Theron Becker 17:08

Weekly update from meetings:

- We have made some adjustments to the education and competency requirements for staff. Each requirement has options for remediation, so it is very attainable. I'm going to send an email tomorrow with all the details when I have more time to formulate and explain. These changes have been approved by Medical Direction, Human Resources, and your leadership team. March 1st will be the go-live date. The Feb protocol quiz and STEMI competency have been altered to the new format, but requirements for attendance remain the same for those two events.
- The FTO list for 2021 has been finalized. Again, I'll send an email tomorrow and make all the changes in our databases and systems when I have a little more time.
- Looking like we are ready to make our bulk order of the disposable laryngoscope blades next week. When they come in, the blades and handles we currently have will go in backup status on each ambulance and the new ones are completely disposable (including the handle).
- The budget requests have been finalized. Some will be presented tomorrow morning and some next week and then the rest the following week. Yes, three different meetings with hospital admin to make all the proposals. There are 34 different things we are asking for totaling $1.9M.
- The leadership team will start having individual discussions with everyone for our bi-annual performance center discussion. They are due by the end of March.
- Protocol committee met today and has an assignment to solicit some input on the format each of you prefer. I'm going to give a shameless plug with my opinion here. The options are listed below:

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Option 1. Online format similar to what we have. Slightly condensed to try to fit as
many on each page as possible and printed copies in each ambulance and in each
station. Formulas and all the website bells and whistles will still work. Designed
with a lot of "considers" and promoting critical thinking.
Option 8. Change the online format of mostly paragraphs to mostly flowcharts like
AHA or Cox algorithms. Will be a total pain in the butt for me to do the graphics to
make flowcharts work. Good for those that want to follow A then B then C and a
strict roadmap for patient care.
Option 10. Go back to the way we used to do it with one PDF document. Will loose all
the online advantages such as formulas and calculations.
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