
Virginia
OFFICE OF EMERGENCY MEDICAL SERVICES
Virginia Department of Health

Virginia's Emergency Medical Services Regulations

Proposed Draft:

An Informational Session

A Presentation for:
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Presenter:
Michael D. Berg, BS, NREMT-P
Manager, Regulation and Compliance
Virginia Office of EMS

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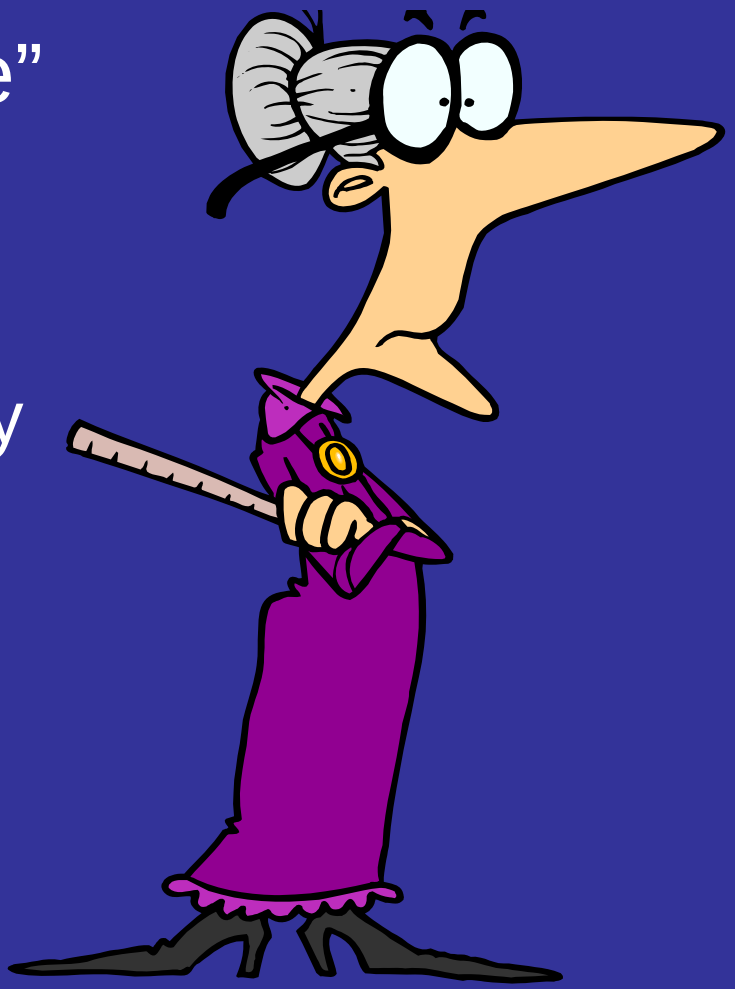
Why oh why?

- The “practice of medicine”
  - Dynamic, ever-changing
- Laws change
  - Virginia General Assembly
  - Federal Laws
- Executive Order 36



Thumbnail overview

- Definitions
- Enforcement
- Patient destinations
- Equipment and supplies
- Board of Pharmacy

Thumbnail overview

- Criminal background checks
- Agency policy development
- Medevac
- Training
- EMS physicians
- Regional councils

Definitions

- Terminology
  - Commissioner vs. OEMS
  - Medication vs. drug
- Training – accreditation, certification levels, testing
- Designated infection control officer
  - Includes training requirement

Definitions

- Invasive procedure
  - Signature requirements
- Local governing body
- Safety apparel
  - Meets new federal requirements
- Training Officer
- Medevac terms

Enforcement

- Adopt National Registry's Guidelines
  - General Denial
    - Serious crimes of violence
    - Other states actions

Enforcement - more

- Presumptive Denial
  - Denied except in extraordinary circumstances
  - Currently incarcerated, on work release, on probation or on parole
  - Categories which five years must have passed since conviction or release from custodial confinement whichever occurs later
  - Crimes involving controlled substances
  - Serious crimes against property – i.e. grand larceny, burglary, embezzlement or insurance fraud
  - Any other crime involving sexual misconduct

Enforcement - more

- Civil Penalties
  - $1,000 per offense per day
  - Agencies and entities only
- Better defines what can be inspected
- Cannot interfere in investigation
- DUI – removes from OEMS and places responsibility on agency

Patient Destination

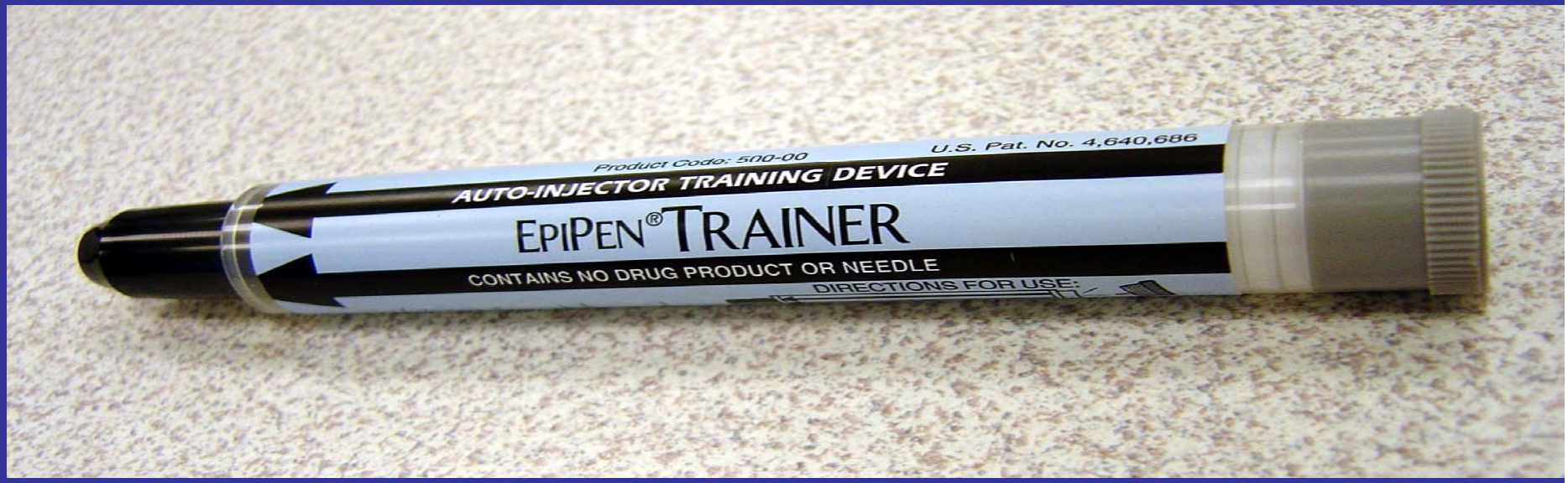
- Where to go?
  - Trauma
  - Stroke
  - STEMI
- What is next?
  - Pediatric
  - OB-GYN
  - Psychiatric
  - Others?

Equipment and Supplies

- Neonatal
  - Not much
- Air
  - Medevac versus fixed wing
- Ground
  - Infant nasal cannula's
  - Triage tags
  - Safety apparel
  - Pillows
  - BVM's

Board of Pharmacy

- Documentation
  - Signature from authorized practioners
  - Protocols
- Any invasive procedure!



Criminal Background Checks

- Still must conduct VSP Criminal History
  - Free for volunteer agencies
- National Crime Information Center (NCIC)
- Driving record transcript from the individuals state Department of Motor Vehicles (DMV) office
- Any documents required by the Code of Virginia

Agency Policy Development

Designated Emergency Response Agency (DERA) Standards

- Written Local EMS Response plan
- Provide 24-hour coverage of the agency's primary service area
- Conform to local responding interval or must develop one if it does not exist
- Specifies what must be done if agency cannot meet this
- Performance must be documented and reviewed

Agency Policy Development

Permitted Vehicle Operations

- Posses a valid operator or driver's license from his state of residence
- No felony conviction previously mentioned
- Convicted or sentenced as the result of operating an OEMS permitted vehicle of any of the following:
  - Driving under the influence of alcohol or drugs
  - Assigned to any alcohol safety action program, or driver alcohol rehabilitation program
  - Prohibited from operating any OEMS permitted vehicle
- Personnel and/or agencies shall be required to report these situations to OEMS

Agency Policy Development

Agencies must have policies that address driver eligibility, record review and vehicle operation

- Driving education and/or training;
- Safe operation of vehicles;
- Agency driving record review procedures;
- Require immediate notification by personnel regarding convictions (regardless of the state) and/or changes to their license;
- Identify mechanisms regarding agency actions for driver penalties (i.e. probation or suspension of driving privileges)

Agency Policy Development

Drugs and Substance Use

- May not be under the influence of any drugs or intoxicating substances that impairs ability to provide patient care or operate a motor vehicle while on duty or when responding or assisting in the care of a patient.
- EMS agency shall have a drug and substance abuse policy which includes a process for testing for drugs or intoxicating substances.

Agency Policy Development

- OMD must sign and date individuals' privileges to practice
- Agencies must have written policy for EMS personnel to carry **:**
  - epinephrine pens (auto-injectors only)
  - oxygen (POV)

Agency

- EMS agency mutual aid response
  - Agencies providing resources as a result of an EMAC, FEMA, or other out-of-state mutual aid request shall notify OEMS upon commitment of requested resources
- Mutual Aid Interoperability
  - Must comply with the Virginia Interoperability Plan as defined by the Governor's Office of Commonwealth Preparedness

Agency

- No tobacco products
  - cigarettes, cigars, chewing, dipping – none!
- Occupant safety
  - Patient must be secured with all stretcher straps available
- Sexual Harassment
  - includes student's as victims

Agency/OMD

- Scope of practice
  - Only perform procedures, treatments or techniques licensed or certified for
    - 18VAC5-21-29 A.1.
  - Act in accordance with local medical protocols
  - As authorized in the Emergency Medical Services Procedures and Medications Schedule as approved by OEMS
    - State EMS Plan – Board of Health

Medevac

- Complete re-write
  - Personnel
  - Training
  - Equipment
  - Mission types
- Exceptions for Fixed Wing operators

Training Regulations

- Previous Administration Manual is now incorporated into EMS Rules and Regulations
  - EMS Training staff needs to be informed!
- Scope of Practice terminology
- Numerous changes in course notifications
  - Postmarks, dates, etc

Training Regulations

- Documentation
  - Student, instructors, courses, and testing issues
- Course Medical Director responsibilities
- Training site accreditation requirements

EMS Physicians

- Must have training prior to submission for EMS Physician endorsement
- Removes Regional Council endorsement
  - Background and other verification still done at OEMS
- Endorsement period still 5 years
  - Required to attend to “Currents” sessions

Regional Councils

- Directories of localities, hospitals and EMS agencies
  - Removes hospital catchment area and adds "listing"
- Accountability of public funds
  - Independent annual audit by Certified Public Accountant
  - Change of Executive Director – another review by a CPA

Thank You!

We appreciate your time and attention. We are always willing to travel at any organizational meeting or event to conduct an in-depth discussion of current and proposed EMS Regulations

Because…