



OLD DOMINION EMERGENCY MEDICAL SERVICES ALLIANCE INC.

7818 East Parham Road Suite 911
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 804-560-3300 • FAX: 804-560-0909
 www.odemsa.vaems.org

Hospital Diversion Committee

January 28th, 2022: 10:00am to 11:00am
 Chair: Tim McKay, Chesterfield Fire Dept

Members and Guests Present: N/A

Conference Line:

ODEMSA Staff: Tarsha Robinson, Heidi Hooker, Ryan Scarbrough, Rick McClure, Jessica Goodman, Tiffany Almeida

Minutes Scribed by: Tarsha Robinson

Materials provided: Previous meeting Minutes, meeting Agenda

Topic/Subject		Recommendations, Action/Follow-up; Responsible Person
Meeting Called to Order	Meeting called to order by Tarsha Robinson and Heidi Hooker. Quorum present.	Motion by: Seconded by: Vote:
Reports: <u>VCU</u> <u>HCA</u> <u>McGuire VA</u> <u>Bon Secours</u>	Continuing to work with EMS to implement strategies to reduce wall times; thank you to the agencies for working with staff Facilities have been busy but is appreciative of the collaboration and communication w/agencies; several agencies have placed HCA facilities on “soft” diversion to help reduce load; appreciation extended to the agencies with their assistance and working with the staff Still having to go on ICU/mental health diversion but will see if there’s anything that can be done to assist crews and reduce wall times Noticed an uptick in in-patient holds than the last few weeks; thank you to the agencies with their assistance and working with the staff to reduce wall times	



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<p><u>RAA</u></p> <p><u>Hanover Fire</u></p> <p><u>Chesterfield Fire</u></p> <p><u>New Kent Fire</u></p> <p><u>Goochland Fire</u></p> <p><u>Henrico Fire</u></p> <p><u>Charles City/Cumberland/Delta Medical/ESS/Henrico VRS/Petersburg/Powhatan/SVEC/VanGuard</u></p> <p><u>ODEMSA</u></p>	<p>As soon as pilot to come off of Code Black began, transport volume dropped; turn-around times have “been decent”; appreciation extended to facilities working with agencies to reduce wall times</p> <p>Call volume has decreased; there were two isolated incidents of diversion but those facilities were made aware and is “business as usual”</p> <p>Appreciation extended to the facilities for their collaboration; call volume has been “average”; have not had to institute “soft” diversion or divert crews since pilot of coming off of Code Black began</p> <p>Call volume has been a little lower than average but no issues with wall times</p> <p>Call volume has been average; no significant issues or concerns noted</p> <p>Call volume has gone down slightly; no significant issues or concerns</p> <p>No major concerns or issues at this time</p> <p>Thank you to all who supported the PDC and all the volunteers</p>	
<p>Old Business:</p> <p><u>Diversion Plan Review</u></p>	<p>The extension of the PDC operations have been successful, and all facilities are grateful that it was able to be used to help decompress the system; several options went out to the committee to discuss the continuance of the PDC, and the general consensus was that it was not feasible at this time for the PDC to continue as is; the vote on the floor is that after the trial period of going off of Code Black, that PDC operations will stop immediately (17:00 01/28/2022); the language of the Diversion plan will continue to be worked on by the Diversion sub-committee/work group, however at this time, the Plan itself will be suspended; voting members via official roster voted for suspension of the Diversion plan as follows: Bon Secours-yay</p>	<p>Motion: Brandon Mencini Second: Multiple Vote: suspend PDC operations immediately; hospitals will remain in an “open” status except in times of duress (i.e. CT scanner down) or “closed”</p>



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	HCA-yay VAMC-yay VCU-yay CVHC-yay PD15-yay w/the condition that VHASS continue to be used as the notification tool for hospitals and EMS providers as currently used	
New Business: <u>Recent Diversions</u>	N/A	
Next Meeting	April 29th, 2022	
Adjourn	The meeting was adjourned at 13:34 pm	