




**EMS for Children Committee Meeting
Virginia Office of EMS
1041 Technology Park Drive, Glen Allen, VA
October 8, 2015
3-5 p.m.**

Members Present:	OEMS Staff:	Others:
Sam Bartle, MD , EMSC Committee Chair	George Lindbeck, VDH, OEMS, State Medical Director	Valeta Daniels, Henrico Doctors, EMS Liaison
David Edwards , VDH, OEMS, EMSC Program Manager	Wanda Street, VDH, OEMS, Secretary Sr.	Brad Taylor, Chippenham-Johnston Willis Hospitals
Theresa Guins , Pediatric ED Physician, EMSC Program Medical Director		Adam Alford, ODEMSA
Steve Rasmussen , Temporary ENA Representative		Michael Moss, VCU Resident
Eddie Ferguson , Goochland Fire/Rescue, VAGEMSA, EMS Provider Representative		
Kae Bruch , School Nurse Representative		
Barbara Kahler , Virginia Chapter of American Academy of Pediatrics (AAP) Representative		
Heidi Hooker , ODEMSA Regional Council Rep.		
Petra Connell , EMSC Family Representative		
Shawn Safford, MD , Pediatric Physician		
Heather Board , VDH, Injury, Violence & Tobacco Programs		
Jeff Haynes, MD , VCU		

Topic/Subject	Discussion	Recommendations, Action/Follow-up; Responsible Person
Call to order:	The meeting was called to order at 3:02 p.m. by the Chair, Dr. Sam Bartle.	
Introductions:	Everyone around the room introduced themselves.	
Approval of the minutes from July 9, 2015 meeting:	A motion was made to review and approve the minutes. The minutes were approved as submitted.	The minutes were approved as submitted.
Chairperson's Report – Dr. Sam Bartle:	<p>Dr. Bartle reported that the medication error workgroup is looking at getting a pre-hospital care drug medication error study started. The workgroup met this morning just before this meeting to discuss the specifics on how to get started and they discussed research that has already been done. They will look at the state and regional databases for pediatric trauma patients. The main problem that is occurring in the research is the absence of the patient's weight. The sub-committee will be asking the committee members for their input about this. The goal is to complete the study and present it to PECARN.</p> <p>The EMS for Children committee will be reviewing the triage and transfer criteria to make recommendations to medical directors across the State for pediatric patients. This was an area that needed improvement when the ACS Trauma</p>	

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	<p>Evaluation was done in September.</p> <p>Ideas are still needed for the 2016 symposium topics. Submit your courses on the OEMS website under the 2016 Call for Presentations link.</p>	
OEMS Report – Paul Sharpe:	<p>Paul Sharpe was not present.</p> <p>Dr. George Lindbeck reported on the ACS Trauma System Evaluation. On the last day of the evaluation, a summary of their findings was held and recorded. The recording will be posted on the OEMS website within the next week or so. The final written version of the report should be submitted to the Office of EMS within 6 to 8 weeks of the meeting. It is typically a 60 to 80 page document.</p>	
EMSC Program Report – David Edwards:	<p>David read through some of the highlights of his report. His report is attached below:</p>  <p>EMSC Program Report 100815.docx</p> <p>Valeta Daniels suggested that the Labor and Delivery departments of hospitals should have the DMV Car Seat Emergency Identification Stickers to give to new parents.</p> <p>David mentioned that the EMSC website is currently under construction and will consist of many links to all sorts of pediatric resources. It will have five sections: hospitals, EMS agencies, injury prevention, data, and disaster preparedness.</p> <p>The EMS for Children Annual All-Grantee meeting to be held June 2016 has been cancelled as of yesterday.</p>	
EMSC Family Representative Report – Petra Connell:	<p>FAN Report (Family Advisory Network)</p> <p>Just a few items I wanted to share from FAN.</p> <ol style="list-style-type: none"> 1. The EMSC webinar “Is Your ED Ready for Children? Pediatric Emergency Care Coordinators Lead the Way to Readiness” held on Monday, September 21, is archived on the EMSC NRC website. This program shared data supporting the need for pediatric emergency care coordinators (PECC), as well as strategies employed to identify and assure availability of PECCs in the emergency departments (ED) of a large hospital system. Finally, a physician and nurse PECC discussed challenges encountered and opportunities to improve pediatric readiness in their ED. The event targeted ED directors, ED physicians and nurses, hospital administrators, state EMSC program managers, EMS providers, state health department and hospital regulators, health care planners, family members, trauma program coordinators and managers, and others interested in improving pediatric emergency care. 2. Mid-Atlantic Regional Meeting was held in Philadelphia. <ol style="list-style-type: none"> a. Wonderful presentation from Save the Children. They have multiple resources available for free on their website. www.savethechildren.org b. Kathleen Brown, MD as possible presenter at Symposium? She presented spinal protection and pediatric airway. c. If funding is available, there will be Targeted Issue funding opportunities released in December for up to five grants. d. Two new Federal EMSC performance measures are being rolled out in 2016 and will be implemented in 2017. Four have been, or will be retired. 	

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	<p>3. The National EMSC National Resource Center FAN contact has resigned after 7 years at the EMSC NRC.</p> <p>Dr. Robin Foster, former EMSC Chair, won the ODEMSA Regional EMSC Award and her nomination will be moving on to the state level. The winner will be announced in November. Dr. Haynes was asked to give her our congratulations.</p>	
Committee Member Organization Reports:	<p>Dr. Kahler stated that the Virginia American Academy of Pediatrics (AAP) annual meeting is in a couple of weeks and there will be a disaster preparedness event among coastal states. She also asked if anyone would like to receive the National Disaster Alerts that are being sent to her. David said that she could forward them to him and he will disburse to the committee.</p> <p>Steve Rasmussen stated that when it comes to disasters, there is community and faith-based organizations that provide for children and families during a disaster. These places would be a good source to receive information. Steve Rasmussen will create community and faith based resource list. If anyone is interested in assisting him, please let him know.</p>	<p>David will send out the National Disaster Alerts to the committee.</p> <p>Steve Rasmussen will create a resource list.</p>
Special Presentation – Pediatric Disaster – Jeff Haynes:	<p>At the July meeting, Kelley Rumsey shared the Trauma Triage Criteria information for Dr. Haynes. The second document, Inter-Hospital Triage, was distributed today. He explained each of the triage criteria drafts. The committee discussed some of the reasons to transport or not transport to the pediatric trauma center. It was suggested that one document be created to incorporate both of the attached documents. Dr. Bartle asked the committee if they wanted this to be presented to the State Trauma Committee to be accepted by all of the regions for statewide triage. They all agreed that this is an excellent idea. It will provide pediatric consistency across the state. If anyone has any further comments or suggestions, send them to Dr. Haynes at jeffrey.haynes@vcuhealth.org. At the next EMSC meeting, the document will be presented for approval and then it will be sent to the Trauma System Oversight & Management Committee meeting for their review and approval.</p> <p>Kae Bruch suggested looking at the Medevac pediatric criteria also as well as the PEPP assessment triangle. Dr. Safford will work with Dr. Haynes in refining the document by the next meeting.</p> <div style="display: flex; justify-content: space-around; align-items: center;"> <div style="text-align: center;">  Suggested Pediatric Trauma Triage Criteri </div> <div style="text-align: center;">  Inter-hospital Triage Criteria - Dr. J. Hayne </div> </div>	<p>Dr. Safford and Dr. Haynes will refine the document and present it at the January meeting.</p>
Old/Unfinished Business:	<ul style="list-style-type: none"> • Pediatric topics brainstorming (for annual pediatric tracks) – Kathleen Brown-EMSC can support her payment. Dosing errors could be a topic. Steve Rasmussen proposed having courses with 90 minute lectures with two people conducting the lectures. The course would run all day with different 30 minute topics. Dr. Guins asked Mr. Rasmussen to email her this idea and she would be happy to coordinate this with fellows at CHKD. • Pediatric drug dosage error project & PECARN • Pediatric facility preparedness • Pediatric disaster preparedness • Other 	<p>David will contact Kathleen Brown.</p> <p>Steve will forward the information to Dr. Guins.</p>

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	The 2016 meeting dates have been changed to coordinate with the Training and Certification and Medical Direction Committee meetings.	
New Business:	None.	
Public Comment:	None.	
Adjournment:	The meeting adjourned at approximately 4:31 p.m. 2016 Meeting Dates: January 7, April 7, July 7 and October 6	

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