

RAPPAHANNOCK EMS COUNCIL BOARD OF DIRECTORS MEETING

Board of Directors

October 19, 2016

Board Members 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
Mark Garnett, Caroline County
Donald Gore, Rappahannock County
John Harkness, Orange County
William Harrington, Spotsylvania County
Phyllis Hurlock, Culpeper County
Warren Jenkins, Culpeper County
Fred Messing, At-Large
David Moody, King George County
Maurice Moody, Orange County
Emmett Price, Stafford County
Dr. Tania White, Regional Medical Director
Joseph Williams, Fauquier County

Staff Present:

Wayne Perry, Executive Director

Board Members Excused:

Mariana Bedway, At-Large
Patricia Fitzgerald, Westmoreland County
David Garvin, King George County
Mary Hart, Fauquier County
Lori Knowles, Stafford County
Joseph Sposa, Spotsylvania County

Staff Excused:

Margot Moser, Office Manager

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 Dining Room of UVA Culpeper Hospital at 7:00 PM.

Approval of minutes:

August 17, 2016 minutes approved as presented.

Public Comments/Presentations from Guests:

There were no public comments.

President’s Report—Kevin Dillard

Kevin announced that there are no new members at this time. He announced that the Day of Action was a success and a picture of the work done was circulated. Thanks to Patricia Fitzgerald for coming out to help.

The 40th Anniversary Celebration was a success, and Kevin presented the board with challenge coins as mementos. Kevin also commended the staff for the decorations and food preparation for the event.

Grant Committee:

The Grant Committee met on October 3 and reviewed 12 grants. These have gone to the state for review.

Vice President’s Report—Donald Gore

No report at this time.

By-Laws Committee:

No report at this time.

Secretary’s Report—Mark Crnarich

Performance Improvement Committee:

The committee last met on August 11 and will meet again on November 17. The Performance Improvement Plan and the Trauma Performance Improvement Plan were reviewed at the last board meeting. Mark introduced the PI schedule for FY17, with the committee recommendation to approve as presented. With no further discussion from the board, the motion carried.

ACTION ITEM PI/TPI Schedule and Topics for FY2017 APPROVED

Treasurer’s Report—John Brandrup

John stated that the financial statements for the quarter were previously distributed and asked if there were any questions; Fred Messing questioned whether the Council was having variation in cash flow as compared to previous years. He saw that there was an increase in cash on hand. Wayne explained that due to the timing of the receipt of our quarterly payments from the state, and with the addition of the MIH grant, it may look different, but it is basically the same as in previous years. The new grant item in the P&L is the Caroline County Pilot Mobile Integrated Healthcare Program that is being funded by the Department of Health, Office of Minority Health and Health Equity.

Finance Committee:

The Council is looking into alternate ways to approach requesting funding from the localities; Wayne has been meeting with county representatives to work towards the goal of becoming a line item in department budgets.

Guidelines and Training Committee:

At the last committee meeting, suggestions for protocol revisions and requests for medications to be added to the formulary were reviewed and passed on to the medical direction committee. No action items or report at this time; the committee meets again on October 25, and protocol updates will likely be presented at the next BOD meeting.

Committee Reports

CISM Report: Kevin Dillard for Patricia Copeland

The team will meet again on 11/14/16. The team had two callouts since the last board meeting, including a defusing in Stafford and a one-on-one in Fredericksburg. The team also provided two outreach training sessions. The team is applying for an RSAF grant to attend the ICISF World Congress.

Patricia is teaching Group Crisis Intervention at Symposium in November. There is one new member, a pastor from Fredericksburg. The CISM Team is currently discussing establishing a vetting process for new pastoral team members.

Incident and Threat Mitigation Committee: Jake Marshall

Jake presented some information regarding the After Action Report from the Amtrak MCI. There was discussion of the possibility of “Triage Tag Day” with the hospital emergency rooms. This is currently being done in Stafford. There may be some issues at the provider level with implementing this. The board requested that the committee produce a written plan for implementing this practice.

Medical Direction Committee: Dr. Tania White

The committee last met on August 30 and will meet again on October 26. The medical direction committee was supportive of the changes that were mentioned previously and the protocol sub-committee is working on hammering out the details. There will be a proposed change from Dextrose 50% PFS to Dextrose 10% infusion, as well as inclusion of Zofran at the EMT level.

State Medical Direction is currently focused on the cost of Epi pens and options for agencies and providers at this point in time. There has also been discussion of trauma under and over-triage at the state level.

Personnel Committee: David Moody

No report at this time.

Pharmacy Committee: Joey King

The committee last met on September 1 and has been discussing the issue of the excessive cost of Epi pens; currently, the committee is in a “fact finding” phase and discussing several possible avenues regarding solutions to this problem including proposing a change to the Scope of Practice to allow EMTs to be able to administer IM epinephrine.

Currently the committee is working toward replacing all of the old med boxes that are still in the system. Some of them are breaking down due to regular wear and tear; agencies are ordering the boxes which are being distributed to the hospitals by the Council.

Strategic Planning: John Harkness

No report at this time.

Heart and Stroke: Emmett Price

Emmett stated that the committee’s work on a STEMI plan is progressing, with focus currently on the development and implementation of a bedside report. At this time, the committee is slowing down its updates to the Stroke Plan in order to anticipate changes to the state stroke plan.

Mary Washington Healthcare is reporting 96% stroke alert rate for STEMI patients versus a 56% national average; the committee is working on getting information from Fauquier and Culpeper.

King George County has submitted a Heart Safe Community application which is under review.

Trauma Committee: Susan Dietrich

The committee last met on October 18 and is currently reviewing the Trauma Triage Plan. No major changes to the plan are anticipated.

EMS Governor’s Advisory Board: Lori Knowles

The Symposium Committee is actively soliciting presentations for the 2017 Symposium. Those interested will need to go the VAOEMS website and submit through the “Call for Presentations” link under Symposium.

Staff Report—Wayne Perry

HR/Personnel Updates

- The council continues to use the electronic timesheet program. Details are also included in the Council's OEMS quarterly report to identify areas of work and quantities of manpower devoted to specific projects. If you have questions about a specific project or work that we do for your jurisdiction please talk with Wayne.

Training Center Updates

- REMS has provided twenty National Registry test sites so far including one during FY2017. Many have been full some with a waiting list. We have another one scheduled for November 19. We are planning to have at least five per year moving forward.
 - Since the paramedic testing process is changing, there will not be a feasible way to combine intermediate and paramedic testing. If we continue to test intermediates, it will need to be on a separate date, which means additional costs. It will depend on how many intermediate candidates we have as to whether this testing level continues.
 - Students needing to retest a station that has been eliminated as a part of the change to the testing procedures will have to test as an initial candidate as of January 1.
 - NREMT fees are increasing on January 1, 2017, as will the registration fee for written testing.
 - Training announcements are listed on the REMS website and Facebook page, as well as provided in updates via social media. Please encourage providers to follow us on Twitter, like us on FB, and check the website periodically.

Events and Funding

- Margot worked very diligently to make the 2016 REMS Council Golf Tournament a success. We are planning for April 29, 2017 as the next date. If you have thoughts or ideas please let Margot know.
- The regional awards winners have been submitted to the state for consideration in the Governor's Award program. We are actively seeking nominations throughout the year and currently accepting applications for 2017. If you have someone who would be a worthy candidate, please e-mail Vivian at vdelts@vaems.org.
- RUW has continued to refer volunteers to the council. We are working with everyone that contacts us to identify projects that they are able to accommodate. The Day of Action was held Friday September 23, and we had 3 groups of volunteers.
- Vivian, the Regional Field Coordinator, is gauging interest in participation in a "100 Pound Weight Loss Challenge" – no more than forty members per county. Members of the board may also compete on a team with the REMS Staff. Please contact Vivian if you are interested in participating.

- Virginia Department of Health Office of Minority Health and Health Equity grant update was provided.

Regional Systems and Programs

- We have received a few comments and suggestions based on the recent protocol rollout. The protocol sub-committee is currently reviewing them and preparing recommendations for changes to the Medical Direction and Guidelines and Training Committee. More to come as this process progresses and we expect to have action items available for the December BOD meeting.
- UVA is conducting a research project on stress in EMS. The REMS Council will be participating in the project during the next phase, probably during CY 2017.

Executive Director Update

- VAGEMSA is requesting a \$0.25 increase for 4-for-life.
- The Governor is submitting a cost-savings plan to address the commonwealth's projected revenue shortfall. Amendments to the biennial budget will be released December 16. This cost-savings plan also includes transferring \$150,000 from the Trauma Center Fund to the General Fund, and an additional transfer of \$150,000 from the Emergency Medical Services fund to the general fund.
- Quarterly report from 4Q FY16 was submitted and was accepted with no issues by OEMS. Currently in the process of completing the 1Q FY17, which is due by the end of October.
 - 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.
- Wayne attended the meeting of the National EMS Advisory Council (NEMSEC) and provided an update of the discussions that were had. If you have any questions or things that you would like me to take to this group at future meetings please let me know.
- The NHTSA is working on a two-year project to develop evidence-based guidelines for fatigue management in EMS. The first stake-holder meeting of the EMS Fatigue study was held earlier this year in February and information from that meeting was previously included in a report to the BOD. There was a follow-up meeting in April, and I included in the e-mail attachments the agenda and to-date information on drowsy driving. If you have any comments or suggestions that you would like to provide in this process please let me know.
- 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 Board was provided with the 2nd quarter 2016 Patient Safety Report and Violence Against Paramedics Report.

- There was a discussion about the role and definition of EMS moving forward at the last NEMSAC meeting. In addition, the EMS transformation “EMS 3.0” information was provided to the Board for review.
- Virginia Provider Health and Safety Committee update. Based on discussions at the last meeting there were several topics of interest, including:
 - Review of recent events, definitions and standardization of terms such as hot/warm zone, RSAF funding criteria for protective equipment, etc.
 - There was a provider survey that was distributed at Symposium, and the committee will be reviewing the results.
 - Each jurisdiction is encouraged to conduct a threat assessment for their service area. Discussions and plans can be generated based on the findings from each jurisdiction.
 - There is a need to have a conversation about the Mental Health of EMS providers, issues related to stress and workplace or environment and the topic of suicide and mental health should become more prevalent throughout the industry.
- Recent multi-person overdose scenes and the introduction of stronger illicit drugs (cut with Carfentanil) have been continuing across the country. The risk extends to public service providers that are handling and packaging evidence on the scene, as well as treating patients. The DEA has announced a plan to reduce the quantity of opioid controlled substances that will be manufactured in 2017 in response to the national epidemic. There is also a discussion about counterfeit prescription medications which are laced with Fentanyl and creating additional complications.
- If you have any feedback or updates on the customer service initiative please let me know. I have not heard of any problems, so I feel confident that the changes that we made are making a positive impact. This continues to be a priority and a standing agenda item for our staff meetings.
- Regional Director’s Group met in August. A copy of the last Office of EMS Quarterly was provided to the Board.
 - There have been a few meetings regarding mental health in EMS. There is a legislative workgroup which will be meeting to discuss things that can be done to improve the current conditions. 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 was shared with the Board.
 - There was a meeting of the Virginia Fire Service Council Summit. Basically, the group feels that EMS training is too expensive and providers should have access to free training “much like fire and police training”. The Office and the RDG lobbyist has cautioned the group about opening the proverbial Pandora’s Box of reviewing the funding formula. Once that occurs, there’s little control as to the final outcome and it may be completely different in a variety of aspects. There is concern that a legislative action may be on the horizon for the upcoming General Assembly session, but nothing has been decided at least as far as we know. It is also a little concerning that there is such a lack of awareness as to the system as it currently stands. In addition, there appears to be little consideration as to the budget shortfall for the Commonwealth. We will continue to monitor and report back.

- There was a discussion about the changes which will take effect this fall regarding overtime regulations from the Department of Labor.

Office of EMS Updates

- *Mike Berg, Regulatory:*
 - The affiliation packet remains in the Governor's office.
 - The POST addition to the DDNR is now in the Governor's office for signature.
 - The periodic review public comment period has closed and no comments were received. There was one e-mail received with a recommendation for equipment.
 - The rules and regulations committee will be working on their recommendations for updates to the regulations. There is a proposal to write a new chapter (replacing 5-31). This will clean things up, removing all of the repeals language. One thing that this does do, is invalidate any existing exemptions that have been approved based on the then-old chapter. This doesn't preclude approving new exemptions, but they will need to re-apply for an exemption. The recommendation will be for some exemptions to be approved with a defined time period, specifically related to staffing exemptions for an ALS ambulance. The goal is to have a product to present to the November EMS GAB. The next step will be to produce a notice of regulatory intent, and the goal will be to not take 8 years as it did with the last update.
- *Scott Winston, Administration:*
 - There was a meeting with the Virginia midwifery association and there were a few challenges with transfer of care between the home provider and EMS. This has come up again and the association would like to renew a relationship with the EMS system. They have been suggested to talk with the regional EMS councils to elevate the awareness and exposure of their work.
- *Adam Harrell, Finance:*
 - There was a conversation with the regional EMS councils during the recent designation application budget process. There was a unanimous agreement with the councils to participate in the new proposal for administration of EMS training funds. There will now be a work-group that works out the MOU language and the process. There will need to be some congruity between the administration and operation between councils as well as the time period will be for the remaining fiscal year. Understand that this will be a work-in-progress and there will be an opportunity to make some changes at the end of the first time period. The goal would be to have another meeting to discuss the MOU in the next 45 days. The execution timeline on this, since it is a MOU, will be much shorter than the otherwise lengthy RFP process. Also, as an MOU, it can be made effective immediately without any delay in processing

and approval. Especially since the language will already be approved prior to coming together to discuss.

- *Gary Brown, Administration:*
 - There was a significant discussion at the EMS GAB executive committee about the EMSTF changes. There are some concerns about the change and some of the ALS-C and EC are concerned about how this will affect their training capacity. Any discussion about changing the procurement process creates angst AND then the fact that there is a competitive bid process implicates that someone will potentially be told no, which is not historically the practice. In addition, the idea that there will be a competitive bid process would mean that there would potentially be a single application and approval period. The goal is that the bid process would be blinded in order to eliminate any concerns of discrimination. The EMS GAB will be creating a working-group or committee to help guide this process. The Office would like educators to know that the system hears the concerns and they will take it into consideration as they work through the creation of the new process.

- *Warren Short, Training:*
 - The CEU scanner program is now a PC-based program and there is no cost with the exception of purchasing a bar-code scanner. Updates will be made as submissions are made to the system. They are currently field-testing the product and the final test will be to use this system at EMS symposium. Current hand-held scanners will still be usable, but as they die off, the new program will be required.
 - The transition has occurred to the new CEU system. All providers with a certification that expired during the transition were extended and all of those certification cards have gone out. NOBODY lost eligibility during the transition process. If you were COMPLETE prior to the transition it will remain after the transition even through the requirements have changed.

- *Tim Perkins – Regional Directors Group:*
 - Designation site visits have been completed and the recommendation is to approve each of the councils' applications. This was approved by the EMS GAB last week and scheduled to appear before the BOH at their September 15 meeting, but it has been pushed back to the December 1 meeting due to expected agenda limitations due to review and discussion surrounding abortion regulations. That means no change in contract and/or funding until at least January 1, 2017. In addition, we still don't know what the funding will be for the new 3-year contract.
 - Don't forget that the deadline for transition to Version 3 data in VPHIB is December 31, 2016.

- MUCC/SALT/START triage – nothing new has occurred since the last update.
- HR 4365 is the piece of DEA legislation titled “Protecting Patient Access to Emergency Medications Act of 2016”. It has 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.

- VAGEMSA/EMS GAB
 - The OEMS is in the final stages of a statewide LMS which will be available for all EMS providers, agencies, and educators in Virginia. This will be the platform that is available for distance and online education in the Commonwealth. The final version that was selected is Blackboard, in order to fall in line and remain compatible with the VCCS.
 - Provider safety bulletins are available through the Office of EMS.
- Input Requested For International Survey On Violence Against EMS: CQ University Australia is conducting a multi-university, international study to examine violence against EMS personnel. All EMS practitioners, both in the United States and around the world, are encouraged to participate. The results will be used to create training programs, policies and other interventions to prevent violence against EMS personnel worldwide. All participants will be entered into a drawing to receive an iPad. The survey link may be found in the staff report.

New Business:

No new business.

Adjournment: The meeting adjourned at 7:45 PM.

Next Meeting: The next meeting will be held at 7 PM on December 14, 2016 at the Rappahannock EMS Council Regional Training Center.