

Executive Committee Meeting
Embassy Suites Hotel, Richmond, Virginia
February 7, 2019
11:00 a.m.

Members Present:	Members Absent:	Staff:	Others:
Christopher Parker	Eddie Ferguson	Scott Winston	Kelly Brown
Jon Henschel	Jose Salazar	Deborah Akers	Gary Samuels
Dreama Chandler		Chad Blosser	George Lindbeck
Gary Critzer		Camela Crittenden	David Hoback
Michel Aboutanos, MD		Gary Brown	Donna Hurst
		Adam Harrell	Sheldon Barr
		Ron Passmore	
		Karen Owens	
		Irene Hamilton	

Topic/Subject	Discussion	Recommendations, Action/Follow-up; Responsible Person
Welcome and Introductions	Chris Parker, Chair, called the meeting to order at approximately 11:00 a.m.	
Approval of the Agenda	An updated agenda was distributed. A motion was made and properly seconded to accept the agenda as presented.	The motion carried.
Committee Structure and Composition	<p>Gary Brown, OEMS Director, said according to the Bylaws to make changes to a committee membership and/or structure the Committee Chair should inform the Chair of the EMS Advisory Board of their requested changes. The EMS Advisory Board Chair will present their request to the Executive Committee for approval.</p> <p>Mr. Brown said they approved a Bylaws change at the November 7, 2018 meeting of the State EMS Advisory Board. Bylaw changes included adding six new committees and changing the name of the Trauma System Oversight and Management Committee to the Trauma Administrative and Governance Committee, also known as TAG. Camela Crittenden and her staff has been working with Dr. Michel Aboutanos, who is Chair of TAG on details of how the new committees should operate. The revised Bylaws state that the Trauma System Coordinator will appoint the Chairs of the six new Trauma System committees. This is a change from the prior Bylaws; however, it is not in conflict with the Bylaws but just a new addition and a little different model as to how these committees operates.</p> <p>Mr. Brown distributed copies of the proposed memberships for the six new Trauma committees.</p> <p>The Executive Committee needs to go on record approving the membership of the six new committees.</p> <p>Mr. Brown explained that these committees evolved from the consultative study conducted by the American College of Surgeons in 2015 when OEMS invited them to do a site visit and evaluate</p>	

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	<p>Virginia’s trauma system. The final report included more than 150 recommendations. At the time, Gary Critzer was Chair of the State EMS Advisory Board, and the Board, under his leadership had to determine the best approach to addressing the recommendations in the report. A structure was set up to form a Trauma Systems Plan Task Force that reported to the Trauma System Oversight and Management Committee and the six new committees originally were workgroups of the Trauma System Plan Task Force. Most of the people identified as members of these committees have been working on these workgroups and tasks for almost three years and are very committed to the improvement of the trauma system in Virginia.</p> <p>These committees will have their first meetings as official committees of the EMS Advisory Board starting this afternoon and continuing tomorrow morning. The Chairs of the committees will be at the State EMS Advisory Board meeting on Friday. Mr. Brown explained that in order to bridge any distance that might exist between Trauma and EMS and have an integrated system, they determined that it was important for these committees to meet in conjunction with the State EMS Advisory Board.</p> <p>Cam Crittenden, the Trauma and Critical Care Division Manager, commented that most of the members of these new trauma committees have already been meeting in the workgroups, having attended over 99 meetings, and are very committed. They represent their areas of expertise and want to do what is best for the system.</p> <p>Ms. Crittenden introduced Kelly Brown the Trauma Program Manager at Lynchburg and Sheldon Barr the COO from Chippenham Medical Center, who were both in attendance at the Executive Committee meeting.</p> <p>Jon Henschel noted that the committee rosters showed some vacant seats and asked if they were still planning to fill those vacancies. Mr. Brown confirmed that they were still working to fill all the seats on the committees.</p> <p>Mr. Henschel also asked if Dr. Aboutanos is okay with all the changes. Chris Parker said that Dr. Aboutanos is good with the changes; and he elaborated stating that said Dr. Aboutanos was very instrumental in appointing people to the committees. Mr. Parker said it is important to make sure they choose the right people for the committee seats, based on their areas of expertise and not just on the organization they represent. Mr. Parker also said that he had been in discussions with OEMS staff the last couple of days discussing the importance of Coordinators working with their committees on making the appropriate committee appointments because the Executive Committee members do not necessarily know who are the right people for committee slots.</p>	

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Approval of Rosters	Mr. Henschel made a motion to approve the new committees. Dreama Chandler seconded the motion and a vote was taken.	<p>MOTION: The Executive Committee moves to approve the six new Trauma Committees and the committee rosters.</p> <p>YEAS – 3; NAYS – 0; ABSTENTIONS – 0</p> <p>The motion was carried unanimously.</p>
Patient Care Coordinator and Trauma System Coordinator Bylaws Approved at November 7, 2018 Meeting Created a Conflict	<p>Mr. Brown stated that the election of Officers and Chairs for the State EMS Advisory Board took place before the November EMS Advisory Board meeting. At their November meeting, the EMS Advisory Board approved the revised Bylaws. While putting together the agenda for the February EMS Advisory Board meeting, he recognized that Dr. Aboutanos had been elected to serve as the Patient Care Coordinator. However, with the approval of the new Trauma committees, Dr. Aboutanos should have been elected to the position of Trauma System Coordinator. However, when the Officers and Chairs were elected, the new Bylaws adding the new Trauma committees had not been approved by the State EMS Advisory Board. At the time, the Trauma System Coordinator position did not exist.</p> <p>If Dr. Aboutanos becomes the Trauma System Coordinator, this leaves the Patient Care Coordinator position vacant. The Guidance document notes that the Patient Care Coordinator position should be filled by a physician. Dr. Yee the Medical Direction Committee Chair, could move into the position of Patient Care Coordinator.</p> <p>Mr. Brown said if the committee wishes, they could get Amanda Lavin, their Assistant Attorney General to give them some guidance on how to handle this situation. He said that he isn't sure if they will be in conflict of the Bylaws if they don't go back through the process of getting nominees for both the Patient Care Coordinator and Trauma System Coordinator positions, give the EMS Advisory Board a thirty-day notice, and then hold elections for the two positions. Personally, Mr. Brown feels that they should just administratively fix it and take it before the EMS Advisory Board tomorrow. If the EMS Advisory Board wishes, they can still go through that administrative process.</p> <p>In conclusion, Mr. Brown said that the recommendation from his staff is to appoint Dr. Michel Aboutanos as the Trauma System Coordinator and Dr. Allen Yee as the Patient Care Coordinator.</p> <p>Mr. Henschel asked if they have had discussions with Dr. Yee and Dr. Aboutanos. Mr. Brown said he has spoken with Dr. Yee, and he has no problem being appointed Patient Care Coordinator. Dr. Aboutanos would become the new Trauma System Coordinator.</p>	

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	<p>Dreama Chandler asked if they need to have an election or if they can just be appointed. Mr. Brown said he believes that the Executive Committee can appoint them today. Chris Parker can bring the matter before the Board and if they choose to have an election that can be done at that time.</p> <p>After reviewing the Bylaws, they concluded that the Executive Committee has the authority to appoint a Coordinator, and they will ask the EMS Advisory Board to ratify their choice.</p> <p>A motion was made by Jon Henschel and seconded by Dreama Chandler to appoint Dr. Allen Yee as Patient Care Coordinator and to move Dr. Michel Aboutanos to the newly created Trauma System Coordinator position.</p>	<p>MOTION: The Executive Committee moves to appoint Dr. Allen Yee as the Patient Care Coordinator and to move Dr. Michel Aboutanos to the Trauma Systems Coordinator position.</p> <p>VOTE: YEAS – 3; NAYS = 0; ABSTENTIONS – 0</p> <p>The motion was carried unanimously.</p>
<p>2-Day Meeting Schedule – Non Board Meetings /Conflicts</p>	<p>Chris Parker met with OEMS staff on yesterday in preparation for this week’s meetings. During the discussion, Chris discussed the fact that with the addition of six new board committees that the schedule is getting very full on the Thursday and Friday before the Board meeting on Friday afternoon. Having so many meetings consecutively creates a challenge for the Board leadership to attend all of the meetings or at least the ones of most importance to them. Mr. Brown said that the addition of the six new board committees also has created a challenge logistically in the ability to find a facility able to house all of the meetings.</p> <p>Mr. Brown stated that they have encouraged VAGEMSA, Regional EMS Council Directors and other EMS related groups to meet in conjunction with the State EMS Advisory Board meetings because of the convenience and efficiencies involved in having all the meetings during the same period. Individuals can make one trip to Richmond instead of multiple trips to attend meetings, and it gives them an opportunity to attend multiple committee meetings. However, it does create conflicts for Officers and leaders of the Board because they cannot be in multiple different meetings at the same time.</p> <p>Chris Parker, the State EMS Advisory Board Chair elaborated stating that as the Chair he actually needs to attend several of the meetings that meet at the same time. Mr. Brown also pointed out that</p>	

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	<p>Coordinators have the same issues because they need to attend the meetings of the committees that fall under their Coordinator position.</p> <p>Mr. Brown explained that it is important for Coordinators to know what is going on in the committees under them so all committees with a shared interest in an action will be aware of the pending action that is being brought to the full EMS Advisory Board. He said in the past situations occurred when an action item was brought to the Board for a vote and the Coordinator and/or the relevant committees had no prior knowledge of the action being brought before the Board.</p> <p>Jon Henschel pointed out that it is important that Board members, and especially Coordinators, are educated to understand the expectations to fill their role. Mr. Henschel said he isn't convinced that they will be able to attend all the meetings they want to attend. He said that will be especially hard for Mr. Parker as Chair of the Board; unless, perhaps, he involves the Vice-Chair and gets him to attend some of the meetings.</p> <p>Mr. Parker said he wants to make a more defined role for both the Vice-Chair and the Coordinators. He feels this will reduce some of the work that the Chair and the Committee Chairs have to do; and making sure that everyone on the Board and all the committees are on the same page.</p> <p>Mr. Critzer asked about the possibility of expanding the EMS Advisory Board meetings from two days to two and one-half days.</p> <p>Adam Harrell explained that they are thinking about expanding the EMS Advisory Board meetings adding a half day on Wednesday. Mr. Harrell said perhaps VAGEMSA, Regional EMS Councils, and any other non-committee meetings could adjust their meeting times, perhaps meeting on Wednesdays.</p> <p>Jon Henschel said he and Chris Parker discussed the Executive Committee meeting and the possibility of having them meet on Friday just before the EMS Advisory Board meeting.</p> <p>Mr. Critzer also suggested that perhaps VAGEMSA could meet on Thursday evening. Mr. Critzer said he would talk to Jeffrey Meyer about holding the VAGEMSA meeting on Thursday evening and they could poll their group to get their thoughts on making this change. Mr. Critzer emphasized he does feel that it is crucial to hold the meeting in conjunction with the EMS Advisory Board meetings because they would probably lose attendance if they move it to another time of the month.</p> <p>Gary Critzer asked how much work does the Executive Committee do that they have to approve before it goes to the EMS Advisory Board or is it more of just discussion and strategizing for the work of the committee and/or the board. Dr. Aboutanos said he feels the Executive Committee meeting should be earlier and not just before the EMS Advisory Board meeting.</p>	

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	<p>Mr. Critzer said he thinks that it might be better to have the Executive Committee held not in conjunction with the EMS Advisory Board meeting simply because you want to have the work laid out and to the committees before their meeting. Mr. Critzer said during his tenure he found that the most effective meetings that the Executive Committee had were meetings that was not in conjunction with the EMS Advisory Board meetings.</p> <p>Mr. Parker asked staff for their input on moving the Executive Committee meetings to a date that was not in conjunction with the other EMS Advisory Board meetings. Cam Crittenden said that they have had some other offset Executive Committee meetings and she felt it worked well because they were not under such time constraints, and she said if they had to get information, they could get it timely. Ron Passmore said that as the former TCC Chair, he always appreciated having the TCC meetings the month before the EMS Advisory Board meeting.</p> <p>Cam Crittenden said they also discussed adding the half day on Wednesday and she thinks it would decompress the days and reduce the number of back-to-back and overlapping or same time meetings. Dr. Aboutanos said that he feels that adding a half day would be too much for many clinicians, because two days are already a lot. Mr. Parker agreed that he understands Dr. Aboutanos point. He said they have a lot more participants than before and he wants to be able to keep them at the table and not lose them because they are not able to be away from work for a longer period of time.</p> <p>Jon Henschel asked how having all the new members and committees affect the OEMS budget. Mr. Harrell said that from a budgetary perspective they negotiate in the best interest of the Commonwealth, and they do have additional funds built in for any off cycle meetings that need to occur to include overnight rooms, facility space and per diem reimbursements.</p> <p>The group was in consensus that they should have the Executive Committee meeting about a month before the EMS Advisory Board. Chris Parker suggested doing it around the same time as TCC and MDC. Debbie Akers said that having MDC and TCC off cycle works well. They are able to have action items ready to move to the EMS Advisory Board so they can continue to move action items forward. She said they also try to schedule the meetings at a time so individuals that live within a reasonable travel distance do not have to come up the night before the meeting and stay overnight.</p> <p>Gary Brown said that TCC meets on a Wednesday and MDC meets on Thursday. These are working lunch meetings, and lunch is provided. EMS for Children meets on Thursday afternoon. Ron Passmore said that workgroups of MDC meet on Thursday afternoon.</p> <p>Adam Harrell said that ideally they could put the Executive Committee meeting on Wednesday afternoon. This would allow any members who want to attend TCC to come in for TCC, Executive Committee and if they would like attend MDC the next morning.</p>	

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	<p>Dr. Aboutanos said that what they are discussing in regards to the Executive Committee will also have an impact on the Trauma Administrative and Governance Committee. Meetings held immediately before the EMS Advisory Board do not allow decisions to be made by the Board as opposed to holding Trauma committee meetings a month before the Board meetings. He said they should to discuss moving that meeting, as well.</p> <p>Mr. Brown suggested that they should look at the calendar for the rest of the year and propose dates for the Executive Committee meeting. Each committee chair should ask their members when they want to meet, as well; and determine if they still want to maintain a meeting in conjunction with the State EMS Advisory Board meeting, or prefer to meet at some other time.</p> <p>Mr. Harrell said any committees wanting to meet off cycle would need to group their meeting with other meetings during the same period. He said if all the committees want to meet at different times the cost increases and the cost to the Commonwealth goes up. Committees that want to meet off cycle need to match their meeting time to already existing off cycle meetings Mr. Parker agreed with Mr. Harrell, stating that he would not want the next Chair of the Board to inherit a mess of several times they have to come to Richmond during a quarter. It would not be productive. Mr. Henschel said if you have too many meetings at too many different times how engaged and involved would people remain. Mr. Henschel said that is the benefit of having meetings in conjunction with the EMS Advisory Board meeting.</p> <p>Adam Harrell said they are running into some scheduling issues for the upcoming two EMS Advisory Board meetings, and he thinks they really need to scheduling a half day on Wednesday. Dr. Aboutanos reiterated his concern that clinicians will have a problem with any more than two days. Adam explained that he is looking into moving more of the non-EMS Advisory Board meetings to Wednesday afternoon.</p> <p>Gary Critzer will discuss with Jeffrey Meyer moving the VAGEMSA meeting to Wednesday afternoon.</p>	
	<p>Gary Brown told Dr. Aboutanos that the Executive Committee did approve all the membership of TAG as well as the six new committees knowing that they have some slots to fill.</p> <p>He said that they have other committees' memberships to approve, and they have the Committee Interest forms of their new appointees and committee assignments to make.</p> <p>Scott Winston spoke on behalf of the Legislative & Planning Committee. He said in the past, some new members of the EMS Advisory Board did not get a committee appointment. He said it is important that</p>	

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	<p>they look at the Committee Interest forms and make sure that new members are assigned to a committee.</p> <p>The Legislative & Planning Committee had a position open up for the Virginia Hospital & Healthcare Association (VHHA) representative, and one of the new members on the Board, Dr. Jeremiah O'Shea, expressed interest in participating on the committee. His first choice was an appointment on TAG; however, TAG already has a VHHA representative. However, the Legislative & Planning Committee was also one of his top three choices for a committee appointment.</p> <p>Scott Winston recommends with the approval of the Executive Committee, Dr. Jeremiah O'Shea, as a member of the Legislative & Planning Committee.</p> <p>Mr. Winston also has a Committee Interest Form for a representative from the Virginia Municipal League (VML), Rich Orndorff who is Mayor of the town of Strasburg. He did indicate Legislative & Planning Committee as his first choice. With the Executive Committee's approval, Mr. Winston recommends appointing Mayor Rich Orndorff to the Legislative & Planning Committee.</p> <p>Mr. Winston presents those two individuals as recommendation of appointment to the Legislative & Planning Committee.</p> <p>The Chair called for a motion to approve the two appointments to the Legislative & Planning Committee. Jon Henschel made a motion and Dreama Chandler seconded the motion to accept these two recommendations. The Chair called for a vote.</p> <p>Mr. Parker said he also has two emails. One email is from John Korman, the Communications Committee Chair. Mr. Korman had two individuals express interest in serving on the Communications Committee - Rich Orndorff and Gary Tanner. Rich Orndorff was just appointed to Legislative & Planning Committee; however, Gary Tanner who represents the Virginia Association of Counties can be appointed to the Communications Committee.</p> <p>Since this is a recommendation from the Committee, the Executive Committee can approve it.</p> <p>Mr. Parker said that Valerie Quick has emailed again asking to be added to a committee. Mr. Parker said that they will get together later in the day to get that moving forward.</p> <p>Dreama Chandler asked Chris Parker if he had received anything from John Korman the Communications Committee chair in regards to adding a seat. She said there had been some discussion in regards to getting someone from hospitals involved. He said he had not heard anything from John Korman but he will follow up with John tomorrow.</p>	<p>MOTION: The Executive Committee moves to accept the recommendation to appoint Dr. Jeremiah O'Shea and Mayor Rich Orndorff to the Legislative & Planning Committee.</p> <p>YEA = 4; NAYS = 0; ABSTENTIONS = 0</p> <p>The motion was carried unanimously.</p>

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EMS Advisory Board Composition – Need for Code Change	<p>Gary Brown said the composition of the State EMS Advisory Board was last changed in Code in 2003. With the Bylaws being updated and approval of new committees on the EMS Advisory Board, it is a good time to look at the composition of the EMS Advisory Board. Should membership be based on systems of care and categories rather than organizational representation? He isn't saying that they should get totally away from organizations because that is a decision that would come from the Executive Committee, the State EMS Advisory Board and eventually legislation that would have to be introduced to make those changes.</p> <p>The State EMS Advisory Board Chair and the Executive Committee have to determine the best way of approaching this task. It will eventually require them finding a legislator who is willing to carry legislation to the General Assembly to amend and reenact that section of the Code.</p> <p>Gary Critzer talked about some of the issues encountered the last time they changed the composition of the EMS Advisory Board. He said that attracted other organizations that felt like they should have representation. He said that anytime you open the door you take a chance on that happening. Mr. Critzer said the more inclusive the Executive Committee is during the process, perhaps having a workgroup and getting as much buy-in as possible so hopefully the EMS Advisory Board is close or unanimous in its support of the change, the better success they will have when taking their proposed changes to the General Assembly.</p> <p>Mr. Parker asked if the workgroup should be composed of the Executive Committee and open the floor at the EMS Advisory Board meeting tomorrow to add a couple of seats from members of the Board; or if they should go outside of the EMS Advisory Board for a couple of seats to participate on the workgroup. Mr. Critzer said he is not sure it would be a good idea to go outside of the EMS Advisory Board for members of the workgroup. He said the Executive Committee has the ability within the Bylaws to create a workgroup.</p> <p>Dr. Aboutanos said when looking into changing the composition of the EMS Advisory Board the first question should be "do we need to change." He said the Trauma group is not asking for the EMS Advisory Board composition to change. They are only asking to add seven additional seats. This creates an issue because some people feel that will make the EMS Advisory Board too big if they add additional seats.</p> <p>Chris Parker does not feel that making the EMS Advisory Board larger is the answer. Instead, he feels the Board needs to be streamlined. He said looking at the future and being visionary, the question is are current seats doing the right deed for what we are trying to accomplish.</p>	

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	<p>Dr. Aboutanos agrees it is important for the change to come from within the EMS Advisory Board instead of outside.</p> <p>Gary Critzer said the State Board of Health is more industry specific than geared towards organizations.</p> <p>Dr. Aboutanos talked about how they streamlined the Trauma System Oversight and Management Committee</p> <p>Chris Parker said they need a procedures guide and it should be included in the Guidance Document. Chris would like to have an Executive Committee Workday to work on this; and it probably should include representation from some of the other committees of the EMS Advisory Board.</p> <p>Mr. Parker wants to schedule an executive Committee workday. He said part of the day could be to bring other people into the workgroup to talk about composition.</p> <p>Bruce Edwards volunteered to help in any way he can with the restructuring of the EMS Advisory Board.</p> <p>Dreama Chandler suggests that Chris Parker look at what he needs and then announce to the Board that he has formed a study group and announce the members of the group.</p> <p>Dr. Aboutanos advised they may need more time in putting together a workgroup and perhaps should wait and not announce this to the EMS Advisory Board tomorrow. The committee all agreed that they should take more time to put together their needs and focus before announcing to the Board.</p> <p>Gary Critzer suggested that they focus on EMS as a system of care and build your board around that system of care. Jon Henschel said they should look at their overall goals and aligning them with the Agenda 2050. Gary Critzer said you would never have 100 percent buy in but try to get as much buy in and support as possible before presenting this to the General Assembly.</p> <p>Dr. Aboutanos said a key point of focus should be about what is the true function of the EMS Advisory Board and this will drive the change. Jon Henschel added it is not about whom they represent, but it is more about the patient they represent. Focus on the system.</p> <p>Gary Brown suggested that they start by adopting some general principles and get an agreement on those guiding principles. They should start with those principles and how the EMS system should be represented and then they should look at the functions. He said if they agree on overall principles and</p>	

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	<p>functions of a system and what it should look like in the future, look at the EMS Agenda 2050, then they should be fine.</p> <p>Scott Winston said he agrees with everything that he has heard. He said that it is very timely that they look at the composition of the Board because they are also beginning a new comprehensive review of the EMS Plan. He said that the EMS Plan is the key to focus on in terms of how we identify the key objectives within the system and how they accomplish the objectives through functional responsibilities versus individual organizations. He said the timing of this is important. They need to make sure that Legislative & Planning and this other work group are in lock steps so they do not come out with a composition that does not reflect what our Plan seeks to accomplish.</p> <p>Chris Parker said that he knows that committees have been tasked with the State Plan and forming their own SWOT Analysis. Instead of getting everybody together for a retreat ; get the information that comes back from the SWOT analysis and start a process that could give us some of the general principles we are looking at and then take it into a general session.</p> <p>Chris Parker decided that they would not mention this at the meeting tomorrow. They will wait to get the information from the SWOT Analysis done by the committees then they can move forward and probably include the entire Executive Committee.</p>	
<p>OEMS and Division Updates</p>	<p><u>VAVRS Financial Report – Adam Harrell</u></p> <p>The Executive Committee is tasked with the annual approval of the VAVRS Financial Report audit. They have not received the audit for 2018. VAVRS is starting the process now. Adam reviewed some of the findings they had for last year’s audit.</p> <ol style="list-style-type: none"> 1. Not recording capitalized assets according to their own policy. General ledger is cash base and the financial statements are accrual base. 2. Lack of segregation of duties 3. Absence of accounting review policies and procedures <p>Adam said that the auditor also highlighted that VAVRS categorized the expenses for which they utilize Four-for-Life monies under three broad categories – Training, Recruitment and Retention.</p> <p>The charge of VAVRS is promoting, assisting and training member rescue squads in providing prehospital emergency care. They get two percent of the Four-for-Life Revenue. To put that in perspective, in calendar year 2016 that was 73 percent of their total support and revenue and in calendar year 2015 it was 68 percent. On average it comes out to anywhere from \$600,000 to \$700,000 per year.</p> <p>OEMS and VDH reviewed the audit and both recommends more detail in the training, recruitment and retention categories. When they receive the financial reports, they are in very broad topics broken down by account codes such as travel expenditures, \$3,000 under Recruitment, \$10,000 under training and \$4,000 under Retention. That does not tell OEMS what they did with that money. It tells how they</p>	

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	<p>categorize it and what they feel they used it for. They recommend that in the upcoming report that be broken down even further.</p> <p>Another concerning comment, is their use of the term “member rescue squads.” The Code of Virginia says that they promote recruitment, retention and training for volunteer EMS in Virginia. The audit reviews asked for further definition of what a member rescue squad was versus what a member rescue squad was not. The Code does not direct the use of this money to support only people who are members of your organization.</p> <p>OEMS has asked Amanda Lavin what are the requirements on accounting and policy procedural documents with an organization that receives greater than 50 percent of their funding from a state source. Adam said generally what you see when it exceeds a certain percentage they are required to mirror state policy.</p> <p>Mr. Harrell said that Gary Brown has the audit document from last year as well as the recommendations and financial statements. This will be a resting agenda item until they supply their report.</p> <p>Gary Brown said there is Code of Virginia language when it comes to responsibilities of the State EMS Advisory Board, and annually reviewing the VAVRS Financial Report is listed as a responsibility of the Executive Committee.</p> <p>Dr. Aboutanos asked if they would be distributing the report.</p> <p>Chris Parker said this would be left as a standing item on the agenda for the next Executive Committee meeting.</p> <p><u>EMS Scholarship Program – Chad Blosser</u> Chad Blosser reported that on October 17, 2018 they released the EMS scholarship program, which was the replacement for the prior scholarship program; after terminating a MOU with the Office of Health Equity. The new scholarship program was designed by VDH EMS IT team and is fully integrated into the Virginia EMS portal. The IT team has done an incredible job to make it user friendly for EMS providers.</p> <p>In the initial roll out on October 17, they reached out to all students who were eligible who had been sitting in eligible training courses from July 1 until October 17. The students received emails telling them to apply for the program. They also sent emails to more than 780 students who had been enrolled since July. They have only had 134 students apply for the scholarship program. There are a couple of reasons for the low application rate – (1) perhaps they had already paid for their schooling and decided there was no need to apply; (2) some people are probably unhappy with or did not feel they could meet</p>	<p>Adam said OEMS will send out last year’s audit documentation to members of the Executive Committee along with some meeting notes.</p>

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	<p>the terms of the contract for the scholarship. Mr. Blosser said they do not actually log attempts of people who attempted the application but decided to terminate it.</p> <p>Their budget is 2 million dollars and to date \$420,000 has been applied for in the scholarship program. There were 560 applications, and a bulk of them were EMT applications. Chad said that the majority of the money going out is to paramedic programs simply because of the difference in cost for those two programs. January was incredibly busy since that is a big month for enrolling in new classes. Chad is certain that they will continue to see an increase in the use of the scholarship program as they move into the next fiscal year. He said he doesn't think that the budget will change next year but they will take a look at how much they spent and how many applications they receive and adjust funding levels accordingly. The goal is to assure that everyone who wants to apply for a scholarship can apply for one but also to make sure that the bulk of the money is actually allocated and spent in the fiscal year and does not rollover into RSAF.</p> <p>Dr. Aboutanos asked if the money not used is automatically rolled back into RSAF. Mr. Harrell answered explaining that any OEMS revenue that comes from Four-for-Life that is not utilized automatically rolls into the grant program for the next fiscal year. Mr. Harrell said the money would roll back into the scholarship program for the next fiscal year. Mr. Harrell stated OEMS has the autonomy to increase the amount if they need to, based on the number of applicants or the number of requests they receive.</p> <p>Dr. Aboutanos asked if a center can apply for a scholarship for a student or does the student have to apply for the scholarship. Chad Blosser said that the scholarship is driven 100 percent by the student. The student can either apply for it as an individual and receive a check themselves or they can assign their payment to an EMS agency that is paying for their training and authorize their affiliated EMS agency to receive the money in the form of grant.</p>	
2019 Legislative Updates	Mr. Brown said that he put this into the agenda to offer it for discussion. He said that weekly grids and reports are provided by the Office of EMS on legislation that they are tracking.	
State EMS Plan Update	Tim Perkins reported that work on the revision of the State EMS Plan is underway. Each committee chair has been tasked with working with their committees on the section of the Plan as applicable to their expertise. They will put that together with input from OEMS Division and Program Managers sometime in the near future. Staff needs to talk about the Plan. By August 2019, there should be a draft for the EMS Advisory Board to vote on for November 2019, and it will go before the Board of Health at their first meeting (March) in 2020.	
EMS Council Re-Designation	Tim Perkins also reported that the regional EMS councils have all submitted their packets for re-designation and site visits will be conducted and completed before the end of April 2019. The recommendations to re-designate regional EMS Councils will go to the Board of Health in May 2019 so that those can be voted on in June 2019 and they can have new designated regional EMS councils by July 1, 2019.	

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<p>CSEMSC Update – Gary Critzer</p>	<p>Mr. Critzer reported that the Central Shenandoah EMS Council has been experiencing a problem with the recruitment and retention of Executive Directors, as well as, funding issues related to the operations of the regional EMS council. After the last Executive Director did not work out, they began discussions with OEMS about the future of Central Shenandoah EMS.</p> <p>Mr. Critzer has been the board president for the Central Shenandoah EMS Council since 1991. He said he has watched the regional EMS council system evolve during this period. In looking forward to the future, Mr. Critzer recommended to their board that they should approach OEMS about the concept of becoming a hybrid regional EMS council. This would allow them to partner with OEMS and through a Memorandum of Understanding, the Council would maintain its Board of Directors, its designation, and its seat on the EMS Advisory Board. At the same time, it would assure that the hallmark of Virginia EMS, which is the ground up grassroots involved EMS system concept, is maintained. This arrangement would do all of this, and at the same time, bring all of their staff underneath the Office of EMS as state staff. This will also open a tremendous number of other doors for them.</p> <p>Mr. Critzer said that Central Shenandoah EMS Council owns their building, paid in full. They want to use their building for other opportunities. They are an American Heart Community Training Center (CTC). They will enter into a real estate agreement with OEMS, providing them a place to live so to speak at the cost of \$1. In exchange for that, OEMS will provide the staff, the maintenance, the upkeep of the facility; utilities, the IT infrastructure and the Council staff will become state employees. The CSEMSC board signed an MOU with OEMS on January 24 to embark on this process.</p> <p>They will be meeting with them again next week to look at the position description for the regional Program Manager, which will be the equivalent of the Executive Director. Once that person is on board, they will work with our Board to fill other positions that are needed.</p> <p>Mr. Critzer believes this arrangement will take Central Shenandoah EMS Council down the road into the future. There have been many questions, a lot of suspicion, and a lot of discussion behind the scenes about this process. He assured them that OEMS did not come to them but instead they went to OEMS. As they get into it, if they find things didn't work as well as they originally envisioned, then they can modify the MOU. If there are things that they didn't think about they can modify the MOU. It allows for five one-year renewals. They can watch this evolve. It is open and they are willing to share the process and tell you the good, the bad and the indifferences. He said his board met and looked at all the opportunities, the pros and the cons. The pro list vastly outnumbered the cons.</p> <p>Mr. Critzer said that he is a big proponent of the regions. He believes that they have done a lot for the EMS system in the Commonwealth; but he also believes that the regional EMS councils have been around for well over 30 years and a lot has not changed within that time. He said the councils are designed for a different era when the needs were dramatically different then they are today. He said he is happy to sit down with anybody who wants to ask questions or talk about it.</p>	

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	<p>Mr. Critzer also shared information on how Central Shenandoah EMS Council has completely restructured their board. Previously, a 72-member board had a seat for every licensed EMS agency in the region. Their board had every licensed EMS agency, every hospital, and every local government. He said out of those 72 seats, the same 15 people always showed up. Mr. Critzer said that every time they tried to change their Bylaws to change the seats, the people they had not seen in five years showed up and objected to taking seats away. They did a restructure and was successful and their board is now 15 members, one from each local government appointed by the local government of the region, one from VHHA from one of the hospitals in their region, and two EMS provider or agency administrators appointed by the other 13 members.</p> <p>Chris Parker said he attended the Regional EMS Council Executive Director meetings many times when they discussed benefits, insurance, and salaries. He thinks that being forward thinking they are moving towards what may be the right direction. He commends Mr. Critzer for that.</p> <p>Dr. Aboutanos said he thought what Central Shenandoah EMS Council did was very impressive and asked Mr. Brown what the implication for the other regional EMS councils is. He asked if OEMS could absorb the cost if other councils also wanted to do the same thing. Mr. Brown said that because their Business Manager has crunched the numbers, if another council wants to follow the model, they could do that. Mr. Brown said if you look at the monies that they currently contract with the eleven councils, and take this model and apply it across the state, there would be some efficiencies realized.</p> <p>Mr. Harrell said OEMS has always been tasked with assuring the ability to maintain operations in a region in the event that a council were to close. They would have to absorb those expenses; and therefore, OEMS always has had to perform that as a continuity of operations activity every year. OEMS has a specific line item in their budget that is targeted for regional council contracts; and with what they are doing at CSEMS it will cost no more to the Commonwealth than what they previously contracted with them.</p> <p>Dr. Aboutanos said we should bring this back after a year and look at the cost. It is an innovative model and if it is a profitable model then eventually the other councils should look at doing this too. Chris Parker said it would be great to see within the next year the outcomes and results in the region from this new arrangement with Central Shenandoah EMS Council.</p> <p>Mr. Critzer said that they are still going to run a CTC which will remain a part of Central Shenandoah EMS, and parts of their building are available for meetings or outside groups. If it is an EMS related meeting, they will not charge. If it is a private sector meeting, they can charge rent. Central Shenandoah EMS Council also has a partnership with Blue Ridge Community College who has completed accreditation for their paramedic degree program. Blue Ridge Community College is using part of the building until they get their new Life Sciences building built.</p>	

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	<p>Mr. Brown said that one of the things that should be of interest to this Board is that by putting our state equipment and resources at Central Shenandoah EMS Council they can stream these board meetings live to their site and people locally could go to that site and participate in the State EMS Advisory Board meetings.</p> <p>Mr. Henschel asked if they are still evaluating what the needs are in their region. Mr. Critzer said they are going to do a needs assessment throughout their entire region. It will be an ongoing process. He explained that in order for them to go to the state and request funding for something, i.e. to conduct a course, etc. that they will have to demonstrate the need and the cost.</p> <p>Mr. Critzer took this opportunity publicly to thank Gary Brown, Adam Harrell, Tim Perkins and Chris, and others from the State that have been involved in this process. It has been a true partnership. They really appreciate their help and assistance.</p>	
PUBLIC COMMENT	None	
OLD BUSINESS	None	
NEW BUSINESS	None	
Adjournment	1:35 pm	

DRAFT