

Middle Peninsula Pre-Hospital Committee

Minutes

June 20, 2006

The regular meeting was called to order at 7:08 p. m. by Julie Glover.

Members present are:

Julie Glover	Abingdon Fire and Rescue
Lewis Kerns	Gloucester Fire and Rescue

Others present:

Wayne Berry	Virginia Office of EMS
George Netroe	Mar-Mac-TSI
Brian Solada	LifeEvac III
John Cooke	PEMS Staff

Agency Reports:

Gloucester Fire and Rescue reported that they are maintaining 5 ALS units and an EMS Car. Call volume is up. Received a new Horton Ambulance that has recently been placed in service. That unit experienced a mechanical failure (head gasket) which was repaired under warranty.

Abingdon continues to respond to increasing number of calls. Have recently taken in several new members.

Mar-Mac-TSI reports that they are using bio-diesel fuel, which is more efficient and cost effective. Phillips is their supplier. Their staff is back up to normal levels ALS but still need 5 EMT-B's for anticipated volume. They are using EMT-Enhanced providers where possible. Increased staffing may be the result of a recent pay increase.

Announcements by the Council Staff:

John Cooke reported for Don Wilson who is attending the Annual Trauma Leadership Conference in Virginia Beach.

FARC has completed grant review and PEMS region did reasonably well. Official grant awards will be announced after July 1st. PEMS will compile a list of items that were well funded and encourages agencies to plan for next cycle.

Jeff Meyer is making great progress as the Performance Improvement Specialist. Individuals are encouraged to visit his web page on the PEMS site where they will find the first data from Medication usage around the region. In addition, there, is important information on PI Committee meetings and minutes.

John thanked everyone who attended the Awards Picnic. Again, those present were directed to the PEMS web site for a complete list of award winners and several hundred photos.

LifeEvac:

Brian Solada, Chief Flight Nurse for LifeEvac III provided a brief overview of their new program that went live on June 19th. He reported that their first mission was an ICU transfer from Williamsburg. He outlined LifeEvac's training program, which

promises to provide ACLS etc. to agencies as an outreach. He made clear the point that their service will transport to the most appropriate facility, regardless of corporate sponsorship. LifeEvac dispatch will automatically turn calls over to a closer helicopter service when appropriate. He discussed their billing practices, noting that they are an Anthem/Blue Cross Preferred provider, which means that patients with that plan are covered for all expenses resulting from flight. Patients with other insurance will be billed and collection based on ability to pay. LifeEvac has already done outreach to many local squads and will be conducting LZ training soon. Brian described LifeEvac's Stand By process. If LZ is greater than 20 minutes away, LifeEvac will launch and can be turned around easily. There is no charge for them launching. If LZ is less than 20 minutes away, they will prepare at their base but not lift off. He encouraged agencies to use hospitals as landing zones and to begin transport rather than waiting for helicopter to land. LifeEvac will do search missions but, have no rescue capability. They publish a newsletter quarterly, agencies are encouraged to contact Matt Payne mpayne@airmethods.com to join the mailing list. Brian also discussed medical scene flights and promised to work with the council to develop a protocol for this use of air medical transport. Brian concluded his presentation by mentioning a "ride along" program will start in about six months, after his staff has adjusted to their routine. There will be a 240 lb weight limit for observers.

Old Business:

PEMS Protocols and AHA Guidelines: John Cooke informed the committee that the MAC has approved protocols that include the 2005 AHA Guidelines. Expected implementation date is September 1, 2006. The MAC realize that these changes may pose some challenges to agencies to modify equipment and train personnel, however they feel strongly that we should move forward in the interest of providing the best patient care possible. Should an agency find that they absolutely cannot comply with these protocols by September 01; their OMD must provide them with specific written protocols with an expiration date. PEMS is currently surveying agencies to determine which agencies have AED's that must be modified and which agencies have models that cannot be "re-programmed." Preliminary data shows there are comparatively few AED's that can't be modified and they are deployed in low acuity situations. More information is available on the PEMS website.

Stat Medication Boxes: Stat Boxes have arrived and are in the process of being labeled. When stocked, they will be provided to the agencies who requested them.

Preceptor Workshop: Copies of the Preceptor Training Workshop were distributed to those present. Additional copies can be obtained from the office.

Report to Board of Directors: Discussion of the request that each of the Pre-Hospital Committees provide a report of their activities to the Board of Directors.

New Business:

Discussion of Telemetry Options: Lewis Kerns discussed his investigation of options to send 12 lead EKG's to Riverside Walter Reed. Lewis has identified that they need a device to allow communication between LifePak 12 and COR and CarePoint. John reminds the committee that the CarePoint that was recently installed at RWR is simply a controller for the radios. Peninsula agencies are currently sending 12 leads via

digital fax. There is still some question as to whether there is a separate device necessary to receive these fax transmissions. Lewis will be put in contact with Gately Communications, the CarePoint Vendor. Jim Masten will also investigate solutions to the problem.

Appointments to PHC Workgroups: George Netroe suggested and has had approved a project that will address Nursing Facilities in the PEMS region and their expectations of EMS and preparations for disasters. George has been in contact with Terry Coy at OEMS asking about the possibility of having EMSAT assist with production. OEMS was cooperative but generally EMSAT is reserved for category I training. Regional Restocking Agreements are also being re-evaluated; Jodi Cotner of RRMC will lead that workgroup. Appointments to assist with these workgroups are being sought from each of the Pre-Hospital Committees. Julie Glover agreed to make contacts and secure appointments from the Middle Peninsula PHC for both workgroups.

Yearly Elections: Elections were tabled because of the low turnout.

Good of the Order: George Netroe began a discussion of Mar-Mac's upcoming ventilator training at RWR. He reported that he had been approached by local squad members because there was a cost (\$15) associated with the class. He then asked, if ALS training funds could be used to support the class. Wayne Berry responded that his request seems appropriate but it was suggested that since CEHS is actually teaching the class that George should contact them to investigate ALS Training funds.

Adjournment: Meeting was adjourned at approximately 8:45 p.m. The **next meeting** will be held on Tuesday, **August 15, 2006** at 7:00 p.m. at the PEMS office. Minutes prepared by John Cooke with the assistance of Julie Glover.