

**Rappahannock EMS Council  
Pharmacy Committee Meeting  
Tuesday December 7, 2004**

**Minutes**

Meeting called to order by Chairperson Kevin Dillard at 10:00 a.m. at the REMS Council Training Room.

Members present:

Kevin Dillard, REMS Board Member  
Tim Kimble, Council Program Rep.  
Robert Zywiak, Mary Washington Hospital Pharmacy  
Chris Simmons, Culpeper Hospital  
Don Taylor, Spotsylvania Fire & EMS  
Joey King, LifeCare Medical Transports  
Karin Bankston, EMS Coordinator, Mary Washington Hospital  
Linda Harris, REMS Systems Coordinator

Others Present

Tina Skinner, REMS Staff

I. Committee Charter Completed:

Mission:

Working to develop effective policies for use and exchange of our regions EMS medication kits to include medication box protocols and the medication box exchange programs at regional hospitals.

Purpose:

Improve the level of care provided by the medical personnel operating under the cognizance of REMS. To develop policies and procedures for medication temperature storage and needle stick safety to assure compliance.

Key Customers:

Critical customers are patients that are treated and transported by our regional EMS providers; the EMS providers; the Emergency Department OMD's and staff; Hospital pharmacies; EMS agencies and REMS council staff.

Resource Support:

Resources for this committee would be a representative from the Board of Pharmacy; REMS staff and financially from the Rescue Squad Assistance Fund (RSAF) to support special projects.

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Decision-Making:

Bi-Monthly reports to the Rappahannock EMS Council Board of Directors.

Authority for Independent decisions:

Recommendations only

Goals/Expected Outcomes:

- Develop policies and procedures for region wide medication temperature storage on EMS units.
- Develop policies and procedures for a needle stick safety program to assure compliance. Develop training program for needle stick safety.
- Identify the specialty EMS Teams in our region to include ERT and Search & Rescue teams. Develop policies for storage of critical care medications that are used by these teams under the state scope of practice.
- Develop region wide policy for exchange of medications used on all EMS units at all Region's Hospital Pharmacies.
- Develop region wide standardized narcotic box design.
- Develop region wide key system for all ALS providers.
- Develop survey to send to agencies and ALS providers on wants, wishes and needs for Pharmacy Committee.
- Work on developing RSAF Grant request for region wide standardized medication boxes and region wide security system.

Proposed Meeting Schedule:

Monthly meeting for the next few months then bi-monthly.

Next meeting January 4, 2005 at 10:00 AM at Culpeper Hospital Board Room.

Topics for next meeting:

Invite Terry Gamlin from Stafford County Office of Fire & Rescue on the status of the one for one drug exchange pilot program between Stafford County and the Mary Washington hospital Pharmacy.

Invite Ralph Orr or member of the Board of Pharmacy

Discuss information found about the Temperature Control Devices on the current market.

Rappahannock EMS Council  
Pharmacy Committee Meeting  
Tuesday, January 4, 2005

Minutes

Meeting called to order by Chairperson Kevin Dillard at 10:00 a.m. at the Culpeper Regional Hospital Board Room.

Member Present:

Kevin Dillard, Chairperson  
Robert Zywiak, Mary Washington Hospital Pharmacy Operations Manager  
Holly Worst, Mary Washington Hospital Pharmacy Operations Manager  
Karin Bankston, EMS Coordinator, Mary Washington Hospital  
Chris Simmons, Culpeper Regional Hospital  
Don Taylor, Asst. Chief, Spotsylvania Fire & EMS  
Joey King, Life Care Medical Transports  
Linda Harris. REMS Systems Coordinator

Excused

Tim Kimble, Council Program Rep

Others present:

Chuck Thompson, Director Stafford County Fire & EMS

The meeting was called to order by Chairperson, Kevin Dillard at 10:00 a.m. at the Culpeper regional Hospital Board Room. After introductions were made the minutes from the December 7, 2004 meeting were approved as submitted.

The agenda as follows:

1. Final Committee Charter. Copies were e mailed to committee members and it was approved as submitted.
2. Temperature Control Devices. An information sheet for the temperature control device (TEMP X) that Fredericksburg Fire Dept. is using was passed around. The cost that they received was about \$3,000 each. Don Taylor has information on a unit that costs about \$500.00. He will forward that information to the REMS office. He questioned on the necessity for temp control devices. He would like some clarification and definition from the state OEMS and Pharmacy Board on what entails temp control for medications, IV supplies and drug on approved units. Since RSAF grant funds 50/50 the costs would be difficult for smaller agencies. Mr. Orr from the Pharmacy Board will be invited to the next committee meeting to address these issues.

3. One for One medication exchange. Chuck Thompson, Director from Stafford County Office of Emergency Services spoke to the committee on the effectiveness of the pilot program between Stafford County and Mary Washington Hospital Pharmacy. Mr. Thompson provided copies of their Standard Operating Procedures for this program. It was based on a program he was part of in Fauquier County and modeled after a program in Anne Arundel, Maryland using a Nox Box vault system for the narcotic drugs with a non-duplicating key system. These boxes cost about \$500.00. Each approved, released ALS provider is issued the SOP's and signs for the key for the NOX Box, which is issued by Mr. Thompson. The providers check and document the contents of the Narc container, which is a small clear plastic box, weekly to include the expiration date and seal number. When this box needs to be exchanged it is taken to the pharmacy. Stafford County purchased smaller medication boxes, which are inventoried monthly. The medications in this box are exchanged in the ER in a special Accudose machine. There was some discussion about starting a gradual phase in program to bring rest of the regions agencies on board with this program. When Stafford County started their program they met with the MWH Pharmacy and their OMD Dr. Dalberg. Stafford County along with their OMD had to secure their own Pharmacy License. Don Taylor from Spotsylvania will research their county acquiring their pharmacy license through their OMD to join the pilot program. They already have a non-duplicating key program for the medication box. But would purchase the Nox Box if it was indicated that they need that one. Bob Zywiak stated that if they do come on board with the pilot program the pharmacy will stock the machine more frequently.

Chris Simmons will contact some agencies in Northern Virginia to seek how they handle the drug exchange program at their hospitals. Chris will also invite the pharmacy director at Culpeper to our next meeting to address the possibility of a one for one exchange program at Culpeper Hospital.

Some additional questions for State Program Rep and Mr. Orr from the pharmacy board are the security needs for medication and IV supplies on units; location of med box keys for that unit and that drugs are to be charted where dispensed.

There is a potential Grant opportunity for the purchase of new narcotic and drug boxes. The small clear boxes were used before but it is unclear why they were no longer used except for the fact that one drug had changed how it was packaged and no longer fit in a small slot. The boxes had to be adapted. Bob Zywiak will look into the reasons and the status of those boxes.

Joey King and Chris Simmons report that both Westmoreland County and Culpeper County medication boxes contain all medications including the narcotics.

Don Taylor, Joey King and Chris Simmons will work on guidelines, protocols and policies for medication boxes, one for one exchange and location of keys on units to include possible RSAF grant items.

#### 4. Committee Goals Assignments:

1. Policies & procedures for region wide temperature storage of medication on EMS Units—Joey King
2. Policies & Procedures for needle stick safety programs – Don Taylor
3. Identify special ERT and Search & Rescue Teams in our area and develop policies for storage on critical care medications – Don Taylor
4. Develop region wide policy for exchange of medications used on EMS units at all area hospitals – Don Taylor
5. Develop region-wide standardized narcotic box system – Don Taylor
6. Develop region wide key system for ALS providers-Don Taylor
7. Develop survey to send to ALS providers on wants, wishes and need for the Pharmacy Committee – Linda Harris
8. Work on developing RSAF grants request for region wide standardized medication boxes and security system – Don Taylor & Linda Harris

All will report at meeting next month on the progress of these goal assignments.

#### 5. New Business

Don Taylor asked for the status of the drug, narcotic box exchange at Culpeper Hospital. He would like to have a MWH narcotic box available to his crews that transport to Culpeper Hospital. Chris Simmons will look into this and report at the next meeting.

Don Taylor wants to know the status of agencies that charge a fee for service having access to the Pyxis machine at the MWH ER. Colonial Beach charges for transport only not supplies used but cannot access the Pyxis machine to replace supplies used on the unit. Karin Bankston states that Colonial Beach does not have a signed contract stating that they only charge for mileage not supplies. Kevin Dillard asked Bob Zywiak and Karin Bankston to please look into this a report back to him on the status.

Don Taylor asked Bob Zywiak if there was a possibility that D25 and D10 could be added to the medication box for use in pediatric and newborn diabetic patients. We currently only carry D50 which is difficult to dilute in the field. Mr. Zywiak states that both are available, the D25 is a syringe and D10 in a 250 ml bag. He along with Karin Bankston will research what is involved including the OMD approval to add these to the medication box.

There being no further business the meeting was adjourned. Next meeting is tentatively set for Tuesday February 1, 2005 at 10:0 a.m. in the REMS Council 2<sup>nd</sup> Floor Training Room at 2301 Fall Hill Avenue, Fredericksburg, Va.

**Rappahannock EMS Council  
Pharmacy Committee Meeting  
Tuesday February 1, 2005**

**Minutes**

**Members Present:**

Karin Bankston, Mary Washington Hospital EMS Coordinator  
Linda Harris, REMS Council Systems Coordinator  
Tim Kimble, Virginia Office of EMS Program Representative  
Chris Simmons, Culpeper Hospital  
Don Taylor, Spotsylvania County Department of Fire, Rescue & Emergency Svcs  
Robert Zywiak, Mary Washington Hospital Pharmacy

**Excused:**

Kevin Dillard, Chairman  
Joey King, LifeCare Medical Transports

**Others present:**

Marianna Bedway, Mary Washington Hospital ER

The meeting was called to order by Linda Harris, in the absence of Chairman Kevin Dillard, at 10:00 a.m. at the REMS Council Training Room in Fredericksburg, Va. Minutes of the January 4, 2005 meeting were approved as submitted.

The agenda as follows:

1. Temp Control Devices. A report from Joey King was read concerning a conversation he had with Mr. Orr from the Pharmacy Board. Mr. Orr indicated he refers any questions on this matter to the Virginia OEMS and their EMS Regulations. The information Mr. King received from the State Office is that the primary concern is if the vehicle is not housed in heated and air-conditioned bays. They would need some sort of temperature-controlled device. There was a discussion on whether temperature control devices are needed or if temperature-monitoring devices would be the better way to go. The question was raised of who would be responsible for replacement of the drugs if they exceeded the temperature range and have to be discarded due to the agency not monitoring the compartment. The VAOEMS stand is the agency would be responsible for the costs of the replacement drugs. There was more discussion on

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whether drugs lose their effectiveness if there is just a single spike in temperature or does it take a longer period of time at the varied temperature to make the drug ineffective. Also is the drug ineffective if the temperature of the drug has varied from the norm during storage or is it ineffective when the temp is above or below norm when being used on the patient. Bob Zywiak will research the drugs that are carried by agencies and the temperature variances that would make them ineffective. Linda Harris will contact Mike Berg for information on the temperature-monitoring device he has found. Bob Zywiak will look into a device that is used at MWH. The committee will wait until the fall Grant Cycle for any grant opportunities to allow time to study temperature ranges. Tim suggested that if we do proceed with a region wide grant we ask for an 80/20 grant. With the state providing 80%, Council 15% and agencies 5%. Especially since most agencies work on very tight budgets and would not be able to afford multiple purchases for temperature control devices. The council would have to budget for funds for this project.

2. The One for One Medication Exchange – Don Taylor presented a Draft Proposal for the Region-wide Standard Operating Guidelines for the One for One Exchange Program. This was based on Stafford County's current program. The goal is to have the one for one exchange at all regional hospitals for medication exchange. The Narcotic boxes will not be included in the one for one exchange. The Narcotic box will need to be exchanged in the pharmacy or through the pyxis at the nurse's station, as is the current policy at Fauquier Hospital. Once an EMS agency decided to adopt the one for one exchange program they will send a letter to the REMS Pharmacy Committee requesting to change to this program. The letter will include their OMD endorsement. It will be the Pharmacy Committees responsibility to notify the receiving hospital pharmacy that this agency is to be added to the program. Then the pharmacy can add them to the dispensing machine. Each agency is responsible for the training of the ALS providers on the new policies and machine use. This draft document states that the med box keys will be in a designated location on the EMS vehicle. The Narc Box Keys will be a non duplicating type key that will be issued to released ALS Providers by the designated officer from each agency. There was some discussion as to whether the REMS Council office would issue the keys. The decision was that REMS Council would issue a blank number of numbered keys to each person that will be responsible for the keys from each locality, county, and/or agency. The agency is responsible to maintain a document for each

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numbered keys to include the signature of the provider that the key was issued to. Agency will provide a list to the REMS Council of ALS members and the key number that was issued to them. REMS will in turn provide the master list to the hospital pharmacy. Tim Kimble suggested that the career office in each county distribute the keys. Mary Washington Hospital does support this program. Culpeper Hospital, according to Chris Simmons, does not plan to purchase a pyxis machine for a number of years. Currently the provider will take the PPCR to the nurse's station in the ER with a list of medications used and she will retrieve them from her machine. Tim Kimble will take a copy of the draft to Fauquier Hospital for their approval. He believes they will support the program.

Don will make some minor changes in the draft proposal, and will be prepared to present it at the next OMD meeting.

3. The needle stick safety program has been put on hold. The provider that Don Taylor assigned to the project is on medical leave.
4. Storage for Critical Care medications for special ERT and Search & Rescue Teams. Don presented a list of the proposed drug box medications that would be needed for these teams. The list contains 7 new medications that would require OMD approval and protocols. Robert Zywiak from MWH will research the availability of the 7 new medications.
5. ALS Survey. Survey will be linked to the REMS Council Website and letters will be mailed to all ALS providers to notify them of the link and the survey. This survey will last for several months.
6. RSAF Grants – The grants will be held until the fall cycle until research is completed on the planned projects.

There being no further business the meeting was adjourned. Next meeting will be **March 1, 2005, 10:00 a.m. in the REMS Council 2<sup>nd</sup> Floor Training Center** at 2301 Fall Hill Avenue, Fredericksburg.



**Rappahannock EMS Council  
Pharmacy Committee Meeting  
March 1, 2005**

**Minutes**

**Members Present:**

Kevin Dillard, Chairperson  
Linda Harris, REMS Council Systems Coordinator  
Joey King, Life Care Medical Transports  
Robert Zywiak, MWH Pharmacy

**Guests:**

Tina Skinner, REMS Council Director  
Mike Grubb, Spotsylvania County Department of Fire, Rescue & Emergency Svcs  
Russ Hummel, Biomedical Equipment & Engineering

**Excused:**

Tim Kimble , Virginia Office of EMS Program Representative  
Chris Simmons, Culpeper Hospital  
Don Taylor, Spotsylvania County Department of Fire, Rescue & Emergency Svcs.

The meeting was called to order by Chairperson Kevin Dillard at 10:00 a.m. at the REMS Council Training Room in Fredericksburg, Va. Minutes of the February 1, 2005 meeting we approved as submitted.

The agenda as follows:

1. One for One Medication Exchange. Tina Skinner reported on conversation she had with both Mike Berg, Compliance Manager at the Virginia Office of EMS, and Mr. Robert Orr from the Pharmacy Board. She spoke to them in reference to item E2 of our Draft proposal for the One for One medication exchange. It references the location of the medication box key on EMS units. Pharmacy regulations state that controlled substances include all scheduled drugs. Under the CSR, Controlled Substance Registration, that we would have to apply for to do the one for one drug exchange specifically outlines that you must control access of drugs and who can obtain and who has access to controlled substances. Mr. Orr agreed that this interpretation is correct. This means that our draft of the one for one exchange will need to be revised as far as the location of the med box keys on EMS units. Tina further stated that controlled substances include Schedule 1 through Schedule 6 medications and the narcotics. Access to all these medications must be controlled. Mike Berg will

contact all program representatives to make sure they understand the regulations for access to controlled drugs. Mike Grubb will meet with Don Taylor to revise the draft proposal. Tina suggested adding to the document the process where by the agency and/ or the council office will need to apply for the controlled substance registration to include the application and fees. And to identify that ultimately it will be up to the medical director for each locality to participate. The draft needs to state that the OMD will have to sign the CSR. The council is willing to apply for all agencies for the registration. Tina would also like for the term 'response vehicle' to be changed to EMS licensed vehicle. The former term can be confusing. Mike Grubb will meet with Don Taylor to make the changes.

2. Needle Stick Safety Program – Mike Grubb reports that the provider that was assigned to this project will report on its progress at the next meeting. He has been on medical leave.
3. Region Wide Temperature Storage – There was a presentation by Mr. Russ Hummel from Biomedical Equipment & Engineering on the temperature monitoring devices and temperature regulation equipment. He has completed research on the need for temperature monitoring devices on EMS units. According to Mr. Hummel the recommendation of the FDA and pharmacy manufacturers is that the temperature range for pharmaceuticals should not be below 50 degrees or above 85 degrees. He monitored 100 med boxes in the ODEMSA Region for about a month at a time from the last week of July 2000 and again in January 2001. During the earlier survey 10 boxes never left the pharmacy. The average number of hours that the medications were above the maximum temperature was 88 days. One box exceeded the temperature for over 500 hours. The latter survey was unfortunately during a milder than normal January. Approximately one third of the boxes went below the minimum during this survey. During these two surveys 89 of the 90 boxes had exposure outside the recommended ranges. There was some discussion about our possible grant for temperature monitoring devices for the 350 EMS licensed units that are within our region. Since Mr. Hummel's research seemed so thorough the decision was not to pursue a RSAF Grant for monitoring devices. There was further discussion on the Pharmgard Temperature Storage unit. They make a small unit that is about 3 ½ cubic feet and approximately sells for \$700.00. The larger unit is 7 ½ cubic feet and costs about \$900.00. Retrofitters and installers would need to insulate the top, bottom, sides, back and door of existing cabinet, plus adding a seal to the door. This could cost approximately \$2,000.00. Once this is completed and the device is installed it will regulate the temperature of the cabinet by adding cooling when the internal temperature reaches 72 degrees and add heating when the temperature reaches 55 degrees.

Bob Zywiak reported on the temperature variances of the medications that are carried by our EMS agencies. He stated that pharmacy companies are reluctant to give information on variations on temperature ranges. He was told that guidelines are set and they will not discuss repercussions if the medications go

outside the guidelines. Mr. Zywiak suggested that during the peak months the agencies could possibly exchange med boxes every 2 weeks if they have not been used. Tina stated that it should be the decision of the Pharmacy as to whether a drug has been compromised or can remain in the field.

The committee has decided to work on a 3 to 5 year plan for RSAF Grant requests for all agencies for the Pharmgard Temperature Storage unit. This will include retrofitting EMS licensed units. The council will also advise agencies as they place RSAF grant requests for new ambulances to add the Pharmgard unit to the request. Kevin will make contact with the state committee about adding this item to the next bid list for the state ambulance contract. The REMS committee will set guidelines on which units will receive the addition of the Pharmgard device. If the ambulance is due to be replaced within the next two years it should not be included for the retrofit. A memo will be sent to agencies for possible grant requests for the Pharmgard.

4. Critical Care Medication Storage – Bob Zywiak stated that he is still checking on the availability of the seven new drugs.
5. ALS Survey – Linda Harris reported that the survey was up and running last week. A link has been added to our web site. A memo was faxed to agencies last week. We have over 600 ALS providers in our region and we felt it was more cost effective to initially fax letters to agencies telling them about the survey. If the response is minimal we will mail letters to selected ALS providers. As of this morning there were 19 responses on the survey. A notice will be posted at MWH about the survey. Comments from the survey will be e mailed to committee members prior to the next meeting.
6. RSAF Grants – This will wait until the fall cycle to place grant request for the Pharmgard device.

There being no further business the meeting was adjourned. The next meeting will be in 2 months on May 3, 2005 at 10:00 a.m. in the REMS 2<sup>nd</sup> Floor Training Room at 2301 Fall Hill Avenue, Fredericksburg.

**Rappahannock EMS Council  
Pharmacy Committee Meeting  
Tuesday May 3, 2005**

**Minutes**

**Members Present:**

Kevin Dillard, Chairperson  
Karin Bankston, Mary Washington Hospital EMS Coordinator  
Linda Harris, REMS Council Systems Coordinator  
Tim Kimble, Virginia Office of EMS Program Representative  
Joey King, LifeCare Medical Transports  
Don Taylor, Spotsylvania Career  
Chris Simmons, Culpeper Hospital

**Guests:**

Tina Skinner, REMS

**Excused:**

Robert Zywiak, MWH Pharmacy

The meeting was called to order by Chairperson Kevin Dillard at 10:00 a.m. at the REMS Council Training Room in Fredericksburg, Va. Minutes of the March 1, 2005 meeting were approved as submitted.

The agenda as follows:

1. One for One Medication Exchange.

Don Taylor reported that the Draft Proposal is completed and was presented to the REMS Board Of Directors at their last meeting. A vote on the proposal could not be taken since there was not a quorum at the meeting. The next step would be the Pharmacy Committee Chairperson taking the document to the REMS Board Executive Committee for a vote of confidence. Then it will be presented to the REMS Council Medical Direction Committee. Tina Skinner suggested adding an education component directed at the 13 Operational Medical Directors to make sure they understand the document and to educate them on the process. There is still an outstanding question of the location of the key to access the medication and narcotic boxes. Per Tina Skinner the Pharmacy Boards definition of a controlled substance is all scheduled drugs and access needs to be controlled. The medical directors will be required to control access for all controlled substances not just the narcotics. After some discussion on the

location of the keys the decision of the committee was to proceed with the One for One Document as it was written.

## 2.Storage of Critical Care Medications.

A report from Bob Zywiak from MWH Pharmacy was read stating the availability of the Critical Care Medications that Don Taylor advised in an earlier meeting were needed by the Critical Care Teams. Most of the medications are available but the pharmacy needs more information such as exact amounts of each medication. Per Don these medications are on the State Scope of Practice for Critical Care Teams. A few of the medications will need to go to the REMS Council Medical Direction Committee for approval since they involve Rapid Sequence Intubation procedures. Don will have his team work on Draft Protocols to go to the REMS Protocol Committee for utilization of these medications.

## 3.Needle Stick Safety Program.

Don Taylor presented a draft of a Power Point Program for Basic Training for Needle Stick Safety for EMS Providers. When finalized, it will go to the REMS Board of Directors for approval. It was suggested that when this program is approved the REMS Office could host a Train the Trainer program for the agencies Infection Control Officers. Tina stated she would work with Jenni Carter to develop and advertise a program geared towards our regions ICO's. They will provide a CD of the Power Point Program and any other information that will be needed for agency training. Don suggested to apply for CEU's for the program. Karin Bankston suggested adding the MWH Exposure Form to the Power Point Presentation. It should include information on how and when to fill out the form and where to place the form once it is completed. Any comments or changes to the program need to be directed to Don Taylor. Once the final changes are made Don will get a final copy to Tina at the REMS office.

## 4. ALS Survey

Results of the survey were e mailed to committee members. There were over 52 responses and it included a good combination of volunteer and career providers. Comments included opening up the Pharmacy Committee meetings for all providers to attend. The REMS Council website will be updated and all committee meetings will be listed so that providers can attend if they choose to. All REMS Council Committee Meetings are open meetings. Kevin asked that we add a note that if a provider chooses to attend a meeting that they notify the chairman of the committee or the REMS Office. The majority of the responses support the one for one medication exchange. There were numerous complaints about the Narcotic containers. The pencil bags that are now being used at MWH are not adequate. One provider actually witnessed another provider removing a drug syringe from the container without breaking the seal. Linda will do a search for another type of container. Another question was raised about ALS providers

being able to use all of the medications that the state has listed within their Scope of Practice. Per Jenni Carter the state list is a guideline and all the mandatory drugs are on the list. Several providers complained that MWH Pharmacy takes too long to restock boxes. Some other providers requested additional supplies of ASA be added to the med box. The current supply is 4 individual blister packs. But if the medic drops one on the floor it cannot be used. Generally 37% of all those that responded are satisfied with their hospital pharmacy. The survey will be closed for now. It was suggested to activate the survey again next year to start trending responses.

## 5. Grants

There was some discussion on what the committee will request as a RSAF Grant in September. There was a suggestion to research a different container for the Narcotics that are carried on EMS Units. Linda will research different containers and will report next meeting. Tim Kimble states that many agencies will place the narcotic bag in the same locked container as the medication box. It should be in a separate smaller locked container. Don reports that his agency has a box that costs approximately \$50.00 plus the cost of the non-duplicating keys. He will bring that information to the next meeting.

There being no further business the meeting was adjourned. The next meeting will be Tuesday July 5, 2005 at 10:00 a.m. in the 2<sup>nd</sup> Floor Training Room of the REMS Council Office, 2301 Fall Hill Avenue, Fredericksburg, Va 22001