COMMONWEALTH OF VIRGINIA DEPARTMENT OF HEALTH OFFICE OF EMERGENCY MEDICAL SERVICES

IN RE: BOARD MEETING OF THE STATE EMS ADVISORY BOARD

HEARD BEFORE: CHRISTOPHER L. PARKER

CHAIRMAN OF THE STATE EMS ADVISORY BOARD

CERTIFIED COP

NOVEMBER 7, 2018

CONFERENCE CENTER

NORFOLK WATERSIDE MARRIOTT

235 EAST MAIN STREET

NORFOLK, VIRGINIA

1:05 P.M.

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APPEARANCES:
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3
   Christopher L. Parker, Presiding
4
   State EMS Advisory Board Chair
5
   Parham Jaberi, M.D.
6
   Deputy Health Commissioner
7
8
9
   Amanda Lavin, Esquire, Board Counsel
10
   Office of the Attorney General
11
   STATE EMS ADVISORY BOARD MEMBERS:
12
   Michael Aboutanos, M.D.
13
   Samuel T. Bartle, M.D.
14
15
   John C. Bolling
   Dreama Chandler
16
   Valeta C. Daniels
17
   Kevin L. Dillard
18
19
   Angela Pier Ferguson
20
   Dillard E. Ferguson, Jr.
21
   Jason D. Ferguson
22
   R. Jason Ferguson
23
   William B. Ferguson
   Jonathan D. Henschel
24
   Lori L. Knowles
25
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1 STATE EMS ADVISORY BOARD MEMBERS (con't.) Matthew Lawler 2 3 Jeremiah O'Shea, M.D. Jethro L. Piland 4 Valerie Quick 5 Gary Samuels 6 Jose V. Salazar 7 8 Thomas E. Schwalenberg The Honorable Gary Wayne Tanner 9 10 Sadie Jo Thurman Allen Yee, M.D., FAAEM 11 Gary P. Critzer 12 13 OFFICE OF EMS STAFF: 14 15 Gary R. Brown, Director Scott Winston 16 Camela Crittendon 17 18 George Lindbeck, M.D. Warren Short 19 20 Wanda Street Chad Blosser 21 Tim Perkins 22 Ronald G. Kendrick 23 24 Stephen McNeer Scotty Williams 25

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OFFICE OF EMS STAFF (con't.)
1
    Ron Passmore
2
    Time Erskine
3
    James Burch
4
5
    Wayne Berry
    Paul Fleenor
6
    Irene Hamilton
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(The State EMS Advisory Board meeting was called to order at 1:05 p.m. A quorum was present and the Board's agenda commenced as follows:)

MR. PARKER: Good afternoon. We'll go

MR. PARKER: Good afternoon. We'll go ahead and get started.

Typically, we start with off the Pledge of Allegiance, but since we don't have a flag, we have requested one, so we are going to defer that for right now. We'll come back to that part.

Just a reminder to all Board members, please make sure you use your microphone, and as you start discussing a topic, make sure you state your name so that in the minutes that are recorded by the court reporter, we can make sure we have the right person with the topic that's being discussed.

Since this is the first meeting for many Board members, we have been asked to start with introductions, so as we go around the table, please introduce yourself and give us a brief -- we don't want to be here all afternoon.

But a brief reason for why you're here, like, a little passion for why you're returning, please tell us what you have gained from the Advisory Board that will help out several of the new folks to put

1 faces to names. 2 We'll start off in the corner with Gary. 3 4 MR. SAMUELS: Gary Samuels. 5 representative for the Virginia Professional Fire Fighters on the Board, retired fire fighter from 6 7 Henrico. Currently work for Bon Secours. 8 9 MR. SCHWALENBERG: Good afternoon. Tom 10 Schwalenberg. I'm division chief, chief medical officer for the City of Chesapeake Fire Department 11 representing Tidewater EMS Council. 12 13 MR. PILAND: Good afternoon. Jethro 14 Piland Hanover Fire and EMS, the fire chief, and I'm 15 16 hearing representing the Virginia Fire Chiefs Association. 17 18 I'm Allen Yee, EMS physician. 19 DR. YEE: 20 I'm here representing Virginia Chapter of American 21 College of Emergency Physicians. 22 23 MR. SALAZAR: Jose Salazar, deputy chief EMS of Loudoun County Fire and Rescue. Representing 24 the Northern Virginia EMS Council. 25

1	MS. CHANDLER: I'm Dreama Chandler
2	representing the Virginia Association of Volunteer
3	Rescue Squads.
4	
5	DR. BARTLE: I'm Sam Bartle. I'm a
6	Pediatric Emergency Medicine Physician. I'm here
7	representing the American Academy of Pediatrics.
8	
9	MS. KNOWLES: Lori Knowles. I'm Deputy
10	Chief for EMS Stafford County Fire and Rescue
11	Department. I'm representing Rappahannock EMS Council.
12	
13	MS. LAVIN: Amanda Lavin, Assistant
14	Attorney General. Counsel to the Office of EMS and
15	BDH, and the advisory council Board.
16	
17	MR. LAWLER: Matt Lawler. Augusta County
18	Fire and Rescue, and I am representing the Central
19	Shenandoah EMS Council region.
20	
21	MR. CRITZER: Gary Critzer. City of
22	Waynesboro Emergency Management and EMS, and I'm the
23	Board of Health representative for EMS.
24	
25	MS. QUICK: Valerie Quick. I'm the VA

1	Prehospital Program Manager, and I represent the Thomas
2	Jefferson EMS Council.
3	
4	MR. FERGUSON: Eddie Ferguson, Deputy
5	Chief, Goochland County Department of Fire and Rescue
6	and Emergency Services, and I'm representing the
7	Virginia State Fire Fighters Association.
8	
9	MR. HENSCHEL: John Henschel. Battalion
10	Chief with Winchester Fire and Rescue Department. I'm
11	also the president of Lower Fairfax EMS Council, and
12	that's who I represent.
13	
14	MR. PARKER: Chris Parker. Current, vice
15	chairman of the Advisory Board representing the
16	Virginia Emergency Nurses Association and the Virginia
17	Nurses Association.
18	
19	MR. BROWN: Gary Brown, director of the
20	Virginia Office of EMS.
21	
22	MR. WINSTON: Scott Winston, Assistant
23	Director, Office of EMS.
24	
25	MR. JABERI: Good afternoon. I'm Parham

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Jaberi, Deputy Commissioner, Virginia Department of
1
2
   Health.
3
                  MS. THURMAN:
4
                                I'm Sadie Thurman.
5
   assistant chief nursing officer for Riverside Regional
   Medical Center and currently the interim chief nursing
6
   officer for Riverside Doctors Hospital, and I'm
7
8
   representing the Peninsula's EMS Council.
9
                  MR. O'SHEA: I'm Jeremiah O'Shea.
10
                                                      I'm
   the chief medical officer at Chippenham Hospital and
11
   Emergency Physician by background, and I'm here on
12
13
   behalf of the Virginia Hospital and Healthcare
14
   Association.
15
                  MS. FERGUSON: Pier Ferguson, volunteer
16
   paramedic, Greensville Volunteer Rescue Squad and also
17
   life member of Forestview, and I'm representing Old
18
   Dominion EMS Council.
19
20
21
                  DR. LINDBECK: George Lindbeck, State EMS
   Medical Director.
2.2.
23
                                 I'm Billy Ferguson.
24
                  MR. FERGUSON:
   the Director of Public Safety in Franklin County, and I
25
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1 represent "VGEMSA." 2 I'm Kevin Dillard, 3 MR. DILLARD: 4 President of Life Care representing Virginia Ambulance 5 Association. 6 7 MS. DANIELS: Valeta Daniels, Goochland Fire Rescue and representing Virginia Association of 8 Volunteer Rescue Squads. 9 10 11 MR. FERGUSON: Jason Ferguson. Central Virginia Community College Public Safety Program. 12 13 representing Blue Ridge EMS. 14 15 MR. FERGUSON: The other Jason Ferguson. Battalion Chief with "Bossock" County Fire and EMS, and 16 representing Western Virginia EMS Council. 17 18 I'm Mike Aboutanos. 19 DR. ABOUTANOS: T'm 20 the chief of trauma and acute care surgery at VCU, and 21 I'm representing the American college of surgeons. 22 John Bolling, retired fire 23 MR. BOLLING: chief for the City of Richmond, Virginia representing 24 the Southwest Virginia Emergency Medical Services 25

Council. 1 2 3 MR. TANNER: Gary Tanner. I'm from of 4 Appommattox. Past chair Board of supervisors, past 5 chief of Concord Fire Department, and I'm representing the Virginia Association of Counties. 6 7 Thank you for doing that, 8 MR. PARKER: and thank you for the Jason's at least were in the 9 right direction, so we can just look in one -- I like 10 11 it. Appreciate that. So now that we have a flag presented, 12 13 we'll go ahead and stand and do the Pledge of 14 Allegiance. (At this time, the Board and the gallery 15 recited the Pledge of Allegiance and observed a moment 16 of silence) 17 18 19 MR. PARKER: Thank you. 20 You should have received an email copy of 21 the August 3rd meeting minutes. Are there any 22 corrections to those minutes? Hearing none, we'll accept those under unanimous consent. 23 24 You have before you a meeting agenda for today. We'll take a motion for approval of the meeting 25

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agenda. Are there any items that need to be added?
1
2
                  BOARD MEMBER: I make a motion we
3
4
   approve.
5
                  MR. PARKER: Motion to approve, all in
6
   favor.
7
8
9
                  BOARD MEMBERS:
                                  Aye.
10
                  MR. PARKER: Motion carries.
11
                  So there's currently no Chairman's
12
13
   Report, so we'll move down to the Vice Chair Report.
14
   Briefly, I would like to thank the Board for the
15
   ability to serve as the chair today.
                  And hopefully, after the elections this
16
   afternoon, potentially the chair for the Advisory
17
   Board. So we'll move forward to the Deputy
18
   Commissioner's report.
19
20
                  MR. JABERI: Being this my first meeting,
21
   I'd thought I'd just take a minute to quickly introduce
22
   myself. I'm Parham Jaberi. I joined the Virginia
23
   Department of Health on October 10th.
24
                  Originally from Baltimore. Did my
25
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training at Tulane in the New Orleans area during the
time which Katrina happened, so I went into public
health, preventative medicine thinking I'll be stamping
out Ebola and other infectious diseases and really had
an opportunity to get engaged in emergency response
very quickly.

Served there as the local health director. Came to Virginia in 2010. Was the district director for the Chesterfield Health Districts, which includes Colonial Heights and Powhatan as well. Worked closely with Dr. Allen Yee and our partners there for about six years.

Went back to Louisiana to serve as

Assistant State Health Officer. Similar role as I am

right now even leading the Office of Public Health for
a year. I'm back to Virginia.

I appreciate the opportunity to -- this morning to meet some of our new Board members. Really understand and better appreciate the wonderful work that EMS professionals along with all the others, our trauma systems, all of our folks out in the community do everyday for the citizen of Virginia.

In terms of reports, I think the one thing that many of you know, just a message of Dr.
Oliver, our commissioner who's been doing a number of

town halls across the state, is a focus on population health.

And I heard one Board member, seasoned
Board member share with the new ones today about the
work that we do in EMS and how that fits into the
conversations of the Board of Health is really to think
about the person as a whole.

And so we hear the buzz word "population health," what exactly does that mean, how does that relate, and so we think about our jobs, we think about our functions, where people are coming from, and when they're returned back into the community.

A lot of that is often outside the lines of what our frontline EMS folks do, but it's so important to think about the whole system. I know a lot of good work is being done with the community paramedicine program and paramedics, and look forward to hearing about that.

We have an opiate problem. Many of you are on the front lines working with that. We continue to realize even though the public health emergency was declared a couple of years ago, that work is going to continue for many years.

So we'll look forward to partnerships around dealing with the opioid epidemic. And lastly,

one passion of mine, I have been through six major hurricanes.

I think when I came to Virginia, we had Irene. Sandy missed. We were in Chesterfield, but I was involved in two other major responses and major flood around Baton Rouge.

And then Harvey certainly, so my passion is emergency preparedness. Love to work with all the folks around the partnering agencies about what we can do to be even more prepared in case of a major disaster.

Thank for your time, and again, look forward to working with all of you.

MR. PARKER: Okay. At this point, we'll turn it over to Gary for the Office of EMS Reports.

22.

MR. BROWN: Okay. Thank you.

Welcome to Norfolk and welcome to the 39th Annual Virginia EMS SYMPOSIUM. We are glad you're here, and it's good to see a lot of participation from individuals that otherwise may not be able to attend the Advisory Board meeting.

Since we are in company of lots of folks down here. In fact, in terms of numbers unique

registrants or in terms of our EMS providers, we are over 1,500, approaching 1,600 registered providers.

When you add in faculty, staff and vendors, we're well over 2,000, pushing 2,100 individuals here this week, and that's not even counting significant others and so forth.

If -- just again, in terms of numbers, the number of CE hours that we were award, we've got about 380 classes. The maximum number of hours that a provider can take while they're down here is 26 hours.

And so if you -- everybody took that maximum of 26 hours times the number of registrants, the Office of EMS will be awarding over 40,000 cumulative hours of CE down here.

That's pretty significant. It's pretty remarkable. It's good -- big program, and we -- we're going to go even bigger next year. It's our 40th anniversary, so we want to go big or go home, as they say, and we've got a lot in store.

And we're already planning it. We've already met as a program committee to begin framing out the content and faculties members for next year.

Our call for presentations is on our website. We certainly invite any of you if you want to present at the symposium or if you know of someone that

you would like to recommend, please refer them to our website and put in your call for presentations.

The program committee, we read every single one, and we do evaluate the presentations and the applicability of them and put together the best program we possibly can for our EMS providers not only in Virginia.

But we have a lot of folks from -- that come in now for this symposium from other states, and we even have an individual from as far as away as Alaska and also another country, Ecuador is represented here at the symposium, so it's beginning to have a far reach.

I have challenged my own staff to make sure that they work with their standing committees and see if you can present -- put in ideas for next year.

And I have also challenged the medical direction committee and each of the OMDs, regional OMDs on that committee, to come forward as well as with presentations for next year, so hopefully, we'll see a lot more ideas and a lot more thoughts as we move forward.

I think I'm going to keep it really brief. In terms of the electronic copy that we -- of our quarterly report that we sent to all the Board

members, we did unfortunately leave out one component of that.

And that was our EMS for children portion of the report, so -- but we have made that correction, and so the -- the report that's on our website right now does include the EMS for children portion of that.

And again, I always say that we still print some of these internally in our office, the green book, if anybody really still wants a paper copy, let Irene know.

And we'll take care of that, but most of what you will hear today, will come out of various committee reports from the chairs of those standing committees.

Also, I want to read a kind of a proclamation, if you will. Unfortunately, earlier this year, in fact, it was during the May meeting of the Advisory Board in Richmond.

We had one of our truly esteemed and experienced and someone that really was a participant in the EMS system for decades, Jim Chandler, who was taken too early from this earth.

And so the Office of EMS, we did not have an opportunity in the August meeting, but we do have a certificate of recognition that I did want to read here

1 just to get it in the record, so if you will bear with 2 me.

2.2.

It's the Virginia Department of Health
Office of Emergency Medical Services certificate of
recognition by virtue of authority vested by the
Virginia Department of Health, Office of Emergency
Medical Services, there is hereby officially recognized
James Mapp "Jim" Chandler.

Whereas, James "Jim" Chandler was involved in emergency medical services from a young age volunteering as a teenager as a fire fighter and rescue squadsman with the Onancock Volunteer Fire Department.

While attending Virginia Tech, he served on their rescue squad as a life member and past captain. Whereas, Jim was a graduate of the Broadwater Academy and Virginia Tech.

After graduating, Jim worked in the emergency medical services field and volunteered with Campbell County Princess Anne Courthouse Rescue Squads.

And whereas, Jim began his EMS career as a field coordinator for the Eastern Shore Emergency Medical Services Council and continued his work at the Blue Ridge EMS Council as their executive director.

Whereas, for the last 36 years, Jim worked for the Tidewater EMS Council originally serving

as a training coordinator, and then becoming their executive director.

22.

Jim served on various committees and boards including serving as chair of the Regional EMS Council's Executive Directors Group.

Whereas, Jim proudly devoted his time to the Virginia One Disaster Medical Assistance Team as a administrative and finance section chief.

Therefore, be it resolved that the Virginia Office of Emergency Medical Services hereby memorializes and honors James "Jim" Chandler for his dedication and contribution to Virginia's EMS system at the regional, state and national level.

He proudly served in the EMS field for more than three decades sharing his wealth of knowledge and experience to help make EMS in Virginia better.

We are honored to have known and worked with Jim, and we are forever thankful for his vast contributions to Virginia's EMS system and beyond.

And this was date of adoption November 7th, signed by myself and Scott Winston within the Officer of EMS.

So I just wanted to present that to you, and we recognize Jim's lifetime achievements, and he will be sorely missed, as he is already.

1 I think with that, for those of you who are staying for the entire symposium, we -- again, we 2 have lots of classes, a lot of activities going on. 3 We have an operational medical directors 4 5 workshop tomorrow, and we have an annual governor's EMS awards program Saturday night. Dr. Jaberi is going to 6 7 be able to come back down and participate in that. And we will be presenting the governor's 8 9 award in 11 categories. It's always a good program, 10 and we are have a lot of good surprises coming up at the banquet Saturday night, so hopefully, you can join 11 us for that. 12 13 And with that, I'm going the turn to Scott, and then to Dr. Lindbeck. 14 15 16 MR. WINSTON: Thank you, Gary. I have a few brief comments. 17 As I do every quarter, I have included 18 19 links to the report from the EMS voluntary event 20 notification tool. 21 It's a -- as it mentions, a voluntary 22 process where data is submitted and used to improve the

emergency medical services.

So please check that out, and if you're

23

24

25

not currently reporting, consider doing it because it's
a very meaningful program that can help our EMS
services across Virginia as well as the country.

There's also a reference to REPLICA, the recognition of EMS personnel licensure interstate compact. Virginia was the third state to adopt REPLICA.

They're currently 16 states that have adopted today REPLICA. Our most -- our neighboring state of Tennessee is the only one that touches our border, that has also adopted REPLICA.

But Delaware has adopted it, and we have word that there's keen interest from West Virginia to get that adopted. And Kentucky as well, so it's just a matter of time.

And REPLICA allows the recognition of a privilege to practice across state lines, and it includes a sharing of information in coordinating national database.

Who's got the light switch?

And the current activity in REPLICA, Gary is a commission member, each state that adopts REPLICA has one seat on the commission.

And the current activity of REPLICA is working with the national registry to develop a

coordinated national database.

2.2.

So we can get a better handle on those bad actors that tend to jump from state to state staying one step ahead of their criminal background history.

So it's big -- big step in the evolution of EMS and the -- being able to share personnel licensure information as well as disciplinary and enforcement actions that may occur.

The last item I wanted to mention has to do with two agencies within the Commonwealth that have received recognition for exemplary service in this calendar year.

And first, I would like to recognize the Virginia Beach Volunteer Rescue Squad in Virginia Beach, Virginia.

The National Registry of EMTS and the EMS world recently recognized Virginia Beach Volunteer Rescue Squad as the volunteer EMS service of the year. I think that's quite an achievement.

The service, as you know, is an active military and tourist community population. They have 10 volunteer rescue squads, 175 members, and over 45,000 hours of volunteer operational and support time is volunteered on an annual basis.

The second agency that's received special recognition just in the last several weeks is the program of the year recognized by the Association of Air Medical Services at their Air Medical Transport Conference in Phoenix just last month.

The Carilion Clinic lifeguard was recognized as the program of the year, so I'd like to give a round of applause to both Virginia Beach and Carilion Clinic.

(Applause)

MR. WINSTON: And, George, I'll kick it over to you.

2.2.

DR. LINDBECK: I don't think I had too much to add. Dr. Yee will cover the Medical Direction Committee report. I would note, and I got emails in the last couple of days, haven't had a chance to thoroughly review.

But the National Blue Print Scope of Practice document is going to be available for review, and the 2050 document is also going to be coming up for review soon.

See, they're happy about it already, so I

would keep your eyes open for those documents and take a look. I'm sure they're going to generate some discussion, things for us to be aware of.

22.

MR. BROWN: Also one thing we put in the quarterly report to the Board is in reference to the EMS agenda 2050. Please, I think we've mentioned this several times in previous meetings.

But that's an important document that we'll provide a vision for EMS for several decades to come in the nation.

And the original EMS agenda for the future that was published in 1996 had a great impact on EMS organizationally and response-wise across the nation.

In fact, the Advisory Board and many of the committees and structure of this Board reflected what was presented in the EMS agenda 1996 document.

And even presented a concept at that time that really nobody knew what that was, and that was mobile integrated healthcare and community paramedicine.

And so it was a document that was really ahead of its time, and it set is vision for the nation, and the next version of that national document 2050

will do the same thing. 1 2 So we'll certainly keep everyone up date And, Chris, if you don't mind, since we do 3 on that. 4 have new Board members. 5 And again, I want to thank each of the new Board members for coming to the orientation this 6 7 morning. And I also -- it's really a pleasure and 8 honor to see such experienced, talented individuals 9 10 being appointed by the governor to serve on this Board. But I'd like to have my staff stand up 11 and introduce themselves so that the new members that 12 13 -- you met some -- most -- well, some of us today, the division managers, but not everyone on staff. 14 15 And so we can start getting a face and a name together and so you will know who is who and vice 16 versa. So, Tim, let me start with you, any OEMS 17 18 employee. 19 20 MR. PERKINS: Tim Perkins, CHaTR Division 21 Manager. 22 23 MR. BLOSSER: Chad Blosser, Training and 24 Development Coordinator.

MR. BROWN:

25

And the person coming in the

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door is really the most important person you need to
1
2
   know. Okay. As Board members and so forth.
3
4
                  (Applause)
5
                  MR. BROWN: It's Irene, so Irene.
6
7
8
                  MS. HAMILTON: Irene Hamilton, and I will
9
   help you in any way I can.
10
                  MR. BROWN: She will. She'll even do a
11
   rendition of YMCA for you, too. So that's -- Okay.
12
   And we have Wanda coming to the mic. I don't know
13
14
   whether she really was, but she's --
15
                  MS. STREET: I'm Wanda Street.
16
17
                  MR. BROWN: Okay. All right. Ron, we'll
18
   start back there with you on the backside.
19
20
21
                  MR. KENDRICK: Ron Kendrick. I'm program
22
   representative for the Southwestern Region.
23
                  MR. MCNEER: I'm Steve McNeer.
24
                                                  I'm the
   program representative for the Greater Richmond area.
25
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1	
2	MR. PASSMORE: Ron Passmore, Division
3	Manager for Regulation and Compliance.
4	
5	MR. WILLIAMS: Scotty Williams. I'm
6	program representative for Northern Virginia.
7	
8	MR. ERSKINE: Tim Erskine, Trauma
9	Critical Care Coordinator.
10	And no, Cam, you're not getting out of
11	it. You can't hide back there.
12	
13	MR. BERRY: Wayne Berry, program
14	representative Peninsula and Tidewater.
15	
16	MR. FLEENER: Paul Fleener, program
17	representative western area.
18	
19	MR. BURCH: Jimmy Burch, program
20	representative and supervisor for the southern half of
21	the state. I cover the southern region.
22	
23	MS. CRITTENDON: Cam Crittendon, Division
24	Manager of Trauma and Critical Care.
25	MR. BROWN: Is anybody did I miss

```
anybody?
1
2
                  Okay. And, Mike Player, when you get up
3
   to give the Regional Council Report, maybe if you would
4
   like to introduce any of the regional executive
5
   directors in the room at that time, if you're giving
   the report.
6
                  You're on the agenda as doing that, but
7
8
   we'll go from there. Okay. Chris, I think that
9
   concludes our report.
10
11
                  MR. PARKER:
                               Okay.
                                       Thank you.
                  We're going to turn next to Ms. Amanda.
12
13
14
                  MS. LAVIN:
                              I have several things to
15
   report.
16
17
                  MR. PARKER:
                              Okay.
18
19
                              I'm kidding. You know I
                  MS. LAVIN:
20
   don't have anything.
21
                               There's a standing joke --
22
                  MR. PARKER:
   there's a standing joke from this morning about we
23
   heard more from her than her typical meeting, so --
24
                                Good afternoon, chairman,
25
                  MR. CRITZER:
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members of the Board. The State Board of Health was scheduled to meet on September 13th.

22.

However, that meeting was canceled due to the potential impacts from Hurricane Florence. On that agenda, however, was the approval of the trauma plan that was developed by the task force and work groups, and ultimately by this Board.

In the -- the fact that the Board was not in session, the state health commissioner has the authority to act on the board's behalf, and he has approved the new trauma plan is in place, so now, the fun work begins of putting all those steps into action.

The next meeting is scheduled for the 13th of December at 9 a.m. at the Perimeter Center in Richmond. It is open to the public.

I would encourage any of our Board members that's never attended a Board of Health meeting to please come and participate.

We are going to be considering amongst a number of things, the water works regulations. You have to learn a whole lot of things when you're on the Board.

So we'll be doing that. Also the Board
-- the periodic review of the abortion clinic
regulations, the notice of intended regulatory action

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1
   is out, so we'll be addressing those issues as well.
2
                  Do you have any questions?
3
4
                  MR. CRITZER: Okay. Thank you.
5
                  MR. PARKER:
                               Thank you, Gary.
6
7
                  The next item on the agenda is the
   Nominating Committee Report. I'm going to turn Jose
8
9
   Salazar for this.
10
11
                  MR. SALAZAR:
                                Thank you. It's actually
   supposed to be Mr. Ferguson. He's not able to be here,
12
   so I'm sitting in his place.
13
14
                  I understand that we are -- at this
15
   point, you should have received an email that had the
   potential slate.
16
                  But you should also have in front of you
17
   the slate of officers, but I will go ahead and read for
18
   you what the nominating committee is proposing as the
19
   slate for the upcoming year.
20
21
                  Chairman, Chris Parker; Vice chair, Eddie
2.2.
   Ferguson; Administrative Coordinator, John Henschel;
   Rules and Regs Committee, John Henschel; Legislative
23
   and Planning Committee, Gary Samuels.
24
                  Infrastructure Coordinator, Dreama
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1
   Chandler; Transportation Committee, Eddie Ferguson;
2
   Communication Committee, John Korman.
3
                  Energy Management Committee, Tom
4
   Schwalenberger -- Schwalenberg. I apologize; Patient
5
   Care Coordinator, Dr. Aboutanos; Medical Direction
   Committee, Dr. Yee.
6
                  Medevac Committee, Jason Ferguson; Trauma
7
   System Oversight and Management Committee, Dr.
8
   Aboutanos; EMS for Children Committee, Dr. Bartle.
9
10
                  Profession Development Coordinator, Jose
11
   Salazar; Training and Certification Committee, R. Jason
12
   Ferguson.
13
                  Workforce Development Committee, Jose
   Salazar; and Provider Health and Safety Committee, Lori
14
   Knowles. That is the slate of officers for this year.
15
16
                  MR. PARKER: So coming from a committee,
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   there requires no second. We'll go ahead and call a
18
19
   vote.
20
                  All in favor, say aye.
21
22
                  BOARD MEMBERS:
                                  Aye.
23
                  MR. PARKER: Any opposed, lights on.
                  Motion carries the slate of officers as
24
   listed.
25
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At this point, we are to the Standing

Committee Reports. We'll start off with the Executive

Committee report. The Executive Committee has not met

since our last meeting.

We're looking to schedule an Executive Committee or workshop in the -- after the new year, and therefore, we can start work on our plans as we move forward. Next up is the FARC Committee.

Kevin.

MR. DILLARD: Thank you, Mr. Chairman.

Our grant deadline Fall cycle closed on September the 19th, and we received applications requesting over \$14,000,000 in funding signal.

The breakdown by region of the dollar amounts of requests for each region is in your packet, and I want to take this opportunity to welcome Luke Parker. He's our new grants manager.

Luke has a fund raiser in his background for the past five years, and he's been involved with grant writing, administration and programming.

He's got a bachelor's degree in English from Christopher Newport University in 2014 and he's pursuing a master's degree in public administration, so we'd like to welcome Luke to the team.

1 Our next meeting is going to be tomorrow at 1 p.m., and then on December 3rd and 4th, we're 2 going to be going to Southwest Virginia and the Bristol 3 area for the granting of the grants. 4 5 MR. PARKER: All right. Thank you, 6 7 Kevin. Administrative Coordinator, Jon Henschel, you can go ahead with your Rules and Regs. 8 9 10 MR. HENSCHEL: I have no report from the Administrative Coordinator. As far as Rules and Regs, 11 we have not met since our last meeting in August. 12 13 Therefore, we have no action items to bring before the Board. 14 The current revision of the rules and 15 16 regulations, if you want to see what the process, now 17 that we have entered phase two, is, you can find that in your quarterly report along with the associated time 18 frames for such. Other than that, we'll move on. 19 20 21 MR. PARKER: For Legislative and Planning 22 Committee, I was not able to attend this morning's meeting due to the new member orientation, so I'm going 23

Actually, Rob Logan --

to defer to Scott for the report.

BOARD MEMBER:

24

25

1 MR. PARKER: Okay. So Rob Logan, Vice If you will come forward with the report. 2 Chair. 3 4 MR. LOGAN: We have nothing to report. 5 MR. PARKER: Okay. Next on the agenda is 6 7 the Infrastructure Coordinator, Dreama. 8 9 Nothing to report as the MS. CHANDLER: 10 coordinator. Transportation Committee, Eddie's just 11 taking over, so do you have anything from there? 12 13 MR. FERGUSON: I'm sorry. I wasn't able 14 to attend the meeting that was just had. I'm not sure 15 anybody else here was there that could report out. Sorry. 16 17 MS. CHANDLER: As far as I know, there 18 are no action items from Transportation. 19 20 Communications Committee has not met since our August 21 meeting. 22 Emergency Management met this morning. They had a good discussion on some challenges that were 23 found with evacuation with the recent hurricanes and 24 ways to address those. 25

Byron, if you'd like to add anything? 1 2 There's no action items from that committee, but there was a good discussion held this morning, and that's all 3 4 I have. 5 MR. PARKER: For the Transportation 6 7 Committee, can I ask Jimmy Burch if he would like to 8 give any report on that. 9 10 MR. BURCH: You can ask. I don't have a lot to report. We did review 40 vehicle grants at the 11 last meeting. We had several members of the FARC 12 Committee that attended as well. 13 Other than that, we welcome Eddie as the 14 15 chair of that committee, and we certainly appreciate what Chip did for our committee over the last several 16 years. Unless you have specific questions? 17 18 Okay. At this time, we'll 19 MR. PARKER: 20 move to the Communications Committee. Anyone here that 21 can give a report on that since Jon Korman's not here? 22 MS. CHANDLER: As far as I know, we have 23 not met since the August meeting. There's been 24 annoying from that. 25

1 MR. PARKER: Okay. All right. So moving 2 forward, Professional Development Coordinator. Jose, would you like make any comment on that or --3 4 5 Since I have not taken over MR. SALAZAR: since as two minutes ago, I have no report. 6 7 MR. PARKER: Perfect. 8 9 So moving to the Training and 10 Certification Committee, R. Jason Ferguson. 11 12 MR. R.J. FERGUSON: Thank you, sir. 13 Training and Certification met on October 3rd. There was some concern mainly from the VCCS group in 14 reference to the new scholarship process and some 15 related TPAM regulations. 16 I just wanted to thank Ron Passmore, 17 Warren Short and his staff for kind of working through 18 that. We did decide to start a work group to kind of 19 20 look at the TPAM as long as we start to look at Chapter 32 as well. 21 22 So we can kind of mesh that together and 23 make some recommendations for updates or any revisions needed. CTS has launched the new peg process, and the 24 EC work group met prior to TCC. 25

1 And they plan to bring an action item to 2 the January meeting, which has been moved to January the 9th due to the holidays. 3 4 5 MR. PARKER: Okay. Thank you. So now, we're back to Jose for the 6 7 Workforce Development. 8 9 MR. SALAZAR: Workforce Development 10 Committee, the last meeting was in August. Our next meeting is scheduled for this Friday. 11 Just make a note that in your brochure it 12 13 says, Workforce Development Committee meets on That's incorrect. The meeting will be Thursday. 14 15 Friday at 10 a.m. for those that want to attend. Some of the projects going on, it seems 16 like an ongoing thing, but EMS Officer I, they had a 17 class at Res College, which 16 people completed. 18 Right now, we have the class going on as 19 20 we speak with 18 folks in it, and we hope that this 21 will be the last pilot, so that we will able to release 22 this program early next year. 23 I know you've hear that before. All 24 right. But hopefully, we will be able to move forward and start working onto the Officer II program on that. 25

1 All standards in excellence continues to push forward. 2 For those agencies that have not looked into that program, certainly encouraged to look at the 3 4 website. It's a good program. At least to do a self-check of where you are in areas that could be 5 improved on, if any. 6 And then our recruitment and retention 7 network, their next meeting is actually not a meeting, 8 but it's actually one of the workshops that's scheduled 9 10 for symposium. It's on Saturday at 11 o'clock. It's EMS 11 Retention Solution Roundtable. If you're available to 12 13 attend, there's no preregistration required. There will be CEs available. 14 But they're trying a different approach. 15 Instead of people coming to a meeting, making it more 16 of the work sessions, and their next meeting will be 17 part of the Virginia Fire Chiefs conference. 18 19 concludes my report. 20 21 MR. PARKER: Thank you. Provider Health 2.2. and Safety Committee. 23 MS. KNOWLES: I wasn't able to attend the 24

last meeting, and I've just taken over as the chair of

that, so I have nothing to report.

MR. PARKER: Okay. Patient Care
Coordinator, Dr. Aboutanos, and if you'd like to move
on with the TSOM at the same time.

22.

DR. ABOUTANOS: Sure. Thank you, Mr. Chairman. As the Patient Care Coordinator, I have nothing to report at this time as far as the coordinator.

And I would yield the floor eventually for all the other committee chairs. Regarding the TSOMC Committee, we met on September 7th.

A majority of the meeting concentrated on the Trauma System Plan Task Force and the organization of the various committees to be -- in terms of the structures and the various representatives in order to carry out what the mandate of the plan.

Which would be to have a comprehensive approach to trauma system development and having a comprehensive representation of each of the proposed committees.

The Committee were very happy that the plan was approved by the EMS, by this Board in August, and then also we reported that the plan, as Gary said,

was approved by the commissioner in October.

And we are anticipating that the bylaws be approved by this Board during this meeting. I can state what the proposed change in the bylaws right now, if that is okay.

MR. PARKER: Sure.

22.

DR. ABOUTANOS: Okay. So just in brief, the proposed bylaws are based on the trauma system plan for an integrated approach with the EMS system plan.

And basically, asking for a trauma system coordinator be made and for that coordinator to serve on the Executive Committee under the trauma system plan -- sorry.

Trauma system coordinator would be then seven committees that are formed, and those seven committees will represent the -- an administrative committee, a system approvement committee.

And then there are five additional committees that are more clinical looking at the pre-injury committee, many pre-hospital, the acute care, post-acute care and emergency preparedness.

So comprehensive approach for each one of those committees. I think those are the main ones that

1	will require bylaws changes according to the trauma
2	system plan, so that is the proposal.
3	
4	MR. PARKER: Dr. Aboutanos, is referring
5	to Appendix D in your quarterly report. The Advisory
6	Board actually received a copy of this in print version
7	at the August 3rd meeting.
8	According to the bylaws, the Advisory
9	Board must have these 10 days in advance of the meeting
10	since that that's been carried out.
11	
12	BOARD MEMBER: We didn't receive
13	EKTIFID GOP
14	MR. PARKER: We received a copy of this
15	at the Advisory Board meeting by hand in August. Any
16	discussion on that?
17	
18	MR. SAMUELS: There are 18 members here
19	that were not on the Board at that time.
20	
21	MR. PARKER: Any other discussion on
22	this? So the bylaw changes come from a committee, so
23	it technically does not require a second.
24	We have opened the floor for discussion.
25	Is there any other discussion on these proposed bylaws

changes?

MR. SAMUELS: Chris, I just have a question. You want us to vote on something that the whole Board did not receive because the appointments were held up in July for an important vote that we were going to have in August.

I have a hard time receiving something, not 10 days in advance, but when we got an email the other day that this -- the package was there, and I have a hard time as a Board being able -- for everybody to digest this.

I mean, we talked about it in the new -in the orientation, but just to make sure that
everybody has that time to digest it and make sure that
we're moving forward in the right direction.

I just don't want to do something without everybody having the -- us following the bylaws as we proposed them, so.

DR. ABOUTANOS: Can I have a comment? So this is a process that was vetted for three years. It was presented at every committee meeting here, at every Board meeting.

There was nothing new about it. We

simply were talking about as far as about the subject would be about the seven group, the task force, so there were no surprises for anybody.

Extensive amount of work has been had.

101 meeting already been held to move this forward. We have held now the task force from moving forward because they are not a committee.

This has been approved by the commissioner. The plan was approved here by this Board, and then we gave the bylaws to everybody.

And then as I understand, you just need to have a majority here to approve those bylaws.

That's -- you know, so this is an integrative plan, not a separate plan.

It's done on purpose. The entire trauma system group have worked very hard for this process to work. I'm very much think this -- that is I think it behooves us to agree that this was very well, again as I mentioned, discussed, vetted.

There's nothing new able it, and as I believe many people are appointed or reappointed on this Board have heard all this before.

So I -- and the fact that we presented it and -- at the time, and we said this is -- these are the bylaws, and I understand there have been some new

members that have been added since.

But if the majority of the members here have seen the bylaws and have not changed the vote, the vote will then not change.

But I think that is significant. It's very important that this Board look at this committee, the Trauma System Committee, and say go for it.

Do the work instead of saying, Okay.

We're holding. We're holding on

something that I think is very important for the

average citizen, and this -- in Virginia for us to move

forward, so -- Sam?

DR. BARTLE: Mr. Chairman, I would like to acknowledge that how much work Dr. Aboutanos has put into this and all the people on the committee that worked with him. This has been a plan -- like he said, it's been in the making for a couple years.

And it trying to meet the recommendations that were proposed by the American College of Surgeons during the evaluation of the trauma -- State Trauma Program back in 2015 I think it was.

This is a very important step for not just trauma itself, but for the office of OEMS and for the state. There are issues that it addresses that are

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1
   very pertinent and to postpone it further, would be
2
   needless.
                  These are things that's been out there.
3
4
   The way I see it, if law was being debated on the
5
   legislative level and new members just got voted in,
   it's still the same bill that's coming through. Might
6
7
   be different issues to discuss, but it's still the same
8
   topic.
9
10
                  BOARD MEMBER: Mr. Chairman, as a new
   Board member, I'm comfortable with moving forward.
11
                                                         Ι
   received the bylaws and read them and the changes
12
13
               Just wanted let you know that I'm okay with.
14
15
                  MR. PARKER:
                               So at this point, I'm going
16
   to ask Amanda to weigh in on this.
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                  MS. LAVIN: You can move forward with a
18
   vote. Like you said, it doesn't need a second.
19
20
21
                  MR. PARKER:
                               Okay.
22
23
                  MS. LAVIN:
                              You can move toward with a
24
   vote. If it passes, it does. If it doesn't, it
   doesn't.
25
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1 MR. PARKER: So at this point, is there a 2 motion to call a vote? 3 4 DR. YEE: Can I ask a question first? So 5 acknowledging all the work that the committees have done, and I just noticed one nuance that I'd like a 6 little clarification on. 7 The Emergency Management Committee and 8 9 the Emergency Preparedness Committee, they seem to have a significant overlap. Are they two separate missions 10 between the committees? 11 12 DR. ABOUTANOS: No, I don't expect to be 13 any separate mission. The whole part of the entire 14 15 Trauma System Plan is to be as integrative as possible. And so adding members, having members 16 from various committees meet, so that the whole thing 17 18 is based on a non-silo process and not a duplication of efforts. 19 20 So I'm very comfortable that if -- as we 21 charge that committee to move forward -- there are a 22. lot of couple other nuances that we calling pre-hospital, etc. 23 so it's really more the -- what we're 24

planning to have here is just let the committees work,

1 and then present how that's actually going to be 2 approval. First, we need to have the approval for the committees to actually start meeting, so. 3 4 5 You know, I don't disagree. DR. YEE: was part of the pre-hospital work group on the task 6 force. I see how it's -- I see its value. 7 I was not part of the Emergency 8 9 Preparedness one, but I did see so much overlap. essentially do the same thing. 10 So if we're not in a silo, why would we 11 have emergency preparedness on one side under the 12 13 trauma and then we have under the infrastructure coordinator, the emergency management. 14 15 16 DR. ABOUTANOS: Yeah, sorry. The -- so if you see the -- when you look at the trauma 17 18 preparedness system plan, it discusses how various members would be integrated. 19 20 So if there's going to be any changes as 21 far as the presentations, then those will also -- those will be adjusted. 22. I actually don't see a significant 23 problem with that. We discussed this heavily. This --24 the Emergency Preparedness Committee discussed just as 25

1 much as the pre-hospital committee was discussed very 2 heavily. And the discussion, was -- is that, Hey, 3 4 are we duplicating process? We said, No. We just -in the Trauma System Plan, you need to have everything 5 integrated. 6 7 And so we -- that's why we have included committee. We made sure that actively presented on it, 8 but I don't see the plan's going to be any different. 9 10 MR. PARKER: Any other discussion at this 11 time? 12 Mr. Chair, I want to 13 BOARD MEMBER: just point of clarification for a new member, the 14 15 different committees that are created under this, are they specific to trauma? 16 Their names are, you know, pre-hospital, 17 acute care, post-acute, but they're intended to be 18 19 specific to trauma as opposed to encompassing all 20 post-acute care. 21 22 DR. ABOUTANOS: That's specific to 23 injury, so that's the whole -- the whole aspect is that just as much all of us struggle with the definition of 24

EMS and pre-hospital where EMS encompasses more than

1 pre-hospital. 2 But every time we think of pre-hospital, the same thing has happened to trauma. You think of 3 4 trauma, you only think of hospital, but a Trauma System Plans begins with prevention. 5 And therefore, that is extremely 6 7 important when you look at a company, so we use the HRSA model for this, and we followed literally 8 specifically. 9 We didn't reinvent the wheel. 10 We followed specifically how Trauma System Plans are 11 developed, and that's why you see the pre-injury, the 12 13 injury, but it really mainly focuses on the injured. 14 MR. PARKER: 15 So as a point of 16 clarification, according to the current bylaws, they state, A two-thirds majority vote of all members is 17 needed to passed the proposed amendment. 18 I wanted to make sure we clarified that 19 20 before we call for a vote. Is there any other 21 discussion at this point? 22 MS. CHANDLER: I have just one other 23 24 question, so the only change would be the that there

would be the coordinator added to the Executive

1 Committee, that all of the committee chairs would serve 2 under him, so there would be no change to this? 3 4 MR. PARKER: That would be phase two, to 5 figure out where we move forward on the Board, whether we -- and that was the discussion we actually had at 6 the Executive Committee meeting in -- I believe it was 7 August, was the discussion of whether -- how the 8 composition of the Board would change. 9 We are focusing right now on the bylaws 10 aspect, and then we can move forward to work group 11 session in order to figure out that composition. 12 13 Okay. At this point, we'll call for a vote. All members in favor of these changes to the 14 15 bylaws reply by saying aye. 16 17 BOARD MEMBERS: Aye. 18 19 MR. PARKER: Any members that are 20 opposed, lights on. Lights off. Thank you. Are any 21 members abstaining? Okay. The motion passes for the 22 changes to the bylaws. Thank you, Dr. Aboutanos. 23 DR. ABOUTANOS: Thank you. Just to add 24 more to the report, another aspect that was discussed

in the committee was the -- this would be a --

basically a head's up of what's going to be coming up in front of this Board in the next meeting.

The American College of Surgeons have put in that -- in their site assessment for trauma centers that a proof of CME by the -- by a physician is not required.

And then so therefore, we developed the task force whether the same thing should be applicable to the Virginia plan where proof of CME by a physician is not required on the proof f maintenance on the certification.

For many of you may or may not know, it's a total mess when comes in to proving CMEs for every physician in the -- in the trauma center.

Significant amount of work that carries out with that, so that's the reason why te American College of Surgeons move by saying let's go ahead with maintenance of certification.

We have a task force that's looking at this, and during the December 6th meeting, we're going to vote on it.

And then will be proposed to this Board in the next meeting for approval before it goes up to the Board of Health for approval. Just a head's up.

And the last thing we discussed in the

task force which I thought actually Gary was going to mention the significant amount of work that's going on with the Stop the Bleed Campaign.

This is a national effort for which the EMS and trauma community are joining forces to do this, and there's a significant amount of work done during this.

This meeting, people trying to train almost 800 pre-hospital providers for them to become full launch, and this would be something phenomenal.

They will be able to report that Virginia
-- I have not heard of any other state doing it that at
level, and so that concludes my report.

MR. PARKER: Okay. Thank you. At this point, we'll turn to Medical Direction Committee.

2.2.

DR. YEE: Medical Direction Committee met last quarter. We have no agenda, no action items. If you recall at -- I believe at your last GAB, there was some discussions on the scope of practice and the formularies.

The formulary and the scope was -- at least the formulary was tabled. The Medical Direction Committee has continued to work on the formulary in

collaboration with our interfacility transport 1 2 partners. So we have some consensus, and we'll hopefully be able to bring that up at the next meeting. 3 4 5 MR. PARKER: Okay. Thank you. At this point, Medevac Committee meeting, and since Jason 6 7 Ferguson has left, we'll ask Tim to give a report. 8 9 Medevac Committee met this MR. PERKINS: 10 morning. We don't have any action items. Most of the discussion centered around recent Medevac-related 11 legislation. 12 While I have the microphone real quick, I 13 just wanted to announce to the group that the Community 14 Health and Technical Resources Division is no longer 15 just a division of one. 16 We do have a new EMS symptoms planner. 17 His name in Chris Vernovai. He comes to us from 18 Highland County where he was the EMS coordinator. 19 20 He was also on the Board at Central 21 Shenandoah. I'd introduce him, but he's downstairs 2.2. teaching the EMS officers, so we're really excited to have him. 23 24 Thank you. 25 MR. PARKER: EMS for

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   Children, Dr. Bartle.
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                  DR. BARTLE: We last met on October 4th.
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   We have no action items. We do want to report that
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5
   we've started into the new EMS grant cycle that was
6
   given over the summer.
                  It will run through March of 2022.
7
                                                       Ιt
   will continue to support programs that we've already
8
   starting, such as joint program with the Stop the
9
   Bleeding Program we have with the school nurses.
10
                  We'll also be looking at, you know,
11
   recruiting and, like, a list of speaks for next year's
12
13
   EMS symposium on pediatric topics.
14
                  And continue to follow-up on the
15
   Pediatric ED Readiness Program that's been going on.
16
   That is all. Any questions?
17
18
                  MR. PARKER:
                              Thank you, Dr. Bartle.
   There's actually a motion from the Medical Direction
19
20
   Committee that's in your quarterly report.
21
22
                  BOARD MEMBER:
                                 (Unintelligible)
23
                            For the record, I have been
                  DR. YEE:
24
   chair for, like, 10 minutes.
25
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1 MR. PARKER: You all are not going to 2 have me back after this. I see that coming. So Appendix B, this is a motion from the 3 4 Medical Direction Committee. The motion reads: 5 Medical Direction Committee moves to endorse changing the Virginia EMS scope of practice to allow the 6 7 advanced EMT the ability to administer TXA. Coming from a committee. This does not 8 need a second. Any discussion on this? 9 10 MR. PARKER: Hearing no discussion, we'll 11 call for a vote. All in fair, aye? 12 13 14 BOARD MEMBERS: 15 16 MR. PARKER: Any opposed? Abstain. Motion passed. Thank you. So now, we're down to the 17 Regional EMS Councils. 18 19 20 MR. WOODS: Good afternoon. At the --21 after the passing of Jim Chandler, the regional directors met, and I was elected as interim chairman. 22. We have not met since that time. 23 We are scheduled to meet on December 3rd 24 in Bristol, Virginia. As a collective group, we have 25

been moving forward with the Regional EMS Council 1 2 designation and that application process. So I will take this opportunity to 3 introduce some colleagues who are here in the room. 4 5 will ask that you all stand as I call your name so that those of you who are new to the Board may become 6 familiar with them. 7 Rob Logan, Western Virginia EMS Council; 8 9 Mary Catherine Allen, Blue Ridge EMS; David Long, 10 Tidewater EMS; Mike Player, Peninsula's EMS; Wayne Perry, Rappahannock EMS; and I saw Craig Evans, who had 11 12 to leave, so he is with Northern Virginia. 13 And I think that's all of us in attendance at the moment. I will be happy to answer 14 15 any questions that you may have. 16 17 MR. PARKER: Thank you. So we are down 18 to the public comment period. Any public comment? 19 public comment? 20 Hearing none, we'll move to any 21 unfinished business. Is there any unfinished business 22. that needs to come before the Board? Any new business that needs to come before the Board? 23 24 Chris, looking at Tim Perkins 25 MR. BROWN:

1 are the Mobile Integrated Healthcare Work group still 2 meeting after this? 3 MR. PERKINS: Correct. 4 5 MR. BROWN: Okay. So that's open to 6 7 anyone. If you're interested in that subject matter, we do have a work group that we have resurrected 8 9 recently. 10 And they will be meeting in this room as soon as the Board meeting is over, so -- or at 11 three o'clock. 12 13 Okay. So we set it at three o'clock, so anybody is welcome, you can attend that and participate 14 in those discussion, if you would like. 15 16 BOARD MEMBER: So I just want to make you 17 18 all aware because I just became aware of it at our District 3 meeting, so the background check that the 19 20 State does only looks for felonies. 21 Recently, a friend of mine was hiring 22 people so they had no history, then reality, one of them had two larcenies. So granted, it's not a felony, 23 but do you also want someone going into people's houses 24 with a history of larceny. 25

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So just be aware of that. If you want to
1
2
   do your additional background, it's not much through
3
   the State Police. You can do your own background check
4
   as well as the State check. Just to make you aware.
5
                  MR. PARKER: Ron, any comment on that?
6
7
8
                  MR. PASSMORE: The background checks the
9
   Office of EMS does looks at all crimes, misdemeanors
   and felonies so --
10
11
               MR. PARKER: Any other new business to
12
   come before the Board? Hearing none, is there a motion
13
   to adjourn the meeting? All in favor? Meeting
14
   adjourned.
15
                  (The EMS Advisory Board meeting concluded
16
   at 2:07 p.m.)
17
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1	CERTIFICATE OF COURT REPORTER
2	
3	I, Bria L. Pintado, hereby certify that I
4	was the Court Reporter at the Board meeting of the
5	STATE EMS ADVISORY BOARD, heard in Norfolk, Virginia,
6	on November 7th, 2018, at the time of the Board meeting
7	herein.
8	I further certify that the foregoing
9	transcript is a true and accurate record of the
10	testimony and other incidents of the Board meeting
11	herein.
12	Given under my hand this 15th day of
13	November, 2018.
14	Bria Pulada
15	Bria L. Pintado
16	
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18	
19	
20	
21	
22	
23	
24	
25	