

Pre-Hospital Work Group Minutes
700 East Main Street Richmond, Virginia 23219
June 2, 2016
0900 – 1100

Members Present:	Members Absent:	Ad-Hoc Members Present:	OEMS Staff	Others Present:
Sherry Stanley, Co-Chair	Dr. Tania White	Wayne Perry	David Edwards	Nick Mattheisen
Dallas Taylor, Co-Chair	Dr. Theresa Guines	Lisa Wells	Scott Winston	
Dr. Marilyn McLeod, Co-Chair				
Sid Bingley				
Dr. T.J. Novosel				
Brad Taylor				
Dr. Jeffery Haynes				
Dr. Carol Bernier				
Ron Passmore				
Dr. Allen Yee				
Dr. Reed Smith				

Topic/Subject	Discussion	Recommendations, Action/Follow-up; Responsible Person
Review of Minutes from May 14, 2016.	Minutes were reviewed by the group and approved.	None
Review of Action Plan as discussed and written in May.	Pediatric Transport: the group reviewed the recommendations for action. Discussion surrounded how to operationalize the recommendations. David recommended making it a priority to assist with grant funding through the RASF and EMS-C as two sources for funding. Trauma Triage Decision Scheme: Dr. Haynes suggested a need for a separate document for pediatric trauma triage. We also need age based vital sign normal values for patient's age 13 or less. There is also an identified need for pediatric burn criteria. The group discussed that nationally there is a trend toward merging adult and pediatric protocols together, however there needs to be more discussion. It was	Action plan to be presented at the TSO & MC Taskforce meeting on June 2, 2016.

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	<p>recommended by the group to send this to EMS-C for possible development of a separate pediatric schema for trauma.</p> <p>Protocols: The group reviewed the list of recommend protocols that should be required for each agency to address in their individual protocols. Dr. McLeod recommended they be addressed for pediatric, geriatric, and adult patients per each OMD. The regions should have the templates available for agencies to adopt. Dr. Yee suggested that the EBG's be incorporated as well.</p> <p>Critical Care Transport: The group recommended the development of a sub-work group to define the scope of the problem, as the OEMS currently does not define the scope of critical care transport in Virginia, and the only transport that is identified as critical care is air medical. Dr. McLeod and Dr. Bernier will do a literature review to see what other states are doing and have done as well as the national trends and recommendations. The group agrees this is a specialty which is lacking and there is a great need for this specialty transport in the care of trauma patients as well as acute stroke patients and STEMI patients.</p> <p>Retention: The group discussed retention of EMS providers and identified that there is a need for the development of a career path for EMS providers. Pay has also been identified as a need for EMS staff retention. The group discussed that EMS providers are often working multiple jobs to make ends meet secondary to the low pay. Nationally, Virginia has a good reputation. The EMS Workforce Development Committee is currently addressing EMS provider retention and this committee has been present for years.</p>	
PUBLIC COMMENT	None	
UNFINISHED BUSINESS	None	
NEW BUSINESS	None	
Adjournment	Meeting was adjourned at 1043. Next meeting will be July 14, 2016 starting at 10 am at OEMS office.	