion and finalization of the grant, eight of the nine jurisdictions in the Region IV will have taken advantage of the Grant and be utilizing the interface with eMEDS
- The HPP Grant for the Somerset County disaster trailer is moving forward with the purchase of equipment and outfitting the trailer. This new resource will be a valuable addition to the three lower shore counties of EMS Region IV.
- MIEMSS has named Anna Sierra as the new Region IV Associate Administrator.
- MIEMSS has named the new Region V Administrator, Jonathan Bratt.
- The Region V Diversion Task Force continues to meet to discuss best practices, lessons learned, and additional methods to improve alert utilization. The Task Force of Hospital and EMS representatives will also be working with the Region III MIEMSS Office and Region III Medical Director for additional insight.
- Region V is working closely with the Emergency Response System of the National Capital Region –Maryland, which includes Montgomery and Prince Georges Counties in the tri state National Capital Region (NCR) Urban Area. NCR wide planning, training and exercises are ongoing. A Forward Movement of Patients Tabletop Exercise was completed this Spring and a full scale exercise is planned for Spring 2014.

***Emergency Medical Services for Children Program (EMSC):*** The state Pediatric Emergency Medical Advisory Committee (PEMAC) meetings for 2013 are posted on the MIEMSS website both on the events calendar and EMSC. The PEMAC website at: <http://www.miemss.org/home/PEMAC/tabid/167/Default.aspx> contains meeting document and EMSC reference materials.

The **National Pediatric Readiness Project** (NPRP – [www.pediatricreadiness.org](http://www.pediatricreadiness.org) ) field test in Maryland and Minnesota are coming to a close. Maryland achieved an excellent response rate of 98% (48 of 49 hospitals). The NPRP is a national wide online quality assessment of over 5000 hospitals with Emergency Departments that will provide a benchmark of how prepared EDs are to care for children on a daily basis. The questions are based upon the 2009 AAP/ACEP/ENA/EMSC policy statement and checklist “Guidelines for the Care of Children in Emergency Departments). Both documents are on the MIEMSS EMSC webpage and the PEMAC webpage listed above. The assessment is voluntary and confidential with state and national data points representing only aggregate data. EMSC presented a summary of the responses at the Annual EMS Medical Directors Symposium in April and the state ENA Conference in May.

The **EMSC Partnership Grant** continues to focus on the ten Federal EMSC Performance Measures that have 2011 and 2017 target dates for achievement. Detailed information is available on the MIEMSS EMSC PEMAC website listed above. This grant was renewed for the 2013-2017 federal grant cycle. NEW & Current projects include:

- Ø Update of the Pediatric Base Station course with new slides on EMS provider scope of practice and the NPRP; expansion of course for transport teams
- Ø Electronic web based inspection resources for the **VAIP 2012** standards and review of the 2013 ACS/ACEP/ NAEMSP revised recommendations for Ambulance Equipment
- Ø Pediatric Reference Cards and Posters have been distributed to all jurisdictions with additional copies available upon requests. They can be viewed on the EMSC website [www.miemss.org/home/Programs/EMSforChildrenPrograms/tabid/158/Default.aspx](http://www.miemss.org/home/Programs/EMSforChildrenPrograms/tabid/158/Default.aspx)
- Ø Development of new reference cards and poster on best practices to restrain children in ambulances based upon the **9/2012 NHTSA Guidelines for the Safe Transport of Children in Ambulances** (also posted on the MIEMSS website under PEMAC and under Ambulance Safety).
- Ø The Maryland Ambulance Safety Task Force will continue to meet quarterly in 2013 and update the Ambulance Safety website with new material as it becomes available ([www.miemss.org](http://www.miemss.org) under Programs and under EMSC). The NHTSA Guidelines for Safety Transport of Children in Ambulances was posted in September 2012 and is available at: <http://www.ems.gov/BestPracticeRecomendations.htm>
- Ø Converting the Guidelines for the Care of Children in Emergency Departments into regulations with criteria for pediatric emergency department and develop a systems for regional categorization after the completion of the NPRP (1/31/2013).
- Ø EMSC Grant educational priorities include: **Pediatric Vascular Access** workshop (MIEMSS unique workshop); **STABLE** (Sugar, Temperature, Airway, Blood Pressure, Lab Work, Emotional Support) courses are being offered with SOCALR for neonatal transport teams and Emergency Department professionals; Care of Newly Born infants and OB emergencies – “When the Stork Dials 9-1-1”. **APLS** – Advance Pediatric Life Support courses will be offered for hospital providers with a focus on physician and advance practice professionals. The 2013 **PEPP** (Pediatric Education for Prehospital Providers) course remains in production at the publishers. Once released, EMSC will host an instructor’s update.

***Child Passenger Safety (CPS) & Occupant Protection Healthcare Project:***

- MIEMSS CPS & OP project has entered a 13<sup>th</sup> year of funding (DOT/NHTSA) with continued outreach to health care providers to provide education and parent educational tools on child passenger safety. The project will continue a new program for Tweens on safe occupant behaviors and collaborate with local Safe Kids chapters and coalitions and KISS program at DHMH.
- Two products are under revision – The **Proper Occupant Protection** training DVD for lay public and the **Prescription Pad for Child Safety** for primary care providers to use in advocacy and prevention education.
- **Rear Facing Longer & Booster Seat** posters are available as part of the educational campaign on Maryland’s enhanced occupant protection law.
- **SECURE** Ambulance Safety & **BUCKLE UP – Every Ride Every Time** posters are available from the EMSC & SOCALR offices

- **Buckle Up NIGHT & DAY** posters and banners are available from the EMSC program office in support of the state and national campaigns to ensure that everyone buckles up 24 hours a day. There was a statewide effort to display these banners during the November holiday travel weeks.
- MIEMSS continues to provide information on the **Never Leave Your Child Alone in a Car / Where's the Baby Campaign** (NHTSA & Safe Kids USA)
- CPS Conference Call was held on March 28<sup>th</sup> 2013 - **Safe Transport of Children in Ambulances** which will be archived on the website.
- Conference Calls are archived on the website:  
**<http://www.miemss.org/EMSCwww/CPSHome.htm>**

Maryland **RISK WATCH Champion Team** will again be facilitating interactive displays and training at the 2013 MSFA Convention. These displays will provide both education to children and families and mentored training opportunities to youth on how to conduct child friendly and proven injury prevention programs. A late summer workshop on Risk Watch Natural Disasters is being planned. This year's displays include: *In an Emergency—Dial 9-1-1 (Cecil Co. DES, Get Out & Stay Out: Fire Safety (MSFA), Is it Hot? Or Not? Play it Safe (MSFA), Is it Safe? Poison Prevention (MPC & JHCC), Play Safe—Be Safe (Safe Kids MD), Disasters Happen, Are You Ready? (Silver Spring VFD), Ride Safe—Be Safe (American Trauma Society & PRMC)*

The **Safe Kids Maryland Coalition** has met quarterly for the past 20 years jointly with the Occupant Protection Task Force. During 2011 and 2012 the meetings rotated around the state to reach as many of the local chapters and coalitions as possible. Meetings, agendas and minutes are posted on the expanded website along with state and national resources for injury prevention – **[www.safekidsmd.org](http://www.safekidsmd.org)**. In FFY 2013, Safe Kids Maryland Coalition meeting will be held at MIEMSS and will provide conference/ Go To Meeting access. The next Safe Kids Maryland meeting for 2013 will be held at MIEMSS on **Monday September 9<sup>th</sup> 2013** with Go To Meeting and conference call line available. Please contact the Maryland Safe Kids coalition through the EMSC Office 410-706-1758. Safe Kids Buckle Up FY 2013 grant continues with the support of the Safe Kids chapters in Cecil, Garrett, Queen Anne's and Saint Mary's counties and partnerships with Maryland Kids in Safety Seat program.

**Public Access AED Program.** Currently, there are a total of 4,195 active AED Program sites in Maryland. A list of approved programs and their status (active or expired) is updated monthly and available on the MIEMSS website at **<http://www.miemss.org>**. AED information, including application information, is located in the public information tab under "Maryland Public Access Automated External Defibrillator." Facilities whose certificates have expired are not in compliance with Maryland's AED law. Revisions to COMAR 30.06 became effective January 7, 2013. MIEMSS has posted the updated information on the MIEMSS webpage that outlines the changes which are intended to make it easier for organizations to implement public access AED programs. A key point of clarification in the revisions is that AEDs should be placed in locations where they are clearly visible to anyone who is willing to use the AED, regardless of whether the individual has received training or not, recognizing trained individuals may not always be available to respond before EMS arrives.

MIEMSS has contracted with Atrus Inc., to establish a web-based registration process that will provide automated notifications regarding battery and electrode expirations, program renewals, and AED recalls. The program would also allow for the connection to an application called "AED link" that would allow interested jurisdictions to see all the PAD locations within their jurisdiction. More information will be provided as it becomes available.

***Out of Hospital Sudden Cardiac Arrest Steering Committee.*** In 1999, the AED Task Force was created to provide guidance on layperson AED legislation that allowed non health care facilities that wished to place AEDs on their premises to do so to decrease time to defibrillation for individuals suffering from sudden cardiac arrest. Since that time, treatment for out of hospital sudden cardiac arrest has evolved in both the layperson and pre-hospital arenas. MIEMSS has worked to create an out of hospital sudden cardiac arrest steering committee to address multiple components including 9-1-1 dispatch, pre-hospital provider treatment, community response, and data collection and reporting. The committee is meeting at MIEMSS on a monthly basis. Subcommittees have been created to focus on the EMD, EMS, and Layperson components. Individuals interested in participating on a committee should contact Lisa Myers at MIEMSS.

***Cardiac Interventional Centers (CICs).*** Because many sudden cardiac arrest patients require intervention in the cardiac catheterization lab, EMS protocols were revised and became effective July 1, 2012 to direct EMS providers to begin therapeutic hypothermia when patients meet certain criteria and transport patients to hospitals that can provide continued cooling. Ideally, those patients would go to a CIC if possible. All 23 CICs have reported the ability to provide therapeutic hypothermia.

MIEMSS and MHCC have begun obtaining data from the Cardiac Interventional Centers. The upload of all required data has occurred and is in the process of being analyzed for completeness. Additionally, to the extent possible, data is being collected from transferring hospitals (non-CICs) and EMS providers by the Cardiac Interventional Centers and reported to the regional STEMI committees. Re-verification of the Maryland CIC designations is scheduled to occur in 2014.

***STEMI Systems of Care in Maryland.*** As MIEMSS continues to work with stakeholders on the development of a STEMI System of Care in Maryland, efforts will be made to improve the collection of data necessary to support quality improvement initiatives with hospitals and the Maryland Health Care Commission. It is important to continue to work to coordinate these efforts across the State and amongst key stakeholders and organizations. MIEMSS and MHCC are working together to obtain data from the hospitals and the cardiac data registries. Recently, the CICs identified a challenge in obtaining EMS data from eMEDS for patients that are transferred from another hospital. MIEMSS is working to address that issue so that CICs will be able to obtain that data from eMEDS.

Maryland is now registered with the American Heart Association Mission Lifeline as a statewide STEMI system of care which includes access to quarterly reports that compare Maryland's STEMI performance to national data. MIEMSS received the first statewide and certain regional reports in October 2012 and has since obtained direct access to the reports from the National Cardiovascular Data Registry. The reports are confidential and are for use only within the confines of the Regional STEMI Medical Review Committees.

Regional STEMI Committees in all five regions continue to meet regularly to address STEMI system development on a regional basis, taking into consideration region-specific issues which have been incorporated into regional plans for STEMI care. Issues considered for the plans included but were not limited to identifying when direct scene transport to a primary PCI center is appropriate vs. interfacility transfer (e.g., “Hub and Spoke” approach), appropriateness of administration of thrombolytics, modalities of transport, methods of EKG transmission and coronary cath lab activation from the field, data collection and reporting. The finalized plans are available on the MIEMSS webpage. The regional committees will continue to monitor regional specific issues on an ongoing basis and modify plans as necessary. MIEMSS also worked with the hospitals to develop Interhospital Transfer Guidelines for STEMI patients that arrive at non-Cardiac Interventional Centers, which have been finalized and added to the online Interhospital Transfer Guidelines Manual. The Manual is available on the MIEMSS webpage.

***Perinatal Centers.*** Applications for re-designation as a Perinatal Referral Center have been received from GBMC, St. Joseph Medical Center, Sinai, Shady Grove, and Holy Cross. Copies of the applications were forwarded to DHMH for review. Staff from DHMH will accompany MIEMSS and participate in the Perinatal site reviews. GBMC, St. Joseph Medical Center, and Sinai site visits will take place in August and September. Shady Grove and Holy Cross site visits to occur in September and October. All 16 perinatal re-verification site visits will be completed by October 2013. The Perinatal Clinical Advisory Council has voted to adopt the new designation levels. The Council’s focus now is on updating the Standards and defining the definitions in the Standards. Following the adoption of the revised Standards, MIEMSS will revise the COMAR Regulations to align with the revised Standards. Johns Hopkins Bayview Medical Center and Howard County General Perinatal Centers will be presented to the EMS Board in August for 5 year re-designation.

***Base Station Survey and Re-designations.*** All base station site visits for CY 2103 are completed. Five base stations sites were surveyed (Upper Chesapeake, Harford Memorial, Carroll Hospital, Johns Hopkins Hospital Adult and Johns Hospital Pediatric) and all received five (5) year re-designation and will be presented to the EMS Board in August. Site visits with those hospitals identified with high Red/Yellow Alert utilization in CY 2012 are completed. Improvement is noted in both Regions III and V with the Quarter 2 2012-2013 comparisons.

***Primary Stroke Centers (PSCs).*** Five PSC (Howard County; Civista, Calvert Memorial, Shady Grove Adventist, and St. Mary’s Hospital) were due for re-designation in CY 2013. All site visits are completed. Howard County, Shady Grove, and Calvert Memorial approved by the EMS Board in May for 5 year re-designation. Civista and St. Mary’s Hospital were recommended for 5 year re-designation and will be presented to the EMS Board in August for approval. Three (3) PSC are due for re-designation in CY 2014 (Frederick, Northwest, and Union Cecil). The re-designation applications were sent to the PSC Coordinators on July 10, 2013 and are due into MIEMSS by December 4, 2013. Site visits will occur in CY 2014. The subcommittee from the Stroke QIC continues to focus attention on best practices to improve the Statewide door to t-PA times as well as the percentage of patients who receive t-PA. Work continues with Carroll Hospital and Doctors Hospital in preparing them to become a PSC. The Statewide Stroke Conference planning is completed and will be held on Friday November 8, 2013 at Anne Arundel Medical Center-Doordan Health Science Building. The conference is open to all and information on the conference and registration has been sent out via blast emails and flyers.

**Trauma Centers.** Trauma re-designation site surveys are ongoing with seven (7) centers completed. Union Memorial Hand Center survey took place on July 24, 2013. Western Maryland and Sinai are to be surveyed in September, and Children's National Medical Center Burn survey is to take place in October. Ongoing work continues with DI in implementing the final processes for all aspects of the new Trauma Registry.

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## **EMS Continuing Education Programs**

**Please go to the MIEMSS website, [www.miemss.org](http://www.miemss.org)  
for information.**

**Mid-Atlantic Life Safety Conference** – September 24, 2013 - Johns Hopkins Applied Physics Lab

**Peninsula Regional Medical Center - 23rd Annual Trauma Conference Topics in Trauma** - September 27, 2013  
7:15 a.m. - 4:30 p.m. - Clarion Resort and Hotel, Ocean City, MD  
For more information, call 410-912-2844

**25<sup>th</sup> Annual Pyramid Conference** - October 31, 2013 and November 1, 2013 – Pre-conference; Saturday, November 2, 2013 and Sunday, November 3, 2013 - Conference - The Comfort Inn and Conference Center, 4500 Crain Highway, Bowie, Maryland



**REPORT  
of**

**Joseph C. Flanagan  
ACTING STATE FIRE MARSHAL**

**to the**

**Maryland Fire Rescue and Education Training Commission**

**August 21, 2013**

Mr. Chairman, members of the *Maryland Fire Rescue Education and Training Commission* and guests, it is an honor and a privilege to present you with a brief update on the events and activities of the Office of the State Fire Marshal (OSFM) since your last meeting.

- ❖ **OSFM Staffing:** – Currently, the OSFM has five vacant full-time positions, two Fire Safety Inspectors, two Deputy State Fire Marshals and one Deputy Chief State Fire Marshal. Additionally, there are two vacant full-time equivalent contractual positions, a Fire Safety Inspector and a Program Manager.
- ❖ **Fire Deaths:** – As of August 20, 2013, Maryland has recorded 45 fire deaths compared to 30 during the same period in 2012, a 50 percent increase. More information about fire deaths in Maryland can be found at the OSFM website at [www.mdsp.org/firemarshal](http://www.mdsp.org/firemarshal) under the Document Downloads tab on the left side of the page.

**2013 Fire Deaths by Jurisdiction:**

Allegany County - 1	Frederick County – 3
Anne Arundel County – 4	Garrett County – 1
Baltimore City – 13	Howard County - 1
Baltimore County - 3	Montgomery – 1
Carroll County – 2	Prince George’s County – 12
Charles County – 1	St. Mary’s County - 1
Dorchester County – 1	Talbot - 1

- ❖ **MFIRS:** – Several fire departments and/or counties are not submitting MFIRS reports to the OSFM in a timely manner. MFIRS reports for each month should be forwarded to the OSFM by the tenth day of the following month. Please continue to remind all fire departments of the importance of submitting accurate and timely MFIRS reports to the OSFM.
- ❖ **Retirement of SFM William E. Barnard:** – A farewell luncheon was held on July 26, 2013 at the Annapolis Elks Lodge in Edgewater for SFM William E. Barnard (Retired). A grateful crowd of 171 people attended the successful event. *“During my twelve years as State Fire Marshal, it has been a genuine honor and a privilege to serve the citizens of Maryland and work with so many dedicated committed public safety professionals. Working with our public safety partners, we made significant strides in improving upon numerous fire and life safety issues affecting the citizens of Maryland. Over the years, we have all worked tirelessly to protect our citizens from the impact of unwanted fires and explosives incidents and to keep fire deaths on a downward trend, reaching a new historic low 53 in 2012”,* stated Barnard.
- ❖ **New State Fire Marshal:** - The Office of the State Fire Marshal is proud to announce that Colonel Marcus Brown, with the approval of Governor Martin O'Malley, has selected Mr. Brian Geraci as the next State Fire Marshal for Maryland. Mr. Geraci has more than forty years' experience as a fire service professional. He spent over 30 years with the Montgomery County Fire and Rescue Service. He spent 21 of those years in the Office of Fire Marshal prior to his retirement in 2006 as a Battalion Chief, assigned to the county's Homeland Security Department. He finished the last twelve years of his career in Montgomery County as the Assistant Fire Marshal.

## Report of the State Fire Marshal

August 21, 2013

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Upon retirement, Geraci continued his dedication to fire safety and prevention with a transition into the private sector and serving on the Maryland State Fire Prevention Commission. Until 2009, he traveled the nation working private fire investigations for numerous organizations throughout the country. In June 2010, Geraci accepted a position with the Office of Emergency Management in Arlington County, Virginia. Ten months later he transferred to the fire department as the Coordinator for the Bomb Squad Unit. Mr. Geraci will begin his employment with the Office of the State Fire Marshal on September 4, 2013.

- ❖ **Retirement of DCFM Mark Bilger:** - The supervisor for the Metro Regional Office of the State Fire Marshal DCFM Mark Bilger retired after 20 years of service on July 31, 2013. The staff of the Office of the State Fire Marshal wishes him well in his future endeavors. Mark stated he is enjoying tending to his house and garden and is looking forward to spending more time at the Hampstead Volunteer Fire Company.
- ❖ **Mid-Atlantic Life Safety Conference:** – Please mark your calendars and save the date for the 2013 Mid-Atlantic Life Safety Conference, which will be held on Tuesday, September 24, 2013 at the Johns Hopkins Applied Physics Laboratory Kossiakoff Conference Center in Howard County, Maryland. The title for this year’s conference is, “Confronting Today’s Challenges”. Presentations will be based on doing more with less. Downloadable form fill- able brochures are posted on the OSFM and MSFA websites.
- ❖ **Fire and Life Safety Information Exchange Program:** – Updates and resource links are being added to the website on a weekly basis. Melissa Williams of Carroll County and the current Miss Carroll County Fire Prevention Ambassador has assumed the role as the second intern to tackle the requirements involved with the position. Thus far, she has achieved tremendous success with updating the website. As a reminder, the Maryland Fire and Life Safety Information Exchange Program website is: [www.md-lifesafety.org](http://www.md-lifesafety.org).
- ❖ **Sparky’s Wish List:** – Sparky’s Wish List is a partnering program that is part of Fire-Safe Communities nonprofit section of the National Fire Protection Association (NFPA). The program has been extended through 2013. All fire departments are encouraged to create a wish list for fire safety education materials for use during school visits and community events. Sparky's Wish List will allow businesses, community members, and others to purchase wish list items directly from NFPA who will then send the fire prevention materials to your department. Additional information and registration materials may be found at the following website: [www.nfpa.org/SparkysWish List](http://www.nfpa.org/SparkysWishList).
- ❖ **Dover Race Weekend - September 27- 29, 2013:** - Mark your calendars for a fire safety event to be held at the Dover International Raceway in Dover, Delaware. National Fallen Firefighters Foundation (NFFF) will be on location with a hospitality tent again this year, plus a new twist has been added. The Fan Zone is being expanded to promote fire prevention and life safety efforts in a joint venture between the OSFM, MSFA, NFFF, Delaware State Fire Marshal, Delaware Volunteer Firefighter’s Association and the Delaware State Fire School. A 30’ x 30’ tent will be erected on site to provide cover for an interactive youth fire prevention area, Kidde will have a smoke alarm and CO detector display and an informative residential fire sprinkler myth and facts section. The Home Fire Sprinkler Coalition (HFSC) will assist with a side by side burn demonstration to be held on September 28th.

**Report of the State Fire Marshal**

**August 21, 2013**

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- ❖ **US Fire Administration – “Fire is Everyone’s Fight” Initiative:** - The U.S. Fire Administration is moving forward with the “Fire is Everyone’s Fight” action plan. All members of the fire service are being encouraged to begin use of the initiative materials and logos immediately. The graphic and theme have been made available using the: [www.usfa.fema.gov/fireiseveryonesfight](http://www.usfa.fema.gov/fireiseveryonesfight) website. An official kick-off of the campaign will occur on July 11, 2013 in Emmitsburg at the USFA.
  
- ❖ **News Releases:** Please take time to visit the OSFM’s Facebook page to find all of the educational news releases issued by the OSFM. There are at least two educational news releases issued every month. Share the releases on your Facebook pages as well. Like us at: <http://facebook.com/MarylandStateFireMarshal>.

Mr. Chairman, and members of the Commission, this completes my report to you today. As always, it is our pleasure to provide you with this updated information. Thank you for your dedication and hard work in making Maryland a better place to live.

Thank You

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