

**State EMS Advisory Board Meeting
Norfolk Waterside Marriott, Norfolk, Virginia
Wednesday, November 11, 2009
1:00 PM**

Members Present:	Members Absent:	Staff:	Others:
J. David Barrick <i>Peninsulas EMS Council (PEMS)</i>	Michael Crockett (Excused)	Gary R. Brown	Matthew M. Cobb, <i>Office of the Attorney General</i>
Edward B. Bish, Jr. <i>Virginia Association of Volunteer Rescue Squads (VAVRS)</i>	Clarence Monday (Excused) <i>Virginia Municipal League (VML)</i>	George Lindbeck, M.D.	Dr. Mark Levine <i>Virginia Department of Health (VDH)</i>
Asher Brand, M.D. <i>Central Shenandoah EMS Council (CSEMS)</i>	Carol Lee Strickler (Excused) <i>Consumer</i>	Scott Winston	Ed Rhodes <i>VFCA, VAVRS, VAGEMSA, EMS Councils</i>
Jason D. Campbell <i>Blue Ridge EMS Council (BREMS)</i>		Brenda Carroll	Carol Rhodes
Jennie L. Collins <i>Northern Virginia EMS Council (NVEMS)</i>		Amanda Davis	Kim W. Craig <i>SARS</i>
Gary A. Dalton <i>Virginia Association of Volunteer Rescue Squads (VAVRS)</i>		Sherrina Gibson	Donna L. Hurst <i>Augusta Health - SARS</i>
Kevin L. Dillard <i>Rappahannock EMS Council (REMS)</i>		Tom Nevetral	Ray Whatley <i>Alexandria Fire Department</i>
Bruce Edwards <i>Tidewater EMS Council (TEMS)</i>		Karen C. Owens	Melinda Duncan <i>Northern Virginia EMS Council</i>
Steve Ennis <i>Virginia State Firefighters Association</i>		Jim Nogle	Linda Hale <i>Loudoun County</i>
Robin L. Foster, M.D. <i>American Academy of Pediatrics</i>		Christy Saldana	Zeb Lilly <i>Harrisonburg Fire Department</i>
James A. Gray, Jr. <i>Virginia Fire Chief's Association</i>		Tim Perkins	Kenny Greer <i>Miller Coors LLC</i>
L.V. Pokey Harris <i>Southwest Virginia EMS Council (SWVEMS)</i>		Greg Neiman	Wayne S. Peer <i>Rockingham County Fire & Rescue</i>
Linda G. Johnson <i>Thomas Jefferson EMS Council (TJEMS)</i>		Paul Sharpe	Kent Weber <i>Tidewater EMS Council / Virginia Beach EMS</i>
Cheryl L. Lawson, M.D. <i>Virginia Hospital & Healthcare Association</i>		David P. Edwards	Billy Altman <i>Roanoke Fire-EMS</i>

Members Present:	Members Absent:	Staff:	Others:
Ajai Malhotra, M.D. <i>American College of Surgeons</i>		Michael D. Berg	David Hoback <i>Roanoke Fire-EMS</i>
Richard D. McClure <i>Old Dominion EMS Alliance</i>		Dennis Molnar	Karen Wagner <i>VAVRS</i>
Larry A. Oliver <i>Lord Fairfax EMS Council</i>		Warren Short	Randy Abernathy <i>VAGEMSA / Hanover Fire-EMS</i>
William E. Quarles, Jr. <i>Virginia Association of Counties (VAC)</i>		Irene M. Hamilton	Eddie Ferguson <i>Goochland County Fire-Rescue Department</i>
Gary Samuels <i>Virginia Chapter of the International Association of Firefighters</i>			Greg Woods <i>Southwest EMS Council</i>
Dee Dee Soyars <i>Virginia Emergency Nurses Association / Virginia Nurses Association</i>			Heidi Hooker <i>Old Dominion EMS Council</i>
Matthew Tatum <i>Virginia Association of Governmental EMS Administrators (VAGEMSA)</i>			Wayne Woo <i>Old Dominion EMS Council</i>
John Dale Wagoner <i>Western Virginia EMS Council (WVEMS)</i>			Mike Harmon <i>Chesterfield Fire / EMS</i>
Scott Weir, M.D. <i>Virginia College of Emergency Physicians</i>			E. L. Senter <i>Chesterfield Fire & EMS</i>
Anthony D. Wilson <i>Virginia Ambulance Association (VAA)</i>			Jo Richmond <i>Peninsulas EMS Council / WDC</i>
Allen Yee, M.D., FAAEM <i>Medical Society of Virginia</i>			Carol Beazley <i>Tappahannock-Essex Fire & EMS</i>
			Mary Kathryn Allan <i>Blue Ridge EMS Council</i>
			John Boatwright <i>Chesterfield Fire & EMS</i>
			Brian Kemp <i>Lord Fairfax EMS Council</i>
			Jeff Beasley <i>Westmoreland Emergency Services</i>
			Scott Hudson <i>Lancaster County EMS / PEMS</i>

Members Present:**Members Absent:****Staff:****Others:**

Jerry D. Andrews
Peninsulas EMS Council

Jeffrey Meyer
Peninsulas EMS Council

Michael Player
*Peninsulas EMS Council / York County
 Fire & Life Safety*

Julia Glover
*Peninsulas EMS Council / Abingdon Vol.
 Fire & Rescue*

Byron Andrews
Sterling Rescue

Mike Cox
Henrico Fire

Jeffrey Reynolds
Patrick Henry Community College

Howard Genderson
Pfizer

Thomas Jarman
Prince William County Fire & Rescue

Robin Davis
Sterling Rescue

Connie Purvis
Blue Ridge EMS Council

Rob Logan
Western Virginia EMS Council

Jim Chandler
Tidewater EMS Council

David E. Cullen, Jr.
Central Shenandoah EMS Council

Topic/Subject	Discussion	Recommendations, Action/Follow-up; Responsible Person
<p>Call to Order – Jennie Collins</p> <p>Approval of Minutes</p> <p>Approval of Meeting Agenda</p>	<p>Ms. Collins called the meeting to order.</p> <p>Ms. Collins asked for a motion to approve the minutes from August 7, 2009.</p> <p>Ms. Collins called for a motion to approve the meeting agenda.</p>	<p>Motion was made and seconded to approve the minutes from August. The Board voted to approve the August minutes.</p> <p>A motion was made and seconded to approve the meeting agenda. The Board voted to approve the</p>

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	<p>Ms. Collins welcomed everyone to the 30th Annual EMS Symposium. She asked the Board members to introduce themselves to the audience.</p>	<p>meeting agenda.</p>
<p>Chair Report – Jennie Collins</p>	<p><u>Executive Committee Meeting</u> – Ms. Collins reported on an Executive Committee meeting on September 14.</p> <p>Bruce Edwards the newly appointed representative on the Board of Health, representing EMS, attended the meeting as an Ad Hoc member.</p> <p>At that meeting they developed a template for the Board of Health report. The committee also reviewed the PAC recommendations to ensure that any outstanding work items needing to go to committees were covered.</p> <p>The Executive Committee also discussed some motions brought forth at the last EMS Advisory Board meeting that the Board asked the Executive Committee to review. These included the Statewide Trauma Triage Plan and the Statewide Guidelines Task Groups that were suggested. The Executive Committee got some legal advice from Matt Cobb, from the Office of the Attorney General.</p> <ol style="list-style-type: none"> 1. The Statewide Trauma Triage Plan is already in force and is going through review with the appropriate committees currently. Future Board items will be forthcoming. 2. The Executive Committee also reviewed the membership on the Statewide Guidelines and Statewide Formulary task groups. 3. The Executive Committee approved an unanimous motion agreeing that the two workgroups would continue to work under Dr. Lindbeck, the State EMS Medical Director and that as their tasks are completed the information will be reported to the Medical Direction Committee. The Executive Committee also agreed that if any other committees need to coordinate on any of the activities they would also come through the Board. <p><u>Board of Health Meeting</u>- Ms. Collins reported that she attended the Board of Health meeting and made a presentation on October 23. Ms. Collins said she covered five items with the Board of Health.</p> <ol style="list-style-type: none"> 1. EMS was under the process to update the Statewide EMS Plan. 2. The status of the Rules and Regulations that are in the Governor’s office waiting to be signed. 3. The budget situation and the concerns of the EMS system in regards to the budget cuts. 4. The EMS Symposium; she gave the Board of Health an overview of the importance of the Symposium to our providers. 5. Gary Critzer reported to the Board of Health regarding the PAT report. 	

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1 st Vice Chair Report –	Currently there is no 1 st Vice Chair and therefore there is no report.	
2 nd Vice Chair Report = Pokey Harris	Ms. Harris reported that she is continuing to work with the committees in regards to the alignment with the EMS State Plan. This needs to be done by May 2010 for review by the Board and go for recommendation by October 2010.	
Deputy Commissioner of Emergency Preparedness & Response – Mark Levine, M.D., MPH	<p>Dr. Levine conveyed greetings from Dr. Remley. He encouraged attendees to attend Dr. Remley’s briefing on Friday.</p> <p>Dr. Levine gave the Board an update regarding H1N1. He reported that they have entered a plateau with H1N1 in this second wave. However, Dr. Levine cautioned that it does come in waves, and we should not take for granted that we won’t have another outbreak.</p> <p>Dr. Levine gave an update on vaccine availability and encouraged the EMS providers to get vaccinated.</p>	
Office of EMS Report – Gary Brown and Staff	<p>Mr. Brown welcomed everyone to the Symposium and reported that they have approximately 1800 registrants and 1100 people scheduled to attend the Awards Banquet. The winners of the 10 Governor’s Awards categories and the scholarship winner will be announced at the banquet. Mr. Brown stated that each attendee has a possibility of earning up to 27 hours of continuing education.</p> <p>Mr. Brown welcomed Dr. Scott Weir. Dr. Weir is replacing Dr. Carl Wentzel on the Board.</p> <p>Mr. Brown announced that the EMS budget had been reduced by another \$1 million dollars in another round of budget reductions since the August meeting. This reduction will be spread throughout the five percentages of the four-for-life funds.</p> <p><u>2010 EMS Advisory Board Meeting Dates:</u> Mr. Brown announced the proposed dates for the 2010 Advisory Board meeting: February 12; May 14; August 13; and November 10. The meetings are scheduled to be held at the new Technology Park conference room to reduce costs.</p> <p><u>H1N1 Update – Karen Owens</u> Ms. Owens reported that she is serving as the Office of EMS H1N1 Coordinator. Ms. Owens reported that they have received federal funding to support EMS providers in fit testing and PPE.</p> <ol style="list-style-type: none"> 1. The Office of EMS has 50,000 surgical gowns that will be distributed to EMS agencies. 2. The Office also is receiving 24 fit test kits and enough fit test solution and sensitivity solution to support the fit testing of 45,000 EMS providers and firefighters throughout the Commonwealth. 3. Regional Councils will also receive these supplies for agencies that do not have PPE fit testing for N95 masks. 4. The Office of EMS will also receive 50,000 safety glasses that will be distributed to EMS agencies for their responders. 	

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	<p>The Surgical Mask grant that was sent out last quarter was modified upon the Institute of Medicine’s recommendation in support of the N95 masks. Anyone who received these grants can purchase N95 masks with that money.</p> <p>The Department of Health released a portion of the Strategic National Stockpile Inventory and that was shipped to EMS agencies across the Commonwealth. The inventory included N95 and Surgical Masks.</p> <p>Chief James Gray referenced Dr. Remley’s letter of November 4 regarding the training of EMS providers to be vaccinators and requiring a declaration from the Governor. Ms. Owens said that a training class has also been developed for EMS providers in case a declaration does come forth from the Governor. Chief. Gray asked how extensive the training class is and if it is possible to start the training process now.</p> <p>Dr. Lindbeck said that they have developed a tool kit for EMS providers and EMS leadership to put together a vaccination program. The mechanics of giving the vaccine is not a big deal for EMS providers it is mostly the organizational and administrative issues that they need to be aware of.</p> <p>Ms. Owens said that they have a checklist and a guide sheet if the declaration is made. They do not plan to do any pre-education at this point.</p> <p>Dee Dee Soyars asked if there is any funding for hand sanitizers. Ms. Owens said there was none.</p> <p><u>EMS Registry Update and Special Training Being Offered at the Symposium– Paul Sharpe</u></p> <p>Mr. Sharpe reported that the entire program has been set up. The field version, called Field Bridge, is not mandatory. The PPDR system replacement is called the State Bridge, and it is a web-based tool. Mr. Sharpe reported that the system includes a lot of QA tools and a lot of reporting functions; and it also includes standard reports, as well as the ability to write reports.</p> <p>The program is currently being piloted in the Danville area. They are ready to start training and implementation.</p> <p>Mr. Sharpe said that they are working with Northrop Grumman, who provides the hardware and the environment for the system, to move it over to the state server. They will be sending out implementation packages to the agencies with instructions and plan to begin implementation in January.</p> <p>Image Trend is at the Symposium and will be providing training. Invitations will be sent out to agencies inviting them to training in their area. Ms. Collins said she would like for all Board members to get the training and would like to get some training scheduled for them before their</p>	

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	<p>next meeting.</p> <p>Scott Winston – Mr. Winston welcomed everyone to Symposium. He told them that OEMS staff will be wearing color coordinated shirts each day of Symposium; and are available to help them with questions.</p>	
EMS Medical Director – George Lindbeck, M.D.	<p>Dr. Lindbeck reported that the work groups have been constituted. Rosters have been presented to the Executive Committee and will be posted on the OEMS web site. The next meetings of each group will be early next year. They have an inquiry in about doing a virtual meeting option. They are still waiting on a reply to their request.</p>	
Office of Attorney General Report – Matt Cobb	<p>No report.</p>	
Nominating Committee – Anthony Wilson	<p>Mr. Wilson reported that the Nominating Committee met and agreed on a slate of officers. Mr. Wilson read that report and advised the Board of other members who expressed interest in certain chair positions.</p> <p><u>Proposed Slate of Officers:</u> Chair – Jennie Collins; 1st Vice Chair – Pokey Harris; 2nd Vice Chair – Jason Campbell; Awards Committee – Kevin Dillard; Communications Committee – Pokey Harris; CISM Committee – Dee Dee Soyars; EMS Emergency Management Committee – Bubby Bish; EMS for Children – Dr. Robin Foster; Workforce Development Committee – Chief James Gray; Finance, Legislation and Planning Committee – Gary Dalton; Medevac Committee – Dr. Allen Yee; Medical Direction Committee – Dr. Asher Brand; Nominating Committee – Anthony Wilson; Professional Development Committee – Larry Oliver; Regulation and Policy Committee – Carol Lee Fischer-Strickler; Transportation Committee – David Barrick; Trauma Committee – Dr. A. J. Malhotra</p> <p>People who were either nominated or expressed interest in positions were- Medevac Committee – Carol Lee Fischer-Strickler; and 2nd Vice Chair – Larry Oliver and Gary Dalton</p> <p>Ms. Collins explained the process for voting on the slate of officers and said that they would also accept nominations from the floor.</p> <p>Chair – Jennie Collins. There were no nominations from the floor.</p> <p>1st Vice Chair – Pokey Harris. There were no nominations from the floor.</p> <p>2nd Vice Chair - Jason Campbell. Bubby Bish nominated Gary Dalton. The Board voted on Jason Campbell and Gary Dalton for 2nd Vice Chair. After the vote, Gary Dalton received the nomination for the position of 2nd Vice Chair.</p> <p>Awards Committee – Kevin Dillard. There were no nominations from the floor.</p>	

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	<p>Communications Committee – Pokey Harris. There were no nominations from the floor.</p> <p>CISM – Dee Dee Soyars. There were no nominations from the floor.</p> <p>EMS Emergency Management Committee – Bubby Bish. There were no nominations from the floor.</p> <p>EMS for Children – Dr. Robin Foster. There were no nominations from the floor.</p> <p>Workforce Development Committee – Chief James Gray. There were no nominations from the floor.</p> <p>Finance, Legislation and Planning Committee – Gary Dalton. There were no nominations from the floor.</p> <p>Medevac Committee – Dr. Allen Yee. David Barrick nominated Carol Lee Strickler. The Board voted on Dr. Allen Yee and Carol Lee Strickler for Medevac Committee Chair, and the vote resulted in a tie.</p> <p>There was discussion on how to handle a tie based on Robert’s Rules. Carol Lee Strickler was not in attendance at the meeting and some board members also felt that it should wait until the next meeting for this reason. However, another board member arrived, and another vote was taken. After the vote, Dr. Allen Yee received the nomination for Medevac Committee Chair.</p> <p>Medical Direction Committee – Dr. Asher Brand. There were no nominations from the floor.</p> <p>Nominating Committee Chair – Anthony Wilson. There were no nominations from the floor.</p> <p>Professional Development Committee – Larry Oliver. There were no nominations from the floor.</p> <p>Regulation & Policy Committee – Carol Lee Strickler. Gary Samuels was nominated from the floor by Jason Campbell. After the vote, Gary Samuels was nominated.</p> <p>Transportation Committee – David Barrick. There were no nominations from the floor.</p> <p>Trauma System Oversight and Management Committee – Dr. Ajai Malhotra. There were no nominations from the floor.</p> <p>Nominating Committee Members - Ms. Collins explained that the board members have to select two members of the Nominating Committee. Ms. Collins clarified that two members of the Nominating Committee are elected by the Board and three are selected by the Chair. Currently,</p>	

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	<p>Anthony Wilson is serving on the committee elected by the Board. The other position was held by Byron Andrews but he has rotated off the Board and the board members need to select another member of the board to serve on the Nominating Committee.</p> <p>Dr. Scott Weir and William Quarles were nominated from the floor. The board members voted and Mr. William Quarles was nominated.</p> <p>Ms. Collins asked for a motion to accept the slate of officers.</p>	<p>A motion was made and properly seconded to accept the Slate of Officers as presented.</p> <p>Slate of Officers: Chair – Jennie Collins 1st Vice Chair – Pokey Harris 2nd Vice Chair – Gary Dalton Awards Committee – Kevin Dillard Communications Committee – Pokey Harris CISM Committee – Dee Dee Soyars EMS Emergency Management Committee – Bubby Bish EMS for Children – Dr. Robin Foster Workforce Development Committee – Chief James Gray Finance, Legislation and Planning Committee – Gary Dalton Medevac Committee – Dr. Allen Yee Medical Direction Committee – Dr. Asher Brand Nominating Committee – Anthony Wilson Professional Development Committee – Larry Oliver Regulation and Policy Committee – Gary Samuels Transportation Committee – David Barrick Trauma Committee – Dr. A. J. Malhotra</p> <p>YEAS = 25; NAYS = 0; Abstentions = 0</p> <p>The motion was carried unanimously.</p>
<p>Bylaws Subcommittee Report – Bruce Edwards</p>	<p>Bruce Edwards explained the process being used by the committee as they work to develop new Bylaws.</p> <p>The committee members are Asher Brand, Gary Dalton, Carol Lee Strickler, Jason Campbell and Bruce Edwards.</p> <p>The committee, along with Jennie Collins, met a few weeks ago at OEMS. They decided on a concept of joining the committees into a focus area to allow easier communications between committees. From their discussions, they developed a proposed committee restructuring which they have brought today for feedback from the board members.</p>	

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	<p>Mr. Edwards explained the proposed committee restructuring. Ms. Collins explained that some of the committee titles may have changed but she cautioned members not to be concerned with titles. Ms. Collins explained that they are trying to group functionality with the coordinator positions. The coordinators will help to work out committee issues prior to bringing them to the Board for action. Ms. Collins explained that there are still a lot of details to work out but the committee wants to make sure that the board is in agreement with the concept before they work on more details.</p> <p>Ms. Collins said if the Board is agreeable the committee will further define the restructuring. Ms. Collins explained that this is where the new mission statements from the committees will come into play. They want to assure that this is matched with the strategic objectives in the State Plan and that they are moving towards a very organized structure and function in collaboration for the state level activities.</p> <p>Ms. Collins asked for comments from the Board. Mr. Quarles asked if this concept inconsistent with other state structures that have boards that operate similar to Virginia. Mr. Ennis wanted to find out if the decision making would be left to the Executive Committee and the Coordinators and limit the full Board’s knowledge on some issues. Ms. Collins said that the Executive Committee is not meant to be a stopping point or take over the decision making of the full board. The Executive Committee’s position is to assure that the information is coordinated among the groups and is depicted when it comes forward to the Board. Mr. Edwards also said that the only entity that has any authority in the Code of Virginia is the EMS Advisory Board.</p> <p>Dr. Foster expressed some concern for where EMS for Children falls in the restructuring. Dr. Foster said that she is a little concerned because EMSC has two different roles, one is education and the other is prevention; but it also needs to be a very well structured system to address the needs of critically ill children. This leads to things such as staffing and equipment needs. Dr. Foster said that she thinks that EMSC could fall under System Oversight. Ms. Collins acknowledged that the Bylaws Committee had discussed in more detail where EMSC belonged due to its mission.</p> <p>Dr. Brand said that their discussions during the meeting reflected his understanding that the information would not funnel through the Executive Committee so much as the Executive Committee would serve as a place to share the ideas about what is happening across the five sub categories. Dr. Brand said that he just wanted to make clear and confirm his understanding that the chart (handed out at the meeting) is simply organizational and it doesn’t reflect obstructions to flow of information.</p> <p>Ms. Collins said that since she is not hearing any objections to the concept, she will ask the Bylaws Committee to continue on with their work.</p>	<p>Mr. Edwards asked members to send him an email with any suggestions of items that should be included in the Bylaws</p>
<p>Review of the Annual Financial Report of the Virginia Association</p>	<p>Mr. Dalton said that VAVRS did submit the report to the Office of EMS but it wasn’t included in the Quarterly Report. Ms. Collins said that the Office did receive the information and it will be</p>	

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of Volunteer Rescue Squads – VAVRS Representative	included in the agenda for the next meeting.	
Board of Health Report – Bruce Edwards	<p>Mr. Edwards attended his first Board of Health meeting. Mr. Edwards said he attended an Orientation meeting the day before the Board of Health meeting, and he was impressed with the work performed by the Department of Health. Mr. Edwards said the board members were extremely receptive to having an EMS representative on the board. He said that Jennie Collins and Gary Critzer both made outstanding presentations to the Board.</p> <p>Mr. Edwards informed the Board that he has become aware that the Code of Virginia FOIA regulations applies to committee and subcommittee meetings and that it also prohibits teleconferencing open meetings. Mr. Edwards raised the issue at the Board of Health regarding this issue. Mr. Edwards brought forth a recommendation to the Board of Health asking them to look into getting that regulation changed. The Board of Health members supported his recommendation. As a result, the Chair of the Board of the Health and the Commissioner are going to compose a letter to the Governor asking if they can change that requirement, especially since there is now an emphasis on “going green” and finding budgetary savings.</p> <p>Matt Cobb clarified that it is not an outright ban to those type of meetings but what it requires is a quorum physically present in one location and then anyone else who is calling in by conference call, wherever they are calling from has to be open to the public, as well; even if they are calling from their home.</p> <p>Mr. Cobb also said that when Mr. Edwards asked board members to email him their comments on the proposed structure for the committees that they need to email their comments individually to Mr. Edwards; but if they copy the entire Board they would be violating FOIA.</p>	
Awards Selection Committee – Beth Singer	Ms. Singer reported that the award winners will be announced on Saturday at the Annual Banquet.	
Communications Committee – Pokey Harris	<p>Ms. Harris reported that the committee has been very active. One of their priorities is utilization of EMD across the Commonwealth. At the last meeting she distributed a map for utilization of EMD across the Commonwealth. The committee will be working towards this, and she hopes to update the map periodically and distribute it.</p> <p>Ms. Harris reported that the committee has been working with Mike Berg on issues regarding EMS Communications regulations. At their meeting on Thursday, they will have dialogue and a presentation from Virginia Department of Emergency Management staff.</p> <p>Ms. Harris reported that the START Triage program was presented at the recent APCO/NENA Interoperability Conference, and they were able to offer CE. It was well received, and they look forward to doing this at other conferences and venues.</p> <p>Ms. Harris reported that she is still working on the Virginia Communications Index for Public Safety of VCIPS, the database for communications type grants. Amanda Davis from the Office of</p>	

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	<p>EMS is very actively involved with this project, and they are both committed to seeing this project to fruition. Their hope is that this database will not only provide a resource for where the dollars are but also verify that there is not monies available; thus forcing the localities to “step up to the plate” and look at budgeting money for communications and find other ways to provide the necessary funding. Ms. Harris said that this will be a long term project.</p>	
<p>CISM Committee –Dee Dee Soyars</p>	<p>Ms. Soyars reported that the committee has been working on objective-based curriculum approval. Committee members are gathering different objectives from various other training curricula, reviewing them and determining which objectives they will use for training standards for Virginia. They are looking at training programs offered throughout the Commonwealth, whether they are related to the International CISM Foundation or other methods, to determine if they will meet approved standards. The committee has also been looking at the accreditation process for whether there is a team application process for deployment of teams.</p> <p>Ms. Soyars said that there is a full day of CISM training being offered tomorrow at the Symposium; and they are also looking at courses for 2010, individual and group three-day type courses on psychological first aid, suicide prevention from trauma to addiction are some of the topics.</p>	
<p>EMS Emergency Management Committee – Bubby Bish</p>	<p>Mr. Bish reported that since the last meeting they lost a member Terry Hebert from the Virginia Department of Emergency Management. Mr. Bish said that Mr. Hebert was a dedicated and hard working member of the committee and he will be missed.</p> <p>Karen Owens has been appointed as the OEMS representative for the H1N1 Coordinator. She is working with EP&R and the H1N1 Office of the Virginia Department of Health.</p> <p>Mr. Bish also reported that the Emergency Operations Division has started working with the representatives for the Boy Scouts Jamboree for 2010.</p> <p>Mr. Bish said that they are still reviewing their committee list to make sure that everyone is adequately represented.</p>	

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<p>Emergency Medical Services for Children – Robin L. Foster, M.D.</p>	<p>The committee last met in October. They have changed the format of their meetings and the representatives submit their reports ahead of time. They had a video presentation from the Attorney General’s office on gang violence. They are working on how to use this information with an educator to do more gang violence awareness and education for EMS providers.</p> <p>The HRSA grant for funding for 2010 – 2012 will be due by the end of the calendar year and the grant year would start March 1, 2010.</p> <p>Dr. Foster also reported that new Pediatric Emergency Department Guidelines can be accessed via a link on the OEMS website and on the American Academy of Pediatrics website. This is an 11 page document that was published in October; it is a how to guide for pediatric care. The document is very detailed and it targets both clinical and administrative people within the hospital. It is a how to guide of how to develop pediatric expertise in those emergency departments for pediatric care.</p>	
<p>EMS Workforce Development Committee – Chief James Gray</p>	<p>Chief Gray said that their report is included in the Quarterly Report.</p> <p>He said that their two subcommittees, Standards of Excellence and Leadership and Management, continue to work on their projects, the Agency Standards of Excellence, agency accreditation; and the EMS Officer Curriculum for EMS Officers 1-4. The Standards of Excellence subcommittee has been making presentations to various associations to get feedback.</p> <p>Chief Gray said that the committee will be presenting the Agency Accreditation Standards project as well as Leadership and Management on Friday night at the Symposium.</p> <p>The next meeting is scheduled on January 13 in Glen Allen. Chief Gray said that they are still recruiting new members of the committee. Individuals interested in joining the committee should see Chief Gray.</p> <p>Ms. Collins tasked the committee to research having a job fair during the Symposium. Ms. Collins said it would be something where people would bring their resumes and have face time with different agencies. The focus will be on educational institutions looking for instructors, hospital programs and pre-hospital programs.</p>	<p>Please contact Chief Gray if you would like to join the Workforce Development Committee.</p> <p>Ms. Collins asked that the Workforce Development Committee work on developing a job fair that will be held in conjunction with the Symposium. Chief Gray said that he accepts the task on behalf of the Workforce Development Committee.</p>

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Finance, Legislation and Planning – Gary Dalton	Mr. Dalton reported that the committee had not met since the last meeting but would meet on Wednesday night. Mr. Dalton said that several of the members attended the Legislative summit that was held on October 16 that was hosted by the Department of Fire Programs and the Virginia Fire Services Council. Most of the meeting was about financial issues.	
Financial Assistance Review Committee – Wayne Peer	<p>Mr. Peer explained to the Board that they will have nominations at their meeting on Thursday at 1PM for the committee chair position.</p> <p>They are in the process of grading grants at the moment. They have 117 applications, approximately \$6.67 million in requests. Mr. Peer said that this is down significantly from the past.</p> <p>The committee will be meeting on December 4 to make the final recommendations to the Commissioner for those grants to be awarded.</p> <p>Mr. Peer referred the committee to the Quarterly Report for other committee work.</p>	
Medevac Committee – Bruce Edwards	<p>Mr. Edwards said most of the committees activities can be found in the Quarterly Report. He reported that the committee met earlier in the day and said that they had a lot to report out of their workgroups.</p> <ol style="list-style-type: none"> 1. Weather Safe is now up and running and the reporting is being done by approximately 60 percent of the programs. 2. The Synergy Group, which is the helicopter utilization group, does not have 100 percent buy in by UVA and there are also some issues going on with VCU that they are trying to work through. However, they are going to try to implement the project by the first of the year. <p>Mr. Edwards said that the committee discussed the budgetary issues and the impact of the Virginia State Police has relative to the Four-for-Life funds. He said that this will probably be a topic of discussion over the next several months.</p> <p>Mr. Edwards informed the committee that he would be rotating off the committee; and he reminded them that last January during their Retreat to set up their missions and goals that they wanted to revisit those projects again in January.</p> <p>The next meeting is scheduled on February 11. Mr. Edwards said that he will work with Dr. Yee to assure a good transmission.</p>	
Medical Direction Committee – Asher Brand, MD	<p>Ms. Collins said she asked Dr. Brand in a previous meeting to provide the Board with a presentation on some of the information and data that the Medical Direction Committee used in making their decisions with the medication and procedures schedule, specifically related to pediatric intubation and some of the other issues where there were some changes between intermediates and paramedics.</p> <p>Dr. Brand gave the presentation regarding rapid sequence intubation and issues surrounding</p>	

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	<p>pediatric airways as these were hot topics when they worked on the Procedure guidelines. Dr. Brand explained that the main question with rapid sequence intubation (RSI) is whether it is safe and if it makes a difference what type of provider should do it and what type of training is necessary for it to be considered safe. Dr. Brand's presentations reviewed some of the higher quality studies on this subject. Dr. Brand said that most of studies were done several years ago, and he said that most of the studies show more deaths from prehospital RSI. Some studies also show decreased mortality with RSI when performed by Medevac crews.</p> <p>Dr. Brand said he thinks these studies show:</p> <ol style="list-style-type: none"> 1. That large systems using RSI, and not doing it very often, don't perform as well. 2. That Medevac in severely injured patients improves mortality. <p>Ms. Collins asked since the studies are dated and there have been tremendous advances in the training if the Medical Direction Committee considered this before they made recommendations. Dr. Brand said that the newer studies tend to be smaller but there still was a difference between ground and air Medevac providers.</p> <p>Following his presentations, Dr. Brand took questions from the Board members.</p> <p>Ms. Collins asked how this information is getting pushed down to the local medical director and how does that work in concert with the State Medical Director and the Medical Direction Committee in getting the information distributed.</p> <p>Dr. Brand said he thinks in general across the Commonwealth the regional protocols address these issues and serve as a forum for medical directors to communicate; and that is how he sees this information being disseminated. He said he was going to talk to Mr. Brown because he thinks it would be wise for this committee to recommend that regulations require that agencies post their protocols on perhaps the regional web site so that they e available for all to see.</p> <p>Ms. Collins asked if the expectation of the Medical Direction Committee's membership since adding the Regional Medical Directors and two ad hoc members is clear in communicating what they need to bring back to the regions. She wanted to know if it is an assumption or a clearly stated expectation for the membership. Dr. Brand said that it is an assumption and he thinks that they could improve things by making that an expectation.</p> <p>Dr. Lawson said that as a member of the Committee and the Chairperson of their Regional Council she said that when she gets information it does go out. Ms. Collins said that she just wants to make sure they are consistent with all the regions because that is a big challenge for our state the consistency of that and they just need to make sure coming from the Chair that it is a clear expectation. Ms. Collins said regarding the posting of the protocols that is a contractual obligation within the regional council contracts that those postings are posted from the agencies. Dr. Brand said that he was thinking about requiring the agencies post their protocols and that they might be</p>	

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	<p>different from the Regional Councils protocol.</p> <p>Dr. Brand reported that there was a demonstration project request by Dr. Frank from Fairfax City . He requested a two year pilot project that would allow his EMT Intermediates to perform RSI. He made the case that they have a very vigorous training program including high quality mannequins and a lot of education aimed at tube placement and felt that his system was safe to permit Intermediates to continue RSI. The MDC voted to approve that 8-3</p> <p>Dr. George Lindbeck said it is important to note that it is not actually a pilot project; it has been running for 10 years and they were not able to get any data about the past experience with the program. He said there was very little specific data or information given about how the program was actually conducted and it does involve children.</p> <p>Dr. Brand said that as requested by the Board they discussed the Trauma Triage Plan and came up with some suggestions to bring back to the Trauma Oversight Committee. Dr. Brand said that he will go to one of their meetings and discuss proposed changes.</p> <p>There were two action items one from Dr. Yee to remove the word vaccine from the Scope of Practice document to eliminate confusion. Dr. Yee explained his request. Dr. Yee explained that the Scope of Practice document allowed EMS providers to give vaccine but under current regulations they are not allowed to give them so to remove it out of the Scope of Practice will eliminate any confusion. Ms. Collins asked if they are requested to remove it from the Medication Schedule or the Procedure Schedule. Dr. Yee said that it is actually in both.</p> <p>Chief Gray asked if they remove that language from the current Scope of Practice if that would preclude EMS providers from giving vaccine if the Governor declares a state of emergency.</p> <p>Matt Cobb said that if you take it out of the schedules and the prerequisites in the statute are met then EMS providers can give vaccine.</p> <p>Dr. Brand reported that the committee came to a resolution on the Statewide Guidelines and the State Task Force. He said the Medical Direction Committee, with the understanding that the guidelines developed by the work group would come through the Governor’s Advisory Board and the Medical Direction Committee for approval, voted to support the process with the understanding that the result would serve as a baseline or minimums document.</p> <p>Ms Collins opened the floor for discussion.</p> <p>Ms. Collins commented that the Executive Committee of the Advisory Board met on this topic. She said that what these guidelines are defined as or the enforcement of it is part of the work of the group that is yet to be performed.</p>	<p>MOTION: The Medical Direction Committee requests to remove any language in the Medication and the Procedure Schedules related to the prehospital administration of vaccine.</p> <p>YEAS = 23; NAYS = 2 (Chief Gray and Dr. Malhotra); ABSTENTIONS = 0 The motion was carried.</p>

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	<p>Ms. Collins asked if the committee is asking to put a constraint on it before they start working on it.</p> <p>Dr. Brand said that the jest of the discussion was that Medical Direction Committee who before the meeting had been opposed to the creation of the task force, in light of the productive Executive Committee meeting, felt that they would be able to support the work group. Dr. Brand said that it was not his understanding that the work group would decide the position of the document or whether the product would come through MDC or GAB. Ms. Collins said the motion that was unanimous within the Executive Committee was that the work group would form and work on all the issues associated with content and process and the work group product would be funneled to the Advisory Board coming through the Medical Direction Committee; and other committees that would weigh in on some of those related decisions.</p> <p>The Chair opened the floor for discussion. Several members asked questions to get a clearer understanding of what the motion was actually saying.</p> <p>Dr. Yee offered clarification of the motion. Dr. Yee said that the regional medical directors wanted to support the workgroup but being responsible wanted to develop a baseline platform for which medical directors could build on. Therefore, they wanted to offer some direction to the workgroup. Everyone at the meeting agreed on the fundamental necessities on patient care items.</p> <p>Matt Cobb commented on the motion. He said that it is confusing because this is an Advisory Board. He said that the work group that is going to be set up is within the Office of EMS and not the Advisory Board. Mr. Cobb said that the Advisory Board cannot constrain the work of the Office of EMS. When the Office of EMS develops it, they will bring it to the Board and at that time the Advisory Board can comment and move forward. Mr. Cobb said that he is hearing a motion from the Advisory Board trying to go beyond advising and constrain a workgroup within the office. Mr. Cobb said that they do not have the authority to do that.</p> <p>Dr. Brand said the committee understands this, and this is basically a motion to endorse and support the workgroup with the understanding that its product will be a set of minimums. He said that they fully understand that they cannot control what the Office of EMS does with its own workgroup but that they are recommending that the GAB give their endorsement based on that condition.</p> <p>Ms. Collins said from the Executive Committee the motion was made to accept the membership of the two workgroups and when their tasks are completed they are presented to the MDC and other committees for suggested changes and are then forwarded to the GAB for approval. Ms. Collins said that the MDC will have the opportunity when the work product is completed and it comes to them for their input to evaluate and make recommendations.</p> <p>Dr. Brand said they are not constrained from endorsing something; but they have no enforcement</p>	<p>MOTION: Dr. Yee made a motion to have the statewide patient care guideline workgroup create a document of patient care guidelines. Medical Direction Committee is in support of this document as a platform for minimum guidelines.</p>

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	<p>authority or can't constrain the product. They can suggest to the Office of EMS that the product is constrained to a set of minimums. At the last meeting there was a motion that recommended that the GAB not endorse the idea of the Office of EMS creating a task force. At the end of the meeting they were charged with coming up with a compromise or resolution. This is MDC concept of how they might come to resolution with the issue. Dr. Brand said speaking for the group, the group has a great deal of concern about the concept of binding statewide guidelines and they want to make it clear that the MDC, and he believes at the last meeting that at least during one of the motions, the GAB in general, had a lot of concern about binding statewide protocols. They would hope that the GAB would agree with MDC that they should recommend to the task force that its product be a minimum guideline.</p> <p>Mr. Edwards asked if the motion could be rephrased so that it would read that the Advisory Board would like for the workgroup to consider starting with minimums.</p> <p>Dr. Weir said he feels it is not unreasonable to define an assignment to a workgroup and he feels that the request to the GAB to articulate the recommendation that the workgroup work's assignment be focused on establishing patient care minimums is not unreasonable as a starting point.</p> <p>Matt Cobb clarified that the Board does not have the authority to define the assignment of a workgroup within the Office of EMS. Dr. Weir then asked if the Board does not have the authority to request that the workgroup be given an assignment that is narrowly defined to focus on patient care minimums. Mr. Cobb said that they don't have the authority to define the assignment of an Office of EMS workgroup. You can say that you would like to Office to look at something but it carries no weight, it is advisory. Mr. Cobb further explained that legally this is an Advisory Board. The Board's role is after an item comes to this Board after the Office of EMS works on it to review it and advise the Board of Health on that product. Mr. Cobb said that everyone says they understand that this is an Advisory Board but they keep using terms like "define," "set a minimum standard," "define what the workgroup is going to look at." Mr. Cobb said he hates to keep coming to the meeting and telling them that they are advisory but they are. He said their advice on this issue will come when it comes before the board. Mr. Cobb said that they can take a vote and say to the Office that they would like the workgroup to look at minimum standards; and that is okay.</p> <p>Ms. Collins said that she thinks that is what Bruce Edwards was suggesting is that it be rephrased in a more positive manner. Dr. Brand said that the Medical Direction Committee never thought that they had any authority to control what the workgroup does and he said that he hopes his terms did not imply otherwise. Dr. Brand said that he does feel as an Advisory Board appointed to advise on matters of EMS has a duty to give feedback to the Office regarding what this workgroup might do.</p>	<p>MOTION: Allen Yee made a motion to have the Statewide Patient Care Guideline work group create a document of patient care guidelines. Medical Direction is in support of this document as a platform for minimum guidelines.</p> <p>The Governor's Advisory Board support statewide patient care guidelines work group that would develop a document of patient care guidelines and find this document as a platform for minimum guidelines.</p>

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	Ms. Collins asked that the motion be restated and the vote taken.	<p>MOTION: The Governor’s Advisory Board recommends to the Office of EMS that its task force on Patient Care Guidelines focus on developing a set of minimal clinical guidelines.</p> <p>YEAS = 16; NAYS = 1; ABSTENTIONS = 7</p> <p>MOTION CARRIES.</p>
Professional Development Committee – Larry Oliver	<p>Mr. Oliver reported that the last meeting was held in October. They reviewed the GAP Analysis by the National Association of State EMS Officials that correlates current national standard curriculum with the new EMS education standards. OEMS staff is currently reviewing the practice analysis.</p> <p>The committee has one action item to bring forth to the Board for action.</p>	<p>MOTION: The Professional Development Committee recommends accepting the staff recommendation to add the OB/GYN topic to Area 10 for BLS Recertification in continuing education.</p> <p>YEAS = 24; NAYS = 0; ABSTENTIONS = 0</p> <p>MOTION CARRIED UNANIMOUSLY</p>
Regulation and Policy – Jennie Collins	Ms. Collins reported that the committee met earlier in the day. They are working on items in developing support material for the regulations that are still in the Governor’s Office. They have had feedback from the Governor’s Office but due to the election they will likely not be signed to move forward in the review process until after the election. Ms. Collins reported that they are in a holding pattern since the election and are not sure if the change in Administration will cause any additional delay.	
Transportation Committee – David Barrick	Mr. Barrick reported that the committee met on October 19 to do grant reviews. They reviewed 23 grant applications and forwarded them back to F.A.R.C.	
Trauma System Oversight & Management Committee – Ajai Malhotra, M.D.	Dr. Malhotra reported that the committee is continuing with the process of trauma center verifications. The committee is looking at forming a more robust Performance Improvement Group especially since the Office of EMS now has two statisticians and looking at the registry to	Dr. Malhotra said at the last meeting there was an action item last time related to some type of written report

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	<p>look at the appropriateness of both prehospital and interhospital triage. In the longer term they want the group to focus on providing risk adjusted mortality and the outcome data to all of our trauma centers. They want to be able to provide a similar report as the one provided by the American College of Surgeons Committee on Trauma with its TQIP (Trauma Quality Improvement Project).</p> <p>The committee is obligated to look at the process of disbursement of the Trauma Fund which has been reduced by the state; and they have formed a sub group to regularly evaluate and recommend how the Trauma Fund should be distributed among the trauma centers.</p>	<p>by the EMS providers at the time of service. He said this is becoming much more important now with Trauma, with MRI and with strokes. The committee is asking the board members if they can work in their area to see that some type of written report is exceedingly helpful for patient care.</p>
<p>Regional EMS Council Executive Directors – David Cullen</p>	<p>Dave Cullen reported that the group met on November 5 in Charlottesville at the Thomas Jefferson EMS Council office. The group discussed supporting the Office of EMS attempt to move the entire office to Technology Park. The group also discussed possible legislation to be introduced in the next General Assembly; some from the Fire Council and some from the Directors Group. They are planning an Executive Director Board Leadership Workshop in the Spring. They have submitted a statewide grant on behalf of all the regions for scanners for continuing education. They held elections and the current officers stayed the same for another year.</p>	
<p>PUBLIC COMMENT PERIOD</p>	<p>Howard Genderson – Pfizer – He said he is speaking on behalf on the National Volunteer Firefighter Council who represent volunteer firefighters and EMS workers across the country. They solicited them for help in building out their heart healthy firefighter program. It is a cardiovascular wellness program to build a smoking cessation tool kit to help firefighters and EMS workers “kick the habit.” Pfizer partnered with them to build a tool kit which they are going to launch in March at their national meeting. The tool kit is an online resource which has resources to conduct an educational program around smoking cessation. There are support materials for local chiefs or directors to reach out to the media to do public service announcements. Also to support firefighters with gym memberships and nutrition counseling. There are materials that help with the advertising. The logo for the program is “Put It Out.”</p> <p>Mr. Genderson is looking for departments who will be interested in January and February to pilot the online piece prior to the national rollout; they are willing to work with those groups.</p>	
<p>Unfinished Business</p>	<p>May Meeting Minutes – The May meeting minutes were tabled in August for a correction.</p>	<p>MOTION: The State EMS Advisory Board moves to approve the May meeting minutes as amended and corrected on page 19 under Trauma System Oversight & Management Committee.</p> <p>YEAS = 24; NAYS = 0; ABSTENTIONS = 0</p>

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		The minutes were approved as corrected.
New Business	Ms. Collins encouraged everyone to attend Dr. Remley's presentation on Friday morning at 8AM. Ms. Collins also commended all Veterans in honor of Veteran's Day..	
Adjournment	Meeting was adjourned at 4:56 PM	
NEXT MEETING	February 12, 2010 at the Office of EMS, 1041 Technology Park Drive, Glen Allen, Virginia at 1 p.m.	

DRAFT