## EMS Emergency Management Committee Meeting Virginia Office of EMS Richmond Marriott Short Pump

## 4240 Dominion Boulevard, Glen Allen, VA 23060 February 2, 2017 9:30 a.m.

Members Present:	Members Absent:	OEMS Staff:	Guests:
Chief David Hoback, Chair	Jack King (Excused)	Karen Owens	John H. Craig, III
Easton Peterson, Health & Medical Emergency	Damien Coy, ODEMSA	Winnie Pennington	Terrance McGregor
Response Teams (HMERT)			
Bubby Bish, VAVRS		Wanda Street	Dan Norville
Judy Shuck, HRMMRS/TEMS			
Bryan McRay, ODEMSA			
Kelly Parker, VDH, Emergency Preparedness			
Adam Galton, VSP			
Michael Player, Regional Council, VA-1			
DMAT			
Morris Reece, VHHA			
Michelle Oblinsky, VEMA			

Topic/Subject	Discussion	Recommendations, Action/Follow-up;
		Responsible Person
Call to order:	The meeting was called to order at 9:30 a.m.	
Review & Approval of	A motion was made to review and approve the August minutes. No meeting was held in November. The	The minutes were approved
the August 4, 2016	motion was moved by Mike Player and seconded by Judy Shuck. The minutes were approved as submitted.	as submitted.
minutes:		
Introduction of Guests	Everyone around the room introduced themselves.	
and New Committee		
Members:		
Committee Chair Report	Chief Hoback does not have a report but will make comments as the meeting progresses. He has asked Karen	
- Chief David Hoback:	to report any EMS-related activations during the Inauguration under New Business.	
<b>Committee Member</b>	(All committee member reports must be submitted to the committee in writing before or at the scheduled	
Reports:	meeting).	
	Mike Player - VA-1DMAT report:	
	1. Personnel from VA-1 DMAT have been approached by VDH to consider the possibility of creating a	
	Disaster Medical Assistance Team as a state asset.	
	2. Personnel from VA-1 DMAT are supporting the Inauguration of the 45th President of the United States	
	of America in Washington, DC. From January 12 -22, 2017.	

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	<ol> <li>3. VA-1 DMAT will be conducting its 12th Anniversary Celebration and Awards on February 21, 2017 at 12:00 noon at the Williamsburg Community Building, 401 N Boundary Street, Williamsburg, VA 23185.</li> <li>4. Personnel from VA-1 DMAT will be attending the NDMS Fundamentals Course at the Center for Domestic Preparedness in Anniston, AL from February 27-March 3, 2017.</li> <li>5. The VA-1 DMAT Team Commander and Deputy Team Commander will be attending NDMS Team Leader Training in Chicago, IL from March 20-24, 2017.</li> <li>6. In 2017 VA-1 DMAT is On-Call for the Nation in March, June, September, and December.</li> </ol>	
	<ul> <li>Kelly Parker – VDH, Emergency Preparedness</li> <li>○ 2017 Public Health &amp; Healthcare Preparedness Academy.</li> <li>- May 31- June 1, 2017.</li> <li>- Fredericksburg Expo and Conference Center.</li> <li>- The Field Epidemiology Seminar will be on June 2 at the same location.</li> <li>- This year the theme with be Moving Preparedness Forward.</li> <li>- Registration Coming Soon.</li> </ul>	
Unfinished Business:	Global Emergency Resources (GER) HC Standards Patient Tracking System Discussion Chief Hoback mentioned the Patient Tracking presentation that was presented last August. We saw a nice, robust downloadable app that interfaces with the hospital. What is the next step in looking at something like this for the Commonwealth? What are our recommendations? The main concern is cost. Is it worth talking to the vendor to see where and how we can obtain funding for it? How often would we use it? Karen said that she gets weekly briefings from the Fusion Center about events/incidents across the State and on average there are at least two events per week. The committee discussed the fact that it should be used daily in order to better use it during a mass casualty event or other major event. Grant funding cannot be used because of reoccurring costs. Easton suggested that the best approach would be to manage it at the Regional Council level to set up incidents and making sure everything is up-to-date, etc. Chief Hoback feels that we should have a candid conversation with the company and see how much money is involved and what funding is available.	Chief Hoback, Easton and Karen will work on this and pull some data together.
New Business:	The New Emergency Preparedness Requirements for Medicare and Medicaid Participating Providers and Suppliers; Final Rule – Judy Shuck  The Centers for Medicare and Medicaid have released their final rule on emergency preparedness standards for seventeen different covered health care entities. She distributed information covering the seven entities and a summary page of what they have to do. There are opportunities for EMS to establish better partnerships with long term care facilities. See page 64030 Part 483 – Requirements for States and Long Term Care Facilities. The long term care facility will have to have an emergency plan, provide for safe evacuation, shelter in place plan, medical preservation method, emergency staffing strategies, arrangements with other long term care facilities to receive residents (mutual aid agreement), training assessment of the plan (exercises), emergency power, etc. See attachments for more information. These are good opportunities for training and exercises.	

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	CSM-EP-Rule-Table-P 42_CFR_CMS_Emerg rovider-Type.pdfPrep_Final_Rule_20:	
	The 2017-2022 Health Care Preparedness and Response Capabilities (HPP update) – Morris Reece and Kelly Parker  The hospital preparedness program for ASPER is coming to an end of its current five year cycle. The grant cycle expires every 5 years, but the funding occurs annually. Kelly explained that there are 4 capabilities of focus this year instead of eight. The main focus was to align healthcare and public health as ESF-8 in terms of response and their capabilities. There was a lot of overlap in HPP and public health. Starting July 1 the capabilities will be more health care system focused. See attachment below.	
	Inauguration Activations – Karen Owens Karen stated that about three months before the inauguration, she was contacted to participate in conference calls regarding mass patient movement should it need to occur. The planning process involved Maryland, D.C., Virginia and the federal government. They were told that there would be 44 ambulances on the north and south sides of the mall for transport. The EMAC request that was drafted was for 150 ambulances within a four hour radius. They wanted them as task forces with groups of five. The EMAC went out to both Virginia and Maryland. She explained the process of securing the ambulances through ESF-8 and some of the specifics of the EMAC. The day of the Inauguration went very well. They are looking into how to inventory the specialized resources (such as patient buses) that may get deployed. Where do we store this resource information? The committee discussed the challenges of resource management and the means to share the information statewide.	
Other Comments/Questions:	None.	
<b>Next Scheduled Meeting:</b>	The next meeting is May 4 at Richmond Marriott Short Pump.	
Adjournment:	The meeting adjourned at approximately 10:40 a.m.	