



OLD DOMINION EMERGENCY MEDICAL SERVICES ALLIANCE

7818 East Parham Road • Suite 911 • Henrico, VA 23294-4302
Phone: (804) 560-3300 • (804) 560-0909 • www.odemsa.net

Training and Education Committee

May 19, 2025

10:00 am – 11:00 am

Chair: Marquita Whisonant, VCU CTCCE

Vice Chair: Damien Coy, Brightpoint

- Members and Guests Present:** Megan Middleton
- Web Conference:** Adam Alford, Jason Johnson, Marquita Whisonant, Will Wyatt, Amanda Bryant, Amy Stewart, Nakia James, Monty Dixon
- ODEMSA Staff:** Megan Middleton
- Minutes Scribed by:** Megan Middleton
- Materials Provided:** Previous meeting minutes, agenda, standing reports

Topic / Subject	Discussion	Recommendations, Action / Follow-up; Responsible Person
Meeting Called to Order	Meeting called to order at 10:07 am by Chairman Marquita Whisonant. Quorum present. December and February minutes and May agenda were approved.	Motion: To approve the December, February minutes and May agenda Made By: Adam Alford Second: Amanda Bryant Motion passes unanimously
EMS Reports		
Halifax Rescue / Southside	Jason Johnson - The county has hired eight providers and put them up in North Halifax by an EMS station. I've got eight up there, and we just started doing in-house training with those guys. We started that in January, and it's going well. Just to give you an idea; in January of last year, they missed 20 calls. This January, they only missed 5. So that shows what we're doing is working. I'm waiting on the rest of the reports to come in now to get a quarterly report finalized, but I'm impressed with the direction things are going. We're looking at doing the same at a couple of other locations in the county, too. But right now, we've got to watch our budget. Just payroll for that	



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	<p>one truck is about \$750,000. If we add that setup to two more stations, that's about \$1.5 million in payroll alone. So yeah, we're looking at it and trying to figure it out.</p>	
<p>Henrico County Division of Fire</p>	<p>Monty Dixon - We are looking good. We just graduated a group of 38 EMTs who are now in the process of taking their EMT test, with the new test. We've had some scheduling concerns. We've been using Chesterfield a lot for the Pearson VUE test on the other side, and they've had some technology challenges that have caused students to wait for a couple of hours, and sometimes not even get into the site. So, we've had to do a lot of administrative stuff on the back end to make sure students don't have to repay for the test, reschedule, etc. Other than that, we're looking good. Tiffany had a great pass rate with the paramedic academy. I think we're at Academy 6 that just finished, and they all passed. We're now looking to enroll the next one, and the application process is already out there. We're just rolling along. I will tell you; we're getting ready to do another big hire, we're looking at 45 people again. So, a lot is coming down the pipe. We need people, and we need to retain the people we already have. Oh — one other cool thing — the Alaska guys are here.</p>	
Hospital Reports		
<p>HCA</p>	<p>Amy Stewart - Happy EMS Week, love everybody, super excited! We do have our EMS Appreciation Night at Hardywood this evening starting at 5. It's a family backyard barbecue style. We've got food trucks; we've got beer tickets. I'll be there wearing my Hanover Fire volunteer hat, not my HCA hat. So, we encourage everybody to come out. It's super fun, and my little ones will be there running around causing havoc! And then for Forest specifically, we have our "Trauma Thursday" this Thursday. We'll be outside all day with games and our new EMS t-shirt. I just got mine this morning, and I can't reveal it yet, I'm super excited to wear it. That's all I have for updates HCA-wise. If there's anything else, I'm sure Jess will let you know. But that's all I've got.</p>	
Accredited EMS Programs		



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<p>VCU CTCCE</p>	<p>Adam Alford - Not sure if I announced this previously, but we do have a new associate medical director who will be working with Dr. Rossi. Dr. Rossi is still our main medical director, but Dr. Josh Cole is going to be the associate medical director. He's an acute care surgeon, but he's also been a paramedic and a combat medic.</p> <p>We also completed our annual report; I think that was submitted last month. We have two cohorts that started recently: an I-to-P program that meets on Thursdays, and an EMT-to-P program that will continue through the year. The I-to-P is scheduled to end in October. We have a new paramedic cohort starting in Crater in October, and applications are currently online for that. So far, our grants haven't been cut, which is good. We're entering year 3 of the big CARA grant. We gave out \$162,000 worth of EMS course vouchers over the past year. I don't have exact numbers yet, but I believe we've had around 50 new underrepresented EMTs get certified in the past couple of years, which we're proud of.</p> <p>Also, just as a heads-up, Jay had knee surgery recently and is having a bit of a rough time. So, if you've got his number, feel free to reach out and check in on him. Hopefully, he'll be back soon. Yes, we do have some tentative retirement dates coming up, I'll wait to share those until they're confirmed.</p> <p>Oh, and yes — thanks for reminding me — Garrett Lewis officially retired April 1st. He had been using his leave, so he hadn't been in the office since January. We did hire a replacement, her name is Barbara, and she's fantastic. She's running day-to-day operations and honestly runs laps around me, which isn't hard.</p> <p>We're also absorbing the EPD BLS training load. That means we'll be doing about 3,000 BLS students per year now, because we're taking over what the hospital had been handling. So yes, we're actively recruiting help!</p>	
<p>ECPI</p>	<p>Amanda Bryant - I just want to make everybody aware, if they weren't previously aware of the passing of Jen Reese, who was our program director. I am now, the program director, but also still the clinical coordinator. So, I am playing both roles now and currently hiring. We just had a group of 15 EMTs finish but I'm still waiting for a systematic glitch to be fixed on National</p>	



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	<p>Registry's end so that I can clear them to test. 10 of them are going on to paramedic, hopefully in 4 weeks. I just need to get them tested. We did also have a 6-paramedic cohort finish. As of May 11th, they are all scheduled to test. Two of them, um, have already tested and passed. We do have a brand-new cohort of EMTs that just started on May 12th, it's about 28 of them right now. Then we have two other paramedic cohorts that are still in the mix.</p>	
<p>Reynolds CC</p>	<p>Nakia James - Morning, everybody. Just some brief updates. We completed 2 EMT cohorts this past spring semester, which was about 2 weeks ago. They're in the testing process currently. We just started another EMT cohort for the summer that started today. I think that's 13 to 15 students. They'll be finishing at the end of July. We have 2 paramedic cohorts in session right now, one is slated to finish in December, and the other in May of next year. Some other changes going on here at the downtown campus, we officially started construction today for our new EMS simulation suite and immersive SIM lab. We're excited about that. It's slated to be completed by August 1st, if all goes well. I also want to dispel a rumor; it appeared that we were no longer offering the paramedic program at Reynolds. That is not true. We've made some changes. We're now offering a certificate paramedic program and a new associate's degree program in technical studies, called the Public Safety Leadership degree.</p> <p>This degree caters to both EMS and fire and allows individuals to bring in pre-existing certifications toward a more meaningful, customizable degree. That's now officially rolled out and on our website. We're starting a new paramedic cohort in the fall. Also, the number of credits in our certificate program has been almost cut in half; not the course content, just the credit hours. This was a VCCS-wide curriculum change. It reduces the cost for students and allows for an accelerated pace if desired.</p>	
<p>Brightpoint CC</p>	<p>Will Wyatt - I've got some updates for our program. Class-wise, for the spring we had two EMT cohorts and an AEMT cohort complete. Our evening EMT, six of eight finished. Our daytime EMT; three of thirteen completed. For AEMT, seven of eight completed. So far, three have tested and three have passed, I'm excited about that.</p>	



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	<p>Our paramedic cohort (cohort two) is entering their final semester. They'll be done July 28th, and we've got 14 students in that right now. For the summer, we've got an EMT program capped at 20 — it's full and has a waitlist. It starts tomorrow and runs Tuesdays through Saturdays. Other things we've got going on — we did our CSSR for CoA this past spring. It was a great learning opportunity for me, and it was rather enjoyable. We submitted it, and our site visit is coming up in 2026. The email I got said they're planning for a visit between April and June of 2026. Amanda, just as a heads-up, they're giving about a year's notice now, which is nice.</p> <p>We also completed our annual survey. As far as fall classes go, nothing's posted right now. Our dean is still working on that, so we'll see what happens. We did get a grant through VCCS for Stop the Bleed and TECC education. That'll come with about 50 individual kits, so hopefully good things will come from that. Our big news is that we've got a new program director stepping in for Brightpoint. Lauren Dumas is going to be the new program director. That was announced last week and went into effect on Friday. So, if you need anything EMS-related from Brightpoint, Lauren is now your contact.</p>	
ODEMSA Reports		
<p>Megan Middleton</p>	<p>I finished up an EMT class at Richmond Fire. I started with 29 students. Over the course of the class, 6 withdrew, and 3 were already EMTs, so of course they passed. I ended up graduating 20 full EMTs from that class.</p> <p>As far as ODEMSA itself; we're very uncertain right now, especially with the Office of EMS. What I do know tentatively is that they're reducing the number of councils from 11 to 7. I believe the four hybrid councils are going to be the ones absorbed — again, I'm not 100% sure, and the plans can change. Also, technically, our contract is supposed to end June 30th with OEMS, but they're not ready to move forward with anything yet. So, it looks like the contracts will be extended, possibly until December 2025.</p> <p>We're short-staffed, which is why we've been a little stricter about people picking up equipment. I just need to make sure someone's here to give it out</p>	



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	and not out at lunch or at an MCI exercise. Right now, it's just me, Heidi, and Ryan. We do have some part-timers, but availability is limited.	
Preceptor Training for Accredited Programs		
Megan Middleton	<ul style="list-style-type: none"> • Total Submissions: 214 • Unique EMS Agencies Represented: 26 • Provider Level Breakdown: A breakdown by certification level was included (specific numbers not detailed in transcript). • Average Program Rating: 4.3 out of 5 <i>(This was added based on a previous committee request to include satisfaction data.)</i> • Open Comments Received: 10 <i>(A comment box was made available for participants to provide qualitative feedback.)</i> • Visuals Provided: <ul style="list-style-type: none"> ○ Rating distribution chart (approx. 800–900 ratings submitted) ○ Submission volume by provider level ○ Top 10 submitting agencies chart • New Agencies Added: <ul style="list-style-type: none"> ○ Lake Monticello ○ Pulaski County 	Actual report at the bottom of the minutes.
Stop the Bleed Coalition		
	No formal report was provided during this meeting due to Greg's absence. The committee agreed to defer the Stop the Bleed update and request Greg provide the full report at the next scheduled meeting.	
Old Business		
Regional Education Needs Assessment	During the meeting, Megan Middleton presented the findings of the regional educational needs assessment, which surveyed EMS agencies across the region to identify trends, gaps, and opportunities in EMS education. The results revealed a diverse representation of agency types (career, volunteer, and combination) and a strong emphasis on ALS-level care. While	



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	<p>many agencies offer continuing education (CE) in person, virtual and third-party platforms are also being utilized. Notably, ACLS, PALS, PHTLS, and ICS 300/400 were frequently reported as required training for both paramedics and EMTs. A significant portion of agencies (67%) indicated they do not have dedicated EMS education staff, and financial challenges—particularly related to tuition, infrastructure, and backfilling—remain a barrier for some. Agencies also shared preferences for course delivery formats, with a mix of 2–3-day schedules and academy-style daily programs. Education and career development pathways vary, with some agencies requiring associate or bachelor’s degrees for advancement, while others report no formal education requirement.</p> <p>Lastly, several agencies expressed interest in regionalized or shared training solutions, such as:</p> <ul style="list-style-type: none"> • ODEMSA-hosted EMT courses • Shared instructor programs • Regional scheduling coordination <p>A full breakdown of responses and data visualizations are included in the slide deck attached at the end of these minutes.</p>	
<p>Provider Safety and Wellness Initiative</p>	<p>ODEMSA is putting this on hold. We’re kind of putting any new projects on hold until December, until we figure out what OEMS is going to do and what they’re going to fund. We decided we don’t want to put forth energy building something that may not be accepted or able to be used. So right now, we’re going to focus on building up our current programs.</p>	
<p>Protocol Review</p>	<ul style="list-style-type: none"> • Protocol 4-2: Regional Field Triage Scheme This protocol, developed by the Medical Direction Committee, was reformatted into a simplified flowchart to improve clarity and reduce visual clutter. It outlines transport destinations based on red and yellow triage criteria, with an added section for burn patients. The subcommittee recommended including a pediatric age definition (“<15 years old”) in the 	<p>Motion: To approve protocols 4-2 (Regional Field Triage Scheme), 11-1 (12-Lead Acquisition), 11-2 (Capnography), and 11-3 (Pulse Oximetry) and</p>



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	<p>red and yellow criteria boxes. Megan Middleton will confirm that addition with MDC.</p> <ul style="list-style-type: none"> Protocol 11-1: 12-Lead Acquisition This protocol was revised to include clearer clinical presentation and rationale, with updated guidance for special populations. Formatting changes included removal of outdated text boxes and revisions to image examples. Megan requested feedback from Amy, who contributed to drafting the updated language. Protocol 11-2: Capnography Capnography guidance was expanded to include both advanced and BLS airway monitoring. A new table was added with waveform examples depicting various conditions (e.g., ROSC, hypoventilation, cuff leaks). A chart summarizing causes of increased and decreased EtCO₂ was added, replacing lengthy narrative sections for improved readability. Protocol 11-3: Pulse Oximetry The overview section was completely rewritten to improve clarity and accuracy. A key addition was a bolded note highlighting that SpO₂ readings can be falsely elevated in cases of carbon monoxide exposure. While the existing images and waveform recognition examples were retained, the pearls section was rewritten for improved tone and instructional value. 	<p>forward them to the Medical Direction Committee for final approval Made By: Nakia James Second: Amanda Bryant Motion passes unanimously</p>
<p>EMCE Documentation to PTAP</p>	<p>Megan Middleton initiated a follow-up discussion regarding a note from a previous meeting about adding a documentation program referred to as EMCE to PTAP. Nakia James clarified that the program is used by some accredited programs as a valid alternative to systems like FISDAP and Platinum Planner. Nakia emphasized that the intent is to raise awareness that EMCE is a legitimate and vetted documentation program, not something students are introducing independently. Megan acknowledged she had explored the platform herself and could gather screenshots for inclusion. She noted a technical challenge with the existing PTAP videos, which would require re-recording audio over PowerPoint slides if EMCE were to be fully integrated into the video-based content.</p>	<p>Megan concluded that she would review how best to incorporate MC into PTAP materials moving forward.</p>

New Business



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	No new business.	
Business from the Floor		
	No business from the floor.	
Adjourn		
	The meeting adjourned at 11:06 am.	With no further business being noted, Marquita Whisonant adjourned the meeting.