

State EMS Advisory Board

NOVEMBER 15, 2024

Table of Contents

Full Board Meeting Minutes	3
I. Opening Session.....	3
II. Reports	5
Chairman’s Report	5
VDH OEMS Report.....	8
State Board of Health EMS Representative Report.....	14
Regional EMS Council Executive Directors’ Report.....	15
III. Committee Reports.....	16
Executive Committee	16
Financial Assistance Review Committee (FARC).....	18
Administrative Coordinator	22
Rules and Regulations Committee	22
Legislative & Planning Committee.....	23
Infrastructure Coordinator.....	25
Transportation Committee.....	25
Communications Committee	26
Emergency Management Committee	28
Professional Development Coordinator	30
Workforce Development Committee.....	30
Training & Certification Committee.....	32
Provider Health & Safety Committee	32

Patient Care Coordinator..... 33

Medical Direction Committee..... 34

State Air Medical Committee 35

EMS for Children Committee..... 35

Trauma System Coordinator 36

Trauma Administrative and Governance..... 37

System Improvement 37

Injury and Violence Prevention 37

Prehospital Care..... 38

Acute Care..... 38

Post-Acute 38

Emergency Preparedness and Response 38

IV. Public Comment 38

V. Business Matters..... 39

 Unfinished Business..... 39

 New Business..... 40

VI. Adjournment..... 42

Full Board Meeting Minutes
 Embassy Suites By Hilton Richmond
 2925 Emerywood Parkway
 Richmond VA 23294
 Friday, November 15, 2024

I. Opening Session

Call to Order:

The meeting was called to order at 10AM by Chair Kevin Dillard.

Pledge of Allegiance:

The Pledge of Allegiance was led by John “JC” Bolling.

Members Present:	Members Absent:	OEMS Staff:	Others:
Kevin Dillard	Kim Craig (excused)	Rachel Stradling	Chris Montana
Beth Adams Roemmelt	Sadie Thurman (excused)	Mohamed Abbamin	Tanya Trevilian
Lisa Baber		Ashley Camper	Stephen Simon
Kim Craig		Cam Crittenden	Ray Whatley
Eddie Ferguson		Jacqueline Hunter	Heather Campbell
Paula Ferrada, M.D.		David Thomas	Heidi Hooker
Brian Frankel		Barry Reeves	Bubby Bish
Rebecca Branch Griffin, Ph.D.		Julie Franchok	Coonie Moore
David Hupp		Scott Winston	Valeria Vajj
Joseph P. Lang, M.D.		Debbie Akers	Pier Ferguson
Matt Lawler		Daniel Linkins	Wayne Bowman

Members Present:	Members Absent:	OEMS Staff:	Others:
Robert Lipscomb		Kari Maagner	Ryan Scarbrough
Beth Matish		Wayne Perry	Rebecca Johnson
Patrick McLaughlin, MD		Mary Kathryn Allen	Karen Owens
Melissa Meador			Whitney Pierce
Benjamin Nicholson, MD			Adam Wincher
Daniel Norville			Tracey McLaurin
James Reynolds			Ed Rhodes
Marlon Rickman			Mike Watkins
Bryan Rush			Allen Yee
Sonny Saxton			Matthew Allen
Victoria Smith			Chip Deeker
R. Bruce Stratton			Gregory Jones
Bill Streett			Michael Player
Joseph Williams			Jennifer Wilson
			Gary Dalton
			Kate Devenport
			Ali Akbar
			Cary Tamlin
			S. Southworth
			Anthony Wilson
			Gary Wayne Tanner (BOH)

Approval of Previous Meeting Minutes

The minutes of the previous meeting held on August 2, 2024, were reviewed.

Motion: To approve the August 2, 2024, board meeting minutes.

Vote: Unanimous

Action: Motion Carries

Approval of Current Meeting Agenda:

The agenda for the current meeting on November 15, 2024, was reviewed.

Motion: Chairman Kevin Dillard requested the addition of a discussion on the Fitch and Associates report under New Business at the end of the meeting. The amended agenda was unanimously approved.

Vote: Unanimous

Action: Motion Carries.

II. Reports

Chairman's Report

Topic: Chairman's Report

Discussion: Presented by Chairman Kevin Dillard.

Chairman Dillard began by acknowledging the significant impact of Hurricane Helene on southwest Virginia and other areas in the southeastern United States. The event prompted the activation of multiple Emergency Operation Centers in Virginia,

highlighting the strength, resilience, and collaboration of the state's EMS system. He extended his gratitude to the Southwest Virginia EMS Council, its leadership, local agencies, and all responders for their exemplary efforts during this challenging time. Mr. Dillard also announced the 2025 Tidewater Healthcare Expo, which will take place from May 13-18 at the Sheraton Norfolk Waterside. He encouraged board members and stakeholders to participate in this valuable training opportunity. Mr. Dillard proceeded to provide the following update related to the EMS Advisory Board.

See below.

Excused Absent Members

- Kim Craig
- Sadie Thurman

Welcome to New Board Members

- Dr. Joe Lang – Virginia College of Emergency Physicians
- Lisa Baber – Old Dominion EMS Alliance
- David Hupp – Virginia Professional Firefighters Association

Reappointed Board Members

- Bryann Rush – Virginia Municipal League
- Joe Williams – Rappahannock EMS Council
- Bill Street – Lord Fairfax EMS Council

The chair expressed gratitude to both new and reappointed members for their commitment to serving the State EMS Advisory Board.

Recognition of Retiring Board Members

The chair honored retiring members, presenting them with mementos in appreciation of their years of service to the board and the Commonwealth:

- Gary Samuels (six years): Administrative Coordinator; Chair of the Legislative and Planning Committee and Bylaws Committee.
- Dr. Allen Lee (six years): Patient Care Coordinator and Medical Direction Chair.
- Pier Ferguson (six years): Served on trauma committees.
- Sonny Saxton (three years): Communications Committee Chair.

Mr. Dillard thanked these individuals for their dedicated service and contributions to the EMS community.

Following these announcements, Mr. Dillard invited Board Member James Reynolds to provide a report on the special work group addressing House Bill 1309.

Discussion: Presented by James Reynolds

HB 1309 - State Emergency Medical Services Advisory Board develop guidelines and guidance for the provision of emergency treatment of fire, police, and search and rescue dogs.

Board Member J.R. Reynolds provided an update on the special work group formed in response to House Bill 1309. The bill mandates the development of guidelines for the emergency treatment and transportation of fire, police, and search and rescue dogs injured in the line of duty. These guidelines are to be created in consultation with the Board of Veterinary Medicine and include the use of EMS vehicles to transport injured service animals to veterinary facilities equipped for emergency care.

The work group is composed of Dr. Christie Bowden, a clinical instructor for Emergency & Critical Care Medicine at Virginia Maryland College of Veterinary Medicine, Ashley Camper from Virginia OEMS, Kari Magner from Virginia OEMS, Susan Seward from Virginia State Veterinary Medical Association, Kellie Moss from Board of Veterinary Medicine, LT Jeremy Demott and his K9 Chirp from Chesapeake Fire Department, Special Operations Paramedic Richard Gray from Chesapeake Fire Department, and myself serving as chair.

We are currently recruiting a law enforcement officer from Southwest Virginia for the committee.

The workgroup met for the first time on October 17th. The next meeting is November 21st at 3 pm.

VDH OEMS Report

Topic: VDH OEMS Report

Discussion: Presented by Christopher Lindsay (Part I)

Mr. Lindsay expressed appreciation for the opportunity to address the board and extended greetings from Dr. Karen Shelton, who was unable to attend due to a pre-planned vacation. Gratitude was expressed to the board members for their ongoing support in rebuilding the OEMS and to newly appointed members for joining and contributing their talents and expertise. Mr. Lindsay introduced, Stephanie Dunkel, the new Deputy Commissioner for Population Health and Preparedness, under whose leadership the OEMS operates. Stephanie Dunkel brings extensive experience in organization management and accountability from her prior public health roles at the national level and in Washington State

Discussion: Presented by Stephanie Dunkel (Part II)

Stephanie Dunkel, Deputy Commissioner for Population Health Preparedness, addressed the board, sharing her background and experience. Originally from Pennsylvania, she spent the last 12 years working in Washington State, where she collaborated closely with EMS and Fire Departments.

Ms. Dunkel, began her career in emergency preparedness, working at the local and state levels. She indicated that her experience includes patient tracking and facilitating the interface between public health, healthcare, and EMS during various emergency responses.

Ms. Dunkel also worked extensively on community paramedicine initiatives, focusing on high utilizers of 911 and emergency department services, and on efforts to address the impact of individuals experiencing homelessness on EMS and 911 systems. The work emphasized diversion and patient tracking to support EMS and 911 systems while addressing community health needs.

Ms. Dunkel expressed gratitude for the opportunity to work with the board and the OEMS, sharing her enthusiasm for supporting EMS efforts across the state.

Discussion: Presented by Christopher Lindsay (Part III)

Christopher Lindsay addressed the recent JLARC report on the Virginia Department of Health (VDH), highlighting challenges in financial management, staffing, and accountability systems that developed over multiple years. While these challenges predated the current leadership, the team has been committed to implementing solutions since the outset, including enhanced financial and operational controls, leadership restructuring, and process improvements. Key efforts include:

- **Operational Reforms:**
 - Consolidation of operational leadership across programs.
 - Monthly operating reviews focused on budgets, hiring, goals, and employee engagement.
 - Creation of a Chief Financial Officer role and a Controller position for compliance and financial oversight.
 - Establishment of an Office of Grants Administration to oversee compliance for 165 federal grants worth \$2.2 billion.
- **Staffing Improvements:**
 - Significant reduction in vacancy rates in financial operations, human resources, and internal audit offices.
 - Implementation of dedicated recruiters to address long-standing staffing gaps.
- **Technology Upgrades:**
 - Development of a modern financial and human resources management system to replace outdated software.

Christopher Lindsay emphasized agreement with the JLARC recommendations and the long-term benefits they will bring to VDH.

Update on EMS Operations: Christopher Lindsay reviewed progress since addressing the EMS Advisory Board a year ago about challenges in the OEMS. Highlights include:

- Securing \$12.5 million to stabilize EMS operations.
- Resolving \$8 million in overdue Return to Locality payments and funding EMS Councils to their contracted amounts.
- Processing over 600 previously unknown invoices to ensure vendor payments.

- Supporting trauma centers with transparent funding, resulting in over \$9 million in payments for two consecutive cycles.
- Sustaining ePCR access for agencies and committing to Rescue Squad Assistance Fund support.

Mr. Lindsay emphasized that despite leadership vacancies and negative publicity, the OEMS team has continued to perform effectively.

Director Search Update:

- A second round of interviews for the OEMS Director attracted 74 applicants, narrowed to six candidates.
- Stakeholder representation, including EMS councils and fire community representatives, was included in the interview process.
- The final candidate will undergo a third round of interviews, with a final decision and onboarding expected early next year.

Future Strategy: Christopher Lindsay underscored the need for transformative changes to position Virginia's EMS system as a national leader. Collaboration with the EMS Advisory Board will be pivotal, leveraging its expertise and mandate to guide the system's future development. Leadership expressed a commitment to building on past successes while advancing the system for future needs.

Decision-Making: Mr. Lindsay outlined a plan to engage the EMS Advisory Board in shaping key decisions for the future of Virginia's EMS system. The process will be collaborative, transparent, and stakeholder-driven, with specific decision points assigned to subcommittees or the board as a whole for research and solution development. Mr. Lindsay cited that Chairman Dillard will oversee timelines and engagement parameters to ensure inclusivity and comprehensive input.

Topics for Discussion:

1. Medical Director Role

- Dr. Lindbeck has long served as the Medical Director for the OEMS; however, changes in procurement methods have rendered the current contracting approach unsustainable.

- A short-term agreement with Dr. Lindbeck and the UVA Physician Group has been reached but is not viable long-term.
- The EMS Advisory Board is tasked with exploring the future of the Medical Director role, including its programmatic, quality, and relationship aspects with the Medical Direction Committee, to inform the development of a permanent structure.

Mr. Lindsay emphasized the importance of the board's engagement and leadership in these discussions, ensuring the collective voice of the EMS system stakeholders is represented in the final outcomes.

2. Virginia's Trauma System

The OEMS (OEMS) administers the accreditation and inspection of Virginia's trauma hospitals, which incurs significant staffing, operational, and administrative costs, including the management of the trauma fund. However, these duties are currently unfunded. Some Virginia trauma centers are accredited by both the Commonwealth and the American College of Surgeons (ACS).

The EMS Advisory Board is asked to consider the appropriate role of OEMS in Virginia's trauma system. Specifically:

1. Should OEMS continue its current responsibilities, or
2. Should Virginia adopt ACS standards and shift OEMS to a smaller oversight role?

3. Structure of the Governor's Advisory Board (GAB) and Committees

The Governor's Advisory Board (GAB) is a large body with associated organizational costs, including staffing, meeting space, and time for committees. The board is asked to evaluate:

1. Whether the current structure is optimal, or
2. Whether there are opportunities to streamline the committee structure.

4. Education and Training

Currently, Virginia operates a centralized model for EMS education and training, administered largely by the central office. The board is asked to provide input on:

1. Maintaining the centralized model, or

2. Transitioning to a decentralized model, where education and training responsibilities are shifted to EMS councils with the central office in a support role.

5. Regional EMS Councils

The board is asked to evaluate the current structure and responsibilities of Virginia's EMS councils, including:

1. The number and geographic composition of councils.
2. Their purpose and responsibilities moving forward.
3. Funding considerations: A fixed allotment of \$4.5 million is projected for EMS councils, approximately 50% of the operational budget.

Request: The board is asked to consider how this funding should be distributed, whether among the current 11 councils or a revised structure. The board's input is requested to develop solutions addressing these topics, ensuring a sustainable and effective future for Virginia's EMS system.

6. Placement of the OEMS

Mr. Lindsay posed a question regarding the appropriate placement of Virginia's OEMS, noting that this decision needs to be resolved definitively. Key considerations include:

1. EMS providers are clinical healthcare providers with significant roles in public health, particularly in advancing community paramedicine, mobile integrated healthcare, pharmaceutical administration, and medical protocols.
2. EMS also plays a crucial role in public safety, heavily integrated into fire-based programs across the Commonwealth and serving as a primary point of citizen interaction.
3. The EMS Advisory Board is asked to evaluate whether OEMS should:
 - Remain within the VDH, or
 - Consider alternative placement within public safety.

Board Engagement Request: Mr. Lindsay requested the board to engage in discussions on this and the five preceding topics, involving stakeholders and members of the OEMS to foster collaboration and leverage their expertise. The goal is to chart a strategic path forward for Virginia's EMS system.

Mr. Lindsay concluded by thanking the chairman and the board for their time and consideration of these important topics.

Discussion: Presented by Rachel Stradling (Part IV)

Rachel Stradling, the Interim Director reflected on her first year in the role, expressing gratitude to key individuals for their support:

- Kevin Dillard and JC Bolling for guidance navigating professional challenges.
- Vance Cooper, Virginia Fire Chief's Association President, for support in understanding the differences between fire and EMS programs.
- Colleagues in the OEMS were also recognized for their ongoing assistance.

Additionally, Ms. Stradling provided updates on the following areas;

1. Electronic Patient Care Record (ePCR)

- An RFP process for a state repository is underway, with results to be communicated once available.
- A funding request has been submitted to the FARC Committee to assist not-for-profits with ePCR costs.

2. Staffing Changes

- Karen Owens has transitioned, leaving a significant gap in the OEMS. Transition plans for her responsibilities are in progress.
- Scott Winston announced his retirement, effective January 31, 2025. A transition plan is being developed to ensure continuity.
- Mike Berg will take on a more active role in training and grant support, confirming he is not retiring.

3. Scholarships and Training

- Scholarships, traditionally funded through the RSAF grant, are being reassessed.
- Unused funds from the 25-cent national registry allocation will be redirected toward training in collaboration with EMS Councils.
- A strategy to address training needs across the Commonwealth will be developed jointly with the Councils.

4. Equipment Inventory:

- A comprehensive inventory of training equipment is underway.
- Plans will be coordinated with Councils to ensure equipment is effectively utilized for training and accessible to providers statewide.

5. Rural Health Day:

- Scheduled for November 21, with details available at powerofrural.org. This day is an opportunity to recognize and celebrate the remarkable contributions of rural healthcare providers, communities, organizations, State Offices of Rural Health, and other stakeholders committed to meeting the distinctive healthcare needs of rural America.

6. Council Visits:

- Ms. Stradling has begun visiting EMS Councils (e.g., Lord Fairfax) and plans to visit all Councils before the new Director’s arrival. These visits aim to gather insights on current needs to ensure a smooth transition.

Ms. Stradling thanked the Board for their time and reiterated a commitment to supporting the EMS system during this transitional period.

State Board of Health EMS Representative Report

Topic: State Board of Health EMS Representative Report

Discussion: Presented by Gary Critzer

According to Gary Critzer, at the State Board of Health meeting on September 19th in Richmond, the following updates and activities were presented:

1. Office of OEMS Update

- The Commissioner provided an update on the status of the Office of OEMS.

2. Overview of Pending Regulatory Actions

- There are 56 pending actions under development:
 1. 14 NOIRAs

2. 10 proposed actions
 3. 7 final actions
 4. 25 fast track actions
3. **Next Meeting Announcement:**
- The next meeting is scheduled for December 5th at the Perimeter Center in Richmond. The agenda is available on the Virginia Regulatory Town Hall website.

Recommendation/Action Follow-up: NA

Regional EMS Council Executive Directors' Report

Topic: Regional EMS Council Executive Directors' Report

Discussion: Presented by Tracey McLaurin

Tracey McLaurin, Director, Lord Fairfax EMS Council, and Chairperson of the Regional Council Directors provided the following updates and highlights from the Regional Council:

1. **Agency Support and Program Improvements**
 - Regional Councils have been actively supporting EMS agencies in their transitions, including collaboration with hospitals, pharmacies, the DEA, vendors, and suppliers of medication dispensing cabinets.
 - Acknowledgment was given to Michael Player, Executive Director of Peninsula EMS Council, for his contributions to the program.
2. **Meetings and Collaboration**
 - The directors met in Richmond and continue to hold bi-weekly meetings with OEMS to stay updated on program developments.
3. **Support for Agency Transitions**

- The group received a presentation from ESF to explore ways councils can support agencies transitioning from past OEMS-provided products.

4. **Fitch Report Concerns**

- The directors expressed concern over inaccuracies and misleading information in the Fitch report released in September. A feedback document in the form of a powerpoint was provided (enclosure 1).
- Since initiating dialogue with VDH leadership, there has been positive engagement, and the directors feel encouraged by discussions on involving councils and stakeholders in rebuilding the EMS system.

5. **Commitment to Collaboration**

- Regional Councils remain united in their commitment to strengthening the EMS system in Virginia, leveraging grassroots support to restore its reputation as one of the best in the country.

Recommendation/Action Follow-up: NA

III. Committee Reports

Executive Committee

Topic: Executive Committee

Discussion: Presented by Kevin Dillard

Executive Committee Report

- The Executive Committee met and approved the following new appointments and reappointments:
 - **Administrative Coordinator:** Dan Norville
 - **Legislative and Planning Chair:** Bruce Stratton
 - **Rules and Regulation Committee Members:** David Hupp, Lisa Baber

- **Legislative and Planning Members:** David Hupp; EMS Councils added as a regular position, with Mike Player joining
- **Infrastructure Coordinator:** Joe Williams
- **Communications Committee Member:** Chair: Gary Tanner, adding Joe Williams
- **EMS Emergency Management Committee Member:** Adding Steve Southworth
- **Medical Direction Committee Member and Chair:** Dr. Joseph Lang - *new member and chair
- **Patient Care Coordinator:** Dr. Patrick McLaughlin
- **Transportation Committee Chair:** Matt Rickman
- **Training and Certification Members:** Larry Oliver, Chris Croco, Dr. Charles Lane (reappointments); Jason Ferguson (new appointment)
- **Trauma System Improvement Member:** Lisa Baber

Motion: To approve the reorganization of the GAB structure, including the addition of newly appointed board members to their respective committees and the appointment of committee chairs.

Vote: Unanimous

Action: Motion Carries.

Mr. Dillard further spoke on the areas Mr. Lindsay addressed and advised in an effort to ensure there is a transparent discussion, the six points brought forward have been divided amongst the various committees within the Advisory Board.

Assignments

1. **Medical Director Role:** Define the vision and responsibilities for a statewide Medical Director. Assigned to the Medical Direction Committee.
2. **Trauma Fund:** Evaluate whether to outsource or retain responsibilities within OEMS. Assigned to the Trauma Administrative and Governance Committee.

3. **Training and Education:** Determine the model (centralized vs. decentralized) and the role of councils. Assigned to the Training and Certification Committee.
4. **OEMS Placement:** Assess whether the office should remain with the Virginia Department of Health or move to another entity. Assigned to the Executive Committee and interested board members.
5. **Advisory Board Committees:** Review the number of committees for overlap and streamlining opportunities. Assigned to the Coordinators and the Executive Committee.
6. **Regional Councils:** Evaluate the number, coverage areas, and responsibilities of the councils. Assigned to the Regional Directors Group and presidents of regional EMS councils.

Participation and Open Meetings

- OEMS staff and other stakeholders are invited to participate in discussions. All meetings will be open for observation and comments.

2025 Advisory Board Meeting Schedule

- Meetings will be held at 10:00 AM on:
 - February 7
 - May 2
 - August 1
 - November 7

Recommendation/Action Follow-up: Forthcoming

Financial Assistance Review Committee (FARC)

Topic: Financial Assistance Review Committee (FARC)

Discussion: Presented by J. C. Bolling

The Financial Assistance Review Committee provided the following updates following their November 14, 2024, meeting.

1. **2024 Rescue Squad Assistance Fund (RSAF) Grant Cycle**

- The grant cycle opened on August 1 and closed on September 16, 2024.
 - A total of 84 grant applications were submitted, requesting 202 items.
 - Submissions came from 74 Emergency Medical Service (EMS) agencies and 10 non-EMS agencies, totaling \$13,742,000.
- 2. Review Process**
- The technical review period has concluded, and committee members are now reviewing the grants.
 - The grading and ranking meeting is scheduled for December 5, with the final awards to be announced on January 1, 2025.
- 3. Key Grant Requests**
- The largest cumulative requests came from:
 - Southwest Virginia: Over \$2.5 million.
 - Central Shenandoah Region: Slightly under \$2.5 million.
 - Specific initiative requests included the EMS Medication Management System Grant, with the highest request from Southwest Virginia (over \$400,000).
- 4. Grant Specialist Update**
- Michael Berg, has confirmed he will continue in his role and has taken on additional responsibilities.
 - Budget constraints that previously limited his travel have been eased, allowing him to resume traveling to provide training.
- 5. Training Opportunities:**
- Regional councils and agencies are encouraged to schedule training sessions with Michael Berg to improve understanding of the grant process, application preparation, and compliance.
- 6. Common Issues Identified:**
- Some grant applications included non-compliant requests, such as funding for invoices already processed or items not permitted under regulations.
 - Refresher training on grant guidelines is recommended to avoid these issues in future cycles.

The committee emphasized the importance of continued training and outreach to ensure effective grant applications and compliance with regulations.

Recommendation/Action Follow-up: See below.

- Committee members will complete their reviews by December 2.
- Grading and ranking will occur during the December 5 meeting, with final decisions announced January 1, 2025.

Additionally, JC Bolling further cited that a discussion was held regarding a proposed EMS Special Initiative Award Opportunity focused on Patient Care Reporting.

1. Need

- The current patient care reporting contract is coming to an end, creating challenges for agencies to independently manage and sustain patient care reporting systems.
- To mitigate this impact, a Special Initiative Grant is being proposed.

2. Proposal Overview

- The special initiative aims to provide financial support to agencies to transition or adapt to the end of the contract.
- The initiative has been discussed in multiple committees, with both advantages and concerns noted.

3. Source of Initiative

- Special initiatives can be proposed by:
 - The Office of Emergency Medical Services (OEMS).
 - The Financial Assistance Review Committee.
- This proposal has the support of both OEMS and the Financial Assistance Review Committee.

4. Request for Approval

- The board was asked to approve the special initiative to move forward with implementation.

Lastly, Ms. Stradling will provide further details and oversee the implementation process if approved.

Discussion: The Acting Director, Rachel Stradling, provided detailed information regarding a proposed Special Initiative Grant aimed at supporting a basic patient care reporting system for not-for-profit agencies.

Key Details of the Special Initiative

1. Purpose:

- To assist agencies with the transition to a new patient care record system following the end of the current contract.

2. Grant Timeline:

- **Portal Opening:** December 1, 2024
- **Portal Closing:** January 3, 2025
- **Grant Review:** Financial Assistance Review Committee (FARC) to hold a special meeting in February 2025.
- **Grant Awards:** Announced by March 31, 2025, allowing maximum time for agencies to implement their systems.

3. Support for Agencies:

- Agencies are encouraged to actively engage with electronic patient care record providers. While contracts cannot be signed prior to grant approval to remain compliant with grant rules, agencies are encouraged to secure letters of intent to prepare for success.
- Michael Berg will travel to regional councils to provide grant-writing training and support to agencies.

4. Grant Allocation Criteria:

- Funding will be allocated based on hardship and the number of calls handled by each agency.

5. Collaboration:

- The OEMS will work closely with regional councils to ensure a smooth transition, recognizing the significant change this initiative represents.

6. Considerations:

- The initiative depends partly on the results of the RFP for the state repository vendor, which introduces some uncertainty.
- The project is acknowledged as complex, particularly given the IT challenges involved.

Request to the Board: Approval was sought to allocate funding for this special initiative to support the transition.

The Acting Director, Rachel Stradling reiterated the significance of the initiative and expressed gratitude to the councils, FARC, and the EMS team for their anticipated collaboration and efforts during this challenging transition. Questions from the board were invited and addressed.

Recommendation/Action Follow-up:

- FARC will conduct a special review meeting in February to finalize grant awards by March 31, 2025.
- Regional councils and OEMS will provide ongoing support to ensure agencies can navigate this transition successfully.

Motion: Approval of EMS Special Initiative for Patient Care Reporting, specifically for not-for-profit EMS agencies.

Vote: Unanimous

Action: Motion carries

Recommendation/Action Follow-up: NA

Administrative Coordinator

Topic: Administrative Coordinator

Discussion: NA

NA

Recommendation/Action Follow-up: NA

Rules and Regulations Committee

Topic: Rules and Regulations Committee

Discussion: Presented by Daniel Norville

Mr. Norville provided the following update - the Rules and Regulations Committee held a meeting on **November 14, 2024**, with the following key updates and actions:

1. Regulatory Updates

- The committee reviewed several variance requests, approving the following:
 - **Variance 6703:** Approved for 24 months.
 - **Variance 6726:** Approved for compliance with the draft of Chapter 32.
 - **OMD Workshop Variances:** Three OMDs with expiring endorsements were granted a 1-year conditional variance due to the cancellation of workshops during the OEMS Symposium.
- **Chapter 32:** Updates on Chapter 32 regulations were provided. Progress has stalled, with the informal review by the Attorney General's Office requiring additional redrafting to address clarity, consistency, statutory alignment, and enforceability.

2. Medical Direction Committee Collaboration: The committee continues to collaborate with the Medical Direction Committee regarding EMS physician nomenclature and the role of mid-level practitioners (PAs and NPs) in EMS leadership and medical direction. No action has been taken on these items to date.

3. Exemption Requests

- Several exemption requests were reviewed, including:
 - **Loudoun County Request:** Deferred for additional preparation by the agency.
 - **Bland County Request:** Withdrawn.

4. Future Workshops

- OMD Workshops are expected to resume in January 2025 to address issues stemming from previous cancellations.

Recommendation/Action Follow-up: NA

Legislative & Planning Committee

Topic: Legislative & Planning Committee

Discussion: Presented by Beth Adams

Beth Adams provided the following updates - the Legislative and Planning Committee held a meeting on November 15, 2024, at 8am prior to the current full board meeting.

Discussion points below;

1. **JLARC Study:** The committee briefly discussed the implications of the JLARC study, including its potential impact on EMS operations and funding.
2. **Virginia Fire and EMS Stakeholders' Legislative Priorities:** Notable among these priorities is a proposal to move the OEMS from the Virginia Department of Health to Public Safety, reflecting broader concerns about alignment and operational support.
3. **OEMS Funding:**
 - The discussion touched on current funding challenges and the need for additional resources to support EMS operations effectively.
4. **Regional Council Legislative Package:**
 - Two key components of the Regional Council's package were highlighted:
 - A proposal to secure additional general funds for EMS operations.
 - Modified language to ensure sustainable funding, specifically related to Paragraph B4 for Life Funds.

Ongoing Committee Business

1. Collaboration with the Medical Direction Committee:
 - The committee continues to work with the Medical Direction Committee on two significant items:
 - EMS Physician Nomenclature: Efforts to standardize the terminology and roles associated with EMS physicians.
 - Role of Mid-Level Practitioners: Exploration of the potential roles for physician assistants (PAs) and nurse practitioners (NPs) in EMS leadership and medical direction.

- **Current Status:** No action has been taken on these items to date. The committee will continue to carry them forward.

Committee Reactions to Reports

Fitch Report and JLARC Study:

- A discussion was held regarding the committee's reactions to the Fitch Report and its alignment with findings in the JLARC study.
- Concerns were expressed about inaccuracies and potential misinterpretations within the reports, as well as the need for stakeholder engagement in addressing these issues.

Beth Adams noted that further elaboration on this topic could be deferred to a later agenda item where the Fitch Report would be discussed in greater detail.

Recommendation/Action Follow-up: NA

Infrastructure Coordinator

Topic: Infrastructure Coordinator

Discussion: Presented by Eddie Ferguson

Eddie Ferguson referred to the updates from Transportation, Communication and Emergency Management Committees.

Vote: NA

Action: NA

Transportation Committee

Topic: Transportation Committee

Discussion: No Report

No Report

Recommendation/Action Follow-up: NA

Communications Committee

Topic: Communications Committee

Discussion: Presented by Sonny Saxton

Mr. Saxton indicated that Communications Committee did have a good meeting but there were no specific actions to report. However, Mr. Saxton provided the following discussion items;

Emergency Response Discussion

- Discussed support provided by Telecommunications Emergency Response Teams (TERT) to 911 centers in Southwest Virginia and North Carolina following Hurricane Helene.
- Plans to establish regional TERT programs across Virginia were introduced, with interest noted from Northern Virginia to Southwest Virginia.

OEMS Updates

- **EMD Accreditation Update**
 - Prince William County 911 and Wise County were re-accredited.
 - A total of 31 agencies are currently OEMS EMD Accredited.
- **Training Program Update**
 - PowerPhone has rebranded as “Total Response,” with no changes to the program. Updates will be reflected in the documentation but require no action.

Member Reports Included.

- **APCO (Kristina Farley):**
 - Annual Fall Conference held from October 29 to November 1 had 515 attendees. Scholarships are available for upcoming events, including the Winter Summit in February.

- **NENA (Stephen Sutton):**
 - Spring Conference scheduled for May 20–23, 2025, includes ENP scholarships and a golf tournament.
 - Key advocacy dates include “911 Goes to Richmond” on January 14, 2025, and “911 Goes to Washington” in late February.
- **PSAP Online Directory:**
 - Orange County has two superusers onboard. Further testing is required before full implementation.
- **EMD Regulations Development:**
 - Awaiting further guidance from OEMS.
- **High School Emergency Telecommunicator Program:**
 - Progress continues on a two-year curriculum expansion to include Fire, Police, Mental Health, and basic dispatching skills.
- **RSAF Grant Update:**
 - One locality submitted a grant for Priority Dispatch EMD, and another for radio equipment. Grant grading is pending the FARC meeting.
- **Supporting Disasters via TERT:**
 - The committee discussed re-creating TERT programs in Virginia, exploring regional versus state programs. Agencies that assisted in Southwest Virginia and North Carolina were acknowledged.

Recommendation/Action Follow-up: NA

Emergency Management Committee

Topic: Emergency Management Committee

Discussion: Presented by Joseph Williams

Mr. Williams provided the following information regarding their most recent meeting November 14, 2024

1. Committee welcomed potential new member Steve Southworth (VAVRS) and VDEM representative Jason Eaton for a presentation.
2. Chair Report
 - Appreciation expressed for committee attendance and ongoing progress in Emergency Management for EMS.
3. VDH Updates (James Moss)
 - Monitoring Marburg outbreak in Rwanda and implications for medical evaluation.
 - Discussed IV shortages due to Hurricane Helene; conservation efforts have been successful.
4. Regional Updates (Matthew Allen)
 - Eastern Region planning surge capacity exercises; similar events scheduled statewide.
 - Preparing for Emergency Preparedness Summit (April 2025) and statewide communications test (December 18, 2024).
5. Equipment Updates (Stephanie Hackett)
 - Final rapid access transport units and MCI buses to be delivered by month-end.
6. VA-1 DMAT (Michael Player)
 - Responded to Hurricane Helene with task forces and IT specialists.
7. Statewide Resource Coordination (Jason Eaton)
 - Reviewed Statewide Mutual Aid (SMA) and Emergency Management Assistance Compact (EMAC) processes.
 - Emphasized education on resource tracking using the CSALTT acronym.
8. Discussion Topics
 - Reserve Ambulance Program: Update requested from OEMS liaison.

- VA Standards of Excellence Program: Brainstorming initiated on recognizing EMS agencies for preparedness plans.
 - Surge Planning: Recommendations for a white paper on best practices and decompression/evacuation planning.
9. Announcements
- VAVRS Rescue College scheduled for June 6–15, 2025.

Recommendation/Action Follow-up:

1. Follow up on reserve ambulance program and ideas for EMS preparedness recognition program.
2. Prepare draft white paper on surge planning best practices.

Professional Development Coordinator

Topic: Professional Development Coordinator

Discussion: Presented by Matt Lawler

Mr. Lawler referred to Mr. Matt Rickman chair of the Workforce Development Committee.

Recommendation/Action Follow-up: NA

Workforce Development Committee

Topic: Workforce Development Committee

Discussion: Presented by Matt Rickman

Mr. Rickman provided the following update;

1. Curriculum and Programs

- **Keeping the Best Toolkit:** Transitioning to Moodle for improved accessibility and delivery.
- **EMS Officer Program:**
 - Over 10,000 CE hours awarded since 2016.
 - Efforts to expand course offerings and address challenges with registration and completion rates.
- **High School EMS Programs**
 - Expanding collaborations with schools and considering dual enrollment options for EMR and EMT training.

2. Standards of Excellence Program

- Placed on temporary hold for evaluation.
- A work group was formed to explore improvements and incentivization for agency participation.

3. Recruitment and Retention

- The Recruitment and Retention Network is developing a 2025 schedule for initiatives to rebuild and expand efforts.

4. Registered Apprenticeships

- Discussions on the apprenticeship program are on hold due to staffing transitions.

5. Leadership and Staffing Updates

- Announcements of upcoming retirements: Scott Winston (January 2025)
- Ongoing interviews for the EMS Director position; outcome pending.

6. New Business and Public Comment

- Feedback requested on the EMS Officer Program to address challenges and expand its reach.
- Gratitude was extended to Karen Owens for her service to OEMS.

Recommendation/Action Follow-up: NA

Training & Certification Committee

Topic: Training & Certification Committee

Discussion: Presented by Matt Lawler

Joint Task Force on EMS Education

- The Medical Direction Committee (MDC) agreed to form a joint task force with the Training and Certification Committee (TCC) to address EMS education quality and psychometric testing reliability.
- The task force has not yet met but may be repurposed to address broader education needs in Virginia.

Virginia High School EMS Education Program Manual

- Approved by both the TCC (July 2024) and the MDC.
- Under review by the Department of Health before presentation to the advisory board.

Auxiliary Continuing Education Document

- Revised document detailing authorized continuing education and pediatric hour breakdown was approved, with minor housekeeping modifications.

Integrated Training Among Public Safety Agencies

- The committee discussed statewide training needs and resource mapping.
- Passed a motion requesting OEMS to evaluate current training needs and resources of public safety agencies and report back to the committee.

Fitch Report Data Request

- A public comment highlighted the need for statistical data or peer review of the Fitch Report.
- The committee moved to request OEMS provide the raw data sets used in the Fitch Report for further analysis.

ePCR Grant Funding

- A motion related to EPCR grant funding was presented but withdrawn.

Provider Health & Safety Committee

Topic: Provider Health & Safety Committee

Discussion: Presented by Brian Frankel

The committee submitted a motion for the board to accept the EMS Safety Officer Position Paper, which was previously shared with all board members.

The paper advocates for establishing the EMS Safety Officer role to foster a culture of safety within OEMS and address the comprehensive health and safety needs of EMS providers.

The committee emphasized the role's importance in enhancing safety practices and promoting a safer EMS community.

- **Chaplain Program Accreditation:** Peer support and chaplain programs are growing and positively impacting EMS providers across Virginia.
 - **Stafford County:** Recognized as the first accredited Chaplain program in the state.

Lastly, Mr. Frankel expressed enthusiasm for ongoing safety initiatives and the continued growth of programs that support EMS providers.

Recommendation/Action Follow-up: NA

Motion to approve: Motion for the board to accept the EMS Safety Officer Position Paper, which was previously shared with all board members.

Vote: Unanimous

Action: Motion Carries

Patient Care Coordinator

Topic: Patient Care Coordinator

Discussion: No report

Recommendation/Action Follow-up: NA

Medical Direction Committee

Topic: Medical Direction Committee

Discussion: Presented by Patrick M. McLaughlin, M.D., M.S.

Dr. McLaughlin provided the following updates from their recent meeting;

1. National Pediatric Readiness Project

- Assessment of licensed EMS agencies responding to 911 calls concluded in August.
- Nationwide response rates are typically below 50%; Virginia aims to exceed this benchmark.
- Results will be available in December and reviewed during the February meeting.

2. Small Ambulance Child Restraints

- Approximately 50 small ambulance child restraints remain available.
- Those interested can contact Dave Edwards or Tim Perkins to obtain one.

3. Hands-On Activities and Upcoming Meeting

- Recap of last year's review and discussion on the ease of use and different models of stretcher-compatible restraints, which was well-received.
- The next meeting will feature hands-on education led by Mr. Bob Page from the High-Performance Ventilation Coalition.
- He will demonstrate a feedback device for ventilation, similar to those used for chest compression feedback (e.g., Zoll devices), providing real-time guidance on timing, depth, and recoil.

Recommendations/Action Follow-Up

- Review and analyze National Pediatric Readiness Project results during the February meeting.
- Promote availability of small ambulance child restraints to stakeholders.
- Encourage participation in the February 6 meeting for hands-on educational opportunities.

State Air Medical Committee

Topic: State Air Medical Committee

Discussion: Presented by Victoria Smith

1. Safety Discussions

- Ongoing focus on addressing safety issues, particularly related to landing zone operations.
- Specific attention was given to the helipad at the central facility in Farmville, where tree growth is impacting safe air medical operations.

2. Weather Turn Down Application (Helicopter EMS)

- Tim Perkins reported that the application's data has remained steady over recent quarters, demonstrating the tool's robustness and effectiveness in supporting decision-making for air medical operations.

3. Flight Medic to Flight RN Bridge Extension Request

- The committee voted to approve the request with a modification to the hospital nursing experience terminology to include independent practice experience within the required hours.
- The proposal will be presented to the Rules and Regulations Committee for further approval.

4. Action Items

- No action items were brought forward to the board.

Recommendation/Action Follow-up: Present the approved Flight Medic to Flight RN Bridge extension proposal to the Rules and Regulations Committee.

EMS for Children Committee

Topic: EMS for Children Committee

Discussion: Presented by Dr. Patrick McLaughlin

The EMS for Children Committee met November 14, 2024 with a quorum, and there are no action items for the board. Updates are as follows;

- The National Pediatric Readiness Project assessment for EMS agencies ended in August, with results expected in December and review in February.
- Approximately 50 small ambulance child restraints are available for distribution. Contact Dave Edwards or Tim Perkins for more details.

Recommendation/Action Follow-up: The next committee meeting on February 6 will feature a hands-on demonstration of a high-performance ventilation device by Mr. Bob Page from the High Performance Ventilation Coalition. The device provides feedback on ventilation depth, timing, and recoil, similar to feedback provided during chest compressions.

Trauma System Coordinator

Topic: Trauma System Coordinator

Discussion: Presented by Paula Ferrada MD FACS FCCM

According to Dr. Ferrada the following are relevant updates;

1. Meeting Status

- The Trauma Committees did not meet this session due to scheduling conflicts with the National Trauma Quality and Improvement Conference, a critical event attended by over 2,000 participants nationwide. This conference is mandatory for many trauma programs.

2. Ongoing Work via Work Groups

- Work groups have been actively engaged throughout the year to:
 - Reduce silos and promote collaboration.
 - Increase diversity in demographics, regions, and roles within the committee's efforts.
- Collaboration with the [American College of Surgeons \(ACS\)](#) led to welcoming Trauma Program Managers (TPMs) and other key stakeholders beyond physicians to discussions.

3. National Recognition

- The Virginia Chapter of the ACS was represented at the National Team Conference.
- Presentation on Virginia's initiatives to improve trauma patient mortality was delivered to over 700 attendees.
- Highlighted Virginia's leadership in resuscitation techniques and its impact on nationwide practices.

4. Credentialing and Certification of Trauma Centers

- Discussions around trauma center credentialing and certification by ACS continue as a priority.

5. Trauma Fund and Future Efforts

- Ongoing conversations about the trauma fund will be supported by work groups to ensure progress between formal meetings.

Recommendations/Action Follow-Up

- Continue leveraging work groups for year-round collaboration and progress.
- Maintain focus on diversity and inclusivity in committee work.
- Advance discussions on trauma center credentialing and certification.
- Prepare updates on trauma fund utilization and outcomes for future meetings.

Trauma Administrative and Governance

Topic: Trauma Administrative and Governance

Discussion: No Meeting Held

Recommendation/Action Follow-up: NA

System Improvement

Topic: System Improvement

Discussion: No Meeting Held

Recommendation/Action Follow-up: NA

Injury and Violence Prevention

Topic: Injury and Violence Prevention

Discussion: No Meeting Held

Recommendation/Action Follow-up: NA

Prehospital Care

Topic: Prehospital Care

Discussion: No Meeting Held

Recommendation/Action Follow-up: NA

Acute Care

Topic: Acute Care

Discussion: No Meeting Held

Recommendation/Action Follow-up: NA

Post-Acute

Topic: Post-Acute

Discussion: No Meeting Held

Recommendation/Action Follow-up: NA

Emergency Preparedness and Response

Topic: Emergency Preparedness and Response

Discussion: No Meeting Held

Recommendation/Action Follow-up: NA

IV. Public Comment

Topic: Public Comments

Discussion: Connie Moore provided the following public opinion;

- EMS providers in rural Virginia are facing increasing concerns due to the loss of funding and free CEUs, which will no longer be provided by OEMS after the end of the year.
- Rural agencies struggle to access the CE opportunities offered statewide due to financial constraints, making it difficult for individuals and agencies to afford the costs.
- Despite these challenges, providers are expected to maintain high levels of patient care, but stress and underpayment are impacting the ability to do so.
- The volunteer concept is increasingly difficult to sustain, with a "what's in it for me" mentality making it harder to engage people in their communities.
- The lack of funding for EMS and the absence of a mandate for EMS in the Code of Virginia are contributing to ongoing financial challenges.
- There is and has been a lack of funding increases for EMS over the past 20 years, describing it as an embarrassment, and criticized the focus on reports and studies that do not lead to meaningful change.

Recommendation/Action Follow-up: NA

V. Business Matters

Unfinished Business

Topic: Unfinished Business

Discussion: No unfinished business

No unfinished business.

Recommendation/Action Follow-up: NA

New Business

Topic: New Business – Fitch Report Feedback

Discussion: The following feedback was provided by the advisory board as it relates to the Fitch Report with a written document by the councils (enclosed);

Beth Adams made the following comments.

1. **Committee Discussion:** There was a passionate discussion among committee members, including those from the field and various EMS sectors, about the ongoing challenges faced by EMS providers. This sentiment was evident in the legislative and planning discussions held earlier in the day.
2. **Fitch Report Concerns:** A significant concern was raised regarding the Fitch report, with the perception that it was written to meet specific expectations. Errors in the data, as noted by Tracy and other committee members, were highlighted. When these inaccuracies were brought to the attention of Fitch and Office of EMS staff, there were no amendments made to address them.
3. **Perception of Deception:** There is a prevailing feeling of deception, particularly in light of the criminal investigation into the Office of EMS finances. It was suggested that VDH may be scapegoating the OEMS casting it as the "bad actor" in this situation. However, the JLARC report, as referenced by the speaker, suggests that large agencies can become unwieldy and lose focus, resulting in a lack of best practices and priority.
4. **Closing Remarks:** The speaker concluded the discussion, emphasizing the complexity of the issues at hand and their implications for the future of EMS.

Eddie Ferguson made the following comments.

Eddie Ferguson thanked Chair Dillard and Vice Chair Bolling for their leadership during tumultuous times for OEMS. He agreed with Ms. McLaurin's statement that today felt like "fresh air" and appreciated Mr. Lindsay's focus on areas needing attention.

- **Concerns Over Fitch Report:** Ferguson expressed concern that the Fitch report could hinder efforts to reform the OEMS stating it had problematic aspects and could become a distraction. He criticized the survey process, which he believed led participants to responses they might not have wanted to commit to. He noted that attempts to meet with the report's author were unsuccessful.
- **Inaccuracies and Tone of the Report:** Ferguson pointed out several inaccuracies in the Fitch report and suggested that it had an agenda-driven tone. He also noted the document released by the regional councils, which he considered problematic. Enclosed.
- **Training Division Criticism:** Ferguson disagreed with the report's mention of volunteer recruitment and retention issues, stating that the Office of EMS's Training Division, specifically under Debbie Acres' leadership, provides excellent support for maintaining certification and ensuring training needs are met.
- **Trust in the Report:** Ferguson expressed a lack of trust in the Fitch report, calling it more of an opinion than a reliable document. He suggested that the JLARC report seemed more credible and requested to know how much the Fitch report had cost the state.

Mr. Ferguson concluded the discussion by emphasizing the complexity of the issues at hand and their implications for the future of EMS.

Recommendation/Action Follow-up: NA

Christopher Lindsay made the following comments.

- **Fitch Report and Costs:** Christopher Lindsay addressed Chief Ferguson's request for information on the cost of the Fitch report, stating that he would provide the specific numbers shortly. He clarified that Fitch was hired for two main purposes: to provide on-site leadership during a period of significant senior leadership vacancies and to produce the consulting report. While Lindsay refrained from stating the exact cost at that moment, he assured the committee that the information would be shared.
- **Moving Forward from the Fitch Report:** Lindsay acknowledged the points made by Ms. Adams and Chief Ferguson, thanking them for their input. He emphasized that the Fitch report, while contributing to discussions,

would not be the deciding factor in future decisions. He noted that during his comments earlier, he purposely did not reference the Fitch report as the group pivots to move forward. The report, according to Lindsay, served more to initiate necessary conversations rather than provide specific data points for decision-making.

- **Addressing Inaccuracies:** Lindsay indicated that he had just received the report / presentation from the EMS Regional Council's today, Friday, November 15 day and had not had the opportunity to review it thoroughly. He welcomed the chance to address any inaccuracies if identified and emphasized the commitment to working collaboratively to resolve any issues.
- **Agenda Moving Forward:** Lindsay concluded by stating that the agenda moving forward is to create the best EMS system possible. He expressed hope that the group would come together to achieve this goal.

Closing Remarks: The speaker emphasized the importance of collective efforts to improve the EMS system and reaffirmed that while the Fitch report served to bring important conversations forward, the focus should now be on constructive actions for the future.

Motion: To discredit the Fitch Report due to several inaccuracies and declare the Fitch Report invalid.

Vote: Unanimous

Action: Motion Carries

VI. Adjournment

Topic: Next Meeting

Discussion: See below.

- The next meeting of the EMS Advisory Board is scheduled for February 7 at 10:00 AM.
- **Update:** Debbie Akers cited clarification on the leadership and office updates. She confirmed that the Vector contract has been secured for another year.

Vote: NA

Action: NA

Recommendation/Action Follow-up: NA

Prepared by: Mohamed G. Abbamin, MPA

Enclosures: Attached

DRAFT