

Training and Certification Committee
Virginia Office of EMS – 1041 Technology Park Dr. Glen Allen, VA 23059
January 3, 2018
10:30 am

Members Present:	Members Absent:	Staff:	Others:
Ron Passmore-Chair William Akers Craig Evans Kathy Eubank William ‘Billy’ Fritz Brian McIntosh Larry Oliver Christopher Kroboth	Dr. Robin Foster Dr. Charles Lane - Excused	Gary Brown Warren Short Debbie Akers Chuck Faison Peter Brown Dr. George Lindbeck	Jason Rodman Tom Olander Ed Moreland Jason Ambrose Adam Alford Michelle Ludeman Greg Neiman Matt Lawler Steve Powell Nicholas Klimenko Wayne Perry

Topic/Subject	Discussion	Recommendations, Action/Follow-up; Responsible Person
I. Welcome	The meeting was called to order at: 10:36am	
II. Introductions	Introductions were made of committee members and guests.	
III. Approval of Agenda	The Committee reviewed the Agenda for today’s meeting. (Attached)	Approved by General Consent
IV. Approval of Minutes	The Committee reviewed the minutes of the July 5, 2017 Quarterly Meeting (Attachment: A) Committee agreed that printed minutes were no longer necessary – all minutes are distributed electronically	Approved by General Consent
V. Reports of Committee Members	<p>A. Reports of Committee Members</p> <ol style="list-style-type: none"> 1. Chairman Report –Ron Passmore – April 4, 2018 will be final meeting as chair of committee. Tenure on EMS Advisory Board will end in June. He will be working with EMS Advisory Board chair on replacement as chair. Stated he would remain as committee chair until his replacement is named. 2. MDC – Dr. Lane - Excused/Dr. Lindbeck – New chair of Medical Direction, Dr. Lisa Dodd will be present at meeting tomorrow weather permitting. <ol style="list-style-type: none"> a. Non-VCCS EMS Program – No Report b. VCCS-No Report c. VAVRS – No Report d. Regional EMS Council Executive Directors – No report 	

Topic/Subject	Discussion	Recommendations, Action/Follow-up; Responsible Person
	<p>e. EMS-C – Not Present f. VAGEMSA – No Report g. Fire Based Organization – No report h. Educators – No Report</p> <p>B. Office of EMS</p> <ol style="list-style-type: none"> 1. BLS Training Specialist – Reported by Debbie Akers <ol style="list-style-type: none"> a. EC Institute <ol style="list-style-type: none"> 1. The Institute was held in Chesterfield from December 9 – 12. 2. 24 New EC’s were Certified 3. This was the last Institute under the old process 4. Anyone who has applied under the old process will be required to complete a new application but all requirements met under the old system will be transitioned to the new system. b. New EC Process <ol style="list-style-type: none"> 1. Will be available online by January 31, 2018. 2. If you are selected as an EC mentor, you will have a new tab on your OEMS portal to facilitate this mentoring process. c. Updates <ol style="list-style-type: none"> 1. The DED Division will continue to present on the road for 2018. Schedule has not been determined pending the hiring of the new BLS Training Specialist. 2. See the latest schedule on OEMS webpage: http://www.vdh.virginia.gov/emergency-medical-services/ems-educator-update-schedule/ 2. ALS Training Specialist – Debbie Akers <ol style="list-style-type: none"> a. NR Stats (ATTACHMENT: B) <ol style="list-style-type: none"> 1. Report distributed 2. Virginia continues to match the Registry pass rate b. Accreditation (ATTACHMENT: C) <ol style="list-style-type: none"> 1. Report distributed 2. Any program listed with an asterisk next to their accreditation status are allowed to have ‘in-house’ CTS or psychomotor competency verification. 3. EMSTF – Chuck Faison <ol style="list-style-type: none"> a. EMS Scholarship Program and Contracting with Regional Councils <ol style="list-style-type: none"> 1. EMS Scholarship <ol style="list-style-type: none"> i. First cycle of EMS scholarships have closed. Received approximately 160 applications ii. Several glitches and issues with the system. OHE has been in contact with the appropriate students to assist with application completion. iii. Working to improve the system and to access applications on web database for approval decisions. One hurdle currently is after OEMS has approved a student, they are notified and receive a contract in the mail for signature and return. Currently waiting on the Attorney General (AG) office for final approval of the contract to issue awards to students. iv. Intent is to have a rolling process to make the scholarship more accessible to all students. 	

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	<p>v. There is no breakdown currently of BLS versus ALS applications or geographic distribution of applicants in response to question from Chris Kroboth.</p> <p>2. CE Auxiliary Contracts</p> <p>i. Made contact with the Regional Councils prior to the holidays. Actively working to create reporting templates for EMSTF funding from the CE & Auxiliary programs.</p> <p>ii. IT anticipates development of templates in next two weeks to allow OEMS to gather pertinent data from these reports.</p> <p>4. Testing – Peter Brown</p> <p>1. Consolidated Testing</p> <p>i. CTS Staffing continues to decline, specifically in the Western regions (CSEMS/BREMS). Currently no HR Specialist on staff, duties are being handled by Adam Harrell in addition to all other responsibilities. Actively seeking individual interested and qualified to apply when the positions are announced.</p> <p>ii. CTS Examiners will be utilized to conduct unannounced visits at the accredited programs using in-house psychomotor competency. A check list is being developed by the office to allow an objective evaluation to occur.</p> <p>iii. Scenarios are being developed with pulse oximetry, glucometry and end-tidal Capnography values available. Workgroup also looking at adding Albuterol and Naloxone to the EMT scenarios. Also determining whether it will be necessary for Medical Control to be contacted for all medication.</p> <p>iv. Discussing potential for future scenarios to include pediatric patients with the use of a manikin and a speaking adult. Recommendation coming from EMS for Children</p> <p>a. Discussion by committee. Kathy Eubank expressed concern that this could potentially increase the difficulty/stress of the CTS testing. Brian McIntosh questioned the ability to incorporate the pediatric respiratory distress scenario into the CTS with use of OPA/BVM). Dr. Lindbeck stated that healthcare providers overall are not comfortable with pediatric calls unless you work in a specialty center. Will need to review and address in future. No resolution will be reached at this time.</p> <p>v. Evaluators will have more specificity to critical criteria to remove subjectivity still present in testing.</p> <p>vi. Reminded committee that the seated spinal immobilization (KED) has been removed from the CTS effective December 1, 2017.</p> <p>5. Division of Educational Development – Warren Short (Given by Debbie Akers)</p> <p>a. Greg Neiman left the Office of EMS in October, 2017, to pursue a new adventure and the office wish him well. The new candidate has not been named, however, they are currently in the background investigation process.</p> <p>b. National Registry has issued formal notification that Intermediate 99 testing will end on December 31, 2019. If a testing candidate has not passed by that date, they will have no further opportunities to certify at the Intermediate level. Stated that consideration should be given to dual enrolling students in an AEMT program</p>	

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	<p>in the event they are not successful on passing the L-99 examination. Program should consider a ‘sunset date’ to ensure student success in testing.</p> <ol style="list-style-type: none"> 6. State Medical Director – Dr. George Lindbeck <ol style="list-style-type: none"> a. Scope of Practice will be on the agenda at MDC tomorrow. <ol style="list-style-type: none"> 1. Document must be a living/breathing document to allow changes based upon science and evidence-based medicine. 2. Will be discussing allowing EMT’s to draw up epinephrine from a vial to replace the Epi-Pen. Previously has been felt to be outside the scope of practice for the EMT. Looking for alternatives to combat the cost of Auto-Injector price fluctuations. Pre-filled syringe kit of epinephrine has been approved by the FDA. ADAMIS pharmaceutical is the company that has produced this product branded as SYMJEPi. b. DEA – Drug Control Act of 1973: Potential rule writing change will shift to the agency level the responsibility for acquiring, storing and accountability of EMS medications. Agencies need to start looking at this process; the regional drug box exchange program will not meet these new requirements. 7. Regulation and Compliance – Position currently vacant 8. OEMS Director – Gary Brown <ol style="list-style-type: none"> a. Scott Winston currently overseeing the Regulation & Compliance Division with Mike Berg’s departure to UVA at the end of October, 2017. Interviews are in process to fill this position. b. A new division titled Community Health & Technical Resources has been formed. Interviews are being conducted to name the Division Manager. c. Adam Harrell is now the Business Manager for numerous agencies within VDH through collaborative services. It is anticipated that a new OEMS business manager or administrative position will be filled within a year to manage day-to-day OEMS business. d. New Governor will be inaugurated in the next few days. There have been some changes in positions, however, no action to reappoint or replace the Commissioner of Health at this time. e. Cam Crittenden and Gary made presentations recently on the new stroke plan. f. HB-1728 work has been completed. g. Question from Bill Akers concerning replica and students being acknowledge across state lines. Gary stated that currently our only board state signed to REPLICa is Tennessee. Hopefully, West VA and Kentucky will sign later this year. Maryland currently not considering this as a priority. 9. OEMS Assistant Director - Scott Winston – Not Present 	
VI. Old Business	None	
VII. New Business	<ol style="list-style-type: none"> 1. Availability of CTS Sites (Bill Akers) <ol style="list-style-type: none"> a. Due to accredited programs no longer utilizing CTS for testing there is a concern about the availability of test sites for students from non accredited programs. Recommended having a time-dependent (non- 	Motion by Bill Akers to establish a workgroup to

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	<p>number expectation of CTS timeframes. Discussion by committee – no resolution. Tabled until April 2018.</p> <p>2. Change of CPR pre-requisite requirement and organizational changes. (ATTACHMENT: D)</p> <p>a. Presented proposal to change CPR from a pre-requisite requirement to a co-requisite requirement and also to remove the specific listing of CPR courses approved and leave it to the program director/course coordinator to determine that the CPR meets the requirements established by regulation 12VAC5-31-1417. Discussion by committee.</p> <p>3. CTS Discussion (Kathy Eubank)</p> <p>a. Requested information on how changes are made to the Consolidated Testing Process without it being vetted through the Training & Certification Committee. Debbie Akers states that a discussion concerning the removal of certain skills from testing based on evidenced based practice. A meeting was held with Dr. Lindbeck which resulted in the removal of the KED from CTS without input from the TCC committee. Medical Direction was in support of this move. After discussion it was resolved that scenarios will remain protected within OEMS but should major changes be recommended, those changes would be brought before committees for input.</p>	<p>review issue and report back to TCC. Motion carried.</p> <p>Motion by Chris Kroboth, second by Bill Akers, motion carried.</p> <p>Will be presented to Governors EMS Advisory Board.</p>
VIII. Public Comment	None	
IX. Dates for 2017 Meetings	2018 dates are January 3, April 4, July 11, October 3	
X. Adjourn	Meeting adjourned at: 14:07	

Respectfully submitted by: _____
 Deborah T. Akers
 OEMS Staff Representative
 January 3, 2018

**Attachment: A to the
January 3, 2018 TCC Minutes**

**Approved
July 5, 2017
Minutes of the TCC**

Training and Certification Committee
Virginia Office of EMS – 1041 Technology Park Dr. Glen Allen, VA 23059
July 5, 2017
10:30 am

Members Present:	Members Absent:	Staff:	Others:
Ron Passmore-Chair William Akers Chad Blosser Kathy Eubank William ‘Billy’ Fritz Brian McIntosh Larry Oliver	Dr. Robin Foster Christopher Kroboth -Excused Dr. Charles Lane - Excused	Adam Harrell Michael Berg Greg Neiman Debbie Akers Chuck Faison Peter Brown Dr. George Lindbeck	Jason Sweet Donna Galganski-Pabst Paul Long Tony Prata Wayne Perry Hunter Elliott Nick Morelos Nicholas Klimenko John Walker Leilani Deforest Debbie Brennaman Jason Rodman Jason Ambrose

Topic/Subject	Discussion	Recommendations, Action/Follow-up; Responsible Person
I. Welcome	The meeting was called to order at 10:32am.	
II. Introductions	Introductions were made of committee members and guests.	
III. Approval of Agenda	The Committee reviewed the Agenda for today’s meeting. (Attached)	Approved by General Consent
IV. Approval of Minutes	The Committee reviewed the minutes of the April 5, 2017 Quarterly Meeting (Attachment: A)	Approved by General Consent
V. Reports of Committee Members	A. Reports of Committee Members <ol style="list-style-type: none"> 1. Chairman Report –Ron Passmore – Yield to Larry Oliver regarding Town Hall Meetings 2. MDC – Dr. Lane - Excused/Dr. Lindbeck – Issues coming up at the meeting tomorrow are the Intermediate Discussion and changes in the Scope of Practice that need to be voted on. 3. Committee Members <ol style="list-style-type: none"> a. Non-VCCS EMS Program – No Report b. VCCS-No Report c. VAVRS – No Report d. Regional EMS Council Executive Directors – No report 	

Topic/Subject	Discussion	Recommendations, Action/Follow-up; Responsible Person
	<ul style="list-style-type: none"> e. EMS-C – Not Present f. VAGEMSA – No Report g. Fire Based Organization – No report h. Educators – No Report <p>B. Office of EMS</p> <ul style="list-style-type: none"> 1. BLS Training Specialist – Greg Neiman <ul style="list-style-type: none"> a. EC Institute <ul style="list-style-type: none"> 1. The Institute was held in Chesterfield on June 24-28. 2. 24 New EC's were Certified, 8 Full Candidates and 16 Fire Instructors 3. This was the last Institute under the old process and has cleared the board for the new process b. New EC Process <ul style="list-style-type: none"> 1. Still waiting on IT to complete the programming necessary to implement the new process 2. Hoping to roll it out in time for fall c. Updates <ul style="list-style-type: none"> 1. The DED Division has continued to present on the road for 2017. <ul style="list-style-type: none"> i. Last Update was in WVEMSC in Blacksburg on Saturday, June 6th, 2017 2. See the latest schedule on OEMS webpage: http://www.vdh.virginia.gov/emergency-medical-services/ems-educator-update-schedule/ d. TPAM 2. ALS Training Specialist – Debbie Akers <ul style="list-style-type: none"> a. NR Stats (ATTACHMENT: B) <ul style="list-style-type: none"> 1. Report distributed 2. Virginia continues to match the Registry pass rate b. Accreditation (ATTACHMENT: C) <ul style="list-style-type: none"> 1. Report distributed 2. Dabney S. Lancaster Community College has become a satellite site for Central Virginia 3. CSEMS Council will be transitioning all of their courses to Blue Ridge CC by 2018 4. Reaccreditation of New River Training Center completed. 5. CoAEMSP is behind on sending reports to some programs <ul style="list-style-type: none"> i. Recently received an e-mail regarding competencies for programs ii. Will be reviewing with the accredited programs for any changes necessary in Virginia 3. EMSTF – Chuck Faison <ul style="list-style-type: none"> a. EMS Scholarship Program and Contracting with Regional Councils <ul style="list-style-type: none"> 1. EMS Scholarship <ul style="list-style-type: none"> i. Still working with Office of Health Equity to finalize the process ii. Online application is moving forward 2. CE Auxiliary Contracts <ul style="list-style-type: none"> i. Were submitted to the Regional Councils for review ii. Waiting to hear who will participate. Have heard from 2, one who signed and one who replied they will not be participating. 	

Topic/Subject	Discussion	Recommendations, Action/Follow-up; Responsible Person
	<p>4. Testing – Peter Brown</p> <ol style="list-style-type: none"> 1. 2017 Updated PEG is forthcoming <ol style="list-style-type: none"> i. Updated the Watch Policy, following NR lead, singling out Smart Watches only, other analog/digital watches are ok. ii. The use of the clocks in the stations is optional- but preferred iii. Clarification for EMR Candidates – Not graded on applying cervical collars or backboarding in Trauma Assessment Station iv. Candidate Orientation Speech has been updated. <ol style="list-style-type: none"> a. Added information at the end on what’s next for candidates i.e. Registration for NR Exam 2. Will be updating scenarios next to bring them in-line with changes, including oxygen delivery <p>5. Division of Educational Development – Warren Short</p> <ol style="list-style-type: none"> a. Welcome back to 1041 Technology Park Drive. b. MC-55 Scanners <ol style="list-style-type: none"> 1. Beginning August 1, will no longer be supported 2. File format will change sometime around that time, once that occurs they will no longer be able to submit to the system 3. Will be holding WEBINARS on the new scanner program this month c. Office of EMS/VDH has a rolling open enrollment Grant program for Nasal Narcan d. Internal Psychomotor Exam for BLS Accredited Programs <ol style="list-style-type: none"> 1. Policies are being developed 2. Looking to roll out and approve programs by this fall e. EMS Symposium is scheduled <ol style="list-style-type: none"> 1. Looking to open Registration by July 15th 2. Have changed the format <ol style="list-style-type: none"> i. 1 hr. sessions instead of 1.5. ii. Starts at 8am 3. ~360 Classes for 2017 Symposium 4. Cadaver Labs for IO is will be running continuously on Saturday and Educators are encouraged to participate <ol style="list-style-type: none"> i. Scheduled back-to-back ii. Providers need to be aware to not schedule courses that start and end at the same time. Door policy will be strictly enforced <p>6. Regulation and Compliance – Michael Berg</p> <ol style="list-style-type: none"> a. DDNR Regulations Final Exempt Packet was sent to Attorney General’s Office <ol style="list-style-type: none"> 1. New law recognizing out of state DDNR went into effect July 1 b. Notice of Intended Regulatory Action (NOIRA) <ol style="list-style-type: none"> 1. Published, opened and closed without comment 2. New Regulations will be posted to the Town Hall leading to approval by the EMS Advisory Board and will then be opened for comments. 	

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	<p>3. Still work to be done, will be meeting with Division of Educational Development to work on some definitions and policies</p> <p>4. HB 1728 Workgroup regarding helicopter EMS, may produce new regulations that will need to be included</p> <p>c. Disturbing Trend</p> <ol style="list-style-type: none"> 1. Students openly admitting falsifying patient contacts and then testing and certifying 2. May lead to revocation of certification from NR. If so, will result in revocation from VAOEMS 3. This can have an impact on the Accredited Programs themselves <p>d. The use of EMS must be documented and submitted to the Office through the Elite Bridge</p> <ol style="list-style-type: none"> 1. The policy went into effect July 1 2. Call reports must be completed within 12 hours of the call, ideally at the end of the call 3. Clarification about what reports need to be submitted – Contact Michael Berg <p>Ron Passmore discussed recent FDA information regarding Epinephrine</p> <p>7. OEMS Director – Gary Brown – Not Present</p> <p>8. OEMS Assistant Director - Scott Winston – Not Present</p> <p>Question from Bill Akers regarding REPLICA. Michael Berg, Warren Short and Debbie Akers discussed the current status.</p>	
<p>VI. Previous Business</p>	<p>A. Workgroups</p> <ol style="list-style-type: none"> 1. I-99 Planning Workgroup – Larry Oliver <ol style="list-style-type: none"> a. Larry Oliver, Chad Blosser and Ron Passmore discussed the events at the Town Hall Meetings b. Gary Critzer presented at each Town Hall (presentation posted online here: http://www.vdh.virginia.gov/content/uploads/sites/23/2017/01/I-99TownhallPresentation2017.pdf) c. Received little comments at the Town Halls or Online (ATTCHMENT: D) <p>Motion: With the initial activity performed by the Training and Certification Committee workgroup and in review of the available information from the Intermediate 99 Town Hall meetings and public comments received, the Training and Certification Committee supports the finding that Virginia does not have the resources to develop and maintain valid, reliable and legally defensible certification exams. The workgroup further recommends that when the National Registry of EMTs no longer offers an Intermediate 99 examination, Virginia will cease issuing initial Intermediate certification and that existing Intermediates in Virginia will be able to maintain their Intermediate certification indefinitely through continuing education, with no reentry mechanism.</p>	<p>Motion by: Larry Oliver</p> <p>That: (see text of motion to the left)</p> <p>Second: Not Required coming from a committee</p> <p>Discussion was held</p> <p>Vote: Unanimously Approved</p>

Topic/Subject	Discussion	Recommendations, Action/Follow-up; Responsible Person
VII. New Business	None	
VIII. Public Comment	None	
IX. Dates for 2017 Meetings	2017 dates are January 4, April 5, July 5, October 4	
X. Adjourn	Meeting adjourned at: 1140	

Respectfully submitted by: _____
 Gregory S. Neiman
 OEMS Staff Representative
 July 5, 2017

DRAFT

Training & Certification Committee
Wednesday, April 5, 2017 - 10:30 AM
Virginia Office of EMS 1041 Technology Park Dr., Glen Allen, VA 23059
Meeting Agenda

- I. Welcome**
- II. Introductions**
- III. Approval of Agenda**
- IV. Approval of Minutes from April 5, 2017**
- V. Reports of Committee Members**
 - A. Reports of Committee Members
 - i. Chairman Report
 - ii. Medical Direction Committee - Dr. Charles Lane
 - iii. Committee Members
 - B. Office of EMS
 - i. BLS Training Specialist – Greg Neiman, OEMS
 - ii. ALS Training Specialist – Debbie Akers, OEMS
 - iii. EMSTF – Chuck Faison, OEMS
 - iv. Certification Testing Coordinator – Peter Brown, OEMS
 - v. Division of Educational Development (DED) – Warren Short, OEMS
 - vi. Regulation & Compliance – Michael Berg, OEMS
 - vii. Director/Asst. Director – Gary Brown/Scott Winston, OEMS
 - viii. Other Office Staff
- VI. Previous Business**
 - A. Workgroups
 - i. I-99 Planning Workgroup – Larry Oliver
- VII. New Business**
- VIII. Public Comment**
- IX. Dates for 2017 Quarterly Meetings**
 - A. ~~January 4, April 5, July 5, October 4~~
- X. Adjourn**

**Attachment: A to the
July 5, 2017 TCC Minutes**

**Approved
April 5, 2017
Minutes of the TCC**

Training and Certification Committee
Virginia Public Safety Training Center (VPSTC) - 7093 Broad Neck Road, Hanover, VA 23069
April 5, 2017
10:30 am

Members Present:	Members Absent:	Staff:	Others:
Ron Passmore-Chair	Dr. Robin Foster	Gary Brown	Tom Olander
William Akers		Scott Winston	Michelle Ludeman
Chad Blosser		Adam Harrell	Jason Sweet
William ‘Billy’ Fritz		Michael Berg	Donna Galganski-Pabst
Christopher Kroboth		Greg Neiman	Amy Ashe
Brian McIntosh		Debbie Akers	Jason Ambrose
Larry Oliver		Chuck Faison	Cathy Cockrell
Dr. Charles Lane		Dr. George Lindbeck	Chris Christianson
Kathy Eubank			Nicholas Klimenko
			Jay Gould
			Wayne Perry

Topic/Subject	Discussion	Recommendations, Action/Follow-up; Responsible Person
I. Welcome	The meeting was called to order at:10:32am	
II. Introductions	Introductions were made of committee members and guests. Charles “Chuck” Faison was introduced as newest DED employee.	
III. Approval of Agenda	The Committee reviewed the Agenda for today’s meeting. (Attached)	Approved by General Consent
IV. Approval of Minutes	The Committee reviewed the minutes of the January 4, 2017 Quarterly Meeting (Attachment: A)	Approved by General Consent
V. Reports of Committee Members	<p>A. Reports of Committee Members</p> <ol style="list-style-type: none"> 1. Chairman Report –Ron Passmore – Discussion about the I-99 Town Hall meetings that have been held so far. Greg Neiman summarized the comments voiced at the recent Town Hall meetings and Dr. Lane discussed his presentation at the VAVRS Meeting held Friday, March 31, 2017 in Roanoke. 2. MDC – Dr. Lane/Dr. Lindbeck - No Action Items at the last meeting. 3. Committee Members <ol style="list-style-type: none"> a. Non-VCCS EMS Program – No Report b. VCCS-No Report c. VAVRS – No Report d. Regional EMS Council Executive Directors – No report e. EMS-C – Not Present 	

Topic/Subject	Discussion	Recommendations, Action/Follow-up; Responsible Person
	<ul style="list-style-type: none"> f. VAGEMSA – No Report g. Fire Based Organization – No report h. Educators – No Report <p>B. Office of EMS</p> <ul style="list-style-type: none"> 1. BLS Training Specialist – Greg Neiman <ul style="list-style-type: none"> a. EC Institute <ul style="list-style-type: none"> 1. June will be the last Institute under the old process 2. The deadline is April 23rd to pass the Cognitive EC Pretest 3. The next Psychomotor Exam is scheduled for May 6th in the Richmond Area 4. Due to Jake’s Schedule, the next Institute is June 24-28 and will be held in the Richmond Area instead of in Blacksburg as it has been held in the past. b. Updates <ul style="list-style-type: none"> 1. The DED Division has continued to present on the road for 2017. <ul style="list-style-type: none"> i. Saturday Updates were held in ODEMSA in February and TJEMS in March. ii. Next Update is in LFEMSC on Saturday, April 22nd, 2017 2. See the latest schedule on OEMS webpage: http://www.vdh.virginia.gov/emergency-medical-services/ems-educator-update-schedule/ 2. ALS Training Specialist – Debbie Akers <ul style="list-style-type: none"> a. 2012/2016 New CE Requirements <ul style="list-style-type: none"> 1. An e-mail went out yesterday regarding the transition to the 2016 National Continued Competency Requirements (NCCR) 2. The Office completed the conversion in the Technician Training database yesterday 3. When helping providers, Educators MUST view their CE Report in order to understand what Recert process (2012/2016) they are under 4. Educators should immediately announce new courses to capture these changes. 5. With the redistribution, 60 people who had recertified after 10/1/16 have gained recert eligibility. New hour allocations mean they no longer meet the 2016 requirements. OEMS will be contacting those providers to determine how they wish to proceed. 6. Identified some issues with providers and CE timelines. OEMS will be following up. b. New Voices <ul style="list-style-type: none"> 1. The Office has hired new receptionists who will be directing calls to the appropriate OEMS personnel 2. Norma Howard will be assuming new responsibilities in the Division of Educational Development. c. Tracie Jones is out of the office on extended medical leave. Norma will begin working with Course Announcements d. NR Stats (ATTACHMENT: B) <ul style="list-style-type: none"> 1. Virginia is now matching the Registry pass rate 2. Remediation Process for the Cognitive Exam <ul style="list-style-type: none"> i. EMS Educators continue to send individuals to take general CE to remediate 	

Topic/Subject	Discussion	Recommendations, Action/Follow-up; Responsible Person
	<ul style="list-style-type: none"> <ul style="list-style-type: none"> <ul style="list-style-type: none"> ii. EMS Educators should review their students test results and design a focused remediation plan for each student iii. Upon completion a letter must be sent to Registry by the EMS Educator e. Accreditation (ATTACHMENT: C) <ul style="list-style-type: none"> i. Report distributed ii. Dabney S. Lancaster Community College is up for reaccreditation iii. CSEMS Council is working on their reaccreditation iv. No real action on Paramedic v. John Tyler Community College is working to submit their Paramedic Self-Study 3. EMSTF – Chuck Faison <ul style="list-style-type: none"> a. Remains on hold in order to comply with State Procurement Laws b. Special Initiative has been re-opened for courses that start between January 1-June 30, 2017 <ul style="list-style-type: none"> 1. Application Deadline for the Special Initiative is April 25 c. For FY18 Funding Distribution Model – The Office is planning for implementation July 1, 2017 <ul style="list-style-type: none"> 1. Looking at a scholarship Model <ul style="list-style-type: none"> i. Establishing a partnership with the Office of Health Equity for the application process 2. CE Funding <ul style="list-style-type: none"> i. Establishing agreements with the Regional EMS Councils for funding distribution ii. Contracts have been approved by DGS iii. Will be reaching out and working with the regional EMS Councils on the process <p style="text-align: center;">Discussion was held regarding the proposed changes in EMSTF Process</p> 4. Testing – Peter Brown – absent – Greg Neiman <ul style="list-style-type: none"> 1. Reminder regarding the prohibition on electronic devices and watches at CTS Sites <ul style="list-style-type: none"> i. Prepare your students to function in the testing environment 2. Secondary Eligibility process for Psychomotor Exams <ul style="list-style-type: none"> i. Sending them to watch 40 hours of videos is simply setting them up to fail, again ii. Have them do the 20 hours of Cat 1 and spend the 20 hours of Cat 2 on psychomotor exam prep. iii. Submit CE’s so they can obtain their Letter of Eligibility in their Virginia Portal 5. Division of Educational Development – Warren Short <ul style="list-style-type: none"> a. EMS Symposium is scheduled <ul style="list-style-type: none"> 1. Have changed the format <ul style="list-style-type: none"> i. 1 hr. sessions instead of 1.5. ii. Starts at 8am 2. 359 Classes for 2017 Symposium 3. Registrations will open on or about July 1 b. DED Website <ul style="list-style-type: none"> 1. Confusing and difficult to go through 2. Chuck is working to bring some order to the site 	

Topic/Subject	Discussion	Recommendations, Action/Follow-up; Responsible Person
	<p>c. OEMS is considering a move to an electronic certification card</p> <ol style="list-style-type: none"> 1. Verification of credentials can be done through the EMS Provider Search on the OEMS website <p>d. New CE Scanner Program</p> <ol style="list-style-type: none"> 1. A number of Educators have been trained both in person and via WEBINAR 2. OEMS will utilize new WEBINAR program to restart online training 3. Available via PC and Mac based devices <p>e. Discussion about the use of the Virginia Public Safety Training Center (PSTC) for the meeting</p> <ol style="list-style-type: none"> 1. Any comments can be sent by email to Adam Harrell <p>Break for Lunch</p> <p>Question from Dr. Lane regarding new RSAF Grading. Adam explained how the new requirement is calculated and discussed Return to Locality Money</p> <p>6. Regulation and Compliance – Michael Berg</p> <ol style="list-style-type: none"> a. NOIRA is in the Governor’s Office <ol style="list-style-type: none"> 1. Once it is approved and published, 1 Town Hall Meeting will be held to take comments on the NOIRA 2. After that the New Regulations will be published and Town Halls will be held b. HB 2153 <ol style="list-style-type: none"> 1. Effective July 1, will be able to recognize out of state DNRs (Reciprocity). A Sub-committee was created to facilitate this process. c. EMS Call Reports <ol style="list-style-type: none"> 1. Updated policy regarding when an EMS Call Report must be created and reported 2. If an EMS resource is utilized, a call report must be generated and submitted 3. The policy will go into effect July 1 d. NASEMSO <ol style="list-style-type: none"> 1. Approved a guideline on the safe transportation of children at their last meeting in New Orleans e. VDH <ol style="list-style-type: none"> 1. We have been directed that, in the upcoming year, the Office will work with EMS agencies in the state and they will participate in 15 VDH sponsored vaccination events. 2. Still working on logistics <p>7. OEMS Director – Gary Brown</p> <ol style="list-style-type: none"> a. REPLICIA <ol style="list-style-type: none"> 1. Have had 8th and 9th states, Wyoming and Mississippi sign-on to REPLICIA 2. 10th state, Georgia should pass legislation any day now 3. Only state which borders Virginia that has passed REPLICIA is Tennessee 4. West Virginia has submitted it to their legislature, but got in late, may not come up until next year. 5. NC is not a NR state 6. Maryland, it is not high on their list of priorities. <p>8. OEMS Assistant Director - Scott Winston</p> <ol style="list-style-type: none"> a. General Assembly 	

Topic/Subject	Discussion	Recommendations, Action/Follow-up; Responsible Person
	<ol style="list-style-type: none"> 1. SB1244 <ol style="list-style-type: none"> i. Possession and Administration of Glucagon ii. Was in subcommittee iii. Instead of going the legislative route, it was felt the issue should be addressed by the EMS Advisory Board. iv. Bill was passed directing VDH to study this and OEMS has been tasked with doing so. v. Will be brought up in MDC tomorrow. vi. Response to the Senate by November 1. 2. HB1728 <ol style="list-style-type: none"> i. Introduced by a delegate at the request of a patron ii. Patron utilized an Air Medical service and received a significant bill iii. A similar Bill in Montana, SB44, is close to being passed which would alleviate the patient from paying the balance of the bill not covered by insurance iv. Creates a Workgroup – to review the rules, regulations, and protocols governing Air Medical Services in Virginia with a focus on dispatch and billing procedures v. Report back to House Committee by November 1 vi. Will likely have to submit an interim report and then finish up later b. Dr. Lindbeck – none c. Adam Harrell <ol style="list-style-type: none"> 1. Please provide positive or negative feedback regarding the use of the Virginia PSTC 2. Kathy Eubank offered the VAVRS Office for any meetings 	
VI. Previous Business	<p>A. Workgroups</p> <ol style="list-style-type: none"> 1. Accreditation Program Internal Psychomotor Testing – Chad Blosser <ol style="list-style-type: none"> a. Met via WEBINAR for final Workgroup Meeting on February 22nd, 2017 <ol style="list-style-type: none"> 1. Completed the Draft Competency List for EMT (ATTACHMENT: D) 2. Finalized the Policy for Internal Psychomotor Verification by Accredited EMT Program (ATTACHMENT: E) <p style="text-align: center;">Discussion was held</p>	<p>Motion by: Chad Blosser That: TCC accept the motion from the Workgroup to implement the new Competencies and Internal Psychomotor Verification by Accredited EMT Programs Policy Second: Not Required Vote: Unanimously Approved</p>
VII. New Business	<p>None</p>	

Topic/Subject	Discussion	Recommendations, Action/Follow-up; Responsible Person
VIII. Public Comment	Tom Olander asked a question regarding purchase of watches instead of the use of clocks at CTS sites. Warren will follow up with Peter Brown	
IX. Dates for 2017 Meetings	2017 dates are January 4, April 5 , July 5, October 4	
X. Adjourn	Meeting adjourned at: 1315	

Respectfully submitted by: _____
 Gregory S. Neiman
 OEMS Staff Representative
 April 5, 2017

Training & Certification Committee
Wednesday, April 5, 2017 - 10:30 AM

Virginia Public Safety Training Center (VPSTC) 7093 Broad Neck Road Hanover, VA 23069
Meeting Agenda

- I. Welcome**
- II. Introductions**
- III. Approval of Agenda**
- IV. Approval of Minutes from January 4, 2017**
- V. Reports of Committee Members**
 - A. Reports of Committee Members
 - i. Chairman Report
 - ii. Medical Direction Committee - Dr. Charles Lane
 - iii. Committee Members
 - B. Office of EMS
 - i. BLS Training Specialist – Greg Neiman, OEMS
 - ii. ALS Training Specialist – Debbie Akers, OEMS
 - iii. EMSTF – Debbie Akers, OEMS
 - iv. Certification Testing Coordinator – Peter Brown, OEMS
 - v. Division of Educational Development (DED) – Warren Short, OEMS
 - vi. Regulation & Compliance – Michael Berg, OEMS
 - vii. Director/Asst. Director – Gary Brown/Scott Winston, OEMS
 - viii. Other Office Staff
- VI. Previous Business**
 - A. Workgroups
 - i. Internal Psychomotor Workgroup – Chad Blosser
 - a. Motion from workgroup
- VII. New Business**
- VIII. Public Comment**
- IX. Dates for 2017 Quarterly Meetings**
 - A. ~~January 4~~, April 5, July 5, October 4
- X. Adjourn**

**Attachment: B to the
July 5, 2017 TCC Minutes**

National Registry Statistics

EMT Statistics

As of 07/04/2017

Virginia:

Report Date: 7/4/2017 9:34:19 PM
Report Type: State Report (VA)
Registration Level: EMT
Course Completion Date: 2nd Quarter 2015 to 2nd Quarter 2017
Training Program: All

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The results of your report request are as follows:

Attempted The Exam	First Attempt Pass	Cumulative Pass Within 3 Attempts	Cumulative Pass Within 6 Attempts	Failed All 6 Attempts	Eligible For Retest	Did Not Complete Within 2 Years
5702	68% (3849)	79% (4477)	79% (4505)	0% (1)	17% (944)	4% (253)

National Registry Statistics:

Report Date: 7/4/2017 9:41:32 PM
Report Type: National Report
Registration Level: EMT
Course Completion Date: 2nd Quarter 2015 to 2nd Quarter 2017
Training Program: All

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[Show All](#) | [Show Only Percentages](#) | [Show Only Numbers](#)

The results of your report request are as follows:

Attempted The Exam	First Attempt Pass	Cumulative Pass Within 3 Attempts	Cumulative Pass Within 6 Attempts	Failed All 6 Attempts	Eligible For Retest	Did Not Complete Within 2 Years
164068	68% (112209)	80% (130569)	80% (131568)	0% (107)	16% (25974)	4% (6465)

Individual Instructor Statistics are available on the OEMS webpage at the following link: <http://www.vdh.virginia.gov/content/uploads/sites/23/2017/01/01-10-2017-16th-Percentile-EMT.pdf>

**Attachment: C to the
July 5, 2017 TCC Minutes**

Accreditation Report

Accredited Training Site Directory

As of July 4, 2017



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Accredited Paramedic Training Programs in the Commonwealth

Site Name	Site Number	BLS Accredited	# of Alternate Sites	Accreditation Status	Expiration Date
<i>Central Virginia Community College</i>	68006	Yes	--	National – Continuing	CoAEMSP
<i>ECPI University</i>	70017	Yes	--	CoAEMSP - LOR	CoAEMSP
<i>J. Sargeant Reynolds Community College</i>	08709	No	3	National – Continuing	CoAEMSP
<i>Jefferson College of Health Sciences</i>	77007	Yes	--	National – Continuing	CoAEMSP
<i>John Tyler Community College</i>	04115	Yes	--	CoAEMSP - LOR	
<i>Lord Fairfax Community College</i>	06903	No	--	National – Initial	CoAEMSP
<i>Loudoun County Fire & Rescue</i>	10704	No	--	National – Continuing	CoAEMSP
<i>Northern Virginia Community College</i>	05906	No	1	National – Continuing	CoAEMSP
<i>Patrick Henry Community College</i>	08908	No	--	CoAEMSP – Initial	CoAEMSP
<i>Piedmont Virginia Community College</i>	54006	Yes	--	National – Continuing	CoAEMSP
<i>Prince William County Dept of Fire and Rescue</i>	15312	Yes	--	CoAEMSP – Initial	CoAEMSP
<i>Rappahannock Community College</i>	11903	Yes	--	CoAEMSP – LOR	
<i>Southside Virginia Community College</i>	18507	No	1	National – Continuing	CoAEMSP
<i>Southwest Virginia Community College</i>	11709	Yes	4	National – Continuing	CoAEMSP
<i>Stafford County & Associates in Emergency Care</i>	15319	Yes	1	National – Continuing	CoAEMSP
<i>Tidewater Community College</i>	81016	Yes	3	National – Continuing	CoAEMSP
<i>VCU School of Medicine Paramedic Program</i>	76011	Yes	5	National – Continuing	CoAEMSP

Programs accredited at the Paramedic level may also offer instruction at EMT- I, AEMT, EMT, and EMR, as well as teach continuing education and auxiliary courses.

- Rappahannock Community College had their site visit in November, 2017. Awaiting final decision by CAAHEP.
- John Tyler Community College under Letter of Review. Completing self-study for submission to CoAEMSP.
- ECPI University has received their Letter of Review to conduct their first cohort class.

Accredited Intermediate Training Programs in the Commonwealth

Site Name	Site Number	BLS Accredited	# of Alternate Sites	Accreditation Status	Expiration Date
<i>Central Shenandoah EMS Council</i>	79001	Yes	4*	State – Full	July 31, 2018
<i>Dabney S. Lancaster Community College</i>	00502	No	--	State – Full	July 31, 2017
<i>Danville Area Training Center</i>	69009	No	--	State – Full	July 31, 2019
<i>Hampton Fire & EMS</i>	83002	Yes	--	State – Full	February 28, 2018
<i>Henrico County Fire Training</i>	08718	Yes	--	State – Full	August 31, 2020
<i>James City County Fire Rescue</i>	83002	Yes	--	State – Full	February 28, 2019
<i>Norfolk Fire Department</i>	71008	No	--	State – Full	July 31, 2021
<i>Paul D. Camp Community College</i>	62003	Yes	--	State – Full	May 31, 2021
<i>Southwest Virginia EMS Council</i>	52003	Yes	--	State – Full	March 31, 2019
<i>UVA Prehospital Program</i>	54008	No	--	State – Full	July 31, 2019
<i>WVEMS – New River Valley Training Center</i>	75004	No	--	State – Full	June 30, 2022

Programs accredited at the Intermediate level may also offer instruction at AEMT, EMT, and EMR, as well as teach continuing education and auxiliary courses.

- Dabney S. Lancaster Community College has decided to not renew their accreditation. They will become a satellite location for Central Virginia Community College.
- Central Shenandoah EMS Council will begin the transition of all courses to Blue Ridge Community College.

Accredited AEMT Training Programs in the Commonwealth

Site Name	Site Number	# of Alternate Sites	Accreditation Status	Expiration Date
Frederick County Fire & Rescue	06906	--	State – Full	July 31, 2020

Accredited EMT Training Programs in the Commonwealth

Site Name	Site Number	# of Alternate Sites	Accreditation Status	Expiration Date
<i>Navy Region Mid-Atlantic Fire EMS</i>	71006	--	State – Full	July 31, 2018
<i>City of Virginia Beach Fire and EMS</i>	81004	--	State – Full	July 31, 2018
<i>Frederick County Fire & Rescue</i>	06906	--	State – Full	July 31, 2020
<i>Chesterfield Fire & EMS</i>	04103	--	State – Full	July 31, 2020

**Attachment: D to the
July 5, 2017 TCC Minutes**

**Public Comments from I-99
Town Hall Meeting**

Intermediate Town Hall Public Comments : Entry # 209**Do you support the Training and Certification Committee (TCC)/Medical Direction Committee (MDC) Proposal Presented in the Townhall?**

Support EMT-I level & courses

Public Comments Concerning the Future of Intermediate

I apologize for my absence at the Richmond town hall meeting. I was unavailable due to another meeting. I would like to advocate for VA maintaining the Intermediate level for all of us who are already Intermediates. I would support VA permitting future Intermediate courses and developing a State level written and practical testing to mimic that of the NR testing.

I have been an EMS provider in VA for almost 17 years now, with 15 of those years as an ALS provider. I began as a Cardiac Tech and then bridged to Intermediate. I have never been a Nationally Registered Intermediate though. It is impossible for me to take a Paramedic course due to the clinical requirements. As an employee of the VA Department of Health Professions, I cannot work in a setting where a licensee of my agency would directly supervise or sign off on my performance as it is a conflict of interest. Therefore, I also cannot participate in any clinical experiences where licensees of DHP supervise my performance. While I realize this situation is isolated to me based on my employment, I know that others may face similar issues based on work and time restrictions. Also Intermediate courses are often less expensive and take less time than Paramedic courses, which may fit better into some providers' schedules and budgets.

I am very proud to be an Intermediate, as I was proud to be a CT. I believe that VA is the type of state that stands out for its uniqueness and that the OEMS has never shy'd away from supporting various levels of providers. OEMS supported the CT level for years which showed the agency's support for a level not recognized nationally, but that proved useful to the VA EMS system. I value my certification level and strive to provide the best care that I can at both a BLS and ALS level. I believe that Intermediates can be just as knowledgeable and sometimes more experienced than some Paramedics. I have trained several Paramedics at my squad, most of which have become stellar ALS providers. In summary, I would support maintaining the Intermediate level as well as permitting future Intermediate courses. Thank you for your consideration.

Name

Andrew Inge

Organizational Representation

myself and Lakeside VRS

Intermediate Town Hall Public Comments : Entry # 550**Do you support the Training and Certification Committee (TCC)/Medical Direction Committee (MDC) Proposal Presented in the Townhall?**

Does not Support Intermediate Proposal

Public Comments Concerning the Future of Intermediate

Virginia Office of EMS needs to move to the National standard and do away with EMT-I; the certification will be indefeasible in court if challenged, OMD's are removing more skills and will continue to move in that direction making the Certification no longer ALS, Insurance companies are not going to accept the certification for ALS care given due to not following national standard and skill depletion.

It's a prime time to do away with the certification by 2019 and follow the National Consensus. The longer the state drags this out the more problems arise and departments will not lead on there own. Don't make the same mistakes that were made with the cardiac tech certification and stop make up certifications.

Name

Curtis L

Intermediate Town Hall Public Comments : Entry # 603**Do you support the Training and Certification Committee (TCC)/Medical Direction Committee (MDC) Proposal Presented in the Townhall?**

Support Intermediate Proposal

Public Comments Concerning the Future of Intermediate

It seems that we have had much success over the years with Intermediate within Virginia. I have been an Intermediate for 12 + years and have run many successful calls. I understand and respect the idea of the training between the Paramedic and Intermediate but for years we both practiced at the same level or very close even with the training differences. The citizens of Virginia absolutely deserve the best EMS care and up to now that has been the case.

The cost involved is an issue for alot. You can attend class in another state, gaining the ability to test Intermediate to Paramedic testing for less than a third of cost to gain the same in Virginia. Having to gain this through an accredited college, in most cases in Virginia, can run cost over \$4000 plus for a student which many cannot reach or afford.

A comment has come up recently that more Paramedics are being certified in the recent years than in past. In some cases I would like to ask if they had been able to maintain their Intermediate and practice to our old standards would they have stayed at the Intermediate level and not proceeded to Paramedic.

Virginia is it own state and Intermediates have been there for many years for its citizens. Make it more reachable for us, if you chose this processes to Paramedic; control cost, time and availability for classes for the Intermediates. As I been told a few times by state employees. Intermediates in Virginia were and are trained above most other states and therefore better qualified. Let's take advantage of that for our state. I would like to see a Virginia Paramedic not necessarily National Registry associated, I plan to stay in Virginia only to practice, based on 12+ years as a Virginia Intermediate.

Name

James Johnson

Organizational Representation

Essex

Intermediate Town Hall Public Comments : Entry # 630

Do you support the Training and Certification Committee (TCC)/Medical Direction Committee (MDC) Proposal Presented in the Townhall?

Question

Public Comments Concerning the Future of Intermediate

Has there been any thought of having a Intermediate to Paramedic bridge, similar to the Cardiac to Intermediate bridge years ago. Some providers cannot take time off from work, and spend thousands of dollars to become a NREMT-P. For myself, I am happy as intermediate, but the rising cost of EMT classes and above are getting out of hand. This is part of the problem with the decline of the EMS volunteers in the commonwealth. Teach us what we did not get in Intermediate class and let us become paramedics in the state. Thank You

Name

Wayne Guffey

Email (optional)

wguffey@vintonems.com

Organizational Representation

Vinton First Aid Crew

Intermediate Town Hall Public Comments : Entry # 633

Do you support the Training and Certification Committee (TCC)/Medical Direction Committee (MDC) Proposal Presented in the Townhall?

Support Intermediate Proposal

Public Comments Concerning the Future of Intermediate

I support allowing those certified to maintain there cert. I am concerned on how this will affect grants, liability issues and poorer level of service if the state wastes money on Intermediate.

Name

Michael Deon

Email (optional)

mdeon@hampton.gov

Intermediate Town Hall Public Comments : Entry # 692

Do you support the Training and Certification Committee (TCC)/Medical Direction Committee (MDC) Proposal Presented in the Townhall?

Support Intermediate Proposal

Public Comments Concerning the Future of Intermediate

I have no public comment regarding the future of Intermediate in Virginia other than I completely support the Training & Certification Committee/Medical Direction Committee Proposal presented in the Townhall.

Name

Ashley Dye

Email (optional)

adye@patrickhenry.edu

Organizational Representation

Patrick Henry Community College

Intermediate Town Hall Public Comments : Entry # 766**Do you support the Training and Certification Committee (TCC)/Medical Direction Committee (MDC) Proposal Presented in the Townhall?**

Support Intermediate Proposal

Public Comments Concerning the Future of Intermediate

As a current EMT-Intermediate, I feel that the Intermediate is a valuable and irreplaceable member of the EMS provider skill set. It is also a cost effective mirror of the Paramedic. As stated in the presentation, there are localities in the commonwealth that cannot afford to send prospective ALS providers to Paramedic training. So, the Intermediate fills that need. The AEMT(or Enhanced) serves a limited ALS role, similar to the older EMT-I/85. It would be to our detriment to begin to believe that the AEMT, unless regional OMDs are willing to add skill-sets to their respective AEMTs, can effectively replace the multitude of skills that the Intermediate has. One proposal I have in mind to solve the [problem of a certification exam is to research Maryland's EMS department and devise a similar system.

Name

Glenn Barr

Email (optional)

glennbarr1978@gmail.com

Organizational Representation

Altavista EMS

Intermediate Town Hall Public Comments : Entry # 4032

Do you support the Training and Certification Committee (TCC)/Medical Direction Committee (MDC) Proposal Presented in the Townhall?

Support Intermediate Proposal

Public Comments Concerning the Future of Intermediate

Leave it don't change a good thing ,but as always Richmond does what they wish

Name

Loretha Barnes

Email (optional)

Libarnes@ls.net

Organizational Representation

Myself

Intermediate Town Hall Public Comments : Entry # 4701

Do you support the Training and Certification Committee (TCC)/Medical Direction Committee (MDC) Proposal Presented in the Townhall?

Does not Support Intermediate Proposal

Public Comments Concerning the Future of Intermediate

VA should fall in with the National Registry as far as certification levels go.

Name

Joe Bond

**Attachment: B to the
January 3, 2018 TCC Minutes**

National Registry Statistics

EMT Statistics

As of 01/02/2018

Virginia:

Report Date: 1/2/2018 11:57:20 AM
Report Type: State Report (VA)
Registration Level: EMT
Course Completion Date: 4th Quarter 2015 to 4th Quarter 2017
Training Program: All

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The results of your report request are as follows:

Attempted The Exam	First Attempt Pass	Cumulative Pass Within 3 Attempts	Cumulative Pass Within 6 Attempts	Failed All 6 Attempts	Eligible For Retest	Did Not Complete Within 2 Years
5508	69% (3775)	79% (4352)	79% (4378)	0% (2)	18% (980)	3% (149)

National Registry Statistics:

Report Date: 1/2/2018 12:01:48 PM
Report Type: National Report
Registration Level: EMT
Course Completion Date: 4th Quarter 2015 to 4th Quarter 2017
Training Program: All

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[Show All](#) | [Show Only Percentages](#) | [Show Only Numbers](#)

The results of your report request are as follows:

Attempted The Exam	First Attempt Pass	Cumulative Pass Within 3 Attempts	Cumulative Pass Within 6 Attempts	Failed All 6 Attempts	Eligible For Retest	Did Not Complete Within 2 Years
157686	69% (109183)	80% (126589)	81% (127472)	0% (100)	16% (25403)	3% (4734)

Individual Instructor Statistics are available on the OEMS webpage at the following link: http://www.vdh.virginia.gov/content/uploads/sites/23/2017/07/2017-July-Percentile-stats_EMT.pdf

**Attachment: C to the
January 3, 2018 TCC Minutes**

Accreditation Report

Accredited Training Site Directory

As of January 2, 2018



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Accredited Paramedic Training Programs in the Commonwealth

Site Name	Site Number	BLS Accredited	# of Alternate Sites	Accreditation Status	Expiration Date
<i>Central Virginia Community College</i>	68006	Yes*	--	National – Continuing	CoAEMSP
<i>ECPI University</i>	70017	Yes**	--	CoAEMSP - LOR	CoAEMSP
<i>J. Sargeant Reynolds Community College</i>	08709	No	3	National – Continuing	CoAEMSP
<i>Jefferson College of Health Sciences</i>	77007	Yes	--	National – Continuing	CoAEMSP
<i>John Tyler Community College</i>	04115	Yes*	--	CoAEMSP - LOR	
<i>Lord Fairfax Community College</i>	06903	No	--	National – Initial	CoAEMSP
<i>Loudoun County Fire & Rescue</i>	10704	No	--	National – Continuing	CoAEMSP
<i>Northern Virginia Community College</i>	05906	No	1	National – Continuing	CoAEMSP
<i>Patrick Henry Community College</i>	08908	No	--	CoAEMSP – Initial	CoAEMSP
<i>Piedmont Virginia Community College</i>	54006	Yes	--	National – Continuing	CoAEMSP
<i>Prince William County Dept of Fire and Rescue</i>	15312	Yes*	--	CoAEMSP – Initial	CoAEMSP
<i>Rappahannock Community College</i>	11903	Yes	--	CoAEMSP – LOR	
<i>Southside Virginia Community College</i>	18507	No	1	National – Continuing	CoAEMSP
<i>Southwest Virginia Community College</i>	11709	Yes*	4	National – Continuing	CoAEMSP
<i>Stafford County & Associates in Emergency Care</i>	15319	Yes*	1	National – Continuing	CoAEMSP
<i>Tidewater Community College</i>	81016	Yes*	3	National – Continuing	CoAEMSP
<i>VCU School of Medicine Paramedic Program</i>	76011	Yes	5	National – Continuing	CoAEMSP

Programs accredited at the Paramedic level may also offer instruction at EMT- I, AEMT, EMT, and EMR, as well as teach continuing education and auxiliary courses.

- Rappahannock Community College had their site visit in November, 2017. Awaiting final decision by CAAHEP.
- John Tyler Community College under Letter of Review. Completing self-study for submission to CoAEMSP.
- ECPI University has received their Letter of Review to conduct their first cohort class.
- Loudoun County Fire and Rescue CoAEMSP site visit for continued accreditation scheduled for February, 2018.
- Northern Virginia Community College CoAEMSP site visit for continued accreditation scheduled for February, 2018.

*** Indicates program has been approved for in-house psychomotor competency verification.**

**** Request has been received for in-house psychomotor competency verification.**

Accredited Intermediate Training Programs in the Commonwealth

Site Name	Site Number	BLS Accredited	# of Alternate Sites	Accreditation Status	Expiration Date
<i>Central Shenandoah EMS Council</i>	79001	Yes	4	State – Full	July 31, 2018
<i>Danville Area Training Center</i>	69009	No***	--	State – Full	July 31, 2019
<i>Hampton Fire & EMS</i>	83002	Yes	--	State – Full	February 28, 2018
<i>Henrico County Fire Training</i>	08718	Yes*	--	State – Full	August 31, 2020
<i>James City County Fire Rescue</i>	83002	Yes	--	State – Full	February 28, 2019
<i>Norfolk Fire Department</i>	71008	No	--	State – Full	July 31, 2021
<i>Paul D. Camp Community College</i>	62003	Yes	--	State – Full	May 31, 2021
<i>Southwest Virginia EMS Council</i>	52003	Yes	--	State – Full	March 31, 2019
<i>UVA Prehospital Program</i>	54008	No	--	State – Full	July 31, 2019
<i>WVEMS – New River Valley Training Center</i>	75004	No	--	State – Full	June 30, 2022

Programs accredited at the Intermediate level may also offer instruction at AEMT, EMT, and EMR, as well as teach continuing education and auxiliary courses.

- Hampton Fire & EMS reaccreditation self-study has been assigned to the site review team. Visit will be conducted late January or early February.

*** Indicates program has been approved for in-house psychomotor competency verification.**

**** Request has been received for in-house psychomotor competency verification.**

***** Request has been received for BLS accreditation to be added to ALS accreditation.**

Accredited AEMT Training Programs in the Commonwealth

<i>Site Name</i>	<i>Site Number</i>	<i>BLS Accredited</i>	<i># of Alternate Sites</i>	<i>Accreditation Status</i>	<i>Expiration Date</i>
Frederick County Fire & Rescue	06906	Yes*	--	State – Full	July 31, 2020

* Indicates program has been approved for in-house psychomotor competency verification.

Accredited EMT Training Programs in the Commonwealth

Site Name	Site Number	# of Alternate Sites	Accreditation Status	Expiration Date
Navy Region Mid-Atlantic Fire EMS	71006	--	State – Full	July 31, 2018
City of Virginia Beach Fire and EMS	81004**	--	State – Full	July 31, 2018
Chesterfield Fire & EMS	04103**	--	State – Full	July 31, 2020

- Initial self-study has been received and is under review for Arlington County Fire Department.
- Initial self-study has been received and has been reviewed for Isle of Wight Rescue. OEMS conducted visit with program and they have requested to postpone start of initial cohort until Fall, 2018.

*** Indicates program has been approved for in-house psychomotor competency verification.**

**** Request has been received for in-house psychomotor competency verification.**

**Attachment: D to the
January 3, 2018 TCC Minutes**

**Proposal for Changes to CPR
process**



EMS TRAINING PROGRAM ADMINISTRATION MANUAL	
TPAM Policy Number: T-1417	Regulatory Authority: 12VAC5-31-1417
Title: Approved Courses in Cardio-Pulmonary Resuscitation	
Date of Issue: March 24, 2016	Effective Date: JANUARY 1, 2017

12VAC5-31-1417. Approved courses in cardio-pulmonary resuscitation.

A. Recognized programs for certification in cardiopulmonary resuscitation (CPR) for the purposes of testing for all certification levels are based upon programs approved by the Board of Health.

B. Completion of an approved course that tests the following skills is required:

1. One and two rescuer CPR - adult, child, infant resuscitation.
2. Complete airway obstruction - unconscious victim - adult, child, infant.
3. Complete airway obstruction - conscious victim - adult, child, infant.
4. Automated external defibrillation.

TPAM Policy 1417

A. The requirements for certification in Cardiopulmonary Resuscitation (CPR) for the purposes of testing at all Virginia certification levels are based upon the current guidelines of the American Heart Association "Standards for Cardiopulmonary Resuscitation (CPR) and Emergency Cardiac Care (ECC). Revisions of these standards are generally considered as the current accepted practice of CPR on a national basis.

B. As specified in the curricula listed above, completion of an approved course which tests the following skills is required:

1. Critical concepts of high-quality CPR
2. The Chain of Survival
3. 1-Rescuer CPR and AED for adult, child and infant
4. 2-Rescuer CPR and AED for adult, child and infant
5. Differences between adult, child and infant rescue techniques
6. Bag-mask techniques for adult, child and infant
7. Rescue breathing for adult, child and infant
8. Relief of choking for adult, child and infant
9. CPR with an advanced airway

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EMS TRAINING PROGRAM ADMINISTRATION MANUAL	
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Title: Approved Courses in Cardio-Pulmonary Resuscitation	
Date of Issue: March 24, 2016	Effective Date: JANUARY 1, 2017

The current courses which are accepted by the Virginia Office of EMS to meet these standards may be found on our website: <http://www.vdh.virginia.gov/OEMS/Training/CPRRequirements.htm>

Current CPR Relative Information
Compiled 12-05-2017



EMS TRAINING PROGRAM ADMINISTRATION MANUAL	
TPAM Policy Number: T-1435	Regulatory Authority: 12VAC5-31-1435
Title: Student Records for Certification Courses	
Date of Issue: March 24, 2016	Effective Date: JANUARY 1, 2017

12VAC5-31-1435. Student records for certification courses.

A. The EMT instructor, ALS coordinator, or EMS education coordinator shall maintain records of class dates, topics instructed, attendance and performance for all students attending a certification course.

B. Student records shall be maintained in accordance with the Virginia Public Records Act (Chapter 7 (§ 42.1-76 et seq.) of Title 42.1 of the Code of Virginia) from the end date of the program and shall include but not be limited to:

1. Signed student acknowledgment forms collected upon completion of review of the appropriate BLS or ALS enrollment requirements.
2. Student signed class rosters.
3. Scores on all course quizzes, exams, and other didactic knowledge or practical skill evaluations.
4. Skill proficiency records in a format as approved by the Office of EMS:
 - a. For BLS programs, BLS individual age and clinical and skill performance verification information in a format as approved by the Office of EMS.
 - b. For ALS coordinator or EMS education coordinator programs, on forms or documents as approved by the ALS coordinator, EMS education coordinator, or an accredited program.
5. All hospital or field internship activities including dates, locations, competencies performed, student evaluations, preceptor name and certification level as applicable.
6. All corrective or disciplinary actions taken during the training program to include dates, findings supporting the need for corrective or disciplinary action, and all applicable details of steps taken to determine the degree and nature of the actions taken.
7. Copy of the course student disposition report (CSDR).
8. All other records requested to be maintained by the PCD or OMD for the program.
9. Any other records or reports as required by the Office of EMS.

TPAM Policy 1435

B. When the Virginia Public Records Act Va. Code §42.1-76, specifies that records may be destroyed, the Office of EMS requires that the following records, at a minimum, be maintained indefinitely:

1. Required summary completion records for BLS programs include:

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EMS TRAINING PROGRAM ADMINISTRATION MANUAL	
TPAM Policy Number: T-1435	Regulatory Authority: 12VAC5-31-1435
Title: Student Records for Certification Courses	
Date of Issue: March 24, 2016	Effective Date: JANUARY 1, 2017

- a) Full course name/type of course
- b) Course begin and end dates
- c) Student's name and certification number
- d) Student Age Verification, if applicable
- e) CPR verification
- f) Number of hours of training completed in each of the major topic areas of the program
- g) Verification of skill completion
- h) Student disposition (pass, failed, withdrawal or incomplete)
 - i) Copy of the Course approval with verified printed names and signatures of Education Coordinator or EMT Instructor and the program's PCD
- j) For accredited EMT programs, competency tracking documents
- k) Records for completion of clinical/field internship

2. Required summary completion records for ALS programs include:

- a) Full course name/type of course
- b) Course begin and end dates
- c) Student's name and certification number
- d) Student Age Verification
- e) Verification of high school graduation/GED or college transcript
- f) Number of hours of training completed in each of the major topic areas of the program
- g) Verification by number of skills/competencies successfully completed
- h) Student disposition (pass, failed, withdrawal or incomplete)

Copy of the Course approval with verified printed names and signatures of the Education Coordinator or ALS Coordinator and the program's PCD



EMS TRAINING PROGRAM ADMINISTRATION MANUAL	
TPAM Policy Number: T-1503	Regulatory Authority: 12VAC5-31-1503
Title: BLS Course Student Requirements	
Date of Issue: March 24, 2016	Effective Date: JANUARY 1, 2017

12VAC5-31-1503. BLS course student requirements.

The enrolled student, certification candidate, or EMS provider must comply with the following:

1. Be proficient in reading, writing and speaking the English language in order to clearly communicate with a patient, family, or bystander to determine a chief complaint, nature of illness or, mechanism of injury; assess signs and symptoms; and interpret protocols.
2. Be a minimum of 16 years of age at the beginning date of the certification program. If less than 18 years of age, the student must provide the EMT instructor or the EMS educational coordinator with a completed parental permission form as approved by the Office of EMS with the signature of a parent or guardian supporting enrollment in the course.
3. Have no physical or mental impairment that would render the student or provider unable to perform all practical skills required for that level of certification including the ability to function and communicate independently and perform patient care, physical assessments, and treatments.
4. Hold current certification in an approved course in cardio-pulmonary resuscitation (CPR) at the beginning date of the certification program. This certification must also be current at the time of state testing. |
5. If in a bridge certification program, the student must hold current Virginia certification at the EMS First Responder level through completion of the certification examination process.

TPAM Policy 1503

- I. The Virginia Office of EMS requires that all individuals hold current certification in CPR as a prerequisite for enrollment in the EMR and EMT Programs (initial full certification courses). Verification of CPR credentials will be maintained by the Education Coordinator on the Individual Skill Performance Record showing successful course completion by attaching a copy of the CPR card to the Individual Skill Performance Record. (Current CPR card or official course rosters are also acceptable to verify CPR certification.)
- II. Federal law requires non-U.S. citizens to make declarations as to their purpose in the U.S.
 - A. This comes with restrictions and is addressed by non-US citizens possessing a valid passport and VISA.
 - B. Depending upon the "type" of Visa possessed by the applicant, restrictions are placed upon the type of activity the person can participate in while in the U.S.

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III. Virginia Verification of Visa Status – Non-US citizens who do not possess a US Social Security Number (SSN) and wish to enroll in a Virginia EMS certification program must:

A. Submit the Virginia Office of EMS Training Program Enrollment form to the Office of EMS along with:

1. A cover letter.
2. A legible copy of their passport.
3. A legible copy of their Visa.

IV. Other educational institutions and activities – Enrollment in a Virginia EMS certification program does not preclude nor should it be confused with enrollment in public or private institutions of education. Those entities by themselves do not provide access to personal information (financial, medical and property) as does an EMS program. Each educational institution is responsible for deciding what to use as enrollment criteria as they will be held responsible should any adverse issues arise. Simply because an EMS applicant is enrolled in an institution's program does not automatically allow them access to enrollment in EMS programs.

A. EMS program enrollment for high school programs (or any EMS program) does not negate the need to comply with Virginia and/or Federal code nor EMS regulations.

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[y Medical Services](#) > [Educational Development](#) > [Student Resources](#) > CPR Requirements

CPR REQUIREMENTS

SUBJECT: Specification of C.P.R. Requirements – Approved Courses

The Virginia Office of EMS requires that all individuals hold current certification in **C.P.R. as a prerequisite** for enrollment in the **EMT and EMR Programs** (initial full certification courses). Completion of an approved course which tests the following skills is required:

- One and Two Rescuer C.P.R. – ADULT and CHILD
- Infant Resuscitation
- Complete Airway Obstruction – Unconscious Victim
- Complete Airway Obstruction – Conscious Victim
- Complete Airway Obstruction – Unconscious Infant
- Complete Airway Obstruction – Conscious/Choking Infant

The current courses which are accepted by the Virginia Office of E.M.S. to meet these standards are:

- American Heart Association – Basic Cardiac Life Support – “BLS Provider” or “Healthcare Provider”
- American Red Cross – “Basic Life Support for Healthcare Providers” or CPR/AED for Lifeguards
- American Safety and Health Institute – “CPR-PRO” or “BLS for Healthcare Providers and Professional Rescuers”
- Emergency Care and Safety Institute “Professional Rescuer” / “Healthcare Provider CPR & AED”
- EMS Safety Services, Inc. – CPR/AED for Professional Rescuers
- Military Training Network – Healthcare Provider
- National Safety Council – “Healthcare and Professional Rescuer”
- ProCPR – “Healthcare Provider” Click here for [ProCPRAcceptanceLetter](#) 

