

**MEDICAL DIRECTION COMMITTEE**  
**Office of Emergency Medical Services**  
**Embassy Suites, 2925 Emerywood Parkway, Richmond, VA 23294**  
**Thursday, July 8, 2021**  
**10:30 AM**

**Members Present:**

George Lindbeck, M.D.  
 Stewart Martin, M.D.  
 Amir Louka M.D.  
 Wendy Wilcoxson, D. O.  
 Tania White, M. D.  
 Asher Brand, M.D.  
 Paul Phillips, M.D.

**Members Absent:**

Scott Weir, M.D.  
 Christopher Turnbull, M.D.  
 John Morgan, M.D.  
 Charles Lane, M.D.  
 Allen Yee, M.D. – Chair  
 E. Reed Smith, M.D.

**Staff:**

Debbie Akers  
 Gary Brown  
 Chad Blosser  
 Ron Passmore  
 Tim Perkins  
 Wanda Street  
 Daniel Linkins  
 Amanda Loreti  
 Chris Vernovai  
 Katie Hodges

**Others:**

Cathy Cockrell  
 Eddie Ferguson  
 R. Jason Ferguson

Topic/Subject	Discussion	Recommendations, Action/Follow-up; Responsible Person
<b>I. Welcome</b>	Dr. Yee could not be here today. Dr. George Lindbeck called the meeting to order at 10:32 a.m.	
<b>II. Introductions</b>	All attendees introduced themselves.	
<b>III. Approval of Agenda</b>	Approval of agenda	<b>Approved by consensus</b>
<b>IV. Approval of Minutes</b>	Approval of minutes from April 8, 2021. The minutes were approved.	<b>Approved by consensus</b>
<b>V. Drug Enforcement Administration (DEA) &amp; Board of Pharmacy (BOP) Compliance Issues – Dr. Lindbeck</b>	No update.  The main thing that we will work on is CSRCs – Controlled Substance Registration Certificates. We encourage EMS agencies to get them if they don't have them. If the CSRCs have expired, we ask that they renew them. There are two types of CSRCs per Ron Passmore. There will be a measured approach to this so that not everyone will be applying for them all at once.	

Topic/Subject	Discussion	Recommendations, Action/Follow-up; Responsible Person
VI. Old Business	<p><b>a. Evidenced Based Guidelines for Blood White Paper Update – Dr. Morgan</b> Dr. Morgan was not present. There is no update on this topic today.</p> <p><b>b. CARES Update – Adam Harrell</b> Adam was not present. No update.</p> <p><b>c. State Certification for Assistant Medical Directors (PA and NPs) – Dr. E. Reed Smith</b> Dr. Reed was not present. No update.</p>	
VII. New Business	<p><b>a. Training and Certification Committee Report – R. Jason Ferguson</b> The TCC met yesterday and had no action items. The committee discussed Virtual Instructor-Led Training (VILT) and Clinicals for EMT.</p>	
VIII. Research Requests	None.	
<b>IX. State OMD Issues – Dr. George Lindbeck</b>		
	<p><b>a. Scope of Practice Changes for critical care decision</b> Dr. Lindbeck showed a slide presentation for billing CMS under Specialty Care Transport (SCT). He explained the qualified billing requirements. The presentation will be sent out today so the committee can review it and provide feedback. This will be on the next MDC agenda as an action item.</p> <p><b>b. Impaired Provider discussion</b> Former OEMS employee, Heather Philips-Green, championed this. It deals with a return to practice model for EMS providers who dealt with mental health and drug use issues and voluntary self-reporting. The return to practice is a one-time opportunity. <b>A motion was made by Asher Brand that the MDC endorse the removal of II. B. from the policy (voluntary self-reporting). All committee members were in favor. None opposed. The motion carries.</b> The committee discussed marijuana use by providers as well as the use of opiates by hospital staff.</p> <p><b>c. Compliance cases and OMD responsibilities</b> Dr. Lindbeck showed another slide presentation. This topic is for discussion and feedback. When should EMS physicians be held responsible under the regulations for problems identified in EMS agency operations that they have responsibility for? What is an acceptable response time from the medical director? The committee members had a lengthy discussion on the cases.</p> <p><b>d. AEMT Challenge by RN/PA/NP</b> Debbie stated that the Office of EMS is getting multiple requests from RN, NP and PAs to become an Advanced EMT rather than an EMT. We are not opposed to it, but we need MDC endorsement. Jason Ferguson explained that a course has been created for nurses who do not have the skills to become a paramedic or AEMT. Debbie stated that a proposal should be written and brought back to next meeting in October.</p>	Attachment A and B

Topic/Subject	Discussion	Recommendations, Action/Follow-up; Responsible Person
	<p><b>e. Colorado Ketamine Bill – Dr. Lindbeck</b> This document is worth reading through and it is very alarming that this is now in state law.</p> <p><b>f. Supplemental care of certified prehospital care providers – Ron Passmore</b> Dr. Jaber asked Ron to ask for more weigh-in on this. Ron gave the committee background information and stated and gave the exemptions that have been requested. There are concerns with them understanding that the services are pre-hospital services.</p> <p><b>Dr. Martin made a motion that MDC endorse the EMS decision to deny the exemptions that were requested. Dr. Brand seconded the motion. All committee members were in favor of the motion. The motion carries.</b></p>	
<b>X. Office of EMS Reports</b>		
	<p><b>a. Division of Accreditation, Certification and Education</b></p> <p><b>Education Program Manager – Chad Blosser</b> The Scholarship program for FY21 ended on June 1, 2021. Distributed 1.397 million dollars for education programs. A Memorandum of Agreement is in process with one of the Regional Councils to efficiently distribute payments. An Institute was held in June in Lynchburg and another will be held in late September in Northern Virginia. There are seven Updates scheduled within the next six months.</p> <p><b>Division Manager – Debbie Akers</b> Debbie gave updates on BLS (3% above National Registry first-attempt) and EMT (71%) pass rates. She also updated everyone on the TR90A and TR999 forms. Provisional certifications stopped being issued on June 30, 2021. There has been an explosion of interest in the Accreditation program in Virginia. This is probably due to the pandemic. Chesterfield Fire and Hanover Fire are two new paramedic programs that have submitted letters of review in the Accreditation program. There are also three other agencies that are interested as well. The Virtual Instructor-Led Training (VILT) is effective today, July 8, 2021.</p> <p><b>b. Director/Asst. Director – Gary Brown/Scott Winston</b> Since Virginia is no longer under a State of Emergency due to COVID-19, virtual meetings can no longer be held by state agencies effective June 30, 2021. The next EMS Advisory Board meeting will be held on Friday, August 6, 2021 here at the Embassy Suites at 10 a.m. Gary also discussed the number of Advisory Board members who are rotating off the Board (19 of the 28 members). The Annual EMS Symposium will be held November 3rd through 7th with less number of classes. The OMD workshop will be held on Thursday, November 4 and there is no registration fee for symposium if this is the only thing you are attending.</p> <p><b>c. Asst. Director – Scott Winston</b> Scott was not present. No update.</p> <p><b>d. Associate Director – Adam Harrell</b></p>	<p><b>Attachment C</b></p> <p><b>Attachment D</b></p> <p><b>Attachment E</b></p>

Topic/Subject	Discussion	Recommendations, Action/Follow-up; Responsible Person
	<p>Adam was not present. No update.</p> <p><b>e. Trauma Services – Adam Harrell</b> Dr. Linbeck reported that Cam Crittenden is still working with OEMS on a contract basis. Tim Erskine’s position has not been filled yet. We are still struggling to schedule trauma site reviews. There is also the transition from ImageTrend to ESO.</p> <p><b>f. Other Office Staff</b> Ron Passmore gave a few Regulation updates such as the bill that allowed EMTs to give COVID vaccines has expired as of July 1, 2021. Flu vaccines cannot be given to minor children by AEMT’s. Medevac committee met last week to review and discuss regulatory changes. Several revisions were made.</p> <p>Tim Perkins stated that the EMS for Children Division is now under the Community Health and Technical Resources (CHaTR) Division. David Edwards could not attend today but wanted Tim to share some information. National Pediatric Readiness of hospital EDs continues. Contact your ED Nurse managers to submit survey to PedsReady.org. The EMSC Committee will meet on July 20 at the Office of EMS from 3 p.m. to 5 p.m. The committee has a new chair, Dr. Patrick McLaughlin. EMSC will offer 40 symposium scholarships. This will cover the symposium registration fee.</p>	
<b>PUBLIC COMMENT</b>	None.	
<b>Quarterly Meeting Dates for 2021 &amp; 2022</b>	October 7, 2021 January 6, 2022	
<b>Adjournment</b>	1:45 p.m.	

Respectfully submitted by:  
Wanda L. Street  
Executive Secretary, Sr.  
Jan. 3, 2022

# Attachment A

Decision Memo – Impaired Provider  
Policy – Mar, 2018



**COMMONWEALTH of VIRGINIA**  
**Department of Health**

**Office of Emergency Medical Services**  
**1041 Technology Park Drive**  
**Glen Allen, VA 23059-4500**

M. Norman Oliver, MD, MA  
State Health Commissioner

Gary R. Brown  
Director

P. Scott Winston  
Assistant Director

1-800-523-6019 (VA only)  
804-888-9100 (Main Office)  
804-888-9120 (Training Office)  
FAX: 804-371-3108

June 8, 2018

**DECISION MEMORANDUM**

**TO:** Gary R. Brown  
Director  
Office of Emergency Medical Services

**THROUGH:** P. Scott Winston  
Assistant Director  
Office of Emergency Medical Services

**THROUGH:** Ronald Passmore  
Manager, Regulation and Compliance  
Office of Emergency Medical Services

**FROM:** S. Heather Phillips, NRP, AEM  
Supervisor, Regulation and Compliance  
Office of Emergency Medical Services

**PURPOSE**

To develop a guideline document for reinstatement of EMS certifications following temporary suspensions in certain cases.

**BACKGROUND**

In follow up to direction provided to Mr. Michael D. Berg (former Manager of the Regulation and Compliance Division) regarding the development of a guideline document based upon guidelines utilized by other Boards and healthcare entities, from Dr. Hughes Melton on September 27, 2017; as a result of a request from Heather D. Darr, also known as Heather Darr Barenklau (HDB) for reinstatement of her EMS certifications.

I reached out to Ms. Tonya James, Discipline Manager of the Virginia Board of Nursing (BON). She referenced the Sanctioning Reference Point (SRP) system, which is also utilized by the Board of Medicine. Currently, the reinstatement process for a licensed practitioner/RN, etc. who voluntarily reported a substance

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June 8, 2018  
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abuse event/issue and accepted a voluntary suspension of license would complete the following for re-instatement:

1. Apply for re-instatement
2. Ensure continuing education requirements were current
3. Provide current background check (within 60 days)
4. Provide proof of successful completion of an Initial Treatment Program
5. Have participated in some type of group recovery program for 6 – 12 months
6. Approval of Medical Director or Sponsor

Based upon the SRP grid results utilized in the initial decision, the BON may require supervision for a specified period of time after reinstatement.

According to a letter authored by Dianne L. Reynolds-Cane, MD and Elizabeth A. Carter, PhD in June of 2011, the Board of Medicine adopted the recommended changes to the SRP system after research consultants completed one of the “most exhaustive statistical studies of sanctioned physicians ever conducted...”. They differ only slightly from the BON as they almost always require a Sponsor and a brief period of supervision after sanctioning.

In addition, I reached out to other states that have a separate Board, to include: Executive Directors from Kentucky and Minnesota. These states also have programs for re-entry back into the EMS healthcare system, but lack specific guidelines. Many variables are considered and a peer panel is convened to review the cases. Some of the factors considered include:

1. Was there a felony associated with drug use?
2. Have felony charges been filed?
3. Previous history of drug-related abuse?
4. Did the provider self-report the issue or were they reported by their employer?
5. Have they successfully completed a treatment program?
6. Do they have Medical Directors support?

A Position Statement was issued by the American Nurses Association (ANA) on January 29, 2010 in support of the “Just Culture Model” and its use in health care to improve patient safety. The model is based upon a belief that as an alternative to a punitive system, this seeks to create an environment that encourages individuals to self-report mistakes, system issues and regulatory violations. The model acknowledges the humans are destined to make mistakes and because of this no system can be designed to produce perfect results. Given that premise, outcomes should be measured and monitored with the goal being error reduction rather than error concealment.

## **JUSTIFICATION**

Based upon the information provided by the BON, the Board of Medicine, and other state initiatives; and based upon the concept of a Just Culture and the sanctioning reviews, a guideline was developed that provides a foundation for balanced accountability and patient safety.

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To further the justification of this request, numerous stakeholders have contacted the Office of Emergency Medical Services in support of a pathway for EMS providers to regain certification after a substance abuse event and sanctioning. Some of the stakeholders include the Virginia Ambulance Association, the Virginia Association of Volunteer Rescue Squads and committees of the state EMS Advisory Board representing Medical Direction, Provider Health & Safety and Workforce Development.

## **RECOMMENDATION**

We are seeking approval from the Director to implement the attached internal administrative policy regarding a process for reinstatement of impaired providers when the requirements set forth are met.

# Attachment B

## Guideline Impaired Provider

## Virginia Office of Emergency Medical Services

### Guideline for Reinstatement of EMS Providers Suspended Because of Impairment

#### I. Purpose

The Virginia Office of Emergency Medical Services (OEMS) recognizes the need to establish guidelines for the reinstatement of EMS certification following enforcement action because of a chemical-dependence impairment.

This guideline exists to provide a consistent process for OEMS staff to utilize when considering a request for reinstatement of EMS certification; to ensure balanced accountability and patient safety; to encourage EMS providers to report the issues and seek treatment; and provide an opportunity for competent EMS providers to regain their EMS certification under certain conditions.

#### II. Requirements

- A. There was no intent to cause direct or in-direct harm to any patient.
- B. Regulant must have voluntarily “self-reported” the issue/event.
- C. Regulant must have successfully completed an adult initial substance abuse treatment program, a minimum of 12 weeks with a final diagnosis of full remission. Program must be supervised by an individual credentialed at the level of Certified Substance Abuse Counselor (CSAC) and be clinically supervised by a Licensed Substance Abuse Treatment Practitioner (LSATP).
- D. Regulant must have participated in some form of group recovery program for a period of not less than 6 months supervised by a mental health professional licensed by the Department of Health Professions.
- E. Regulant must be current in continuing education, or, be able to complete continuing education requirements of EMS certification level prior to expiration &/or re-entry period.
- F. Within 60 days prior to request for re-instatement, the regulant must submit fingerprints and provide personal descriptive information to be forwarded by OEMS through the Central Criminal Records Exchange of the Virginia State Police to the Federal Bureau of Investigation, for obtaining his criminal history record information.
- G. Regulant must provide a copy of a drug screening analysis conducted within 60 days prior to request for re-instatement.
- H. Regulant must have the written approval of the Operational Medical Director (OMD) of the EMS agency they wish to affiliate.
- I. Regulant must not have been convicted of any felony crimes that may be disqualifiers to affiliate with an EMS agency and/or hold EMS certification, pursuant to the *Virginia EMS Regulations*.

- J. If re-instatement is granted, the regulant must complete all requirements of the EMS agency and OMD prior to practicing as an Attendant in Charge (AIC).
- K. If re-instatement is granted, the provider must successfully complete any process established by the EMS agency and OMD to be released to practice (i.e., supervised field preceptorship, patient care protocol review, etc.).

### III. Process

A regulant may request in writing, the one-time re-instatement of their EMS certifications after a minimum of one year has passed since the enforcement action. Regulant shall provide documentation of completion of the requirements set forth in Section II of this guideline to the OEMS. The Operational Medical Director (OMD) for the EMS agency the regulant will affiliate with must review the request and make a recommendation to the state Medical Director. The state Medical Director shall review the request and make a recommendation to the state Health Commissioner. Every effort should be made to resolve any differences of opinion in the recommendation of the EMS agency OMD and state Medical Director before a request is submitted to the Health Commissioner. The recommendation of the Health Commissioner is considered final. In the absence of a decision from the Health Commissioner within thirty days to approve/deny the request, the recommendation of the state Medical Director shall stand. The Regulation & Compliance Manager or the appropriate Supervisor of the Regulation and Compliance Division will notify the regulant in writing by certified letter of the decision.

# Attachment C

## EMSSP Report

# Attachment D

## EMT Pass Rates

# EMT Statistics

## As of 07/05/2021

### Virginia:

**Report Date:** 7/5/2021 2:02:24 PM  
**Report Type:** State Report (VA)  
**Registration Level:** EMT  
**Course Completion Date:** 7/1/2018 to 6/30/2021  
**Training Program:** All

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The results of your report request are as follows:

Attempted The Exam	First Attempt Pass	Cumulative Pass Within 3 Attempts	Cumulative Pass Within 6 Attempts	Failed All 6 Attempts	Eligible For Retest	Did Not Complete Within 2 Years
8398	71% (5963)	80% (6708)	80% (6747)	0% (6)	17% (1405)	3% (241)

### National Registry Statistics:

**Report Date:** 7/5/2021 2:05:21 PM  
**Report Type:** National Report  
**Registration Level:** EMT  
**Course Completion Date:** 7/1/2018 to 6/30/2021  
**Training Program:** All

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The results of your report request are as follows:

Attempted The Exam	First Attempt Pass	Cumulative Pass Within 3 Attempts	Cumulative Pass Within 6 Attempts	Failed All 6 Attempts	Eligible For Retest	Did Not Complete Within 2 Years
228495	68% (156109)	79% (181331)	80% (183064)	0% (259)	16% (37672)	3% (7564)

Individual Instructor Statistics are available on the OEMS webpage at the following link: <https://www.vdh.virginia.gov/emergency-medical-services/education-certification/program-rankings-based-on-16th-percentile-peer-to-peer-benchmarking/>

# Attachment E

## Accredited Program Report

# **Accredited Training Site Directory**

As of June 30, 2021



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**Accredited Paramedic Training Programs in the Commonwealth**

<b>Site Name</b>	<b>Site Number</b>	<b>BLS Accredited</b>	<b># of Alternate Sites</b>	<b>Accreditation Status</b>	<b>Expiration Date</b>
<i>Blue Ridge Community College</i>	79005	Yes	--	CoAEMSP - LOR	
<i>Central Virginia Community College</i>	68006	Yes	--	CoAEMSP – Continuing	CoAEMSP
<i>ECPI University</i>	70017	Yes	--	CoAEMSP – Initial	CoAEMSP
<i>Henrico County Division of Fire</i>	08718	Yes	--	CoAEMSP – LOR	
<i>J. Sargeant Reynolds Community College</i>	08709	No	--	CoAEMSP – Continuing	CoAEMSP
<i>John Tyler Community College</i>	04115	Yes	--	CoAEMSP - Initial	CoAEMSP
<i>Lord Fairfax Community College</i>	06903	Yes	--	CoAEMSP – Continuing	CoAEMSP
<i>Loudoun County Fire &amp; Rescue</i>	10704	Yes	--	CoAEMSP – Continuing	CoAEMSP
<i>Northern Virginia Community College</i>	05906	Yes	--	CoAEMSP – Continuing	CoAEMSP
<i>Patrick Henry Community College</i>	08908	No	--	CoAEMSP – Continuing	CoAEMSP
<i>Piedmont Virginia Community College</i>	54006	Yes	--	CoAEMSP – Continuing	CoAEMSP
<i>Prince William County Dept. of Fire and Rescue</i>	15312	Yes	--	CoAEMSP – Initial	CoAEMSP
<i>Radford University Carilion</i>	77007	Yes	--	CoAEMSP – Continuing	CoAEMSP
<i>Rappahannock Community College</i>	11903	Yes	--	CoAEMSP – Initial	CoAEMSP
<i>Southside Virginia Community College</i>	18507	Yes	--	CoAEMSP – Continuing	CoAEMSP
<i>Southwest Virginia Community College</i>	11709	Yes	1	CoAEMSP – Continuing	CoAEMSP
<i>Stafford County &amp; Associates in Emergency Care</i>	15319	Yes	7	CoAEMSP – Continuing	CoAEMSP
<i>Thomas Nelson Community College</i>	83012	Yes	2	CoAEMSP – LOR	
<i>Tidewater Community College</i>	81016	Yes	--	CoAEMSP – Continuing	CoAEMSP
<i>VCU School of Medicine Paramedic Program</i>	76011	Yes	5	CoAEMSP – Continuing	CoAEMSP

Programs accredited at the Paramedic level may also offer instruction at AEMT, EMT, and EMR, as well as teach continuing education and auxiliary courses.

- Thomas Nelson Community College under Letter of Review to conduct their first cohort class.
- Blue Ridge Community College under Letter of Review to conduct their first cohort class.
- Henrico County Division of Fire under Letter of Review to conduct their first cohort class.
- Chesterfield Fire and EMS are working on submission of their Letter of Review and LSSR.
- Hanover Fire and EMS are working on submission of their Letter of Review and LSSR.

**Accredited AEMT Training Programs in the Commonwealth**

<b>Site Name</b>	<b>Site Number</b>	<b>BLS Accredited</b>	<b># of Alternate Sites</b>	<b>Accreditation Status</b>	<b>Expiration Date</b>
Accomack County Dept. of Public Safety	00121	No	--	State – LOR	December 31, 2021
Augusta County Fire and Rescue	01521	Yes	--	State – LOR	December 31, 2021
Danville Training Center	69009	No	--	State – Full	December 31, 2021
Fauquier County Fire & Rescue – Warrenton	06125	Yes	--	State – LOR	December 31, 2021
Frederick County Fire & Rescue	06906	Yes	--	State – Full	December 31, 2021
Hampton Fire & EMS	83002	No	--	State – Full	December 31, 2021
Hampton Roads Regional EMS Academy (HRREMSA)	74039	Yes	--	State – LOR	December 31, 2012
James City County Fire Rescue	83002	Yes	--	State – Full	December 31, 2021
Newport News Fire Training	70007	Yes	--	State – LOR	December 31, 2021
Norfolk Fire and Rescue	71008	Yes	--	State – Full	December 31, 2021
Paul D. Camp Community College	62003	Yes	--	State – Full	December 31, 2021
Rockingham County Fire and Rescue	16536	Yes	--	State – LOR	December 31, 2021
Southwest Virginia EMS Council	52003	Yes	--	State – Full	December 31, 2021
UVA Prehospital Program	54008	Yes	--	State – Full	December 31, 2021
WVEMS – New River Valley Training Center	75004	No	--	State – Full	December 31, 2021

**Accredited EMT Training Programs in the Commonwealth**

<b>Site Name</b>	<b>Site Number</b>	<b># of Alternate Sites</b>	<b>Accreditation Status</b>	<b>Expiration Date</b>
Albemarle Co Dept of Fire	54013	--	State – Letter of Review	December 31, 2021
Arlington County Fire Training	01305	--	State – Letter of Review	December 31, 2021
Augusta County Fire and Rescue	01521	--	State – Letter of Review	December 31, 2021
City of Virginia Beach Fire and EMS	81004	--	State – Full	December 31, 2021
Chesterfield Fire & EMS	04103	--	State – Full	December 31, 2021
Fairfax County Fire & Rescue Dept.	05918	--	State – Letter of Review	
Gloucester Volunteer Fire & Rescue	07302	--	State – Letter of Review	December 31, 2021
Navy Region Mid-Atlantic Fire EMS	71006	--	State – Full	December 31, 2021
<b>Roanoke Valley Regional Fire/EMS Training</b>	77505	--	State – Letter of Review	December 31, 2021