


EMS for Children (EMSC) Committee Meeting
Virginia Office of EMS
1041 Technology Park Drive
Glen Allen, VA 23059
January 4, 2018
3-5 p.m.

Core Members Present:	OEMS Staff:	Guests:
Sam Bartle, MD , EMSC Committee Chair, EMS Advisory Board Pediatric representative		
David Edwards , EMSC Program Manager (VDH, OEMS)		
Steve Rasmussen , Emergency Nurses Association (ENA) representative		
Petra Connell , EMSC Family Advisory Network (FAN) representative		
Allison Ayres Clevenger , State Child Fatality Review Team, Office of Chief Medical Examiner (OCME) representative (VDH)		
Tim Erskine , State EMS Official (State Trauma Coordinator, VDH, OEMS)		
Eddie Ferguson , EMS Field Representative (Goochland Fire & Rescue)		

Topic/Subject	Discussion	Recommendations, Action/Follow-up; Responsible Person
Call to order:	The meeting was called to order at 3:12 p.m. by the Chair, Dr. Samuel Bartle.	
Introductions:	Everyone around the room introduced themselves.	
Approval of the minutes from October 5, 2017 meetings:	A motion was moved by Petra Connell to approve the minutes from the October meeting. The motion was seconded by Steve Rasmussen. The minutes were approved as submitted.	The minutes were approved as submitted.
Chair Report –Dr. Samuel Bartle:	Dr. Bartle reported that Dr. Theresa Guins will no longer be a member of this committee. She has and is doing some great things for children and should be recognized for her accomplishments. The committee discussed giving her a letter from the Governor. Dr. Bartle mentioned that the symposium went very well. He also mentioned that EMSC is back in the federal budget, but that it is still unknown whether it will pass or not.	
OEMS Report – Tim Erskine:	<p>Tim Erskine gave an update on the Trauma System Plan (TSP) Task Force. February 6 is the next meeting of the Task Force to review and complete the Trauma System Plan. The task force will work through the trauma indicators to score and assign them to the proper workgroups/committees. The committee discussed the Trauma System Plan, asked questions and received answers/feedback from Tim.</p> <p>Dr. Bartle stated that Dr. Aboutanos, Chair of the Trauma System Plan Task Force, wants the EMSC to look at the State Trauma Plan from a pediatric perspective.</p>	

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<p>EMSC Program Report – David Edwards:</p>	<p>Dave stated that most of his time has been spent on the obligatory grant application for the next four-year cycle, and that no money has been appropriated for the program yet. However, he stated that there are now nine EMSC Performance Measures. Three were retired, and three of them are new this year. The new measures have to do with the state’s submission of NEMSIS Compliant Version 3.x Data, the presence or absence of EMS agency Pediatric Emergency Care Coordinators (PECC), and whether EMS agencies regularly have EMS providers demonstrate competence with pediatric-specific equipment. The measures have time-specific goals attached to them and progress is measured every two to three years. Funds are continuing to be set aside for the following: child restraint systems, updated length-based pediatric tapes, evolving pediatric dosing aids, “Stop the Bleed” program supplies, resources for pediatric coordinators, etc.</p> <p>The Committee discussed the survey and the collection of baseline pediatric information for the new Performance Measures. David needs 80 percent or more in order to achieve our response goal. Steve Rasmussen suggested having a two-day hands-on Pediatric “Boot Camp” to familiarize the providers with the pediatric equipment and get them to demonstrate the proper use of it. It would be like an ATLS course, per Steve. Dr. Bartle asked David and Steve to bring something to the next meeting outlining ideas for the course. It should be centered around medication errors, pediatric transport/restraint devices, etc. It could be a one-day program and be offered twice. Steve is willing to come to OEMS and sit down with David to plan this.</p> <p>David also mentioned that \$10,000 per grant year is being set aside to support a NASEMSO project to develop evidence-based standards for pediatric equipment in ambulances, which would stimulate crash testing and guide the development of safer pediatric equipment. Some committee members had reservations about using Virginia funds for crash testing and standards development. They feel that perhaps it should be funded on the national level and not the state level, allowing more child restraints to be purchased with the money. David stated he felt that bold action was needed to initiate the process, which has been needed for many years but ignored, and that this was a chance to begin that process and still fund the priorities of our EMSC program. Eddie Ferguson concurred, adding that Virginia was on the forefront of this process in its partnership with NASEMSO, and that this was an important opportunity.</p> <p>After discussion, Eddie Ferguson made a motion to support the grant writing efforts as they are today, with the money still reserved to support the standards development project with NASEMSO, in order to meet the deadline in applying for the grant money. The Committee would like to broaden the category so that the money can be used for something else related to pediatrics if it is determined that crash testing is not what we want to use it for. The motion was seconded by Steve Rasmussen, and all members present were in favor of the motion.</p> <p>The complete report is attached below:</p> <div style="text-align: center;">  <p>EMSC Program Report 01-04-18.doc</p> </div>	<p>David and Steve will outline the Bootcamp and bring to the next meeting.</p>
<p>EMSC Family</p>	<p>The Safe Sleep EMSAT video has been completed. Heather Board, from VDH; Petra Connell, EMSC FAN</p>	

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Representative Report – Petra Connell:	representative, Allie Ayres, from OCME; Dr. Kahler from AAP and a breastfeeding advocate from VDH all participated and did a nice job.	
Committee Member Organization Reports:	Allison Ayres, OCME – Allie reported that she just completed an Infant Fatality Surveillance System and will be implementing a Child Fatality Surveillance System for children ages 1 to 17. If you have any data that you would like to collect, please let her know. She will have the pre-hospital care report and the hospital death records. She will be reviewing years 2014 to 2016. The committee is interested in cause of death, child suicide information, homicide, environmental background, geographic locations, etc. She will review risk factors. She is hoping to start this in late February or early March 2018.	
Special Presentation:	There was no presentation today.	
Unfinished/Old Business:	<ul style="list-style-type: none"> • EMS Agency Survey (in progress) Baseline Data—new PMs 02 and 03 – discussed in David’s report. • 2018 EMS pediatric topics – discussed in David’s report. • EMSC State Partnership Application (due Jan. 8, 2018) – discussed in David’s report. • Safe Sleep EMSAT Video – discussed in Petra’s report. 	
New Business:	<p>The July meeting date has changed to the 12th.</p> <p>Steve Rasmussen asked if EMSC is doing any training involving human trafficking. He would like to do more than just the classes at Symposium. It was suggested that we do an EMSAT video.</p>	
Public Comment:	None.	
Adjournment:	<p>The meeting adjourned at approximately 5:00 p.m.</p> <p>2018 Meeting Dates: (All Tentative) April 5, July 12, October 4 Location: 1041 Technology Park Drive, Glen Allen, VA 23059 Time: 3:00 p.m. to 5:00 p.m.</p>	