




**Legislative and Planning (L&P) Committee Meeting  
 Courtyard by Marriott  
 Friday, August 5, 2016  
 9:00 A.M.**

<b>Members Present:</b>	<b>Members Absent:</b>	<b>OEMS Staff:</b>	<b>Others:</b>
<b>Rob Logan, Vice-Chair</b>	<b>Joan Foster, Chair (excused)</b>	Gary Brown	David Hoback
<b>Ed Rhodes</b>	<b>Gary Samuels</b>	Michael Berg	Jeff Michael
<b>Eddie Ferguson</b>		Scott Winston	Jason Ferguson
<b>Anita Perry</b>		Tim Perkins	
<b>Gary Dalton</b>		George Lindbeck, MD	
<b>Byron Andrews</b>		Warren Short	
<b>Michael Player</b>		Adam Harrell	

<b>Topic/Subject</b>	<b>Discussion</b>	<b>Recommendations, Action/Follow-up; Responsible Person</b>
<b>OPENING</b>	Vice Chair Rob Logan called the meeting to order at 9 AM. Mr. Logan served as chair for the meeting because the Chairwoman Joan Foster was not able to attend this meeting. The minutes from Friday, May 6, 2016 meeting were reviewed and unanimously approved.	<b>Motion made by Ed Rhodes and seconded by Gary Dalton to approve the May 6, 2016 meeting minutes. The Committee voted unanimously to approve the minutes.</b>
<b>OEMS UPDATE</b>	<p>Mr. Scott Winston informed the committee to refer to the quarterly OEMS report to the state EMS Advisory Board for updates on key activities. The report is posted on the OEMS Web site at: <a href="http://166.67.66.226/oems/Files_Page/Advisory_board/ABQuarterlyReport0816.pdf">http://166.67.66.226/oems/Files_Page/Advisory_board/ABQuarterlyReport0816.pdf</a>.</p> <p>Mr. Winston updated the committee members concerning a number of personnel changes at the Office of EMS. Ms. Cam Crittenden, Trauma Program Manager began work on Tuesday, May 10. OEMS continues the recruitment process for the vacant Trauma Program Coordinator position. Two previous recruitments failed to attract an individual with the complete skill set OEMS feels is important for this position. The position announcement has been rewritten to attract an applicant</p>	

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	<p>pool with more of the qualifications outlined in the employee work profile (EWP). An applicant has been hired for the vacant Medical Records Technician, Sr. position and they will start on Wednesday, August 10. OEMS will initiate a new recruitment process for the Lead Agency Data Analyst (Informatics Coordinator) in the next several weeks. A previous recruitment did not result in the selection of a suitable candidate. Mr. Winston reported that Dennis Molnar, OEMS Business Manager is retiring on September 1. Mr. Adam Harrell has been hired as the new OEMS Business Manager and he is working in a dual incumbency role with Mr. Molnar until he retires on Sept. 1. An applicant has been hired as the new Human Resources Specialist for OEMS and they will start work on Wednesday, August 10.</p>	
<p><b>STATE EMS PLAN UPDATE</b></p>	<p>The current version of the state EMS Plan was approved by the Board of Health on June 5, 2014 (see attachment). The Virginia Office of EMS is mandated by <i>Code</i> to review and revise the state EMS Plan, as necessary, every three (3) years. Mr. Perkins presented an initial draft of the revised state EMS plan at the meeting. (see attachment) The draft incorporated changes (highlighted in yellow) recommended by OEMS Division Managers and standing committees of the state EMS Advisory Board. Mr. Perkins indicated he is still waiting for input from several committees of the Board. Mr. Perkins highlighted a new key strategic initiative (4.3.3) to provide information, resources and best practices to EMS agencies as it relates to EMS response to active shooter and hostile environment incidents. It was stressed that the plan should not be too specific referring to programs that may not be around in three to five years.</p> <p>Mr. Michael Player suggested adding a new strategic initiative (2.2.8) to assure an adequate amount and quality of crisis/behavioral health training and educational resources for EMS providers and emergency department staff.</p> <p>Mr. Ed Rhodes suggested adding a new strategic initiative (4.3.4) to develop, in conjunction with the EMS Advisory Board, the Virginia Department of Fire Programs, the Virginia Department of Behavioral Health and Developmental Services and stakeholders, a program dealing with mental health and awareness training of first responders, namely EMS providers (volunteer and career, fire and EMS) using such items as mental health first aid programs that encompass public safety and suicide prevention as background information.</p> <p>The committee recommended adopting the state EMS plan in concept with the changes presented</p>	<div style="text-align: center;">         State EMS PlanFINAL.pdf     </div> <div style="text-align: center;">         State EMS Plan.2016DRAFT.pdf     </div> <div style="text-align: center;">         SummaryEMSPlanRevisions- 2016.docx     </div> <p><b>A motion was made by Michael Player and seconded by Eddie Ferguson to adopt the state EMS plan in concept with the</b></p>

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	<p>(highlighted in yellow) and to include appropriate behavioral health and crisis first aid and prevention strategies.</p> <p>A public comment period lasting thirty (30) days will be conducted in the August/September timeframe. A special called meeting of the Committee will be held on Thursday, September 29 at 10 AM at the Office of EMS in Glen Allen, VA to review input received during the public comment period and to finalize the plan before submitting it to the state EMS Advisory Board for review at least two (2) weeks prior to their next meeting scheduled on November 9, 2016. If approved by the state EMS Advisory Board at their November 9 meeting, the plan will then be presented to the Board of Health for their review and approval at their February 2017 meeting.</p>	<p>changes as discussed, to include behavioral health, and crisis first aid and preventative components. The committee voted unanimously to approve the motion.</p> <p>Sept. 29 at 10 AM – L&amp;P Committee special called meeting at OEMS to review and finalize state EMS Plan</p>
<p><b>REGULATORY UPDATES</b></p>	<p><b><u>EMS Personnel Requirements and “Affiliation”</u></b></p> <p>Mr. Berg reported the general consensus is to wait for the next periodic review of the EMS Regulations to insert the term “affiliation” in 12VAC5-31-910 related to applications for EMS certification and affiliation with an EMS agency. Individuals will be denied membership (affiliation with a licensed EMS agency) and EMS certification if certain criminal or enforcement history exists. The term “affiliation” was in the previous edition of the EMS Regulations and was inadvertently omitted from the current edition of the EMS Regulations. Information about this regulatory action can be found on the Virginia Townhall web site at (<a href="http://townhall.virginia.gov/L/viewstage.cfm?stageid=7067">http://townhall.virginia.gov/L/viewstage.cfm?stageid=7067</a>)</p> <p><b><u>Chapter 66: Regulations Governing Durable Do Not Resuscitation Orders</u></b></p> <p>OEMS initiated a periodic review of the Regulations Governing DDNR Orders and submitted a fast track regulatory package. OEMS has been advised that licensed health care practitioners and staff at licensed medical facilities are hesitant to recognize other DNR Orders pursuant to 12VAC5-66-60. Qualified health care personnel are authorized to honor any Other Do Not Resuscitate (DNR)</p>	

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	<p>Order as if it were a Durable Do Not Resuscitate Order when the patient is currently admitted to a hospital or other qualified health care facility or is in transit from a qualified health care facility provided that such order includes the same information as listed in subdivision 1 of <u>12VAC5-66-40</u>, except that an Other DNR Order shall not be required to include the signature of the patient or a person authorized to consent for the patient on the order itself.</p> <p>Individual organizations and associations have advocated for adding reference to specific other DNR orders in the DDNR regulations. Specifically, a request to add Physician Orders for Scope of Treatment (POST) to the DDNR regulations has been made.</p> <p>OEMS presented the proposed regulatory change to the Board of Health at their March 17, 2016 meeting to seek approval for adding POST to the definition of DDNR. The proposed regulatory change was approved by the Board after adding language to require the signature of the physician on the POST form. The regulatory packet has now been forwarded to the Governor’s policy analyst for review and his recommendation to the Governor for further action.</p> <p><b><u>Chapter 31: Virginia Emergency Medical Services Regulations</u></b></p> <p>Mr. Berg announced the OEMS is required to conduct a periodic review of the EMS Regulations (12VAC5-31) every four (4) years and will initiate a periodic review of the Virginia EMS Regulations early next year.</p> <p>The public comment period for the periodic review of the EMS Regulations ended on July 17, 2016. No comments were received through the formal public comment process. Mr. Berg indicated he received an email from a regulant about potential revisions to the EMS Regulations.</p> <p>A work session of the Rules and Regulations committee is scheduled for September 28 at OEMS in Glen Allen, VA to continue work on revisions to the EMS Regulations. A draft of the proposed changes to the EMS Regulations will be submitted for review to the state EMS Advisory Board meeting at their November 9, 2016 meeting.</p> <p>A Notice of Intended Regulatory Action (NOIRA) will be submitted to the Board of Health at their</p>	<p>Sept. 28 at 9 AM – Rules &amp; Regs workgroup meeting at OEMS.</p>

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	<p>February 2017 meeting.</p> <p>Mr. Berg reported that the present thinking is to repeal Chapter 31 (12-VAC5-31) of the EMS Regulations and recommend adoption of a new Chapter 32 (12-VAC5-32). By writing a new chapter this action will allow an opportunity to clean up previously repealed sections of the EMS Regulations, make adjustments to the flow and sequencing of the EMS Regulations, and nullify all exemptions that were made under the old EMS Regulations (i.e. EMS vehicle staffing exemptions). In the future, Mr. Berg indicated he will recommend the use of exemptions for a specified period of time versus exemptions that are permanent.</p>	
<p><b>2016 Virginia General Assembly Session</b></p>	<p><b><u>House Bill 311</u></b></p> <p>Delegate Orrock’s HB311 was approved by the legislature and signed by the Governor that directs the Secretary of Health and Human Resources to undertake efforts to establish collaborative agreements with other states, particularly those states that share a border with the Commonwealth, for the interstate recognition of certifications of EMS providers for the purpose of allowing EMS providers to enter into other states to provide emergency medical services. OEMS must submit a report to the General Assembly regarding the status of such efforts no later than November 1, 2016.</p> <p>OEMS has contacted the states that surround Virginia and determined that all states with the exception of North Carolina intend to adopt REPLICA within the next 3 to 5 years. North Carolina is unable to currently adopt REPLICA because they do not use National Registry as their initial certifying examination in their state.</p> <p>Delegate Orrock indicated this bill is an interim measure until REPLICA is ratified by 10 states. It was also reported that National Registry (NREMT) has hired an individual to build the required IT infrastructure of REPLICA. NASEMSO, using resources made available from NREMT and Association and Society Management International, Inc. (ASMI) hired Sue Prentiss, former New Hampshire State EMS Director to serve as a “champion” for REPLICA to assist other states in their legislative journey. This individual will also have duties related to the preparation of drafts and materials in anticipation of the formation of the REPLICA Commission.</p>	

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	<p><b><u>Virginia Fire Service Council (VFSC) Summit on Expanding Fire and EMS Influence</u></b></p> <p>A VFSC Summit has been held on May 19 and July 13 to discuss expanding the influence of Fire and EMS in Virginia. During the July 13 meeting a discussion came up about funding for EMS and the burden on local jurisdictions to fund training. During this meeting, it was noted that there are over \$3M each year allocated for training and these funds are not always drawn down. Some individuals at the meeting indicated obtaining funds to train personnel at an accredited training site was cumbersome and only larger departments can comply with all the requirements. A discussion at this meeting then focused on \$4 for Life funds and specifically Return to Localities (RTL) funds and the need for greater flexibility on the use of these funds. Apparently some conflicting information was provided at this meeting leading some individuals to think these funds could not be used to pay overtime for instructors or tuition fees for students to attend EMS courses held at community colleges. See last paragraph of this section that addresses how this misperception will be addressed.</p> <p>The discussion at the VFSC Summit then turned to EMS Training Funds (EMSTF) and how the proposed competitive bid process will delay getting funds into the field. It was reported by Ed Rhodes and Eddie Ferguson that many of the stakeholders at the July 13 meeting are concerned about the rising cost of education and training of EMS personnel as well as equipment needs and these should be identified as high priority needs for the EMS system in VA.</p> <p>At the July 13 meeting, VAGEMSA was assigned the task of identifying the top three or four EMS issues. These items will be included in a brochure that is being put together by VFSC to educate legislators about the top needs for EMS. EMS needs that have been identified include preserve the present level of funding to EMS and Fire, address the new restrictions on the use of EMS Training Funds when more information is available about the process, and seek support for the implementation of Mobile Integrated Healthcare-Community Paramedicine (MIH-CP) programs in VA.</p> <p>L&amp;P Committee members discussed their concerns about attempting to change the distribution and use of \$4 for Life funding and the potential pitfalls this may create. Members stated the EMS</p>	

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	<p>community needs to be ready to defend any attacks that may occur on the \$4 for Life funds.</p> <p>It was pointed out that a legislative roundtable meeting has been scheduled by VDFP on Thursday, August 11 to discuss possible legislative actions that may come up during the 2017 session of the Virginia General Assembly.</p> <p>At this point, it was brought to the attention of the committee by OEMS Director Gary Brown that \$4 for Life funding may be used for personnel costs. The Code is silent on the use of RTL to cover the cost of EMS personnel. These funds are not prohibited to be used for instructor fees, overtime costs for instructors, psychomotor practical skills, etc. as long as their use is directly related to the initial or recertification training of EMS personnel.</p> <p>Chief David Hoback agreed to speak with Chief Stephen Kopczynski, Chairman, VFSC and Fire Chief of York County Dept. of Fire and Life Safety to explain that RTL monies can be used for costs related to training EMS personnel, with the exception of personnel costs to backfill positions due to training.</p>	<p><b>Chief David Hoback agreed to speak with the Chairman of the VFSC, Chief Stephen Kopczynski to clarify misinformation about the use of RTL monies that came up at their July 13 meeting.</b></p>
<b>UNFINISHED BUSINESS</b>	There is no unfinished business to bring before the committee.	
<b>NEW BUSINESS</b>	There is no new business to bring before the committee.	
<b>PUBLIC COMMENT</b>	There is no public comment.	
<b>NEXT MEETING DATE</b>	The next regularly scheduled meeting of the committee will be held on Wednesday, November 9, 2016 at 10 AM at the Norfolk Waterside Marriott in Norfolk, VA. November 9.	
<b>ADJOURNMENT</b>	The meeting was adjourned at 10:30 AM.	