



Peninsulas Emergency Medical Services Council, Inc.

PO Box 1297, 6876 Main Street

Gloucester, VA 23061

Office (804) 693-6234 - Fax (804) 693-6277

PEMS PIC Meeting Minutes

A Subcommittee of the Medical Advisors Committee

Meeting Date: 03-08-18

Meeting Location: PEMS Office

Chaired By: L. Miller

Begin Time: 3:00 p.m.

End Time: 4:38 p.m.

Minutes Submitted By: D. Thomas

Draft Approved Date:

Members Present:	Members Absent:	Staff:	Others:
K. Harper for S. Klink	D. Baylous	Hoyle, Paul	
T. McGregor	S. Beam	Thomas, Debbie	
L. Miller (Chair)	C. Beck		
Phil Shahan (TC)	J. Brann		
	J. Browne		
	K. Carter		
	L. Messina		
	J. Packett		
	T. Smith		
	E. Thimons		
	D. Wilson		

Item	Discussion	Action Required	By Whom/When
Call to Order	By L. Miller at 3:02 p.m.		
Introductions	Members introduced as listed above.		
Approval of Minutes	Minutes from the 7-10-17 submitted for approval. Motion to approve by T. McGregor, second by S. Hall. Motion approved.		
Membership Changes	Remove R. Adams (RTH) per L. Miller she has retired – suggests contact Donna Tignor Remove J. Andrews (serious illness) Remove G. Baker (retiring end of March; no meetings attended in 2017) Remove J. Burnette (RDH) Add Craig Beck (RDH) Remove A. Burford (OMD) Remove L. Hogge (BSRGH)		

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	<p>Remove S. Hall (Nightengale)--Add back Denise Baylous for Nightengale Remove K. Jowers (GVFRS) –She is leaving GVFRS permanently for medical reasons</p> <p>Discussion about several (4) other members who have not attended in at least 12 months but are still on the roster. D. Thomas will contact to determine their desire to continue and whether they are willing/able to commit to attendance at future meetings.</p> <p>T. McGregor states that we need to approach the EMS Operations Committee with the list of position vacancies and request they appoint members to participate.</p> <p>With the departure of Amy Burford as the OMD, we need to seek a replacement from the Medical Advisors Committee. They meet tonight, following this meeting, so we will ask them at that time.</p> <p>Note added by D. Thomas post-meeting: <i>**The MAC appointed <u>Eleanor Irwin</u> to be the OMD at their 7 pm meeting 3-8-10**</i></p>	Send info to EOC	D. Thomas by 4/3/18
Staff Reports	<p>D. Thomas reports that Protocol Update for 2017 went live on 3/1/18. You Tube video has the actual rollout for educational purposes.</p> <ul style="list-style-type: none"> • There is a FREE smartphone app available to anyone/everyone for the protocols. We are not facilitating the printing of protocols any longer. Thanks to Gloucester Rotary Club for funding the subscription for the app so that it would be free to the region. • Reminder that we need nominations for the PEMS Regional EMS Awards. Categories open for agencies, providers, nurses & physicians. Deadline for submission: April 20, 2018. Forms and more information available on the PEMS website. • The position for Business Manager has been filled by Mr. Kevin Brophy. Comes to PEMS with long background in financial/business office management; most recently filled similar position with the Gloucester Mathews Free Clinic. 	Send in nominations	All members

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Old Business	<p>PI Project 2nd Quarter 2018– TRAUMA: D. Thomas reported on the follow up to the 9 calls from the <i>TPIC under-triage report</i> that the Trauma Task Force had identified as requiring follow up with the hospitals. 6 were deemed appropriate transports. 3-she was unable to obtain a response from the receiving hospital. The Trauma Task Force had reviewed the narratives in their meeting and determined that 2/3 were appropriate with one call being forwarded to the PI Committee for follow up on a care issue – but not for an <i>under-triage</i> issue. The care issue involved management of a major extremity bleed. The PI Committee has opted to do an MIR a to get the crew or agency response to the matter. D. Thomas will submit the MIR on behalf of the PI Committee.</p> <p>Discussed providing Stop the Bleed training to the region. L. Miller points out that this will be a practical evolution at the Hampton Roads Trauma Symposium, but realizes the more rural areas of our region will not be attending the symposium. Suggests we discuss with Trauma Task Force ways to get that particular training out to those areas. K. Harper suggests considering similar training to the area police.</p> <p>3rd Quarter PI Project 2018– STROKE (General System Related Project) D. Thomas reviewed the project template and its data/quality metrics. Much of our data is coming from the Stroke Task Force and is incomplete at this time.</p> <p>4th Quarter PI Project 2018 – STEMI (General EMS Performance Improvement Project) D. Thomas states that the project template with data/quality metrics has been done by the STEMI Task Force, and that data collection begins April 1, 2018.</p>	<p>D. Thomas Submit MIR to P.Hoyle for agency follow-up Trauma TF Agenda to consider Stop the Bleed training initiative</p> <p>Ongoing data collection</p> <p>Ongoing data collection</p>	<p>ASAP</p> <p>D. Thomas 6/14/18</p> <p>D. Thomas</p> <p>D. Thomas</p>
New Business	<p>FY2019 PI Projects D. Thomas states we need to finalize the PI Project schedule for FY2019. The first quarter of each fiscal year will be a planning quarter for us.</p> <p>Trauma - L. Miller states that she also wants us to finish the 2017 review for under-triage. States data showed 40+ percent under-triage and while the first ½ of the data shows no problems for us, she does not want us to assume we don't have a problem until we get the rest of the data which will come out with the next TPIC report and should be from July 1 – December 31, 2017.</p> <p>General Systems Related - K. Harper/T. McGregor would like for us to pursue getting data on scene times involving HEMS and potential over-triaging of patients to HEMS vs. ground transport.</p> <p>General EMS PI Project - K. Harper/L. Miller would also like to see us undertake a project to review the recognition and management of SEPSIS patients in the field. Much discussion about the types and availability of reliable thermometers on the region's ambulances. All agreed that in order for EMS to successfully detect temperatures, good thermometers are essential. Tympanic and stick on the forehead types not acceptable. L. Miller questions whether or not we should try to get all the hospitals involved to purchase good thermometers. T. McGregor states this will likely be the only way to get them on every unit. D. Thomas will mention this need to our contracted Grants person to see if perhaps there are grants out there we could get to do it...or at least fund some of it.</p>	<p>Complete Review as soon as new TPIC report issued.</p> <p>Data collection</p> <p>Research funding streams to get good thermometers on every ambulance</p>	<p>D. Thomas</p> <p>D. Thomas</p> <p>Hospital members & D. Thomas – grant opportunities</p>

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	<p>DRAFT PROJECT CALENDAR FOR FY2019: 1st Quarter – Planning/Development 2nd Quarter – Trauma-Completion of TPIC Undertriage Review 3rd Quarter – General Systems Related Project – HEMS Utilization 4th Quarter – General EMS PI Project - Sepsis</p> <p>L. Miller asks that we collect an entire year’s worth of data for the HEMS and Sepsis projects and also asks D. Thomas to send out a SurveyMonkey to determine which agencies have FDA approved thermometers w/capability for oral and/or rectal temperatures and what factors most influences the type they have. Also ask about Capnography capabilities.</p> <p>Pediatric CUFFED Endotracheal Tubes: L. Miller relates a recent call in which a child was brought in with an unrecognized displaced ET tube. All indications are that it WAS placed correctly initially, but upon arrival to the ED it was found to be displaced. The EMS crew was using an uncuffed ET tube as has been the standard for EMS in the region. She cites studies that indicate the increased chances for dislodgement of uncuffed tubes and that all the area trauma centers have switched to cuffed tubes as a result. She will be taking this matter to the Medical Advisors Committee meeting tonight for their input/approval to pursue having the region make the switch. If they approve, she will bring the matter before the EMS Operations Committee in April.</p> <p>The members felt that since pediatric intubation is so rare, and because data doesn’t really support improved outcomes if done in the field, that it would be worthwhile to gather data regarding pediatric intubation attempts and success rates across the region to determine whether we should be intubating children at all.</p>	<p>Create Survey</p> <p>Discuss Pedi ET Tubes w/MAC</p> <p>Abstract 1 year’s data intubation success</p>	<p>D. Thomas Next Meeting</p> <p>L. Miller – 3/8/18</p> <p>D. Thomas Next Meeting (?)</p>
Good of the Order	<p>Next Meeting: June 14th 2018 at 3:00 p.m.</p> <p>Important Dates:</p> <ul style="list-style-type: none"> • Rau Ivatury Trauma Symposium (VCU) - Friday, March 23, 2018 • Sentara Stroke Symposium (Wmsbg) - Friday, March 30, 2018 (registration is full) • Deadline for Regional EMS Award Nominations – Friday, April 20, 2018 • Hampton Roads Trauma Symposium – Friday, April 27, 2018 • CHKD Pediatric Trauma Symposium – Friday, May 18, 2018 • EMS Day Luncheon & Awards at Busch Gardens – Saturday, May 19, 2018 		
Adjourn	Adjourned to Executive Closed Session for MIR reviews.		
Closed Session	<p>All participants on secure lines.</p> <p>P. Hoyle reviewed 2 Medical Incident Reports (MIRs) MIR -18-001: Pediatric intubation - referral to MAC for potential equipment change. PI asks P. Hoyle for further review to answer some specific questions. MR- 18-002: Diversion to trauma center w/o meeting trauma center criteria – Closed as appropriate diversion.</p>	Further Review required for 18-001	P. Hoyle Next meeting