RAPPAHANNOCK EMS COUNCIL BOARD OF DIRECTORS MEETING

Board of Directors February 15, 2017

Board Members Present:

Staff Present:

Eddie Allen, City of Fredericksburg Jack Atkins, Rappahannock County John Brandrup, At-Large Mark Crnarich, At-Large Dr. Jordan Crovatin, At-Large Scott Davis, City of Fredericksburg Susan Dietrich, Caroline County Kevin Dillard, At-Large Patricia Fitzgerald, Westmoreland County Donald Gore, Rappahannock County Mary Hart, Fauquier County John Harkness, Orange County Phyllis Hurlock, Culpeper County Lori Knowles, Stafford County Fred Messing, At-Large David Moody, King George County Joseph Sposa, Spotsylvania County Dr. Tania White, Regional Medical Director Joseph Williams, Fauquier County

Margot Moser, Office Manager Wayne Perry, Executive Director

Board Members Excused:

Mark Garnett, Caroline County David Garvin, King George County Warren Jenkins, Culpeper County Maurice Moody, Orange County Emmett Price, Stafford County

Guests:

Joey King, Pharmacy Committee Chair Jake Marshall, Incident and Threat Mitigation Committee Chair

Call to Order:

The meeting was called to order by President Kevin Dillard in the Board Room of Novant Health UVA Health System Culpeper Medical Center at 7:00 PM.

Approval of minutes:

December 14, 2016, minutes approved as presented.

Public Comments/Presentations from Guests:

There were no public comments.

President's Report—Kevin Dillard

Kevin said that the Council and the Board of Directors are doing great work which is being recognized statewide. The Council has received two resolutions in recognition of its forty years of service; a joint resolution from the Town of Montross, the Town of Colonial Beach, and County of Westmoreland and a resolution from the Virginia House of Delegates These documents have been framed and will be displayed in the Council offices.

Kevin also invited the board members to attend the Spotsylvania Sheriff's office's autism awareness event to be held on Sunday, April 9 from 12-4. He hopes to set up a booth for the Council; please contact Kevin if interested in representing the Council at this event.

Kevin announced that due to Marianna Bedway's resignation, there is currently an open At-Large position. Two individuals have applied for the position, Jake Marshall and Debra Marinari. Ballots were distributed, to be tallied by Jack Atkins and Donald Gore. Jake Marshall excused himself so that the board may discuss the applicants freely.

Several board members contributed to the discussion of the nominees, with the most notable remarks regarding Mr. Marshall's involvement on the committee level. Mark Crnarich, Joe Sposa, Eddie Allen, John Brandrup, and Susan Dietrich all commented that he has contributed much at committee level and is very enthusiastic about EMS. Board members voted, ballots were collected and tallied by Don Gore and Jack Atkins. Jake Marshall was chosen for the open At-Large seat.

ELECTIONS—At-Large Vacancy:

Jake Marshall

The Heart and Stroke Committee recently approved King George County's application to become a HEARTSafe Community. Kevin and Lori Knowles presented Chief Moody with two signs and certificates. Lori commented that the application was excellent, thorough, and complete. Chief Moody thanked her for her help with the process. Localities interested in participating in the program should contact Lori for assistance in getting started.

Grant Committee:

The Grant Committee will meet again on April 6. The state has made some changes to the upcoming grant cycle. New mechanisms are to be included in the scoring process, to include the areas of health professional shortages, medically underserved populations, fiscal stress index scoring, and a return to locality scoring.

Vice President's Report—Donald Gore

No report at this time.

By-Laws Committee:

The By-Laws need minor updates. The board was presented with the requested changes, including changing the name of the Disaster Committee to Incident and Threat Mitigation; Quality Improvement to Performance Improvement; Stroke and Cardiovascular Committee to Heart and Stroke; and the removal of the Public Information and Education Committee. There were no questions or discussion from the board, and the changes will be voted on at the April meeting.

Secretary's Report—Mark Crnarich

Performance Improvement Committee:

The PI Committee meets again on May 11. Mark announced that the recent contract modification will allow the Trauma Performance Improvement Committee and the General Performance Improvement Committee to be combined into one entity. The committee will soon condense the Performance Improvement Plans to reflect this change.

The Office of EMS has been transferring the server for the Virginia Prehospital Informational Bridge. The Council now has access to all agencies in our service area that are reporting to the state. The Committee has developed some recommendations for digital reporting to be distributed to the other Council committees. Custom reports are still being restored in VPHIB, but it is anticipated that this will happen later this week.

The Committee is currently seeking ideas regarding possible data studies from other Council committees. Currently, the Committee is planning several project, including studies regarding airway, Narcan administration, stroke performance assessment, and advanced skills tracking. They are also working on a feasible way to obtain Medical Record Numbers in order to prove that if the system is working correctly, emergency rooms can have access to patient care reports in a timely fashion to decrease turnaround time.

Treasurer's Report—John Brandrup

John stated that the Council's financials for the quarter were sent out prior to the meeting. There were no questions from the board.

Finance Committee:

The Council has received some updates regarding locality funding. Spotsylvania County plans to remain at level funding for FY18, Rappahannock County also is giving level funding. Stafford County has agreed to move the Council into the Fire and Rescue budget as a line item, but currently we do not know how much they will be allocating to the Council for FY18.

Guidelines and Training Committee:

The Committee will meet on February 21, where it will formally approve the revised Pain Control protocol. Per the advice of Dr. White, the Regional Medical Director, the Council Staff added information specifying that ketamine was to be administered only if fentanyl is not effective or not available. Some minor pen and ink changes were also made. John Brandrup made a motion to approve the revisions to the protocol pending review by the Guidelines and Training Committee. Dr. Crovatin seconded the motion. With no further discussion by the board, the motion carried.

ACTION ITEM—Protocol Revisions, pending Guidelines & Training Review APPROVED

Committee Reports

CISM Report: Kevin Dillard for Patricia Copeland

The CISM team is up for renewal with ICISF and the paperwork will be submitted shortly. Trisha Copeland and Chris Jett will be attending an "Emotional Survival for Trauma, PTSD, and Critical Incidents" in Richmond with funding from Stafford County.

Trisha is seeking funding from the Council to attend Advance Group Crisis Instructor in Baltimore in April. She is also planning to teach Group Crisis Intervention and Suicide Awareness at VAVRS Rescue College in June.

K-LOVE classes are to be offered in June and are free. Visit crisisresponse.org/train/

The team has had two callouts since the last board meeting, and gained one new member: Lisa Davis's service dog, Blue. The next team meeting will be on March 13 at the REMS Council.

Incident and Threat Mitigation Committee: Jake Marshall

The committee is currently working on the written plan requested by the board for the "Triage Tag" exercises. They also continue to work on a Mass Gathering Protocol for the reference section of the protocols.

The committee has two action items, the MCI Plan and Surge Plan. The committee recommends approving the plans as presented. John Harkness made a motion to approve the MCI Plan as presented, which was seconded by John Brandrup. With no further discussion from the board, the motion carried.

ACTION ITEM—MCI Plan Update

APPROVED

Scott Davis made a motion to approve the Surge Plan as presented, which was seconded by Pat Fitzgerald. With no further discussion from the board, the motion carried.

ACTION ITEM—SURGE Plan Update

APPROVED

Medical Direction Committee: Dr. Tania White

The state Medical Direction committee met on January 5. Symposium submissions are coming up soon, as are OMD renewal workshops. One will be held on April 4 at the Rappahannock EMS Council.

Personnel Committee: Chief David Moody

The Personnel Committee met on December 5. The committee is currently reviewing the Council's position descriptions. These revisions were sent to the board for approval at this meeting, but Chief Moody asked to table the document until the next meeting in order to allow the Personnel Committee one final review.

ACTION ITEM—Council Job Descriptions

POSTPONED

Pharmacy Committee: Joey King

The committee will meet on March 2. The committee has been informed by some agencies that they need additional Narcan and is currently working to determine if there is truly a need for a formulary change. The med boxes have been upgraded, and currently the Committee is receiving positive feedback regarding the new boxes and seals.

Strategic Planning: John Harkness

No report at this time.

Heart and Stroke: Kevin Dillard for Emmett Price

The committee next meets on March 1. The Regional Stroke Plan is currently up for review with no revisions at this time. John Brandrup made a motion to approve the Regional Stroke Plan as presented, with a second from Susan Dietrich. The motion carried with no further discussion.

ACTION ITEM—Regional Stroke Plan

APPROVED

Trauma Committee: Susan Dietrich

The committee will meet again in April. The Trauma Triage Plan is up for review. The Committee made some minor revisions, to include the addition of two trauma centers. The committee recommends approving as presented. Lori Knowles made a motion to

approve the plan, and John Harkness seconded the motion. With no further discussion by the board, the motion carried.

ACTION ITEM—Trauma Triage Plan

APPROVED

EMS Governor's Advisory Board: Lori Knowles

The last meeting of the GAB was February 3.

Notable items addressed included:

- The Federal Register has been updated to include national emergency preparedness requirements for Medicare and Medicaid participating providers, including long-term care facilities.
- VDH has announced a health and safety joint project to consist of a community vaccinator program at the different health departments. Currently the health department is seeking EMS provider volunteers to undergo training to become vaccinators. The training is online; providers may register for and complete the training on VDH's website.

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Staff Report—Wayne Perry

The REMS Staff plans to transition to using Drop Box for Board of Directors communications because of the volume of material being e-mailed out. Margot gave a brief presentation on the use of Drop Box. Should you have any questions or need assistance with this new process, please contact the REMS offices.

Training Updates

- REMS has a National Registry test site scheduled for March 11 and it is a paramedic ONLY test site. Registry has changed to a new testing process, replacing individual skill stations with an out of hospital scenario to be completed. In preparation for that we are hosting training on this new testing process. The cost for paramedic testing has increased, in order to cover the expenses associated with the new testing and equipment requirements. It will depend on how many intermediate candidates we have as to whether or not we will continue to provide Intermediate testing.
- TJEMS is going to be offering an advanced DICO class April 2.
- PEMS is having a regional EMS expo on March 11 and 12, 2017.
- REMS is hosting an OEMS OMD update course on April 4, 2017.
- Hampton Roads Trauma Symposium is on April 21.
- The state Training and Certification committee has proposed that the state issue no new Intermediate certifications be issued after Registry ceases Intermediate testing. Current Intermediates would be able to retain their certification, but if their certification expires they will go into reentry as an AEMT.

- State recertification requirements no longer align with National Registry requirements after their recent update. This may mean that individuals with different National Registry expiration dates may have different recertification requirements.
- The Education Coordinator process is changing. After February 15, applicants will not be accepted by the state. All new applicants will have to be recommended by an instructor, and a new mentoring and team teaching program is to be implemented.

Events and Funding

- The Golf Tournament is Saturday, April 29, 2017. Player and sponsor registration forms were distributed to the board and are available on the REMS website.
- The Council joined Amazon Smile. It allows for 0.5% of eligible purchases to result in a donation to the REMS Council. The staff has added this information to their signature lines.
- The Council is seeking nominations for 2017. Forms are available on our website. If you have any questions, please e-mail Vivian at wdelts@vaems.org. Vivian is currently seeking a venue for this year's awards.
- The staff has scheduled meetings with the different hospital organizations to discuss
 the potential for funding for the regional EMS system. The meeting with HCA
 SRMC has already occurred and they were receptive to the possibility. More
 discussions are planned and additional meetings with the other facilities are on the
 schedule. A poll of the other councils' funding from similar sources was also
 conducted.
- The REMS Council supported an ITLS training course in Fauquier County in early February 2017.
- Staff have started the process of updating the logo to include the 40 year anniversary landmark.

Regional Systems and Programs

- UVA, who is conducting the research project on stress in EMS, has approved the Council moving forward with a digital version of their survey. Once the survey has been completed, the training may be provided. Wayne would like to offer a leadership briefing to any agency that is interested in incorporating the Stress First Aid model. So far, Orange County is the only jurisdiction that has implemented the training in the REMS Region. Please contact Wayne to begin the process of scheduling this opportunity.
- The council is working on some table-top disaster and interagency drills that will eventually culminate in a large-scale multi-agency event. If members have an interest in guiding this process or participating, Vivian is the point of contact for this project.
- CSRs are expiring on February 28. Please have agencies send their new CSRs to Carolyn.

Website/Technology

- The new website is being reviewed for a re-design. If board members see anything that needs to be updated, or if you have any suggestions or comments, please let Council staff know.
- The website had 7,574 unique visits in 2016.

Executive Director Update

- The Quarterly report from 2Q FY17 was submitted and accepted by OEMS. The Council Currently in the middle of 3Q FY17, which is due by the end of April, and the Council received a contract modification for the remainder of the current FY17 that is currently being executed. There are some changes, which will be pushed out through the committee structure. Clarification was sought on the contract modifications: there is NO contract requirement to have a separate Trauma Committee. The only requirement for instructor meetings is ONE per year. The contract states that CISM teams must maintain accreditation, currently there are only two councils that are accredited. There is also changes to the EMS plan review requiring input from public health and changes that involve the RSAF grant review process and grading (see attachment). Tim, staff, and Adam will get together to discuss council concerns and work on another potential contract modification.
 - PLEASE don't forget the quarterly meeting requirements so that we don't have to pay a penalty.
 - PLEASE submit meeting minutes and related documents in a timely manner. We are not able to submit them and have them posted unless we receive them.
- The Council received our annual insurance renewal and have met with the insurance representative to review the documentation. We are working with the finance committee chair to identify the adequacy and completeness of our insurance coverage.
- The national database for sentinel and near-sentinel EMS events is up and ready to receive information. There is information about the E.V.E.N.T. program in an attachment on the e-mail and the reports are accessible through the REMS Council website as well. The 4th quarter 2016 Patient Safety Report and Violence Against Paramedics Report is not yet published, links to the 3rd quarter report are available in the last staff report.
- The law firm of Page, Wolfberg, and Wirth released an article regarding new <u>Safe-Harbor for Government Ambulance Agencies anti-kickback regulations</u>, which was to become effective in January 2017
- The Executive Director has applied for a scholarship through the Harvard Business School Club of Washington DC to attend a social enterprise program, Strategic Perspectives in Nonprofit Management. Results of the application will be heard by March 20.
- There continues to be a discussion about the role and definition of EMS moving forward; agencies and providers are encouraged to review EMS transformation "EMS 3.0" information from the National Association of EMT's.

- The Health Commissioner received a request for impact feedback and environmental assessment (EA) from the Virginia Department of Transportation regarding the I-95 Express Lanes Fredericksburg Extension Study and forwarded it to OEMS, and then the potentially impacted regional councils
 - The study will provide capacity improvements through extension of the High-Occupancy Toll lanes from near Exit 133 to near Exit 143 in Stafford County. In addition, the EA will evaluate the potential effects from the addition of one general purpose northbound lane from near Exit 155 to Exit 160 in Prince William and Fairfax Counties.
- The next meeting for the EMS Fatigue project will be February 28-March 2 at the NASEMSO Headquarters. This will be the final gathering of the full expert panel to review the findings of the literature review. More information on the project is available at www.emsfatigue.org and there will be a time for public comment. If you have anything that you'd like for staff to pass along, please let Wayne know.
- The Regional Directors participated in a meeting with Virginia House Democratic leadership on January 10 in Richmond.
 - Jim Chandler attended representing RDG; Gary Critzer, Eddie Ferguson and Jeff Meyer attended representing VAGEMSA. 10 or so delegates and staff heard back-to-back comments from EMS stakeholders. Our group put in a plug to shift the VSP funding that comes out of 4 for life to their own funding if/when their own funding increases. The VAVRS group made a similar pitch. We then laid the groundwork for future EMS system funding increases, mostly focused on the grant program, the cost of ambulances and equipment, unmet needs, cost of training, etc. Gary explained that state EMS funding (OEMS, regions, grants, training, return to localities, etc) comes out of 4 for life, not general funds, which hasn't increased since the 25 cent increase about 8 years ago.
 - As previously reported, the RDG is supporting an end to the redirection of \$1M from RSAF grants to the Virginia State Police Medevac program.
- The Pre-Hospital Trauma Task force met in Richmond. The group was asked to provide a justification for the previously assigned grade of the HRSA document to evaluate the trauma system in Virginia. Documentation about this was distributed with the board meeting materials. The next TSOM meeting will be in March.
- If you have any feedback or updates on the customer service initiative please let Wayne know.
- Wayne attended the FISDAP research summit last week. His group worked on an abstract which evaluated the impact of critical stress events on paramedic student attrition. Other projects were begun which look at intrapartum analgesia administration; incidence versus need for application of CPAP; paramedic airway management during cardiac arrest; the role of simulation in training; flipped classroom model application to EMT training; and the impact of cardiac case management during lab, clinical exposure, and field internship. The abstracts will be completed and some submitted to NAEMSE at the end of March for review and selection. Wayne's previous project of "Examining the Role of Experience and

Affective Personality Traits in Paramedic Students' Success" was accepted and presented as a poster presentation at NAEMSP.

- Regional Director's Group met last week. A copy of the last Office of EMS
 Quarterly report was distributed to the board, along with the most current listing of
 legislative bills pertaining to EMS and public safety and the legislative report from
 OEMS.
 - There have been a few meetings regarding mental health in EMS. There is a legislative workgroup which met last month to discuss things that can be done to improve the current conditions. The recap on that meeting was mostly that everyone came with a little bit different agenda. Trying to gain traction with a common thread at this point. There will be something that is proposed to include mental health training in the statewide EMS plan. There is a National 2016 Mental Health in EMS report that is available for review as well. The VPPF training bill does have patrons, but it is not up on the system yet. There is legislation that is carried by Delegate Helsel and Senator Deeds, which includes biennial training from a course created/approved by the Virginia Department of Behavioral Health.
 - A brief summary of current bills may be found in the staff report that was distributed to the board prior to this meeting.
 - There is a bill relating to not having to wear a motorcycle helmet, some drone bills, a number of bills relating to naloxone, three fireworks bills that were all "killed", and two Line of Duty bill. Issues were raised concerning the Line of Duty bill relating to coverage of spouses prior to July 1, 2017, this was taken care of earlier this week.
 - The draft bill that would include certified EMS providers into the health practitioner monitoring service "never got any traction".
 - Some of the other councils are seeing potential diversions of narcotics as well as Narcan that is missing from the drug boxes. If agencies are doing a narcotic count and not a med box count, they may want to consider changing the way they inventory.
 - Another council reported that agencies are being denied dropping off full sharps containers with hospital facilities. As they investigated they found that there were no formal agreements specific to this item. Until something else can be worked out, they are utilizing the health department as a drop-off point.
 - There will be a training event through VHHA at the Fredericksburg Expo Center on May 31 and June 1, details should be coming soon on www.vhha.mci.org
 - The training session at the next RDG meeting in May will be on insurance products and the VA Risk 2 plan. The Board Members are encouraged to attend for the training and/or the meeting.

- Some of the other councils are engaging in MOUs with their jurisdictions based on specific needs as well as some recommendations from outside sources. Board members are asked to let Wayne know if they feel this would be helpful in the REMS region.
- HR 4365 is the piece of DEA legislation titled "Protecting Patient Access to Emergency Medications Act of 2016". It cleared the US House Subcommittee on Health and is next due for a full committee review. The NAEMT encourages providers and agencies to speak with their representatives to provide a voice for this issue.
- Standards of Excellence has been utilized by several EMS agencies with positive feedback. A challenge seems to be convincing agencies to go through the process. All of the forms have been digitized. Program needs better recognition and marketing.
- Virginia Provider Health and Safety Committee update
 - Recent events, hot/warm zone, RSAF funding criteria for equipment
 - Provider survey
 - Threat assessment
 - Mental Health of EMS providers
- The Centers for Medicare and Medicaid Services is poised to implement Emergency Preparedness requirements requiring participating providers and suppliers to meet standards in the following areas: emergency plan; policies and procedures; communication plan; and training and testing program. Regulations will be effective sixty days after publication in the Federal Register. Affected providers and suppliers must be in compliance within one year.

Office of EMS Updates:

- The office of EMS launched a new website on January 17, www.vdh.virginia.gov/emergency-medical-services/
- Mike Berg, Regulatory:
 - OEMS has been tasked with participating in 15 vaccination programs across the Commonwealth. Anyone who is involved in the VDH-sponsored program must complete a 4-hour online training program. Any EMS provider who receives the training needs to be tracked and OEMS is working on determining how and who will be doing this. OEMS is asking for support for building and strengthening relationships between the health districts. The councils have asked to assist with information sharing with EMS agencies about vaccination clinics, training, and other news related to vaccinations and the contract modification includes a greater involvement with public health/health departments.

• Adam Harrell, Finance:

- The EMSTF contracts are coming next now that the regional council contracts are completed. This process has changed slightly, and the piece that is missing from this is funding for initial education. All of the initial education funding is going to be provided through a scholarship program. There will be an option for everything up-to a full-ride for all levels of EMR through Paramedic. The funds are provided to the students on a semester basis, and the money will be sent directly to the students. There are ties to the funding related to successful course completion, but it is a proactive payment, not a reimbursement.
- This leaves the councils with the responsibility for auxiliary and CEU programs. This does diminish some of the harsher requirements of bidding that were expecting to be included in the contract. There is still a desire to have councils determine funding based on needs. The auxiliary funding will be based on the last year's funding that was requested for the council's service area. The Office will provide funding for a full CE (NCCR NREMT Paramedic) class for every city or county within the Commonwealth. The hope is to have contracts available for regional councils that take effect January 1, 2017.
- There is also going to be another special initiative grant cycle that will begin December 15 which will cover initial training expenses for the last two quarters of FY17.

• Tim Perkins – RDG

- Some of the anticipated contract changes include
 - the addition of a social media reference in addition to the website.
 - trauma and medical QI which have been combined into a single entity. (included in the contract mod)
 - there will now be a set amount of funding that will be the baseline, and there will be an opportunity for pay-for- performance incentives.
 - a survey tool that is to be made available for end-users to provide feedback on the council's customer service (included in the contract mod). Although not currently in effect, there is a potential to attach funding to the results of the customer service survey.
 - an emphasis on being more collaborative within public health. While they aren't looking for the council to do 100% of the work, there should be an invitation to the public health side of the equation (included in the contract mod).
 - A recommendation to get involved with hospital preparedness and medical reserve corps.
- Starting January 1, the OMD-recertification program has transitioned from VACEP to OEMS.

 All Office of EMS meetings starting January 1, 2017 will be held at the Richmond Marriott at Short Pump.

New Business:

Chief Moody announced that King George is hosting a Critical Care Paramedic Program starting on 3/22 which will run a little over 100 hours. This will be Wednesdays and Thursdays for 8 hours. The class is capped at thirty participants and will cost \$1,400-\$1,500. There is also a course in Manassas. The King George course is being taught by Air Medical out of northern Virginia.

Chief Harkness announced that Orange is bringing a nationally known speaker regarding active shooter incidents to Orange on June 16. The department is trying to hold the event at a local high school to allow an increased number of participants. Orange County providers have priority for registration, but there may be open spots for other providers to attend. Details will be announced after the contract is finalized.

Adjournment: The meeting adjourned at 7:55 PM.

Next Meeting: The next meeting will be held at 7 PM on April 19, 2017, at the

Rappahannock EMS Council Regional Training and Simulation

Center.