



**OLD DOMINION EMERGENCY MEDICAL SERVICES ALLIANCE INC.**

1421 Johnston-Willis Drive  
Richmond, VA 23235-4730  
804-560-3300 • FAX: 804-560-0909  
www.odemsa.vaems.org

**MCI Committee**

January 29, 2016, 11:00 am to 01:00pm

Chair: Robin Manke, VCU

Vice Chair: Bubby Bish, SVEC

**Members and Guests Present:** Bubby Bish, Jill Russell, Ken Smith, Allen Yee, Robert Trimmer, Andrew Slater, James Moss, Jane LaVerne, Bryan McRay, Al Thompson, Roger Warden, Kelly Parker, Bobby Overton, Deborah Whitacre, Marco Gongora, Heather Davis, Mike Ortega

**Conference Line:** Robin Manke, Bee Betts, Aileen Cassadra, Tammy Gunter

**ODEMSA Staff:** Rachel Dillon

**Minutes Scribed by:** Rachel Dillon

**Materials provided:** Previous meeting minutes, meeting agenda, draft of regional MCI plan

<b>Topic/Subject</b>	<b>Discussion</b>	<b>Recommendations, Action/Follow-up; Responsible Person</b>
<b>Meeting Called to Order</b>	Robin Manke called the meeting to order at 11:04am. Introductions were made, and it was determined that we had a quorum. The minutes from the November meeting were reviewed and approved.	<b>Motion by:</b> Robert Trimmer <b>Seconded by:</b> Andrew Slater <b>Vote:</b> November meeting minutes approved
<b>Reports:</b>  HCA  Bon Secours  VCU	Ken Smith – no report  Jill Russell – no report  Robin Manke – We continue to work on our unique pathogens unit, and we will be holding a conference on unique pathogens in the spring.	



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<p>RHCC</p> <p>RAA</p> <p>Chesterfield Fire</p> <p>SVEC</p> <p>VDH</p> <p>ODEMSA</p>	<p>Andrew Slater – There was a non-MCI patient surge event this week, where there was an increase in the number of patients needing dialysis. We had all hospitals post a special diversion status and instructed providers to call medical control to help distribute patients.</p> <p>Bryan McRay – The storm provided some challenges and we ended up using equipment purchased for the UCI bike race, such as the ASAPs, to help reach patients.</p> <p>Dr. Yee – We are finishing our AAR for the bus MCI and recovering from the snow.</p> <p>Bubby Bish – no report</p> <p>James Moss – no report</p> <p>Heidi Hooker – There is some money from the state available to help EMS and hospitals work together. Kelly Parker further explains how the application process will work.</p> <p>The group discusses some ideas, such as MCI planning and training. Andrew Slater, Dr. Yee, Ken Smith, and Bubby Bish agree to work together to come up with several ideas to send to the ODEMSA Board of Directors at their March meeting.</p> <p>Heidi also notes that OEMS is looking for additional Symposium presentation proposals.</p>	
<p><b>Old Business:</b></p>	<p>Monthly Regional Triage Day – Dr. Yee notes that this idea has gone before the Metro Fire Chiefs; conceptually, everyone seems to agree, but wants to wait for the new triage tags (and potentially MUCC) before starting it. Bubby notes that MUCC has been incorporated into MCI 1 and 2. Dr. Yee suggests introducing the concept and educating providers ahead of time, then making dummy tags when the new triage tags are available. This could then be started at a small scale, then built up.</p> <p>Hospital Evacuation Plan – Ken notes that they have purchased access to a program called DQE, which is an online education suite. One of the modules on it is hospital</p>	



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	<p>evacuation. There are 500 licenses under it that will be shared with hospitals. We are also offering it to long term care facilities if they want to participate in evacuation training. I plan to get the workgroup together again soon.</p> <p>Status of WebEOC Changes – VHHAS updates will begin next month, mostly to the administrator levels first.</p> <p>MCI Plan Review/Update – Rachel explains that the annual review and update of this document is due this quarter. The group discusses the following suggestions:</p> <ul style="list-style-type: none"> <li>- Page 9: 3<sup>rd</sup> paragraph – clarify to not call MCI Medical Control for non-MCI patients unless type 3 or higher</li> <li>- Page 11: change “will be required to carry” to “ideally will carry” identification → plans will be made to help all providers obtain acceptable ID</li> <li>- Page 11: add “in the absence of [an agency’s] online or on-scene medical direction...”</li> </ul> <p>The group also discusses the CHEMPACK annex, and notes some deficiencies relating to the care of the on-scene responders. The group decides to leave the annex out of the MCI plan for now to allow that document to be further edited.</p> <p>Dr. Yee makes a motion to have Rachel send out a clean copy of the MCI plan to the voting members of the committee for an electronic vote, with instructions on how to complete the electronic vote within 10 business days. Motion is seconded by Bubby.</p>	
<p><b>New Business:</b></p>	<p>Recent MCIs – The review will be discussed next quarter.</p> <p>There is no further business from the floor.</p>	
<p><b>Next Meeting</b></p>	<p>The meeting was adjourned at 12:06pm.</p>	
<p><b>Adjourn</b></p>	<p>April 22, 2016 at 11:00am.</p>	