

**Virginia Department of Health  
Office of Emergency Medical Services**



**Quarterly Report to the  
State EMS Advisory Board**

**February 3, 2023**

# **Executive Management, Administration & Finance**

# **Office of Emergency Medical Services**

## **Report to The**

### **State EMS Advisory Board**

### **February 3, 2023**

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#### **MISSION STATEMENT:**

To reduce death and disability resulting from sudden or serious injury and illness in the Commonwealth through planning and development of a comprehensive, coordinated statewide emergency medical services (EMS) system; and provision of other technical assistance and support to enable the EMS community to provide the highest quality emergency medical care possible to those in need.

#### **I. Executive Management, Administration & Finance**

##### **A) Action Items before the State EMS Advisory for February 3, 2023**

At the time of finishing this report there are no Action Items for the Board to vote on.

##### **B) State/Regional (Hybrid) EMS Council Reports**

The Office of Emergency Medical Services committed to providing updates on the progress of the collaborative partnership and the transition and conversion of applicable Regional EMS Councils that have requested to be a hybrid State/Regional EMS model. The four councils include the following:

- Central Shenandoah EMS Council
- Blue Ridge EMS Council
- Rappahannock EMS Council
- Southwest Virginia EMS Council

Each Council has provided a report that is included in this Quarterly Report to the State EMS Advisory Board.

**C) Item 288 Office of EMS Four-for-Life Budget**  
**FY2023 and FY2024**

	First Year - FY2023	Second Year - FY2024
Emergency Medical Services (40200)	\$49,997,611	\$49,997,611
Financial Assistance for Non Profit Emergency Medical Services Organizations and Localities (40203)	\$33,446,098	\$33,446,098
State Office of Emergency Medical Services (40204)	\$16,551,513	\$16,551,513
Fund Sources:		
Special	\$20,589,681	\$20,589,681
Dedicated Special Revenue	\$29,000,789	\$29,000,789
Federal Trust	\$407,141	\$407,141

Authority: §§ 32.1-111.1 through 32.1-111.16, 32.1-116.1 through 32.1-116.3, and 46.2-694 A 13, Code of Virginia.

A. Out of this appropriation, \$25,000 the first year and \$25,000 the second year from special funds shall be provided to the Department of State Police for administration of criminal history record information for local volunteer fire and rescue squad personnel (pursuant to § 19.2-389 A 11, Code of Virginia).

B. Distributions made under § 46.2-694 A 13 b (iii), Code of Virginia, shall be made only to nonprofit emergency medical services organizations. The Virginia Department of Health shall develop and implement a plan to ensure timely quarterly distributions of \$4.25 for Life funding to the Virginia Association of Volunteer Rescue Squads beginning quarterly in May 2021.

C. Out of this appropriation, \$1,045,375 the first year and \$1,045,375 the second year from the Virginia Rescue Squad Assistance Fund and \$2,052,723 the first year and \$2,052,723 the second year from the special emergency medical services fund shall be provided to the Department of State Police for aviation (med-flight) operations.

D. The State Health Commissioner shall review current funding provided to trauma centers to offset uncompensated care losses, report on feasible long-term financing mechanisms, and examine and identify potential funding sources on the federal, state and local level that may be available to

Virginia's trauma centers to support the system's capacity to provide quality trauma services to Virginia citizens. As sources are identified, the commissioner shall work with any federal and state agencies and the Trauma System Oversight and Management Committee to assist in securing additional funding for the trauma system.

E. Notwithstanding any other provision of law or regulation, the Board of Health shall not modify the geographic or designated service areas of designated regional emergency medical services councils in effect on January 1, 2008 or make such modifications a criterion in approving or renewing applications for such designation or receiving and disbursing state funds.

F. Notwithstanding any other provision of law or regulation, funds from the \$0.25 of the \$4.25 for Life fee shall be provided for the payment of the initial basic level emergency medical services certification examination provided by the National Registry of Emergency Medical Technicians (NREMT). The Board of Health shall determine an allocation methodology upon recommendation by the State EMS Advisory Board to ensure that funds are available for the payment of initial NREMT testing and distributed to those individuals seeking certification as an Emergency Medical Services provider in the Commonwealth of Virginia.

G. Out of this appropriation, \$190,000 the first year and \$190,000 the second year from the Virginia Rescue Squad Assistance Fund shall be provided for national background checks on persons applying to serve as a certified or non-certified provider in a licensed emergency medical services agency. The Office of Emergency Medical Services may transfer funding to the Office of State Police for national background checks as necessary. The Virginia Department of Health shall continue to allow local EMS agencies to submit fingerprint cards for background checks on volunteers applying to be a member of local EMS agencies. The cost of the criminal background shall be paid from funds available to the Office of Emergency Medical Services.

H. The Virginia Department of Health shall make at least one annual distribution from the Trauma Center Fund, established pursuant to § 18.2-270.01, Code of Virginia, to eligible hospitals based on the available funding at the time of distribution.

## **Item 292**

First Year - FY2023    Second Year - FY2024

Health Research, Planning,  
and Coordination (40600)

\$38,397,213    \$23,166,547

A. Supplemental funding for the regional health planning agencies shall be provided from the following sources:

- I. Out of this appropriation, \$60,000 the first year and \$60,000 the second year from the general fund shall be provided to contract with the Virginia Telehealth Network to provide consultation to advisory groups, track implementation and facilitate changes to the Statewide Telehealth Plan.

**D) § 3-1.01 INTERFUND TRANSFERS**

W. On or before June 30 each year, the State Comptroller shall transfer \$12,518,587 the first year and \$12,518,587 the second year to the general fund from the \$2.00 increase in the annual vehicle registration fee from the special emergency medical services fund contained in the Department of Health's Emergency Medical Services Program (40200).

**Department of Medical Assistance Services - Item 308**

First Year - FY2023    Second Year - FY2024

Administrative and Support Services (49900)	\$300,158,198	\$289,288,829
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U. Out of this appropriation, \$875,000 the first year and \$875,000 the second year from the general fund and \$1,625,000 the first year and \$1,625,000 the second year from non-general funds is provided for the Department of Medical Assistance Services to amend the State Plan and any waivers under Title XXI to fund \$2,500,000 annually for three Poison Control centers serving Virginia as part of a Health Services Initiative. The department shall have the authority to promulgate emergency regulations to implement these amendments within 280 days or less from the enactment of this act.

## **E) Budget Amendments**

### **1) HB 1904 Fiscal Impact - Emergency Department Care Management Grants - Chief Patron: Hope**

Item 288 #1h	First Year - FY2023	Second Year - FY2024
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#### **Health and Human Resources**

Department of Health	\$0	\$5,000,000
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#### **Language**

Page 336, line 28, strike "\$49,997,611" and insert "\$54,997,611".

Page 337, after line 27, insert:

"I. Out of this appropriation, \$5,000,000 the second year from the general fund shall support grants for Emergency Department Care Management Grants authorized in § [32.1-372.1](#) of the Code of Virginia."

#### **Explanation**

(This amendment provides \$5.0 million the second year from the general fund to develop a grant program to fund hospital-based care management programs for frequent utilizers of emergency departments set out in House Bill 1904. This is a recommendation of the Joint Commission on Health Care.)

### **2) Provide 500 AEDs to Community Organizations - Chief Patron: Price**

Item 288 #2h	First Year - FY2023	Second Year - FY2024
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#### **Health and Human Resources**

Department of Health		\$637,500
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#### **Language**

Page 336, line 28, strike "\$49,997,611" and insert "\$50,635,111".

#### **Explanation**

((This amendment provides \$637,500 the second year from the general fund for the purchase of 500 Automated External Defibrillators (AEDs) to be given to organizations that consistently host events with 50 or more people on a regular basis. The AEDs would be distributed to the first 500 of such

organizations that demonstrate a financial inability to purchase one on their own. These devices would help save lives in cases of heart incidents during their events.)

### 3) **Patrick County EMS Equipment & Training** - Chief Patron: Williams, W.M.

Item 288 #3h

First Year - FY2023

Second Year - FY2024

#### **Health and Human Resources**

Department of Health

\$750,000

#### **Language**

Page 336, line 28, strike "\$49,997,611" and insert "\$50,747,611".

#### **Explanation**

(This amendment provides \$750,000 the second year from the general fund for Patrick County Fire/EMS for fieldwork and training. The county has not current hospital, emergency room or even urgent care, thus relies on the EMS department for providing adequate triage services until they can transport citizens to neighboring localities. They are largely dependent on their equipment to save lives, however, much of it needs replacement due to age. Funds would be used to upgrade equipment and train employees.)

### 4) **Trauma Center Funding (language only)** - Chief Patron: Sickles

Item 288 #4h

#### **Health and Human Resources**

Department of Health

#### **Language**

Page 336, strike lines 51 through 55.

Page 337, strike lines 1 through 2.

Page 338. after line 27, insert:

"I. Notwithstanding any other provision of law or regulation, \$10,000,000 from the special emergency medical services fund the second year shall be provided to the Trauma Center Fund."

#### **Explanation**

(This amendment eliminates language requiring the State Health Commissioner to review current funding provided to trauma centers and provides \$10.0 million from the special emergency medical services fund for the Trauma Center Fund to stabilize funding to the trauma centers in Virginia. A



companion amendment in Part 3 adds language reducing the transfer of funding to the general fund from the special emergency medical services fund which is derived from a portion of the \$2.00 increase in the annual vehicle registrations. This frees up funding for the Trauma Center Fund to be distributed to Virginia trauma centers.)

## 5) **CPR Training Grant Program** - Chief Patron: McQuinn

Item 288 #5h	First Year - FY2023	Second Year - FY2024
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### **Health and Human Resources**

Department of Health	\$0	\$750,000
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### **Language**

Page 336, line 28, strike "\$49,997,611" and insert "\$50,747,611".

### **Explanation**

(This amendment provides 750,000 the second year from the general fund for a Department of Health grant program to Emergency Medical Systems and non-profit organizations to increase community access to no cost Cardiopulmonary Resuscitation (CPR) training across the Commonwealth.)

## 6) **Reduce Transfer from Special EMS Fund for the Trauma Center Fund** **(language only)** - Chief Patron: Sickles

Item 3-1.01 #1h
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### **Transfers**

Interfund Transfers

### **Language**

Page 645, line 3, strike the second "\$12,518,587" and insert "\$2,518,587".

### **Explanation**

(This amendment reduces the transfer to the general fund from the \$2.00 increase in the annual vehicle registration fee from the special emergency medical services fund contained in the Department of Health's Emergency Medical Services Program by \$10.0 million the second year. A companion amendment in Item 288 provides this funding for the Trauma Center Fund.)

7) **HB 2327 - Include E-911 Dispatchers in LEOS** - Chief Patron: Cherry

Item 500 #4h

First Year - FY2023

**Independent Agencies**

Virginia Retirement System

\$124,000

**Language**

Page 600, line 14, strike "\$53,480,079" and insert "\$53,604,079".

**Explanation**

(This amendment provides \$124,000 from the nongeneral fund in fiscal year 2023 to fund the administrative impact of House Bill 2327 which allows local governments to provide enhanced retirement benefits for hazardous duty service to full-time salaried 911 dispatchers. The funding amount included in the request is a placeholder until a detailed estimate is finalized.)

8) **HB 2328 - Include State E-911 Dispatchers in VaLORS** - Chief Patron: Cherry

Item 500 #5h

First Year - FY2023

**Independent Agencies**

Virginia Retirement System

\$124,000

**Language**

Page 600, line 14, strike "\$53,480,079" and insert "\$53,604,079".

**Explanation**

(This amendment provides \$124,000 from the nongeneral fund in fiscal year 2023 to fund the administrative impact of House Bill 2328 which adds E-911 employees that work for state agencies into the VaLORS hazardous duty service retirement system. In addition to the administrative cost there will be an increased from the general fund cost for the benefit changes. The funding amount for the benefit change is being finalized.)

9) **Physician Orders for Life-Sustaining Treatment (POLST) Program** - Chief Patron: Kory

Item 295 #11h

First Year - FY2023

Second Year - FY2024

**Health and Human Resources**

Department of Health

\$0

\$100,000

## **Language**

Page 345, line 41, strike "\$25,015,423" and insert "\$25,115,423".

Page 350, after line 19, insert:

"Z. Out of this appropriation, \$100,000 from the general fund the second year shall be provided to the Virginia Physician Orders for Life-Sustaining Treatment (POST) Collaborative Program for the design and development of pilot programs in communities across Virginia."

## **Explanation**

(This amendment adds \$100,000 from the general fund the second year for the Virginia Physician Orders for Life-Sustaining Treatment Collaborative Program for the design and development of additional pilot programs in communities across Virginia, Physician Orders for Life Sustaining Treatment (POLST) is a medical order that aims to enable seriously ill patients to designate the treatments they want and to ensure that those preferences are honored by medical professionals. POLST Collaboratives are generally a part of the National POLST Paradigm and are intended to educate patients, families and health care professionals throughout a state about the POLST. Currently, the Virginia POST Collaborative is made up of representatives from the existing pilot programs and representatives from the Medical Society of Virginia, the Virginia Department of Health, the Virginia Hospital and Healthcare Association, and the Virginia State Bar.)

- 10) **Emergency Department Care Management Grants** - Chief Patron:  
Favola

Item 288 #1s

## **Health and Human Resources**

Department of Health

### **Language**

Page 336, line 28, strike "\$49,997,611" and insert "\$54,997,611".

Page 337, after line 27, insert:

"I. Out of this appropriation, \$5,000,000 the second year from the general fund shall support grants for Emergency Department Care Management Grants authorized in § [32.1-372](#) et seq. of the Code of Virginia."

## **Explanation**

(This amendment provides \$5.0 million the second year from the general fund to develop a grant program to fund hospital-based care management programs for frequent utilizers of emergency departments. This is a recommendation of the Joint Commission on Health Care.)

11) **Patrick County Fire and EMS - Chief Patron: Stanley**

Item 288 #2s	First Year - FY2023	Second Year - FY2024
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**Health and Human Resources**

Department of Health	\$0	\$750,000
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**Language**

Page 336, line 28, strike "\$49,997,611" and insert "\$50,747,611".

Page 337, after line 27, insert:

"Out of this appropriation, \$750,000 the second year from the general fund shall be provided to Patrick County to upgrade emergency medical services capabilities to better serve residents in emergency situations."

**Explanation**

(This amendment provides \$750,000 the second year from the general fund to Patrick County to upgrade Emergency Medical Services' ability to train employees and stabilize citizens in moments of a healthcare emergency during ambulance transit.)

12) **SB 827: Grant Fund Program for Safe Hospital Emergency Rooms -**  
Chief Patron: Favola

Item 293 #3s	First Year - FY2023	Second Year - FY2024
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**Health and Human Resources**

Department of Health	\$0	\$5,000,000
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**Language**

Page 341, line 36, strike "\$164,139,331" and insert "\$169,139,331".

Page 342, after line 31, insert:

"H. Out of this appropriation, \$5,000,000 the second year from the general fund shall be provided for a grant fund for hospital and hospital systems for planning and implementation activities that will create a safe environment for patients, staff and visitors in Emergency Departments."

**Explanation**

(This amendment provides \$5.0 million the second year from the general fund to create a grant program for hospitals and hospital systems to fund planning and implementation activities that will

create a safe environment for patients, staff and visitors in Emergency Departments pursuant to Senate Bill 827.)

## **F) EMS Systems Funding – Rescue Squad Assistance Fund, Return-to-Locality Fund, Other Grant Opportunities**

- Personnel Update

We are happy to announce that Mr. Michael D. Berg, MPA, NRP has been selected as the new manager for this division. Michael has extensive experience in EMS as a provider, mentor, instructor, and leader at the local, state, and national levels. We look forward to his leadership and innovations moving forward!

- Return to Localities (\$4-for-Life)

Purpose of the Fund:

As identified in the *Code of Virginia* § 46.2-694

(<https://law.lis.virginia.gov/vacode/title46.2/chapter6/section46.2-694/>),

*e. Twenty-six percent shall be returned by the Comptroller to the locality wherein such vehicle is registered, to provide funding for training of volunteer or salaried emergency medical services personnel of nonprofit emergency medical services agencies that hold a valid license issued by the Commissioner of Health and for the purchase of necessary equipment and supplies for use in such locality for emergency medical services provided by nonprofit emergency medical services agencies that hold a valid license issued by the Commissioner of Health.*

Such funds shall be in addition to any local appropriations and local governing bodies shall not use these funds to supplant local funds.

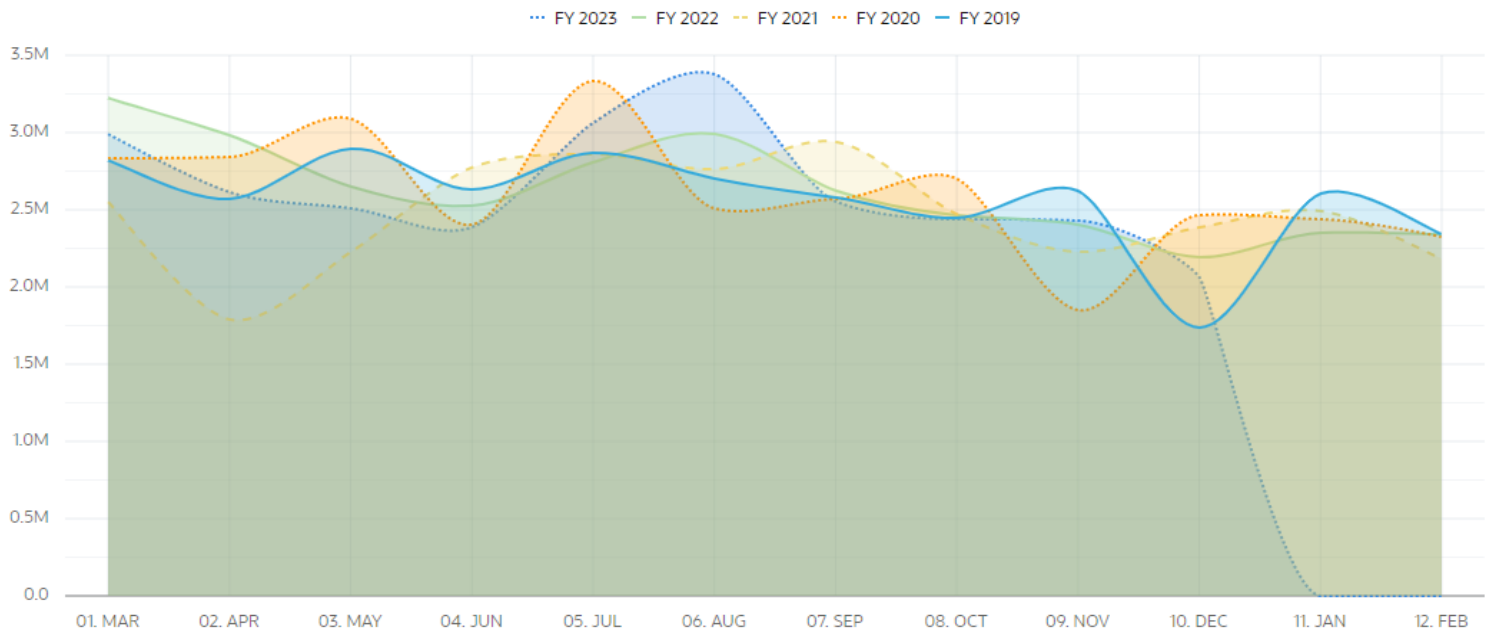
FY22 Annual Reports: 315 of 133 jurisdictions reporting (23% reporting) (01/12/2023)

FY21 Annual Reports: 95 of 133 jurisdictions reporting (68% reporting) (01/12/2023)

FY20 Annual Reports: 116 of 133 jurisdictions reporting (86% reporting) (01/12/2023)

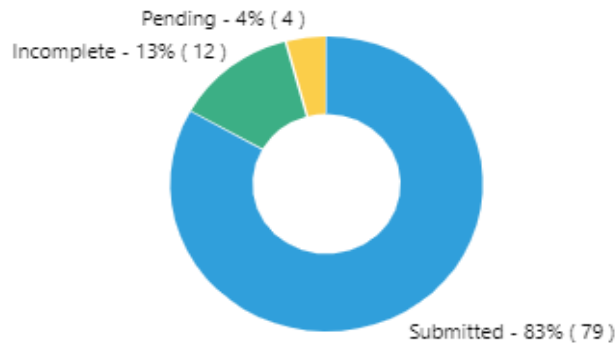
Staff was able to identify 10 localities who had not submitted reports for three years. They have all been individually contacted and are in the process of updating their information in order to submit their annual reports and receive their due monies.

Vehicle Registrations



- Financial Assistance for Emergency Medical Services (FAEMS) Grant Program, known as the Rescue Squad Assistance Fund (RSAF)

The Rescue Squad Assistance Fund (RSAF) is designed to establish, expand, or enhance emergency medical services (EMS) throughout the Commonwealth of Virginia by providing matching grants to assist eligible agencies with purchasing equipment, supplies, and training. Applicants submit applications through an online application and grants management platform called the EMS Grant Information Funding Tool (E-GIFT), which is housed within the statewide EMS Portal. The applications are first reviewed by a panel of technical reviewers – regional EMS councils, field investigators, subject-matter experts, and the Transportation Committee – then the Financial Assistance Review Committee (FARC), which makes final funding recommendations to the Commissioner of Health. RSAF is divided into two grant cycles: Spring and Fall. Awards from each cycle are announced on July 1 and January 1 respectively.



This quarterly report reflects data from the Fall 2022 RSAF cycle. The application period for the Fall 2022 RSAF cycle closed on September 15, 2022. The Office of EMS (OEMS) received 79 applications for 174 items totaling \$13,898,164.66 in funding which can be broken down to \$8,783,268.64 in state and \$5,114,896.02 in local matches.

- 8 Non-EMS Agencies
- 71 EMS Agencies

Incomplete applications: 8 agency, 4 non-agency

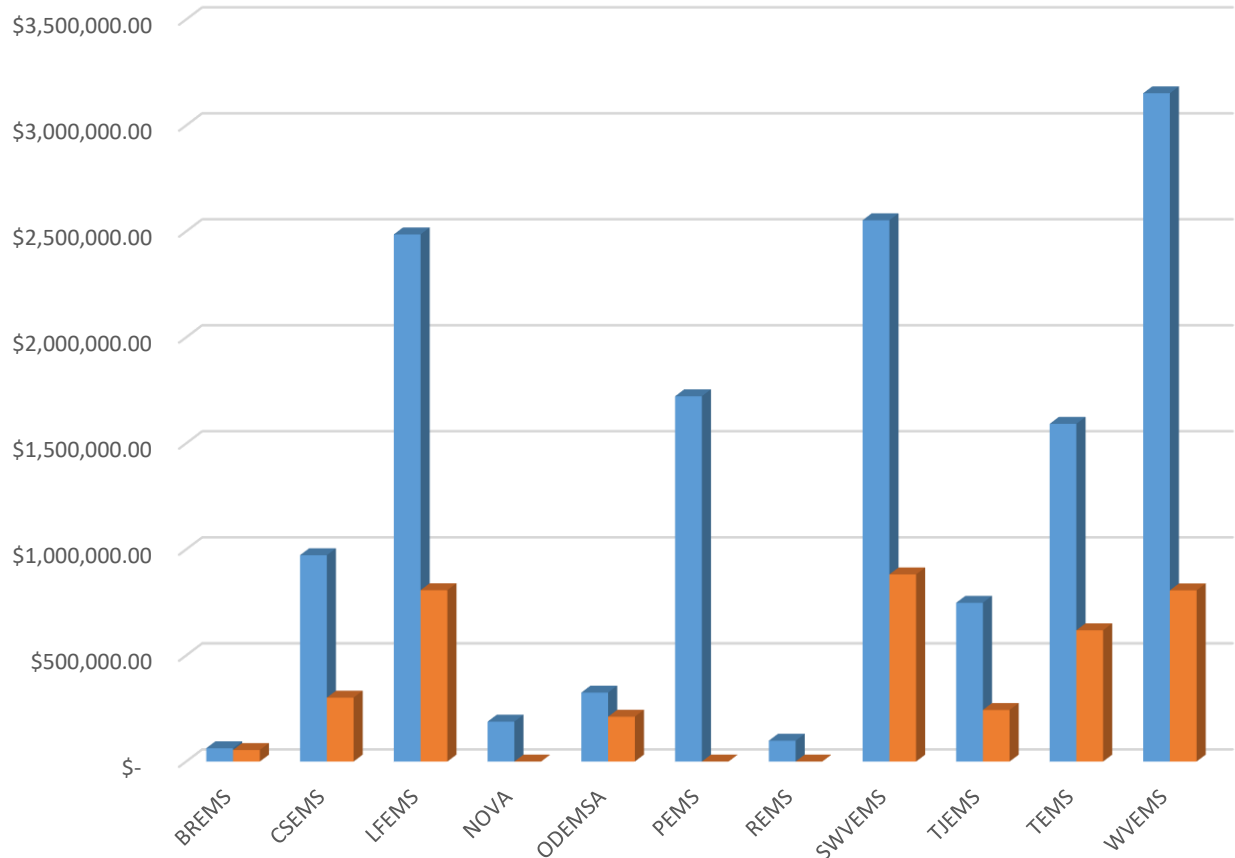
Pending applications (missing signatures): 3 agency, 1 non-agency

The number of applications decreased by approximately 13 percent compared to the Spring 2022 Cycle of RSAF. OEMS received applications from each of Virginia's 11 EMS Region as shown in Figure 1. The total funding requests/award amounts can be broken down by region as follows:

Regional Council	Requested Amount	Award Amount
• Blue Ridge:	\$62,575.19	\$54,162
• Central Shenandoah:	\$972,567.81	\$310.125
• Lord Fairfax:	\$2,485,805.77	\$807,712.99
• Northern Virginia:	\$187,976.56	\$0
• Old Dominion:	\$324,953.95	\$211,397.81
• Peninsulas:	\$1,721,968.36	\$0
• Rappahannock:	\$98,022.39	\$0
• Southwest Virginia:	\$2,552,268.45	\$881,984.45

- Thomas Jefferson: \$748,390.94 \$242,985.76
- Tidewater: \$1,591,992.60 \$618,827.80
- Western Virginia \$3,151,642.64 \$807,165.75

Figure 1: Amount Requested vs. Award Amount, Fall 2022





- Additional Grant Opportunities

U.S. DEPARTMENT OF HOMELAND SECURITY

Center for Prevention Programs and Partnerships

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### Grant Forecast

Today, the U.S. Department of Homeland Security's (DHS) Center for Prevention Programs and Partnerships (CP3) released a forecasted funding opportunity for the Fiscal Year (FY) 2023 Targeted Violence and Terrorism Prevention (TVTP) Grant Program. Applicants should use this forecast and application guidance to begin to register/maintain their accounts with the required systems, find project partners, and draft their applications now.

This forecast identifies:

- Anticipated deadlines
- Priorities
- Objectives
- Project types
- Required application contents and templates
- Eligibility, scoring, and selection criteria
- Background research
- Other resources that applicants need to prepare their applications

### Key Details

Funds available:	\$20 million
Anticipated Grants.gov Submission Deadline:	April 25, 2023
Anticipated NOFO release:	Early March 2023
Anticipated Award Announcement:	September 2023
Eligible Applicants:	Nonprofits; Universities; State, Local Tribal, and Territorial Government Agencies

### Forecast and Other Resources:

- The forecast can be found at: <https://www.grants.gov/web/grants/view-opportunity.html?oppId=345347>

- Download the **FY23 Application Guidance** from the “Related Documents” Tab
- Helpful resources for interested applicants can be found here: <https://www.dhs.gov/targeted-violence-and-terrorism-prevention-grant-program-resources>
- Examples of previously funded projects can be found here: [www.dhs.gov/tvtpgrants](http://www.dhs.gov/tvtpgrants)

### **Upcoming Webinars**

**Register Here:** [FY23 TVTP Grant Program Forecast Webinar](#)

The Center for Prevention Programs and Partnerships will be hosting three TVTP forecast webinars for potential applicants to learn about the grant program and CP3's mission. The presentation will cover a general overview of the program, the types of projects funded, resources that applicants can leverage to complete their applications, and an opportunity to ask questions. Each presentation will cover the same material; please register for the date that works best for your schedule.

Dates/Times: Thursday, January 19, 2023 @ 2:00 pm EST  
 Friday, January 27, 2023 @ 2:00 pm EST  
 Tuesday, January 31, 2023 @ 2:00 pm EST

### **For More Information**

Please contact the CP3 grants team at [TerrorismPrevention@hq.dhs.gov](mailto:TerrorismPrevention@hq.dhs.gov) with any questions. If needed, there is availability to schedule phone/video meetings. Organizations that represent groups of eligible applicants can also request additional webinars, subject to availability.

### **Additional Activities**

Staff conducted a RSAF workshop on January 24, 2023, at the Southwest Virginia Higher Education Center in Abingdon, Virginia.

- Testimonials

*“The members of Haysi Rescue Squad would like to express their appreciation to the Office of EMS. Without the Rescue Squad Assistance Funding grants, we would not have been able to stay open. The grants provided by the EMS office have made it possible for us to have all the equipment we need such as defibrillators, radios, ambulances, Lucas, heart monitors, etc. Therefore, we would like to say thank you for all the help over the years and let you know we sincerely appreciate all the help you have given our squad.”*

*Terry Bartley/Captain*

## **G) OEMS Patient Care Informatics Team**

The Office of Emergency Medical Services is currently in the process of transitioning to a new data management system for all pre-hospital and trauma registry data. During this transition, data projects related to pre-hospital EMS data, opioid usage and Naloxone administration, and trauma incidents are limited. This data will be included in the quarterly report once the transition has been completed. Thank you for your understanding and patience during this transition.

### **Ad Hoc Reports**

The OEMS Epidemiology Team received eight data requests in the fourth quarter of 2022. Four specific requests are discussed below.

- A request was made for the number of traumatic brain injuries reported to the Virginia Statewide Trauma Registry (VSTR) between October and November 2022. During this timeframe, 1,852 brain injury incidents were documented in VSTR among patients who did not expire from their injuries.
- A request was made for the number of ketamine administrations reported by Virginia EMS providers between January 2019 and September 2022. During this timeframe, 15,490 ketamine administrations were reported for 7,946 patients.
  - A total of 3,957 ketamine doses were administered for 1,685 patients during 2019.
  - A total of 5,379 ketamine doses were administered for 2,504 patients during 2020.
  - A total of 4,123 ketamine doses were administered for 2,347 patients during 2021.

- A total of 2,031 ketamine doses were administered for 1,410 patients between January and September 2022.
- A request was made for pediatric ambulance transport data between July 2021 and June 2022. During this timeframe, 32,828 patients younger than 18 years of age had a type of service requested equal to “911 Response (Scene)” and an incident disposition of “Patient Treated, Transported by this EMS Unit.” Of those, 32,126 were transported to a hospital or freestanding emergency department in Virginia.
- A request was made for the number of EMS patients with a 911 response transported to healthcare facilities in the Northern Virginia EMS Council Region between July 2021 and June 2022, by facility. During this timeframe, 116,173 patients were transported to northern Virginia hospitals. The number of transports by hospital can be seen in Table 1.

Table 1. Number of EMS Patients with a 911 Response Transported to Healthcare Facilities in the Northern Virginia EMS Council Region, July 2021 – June 2022, Virginia

Healthcare Facility Name	Number of Transports
Fort Belvoir Community Hospital	422
HCA Reston Hospital Center	9,660
HCA StoneSprings Hospital Center	2,039
Inova Alexandria Hospital	11,773
Inova Emergency Care Center - Fairfax	901
Inova Emergency Care Center - Leesburg	2,266
Inova Emergency Care Center - Reston/Herndon	168
Inova Fair Oaks Hospital	8,494
Inova Fairfax Hospital	29,831
Inova HealthPlex - Ashburn	989
Inova HealthPlex - Franconia/Springfield	1,874
Inova Healthplex - Lorton	1,198
Inova Loudoun Hospital	8,588

Inova Mount Vernon Hospital	6,738
Kaiser Permanente - Tysons Corner - Advanced Urgent Care	31
Kaiser Permanente - Woodbridge - Advanced Urgent Care	8
Novant Health UVA Haymarket Medical Center	206
Novant Health UVA Prince William Medical Center	2,199
Sentara Northern Virginia Medical Center	12,390
Tysons Emergency	115
UVA Haymarket Medical Center	7
UVA Prince William Medical Center	1,448
Virginia Hospital Center	14,828
<b>Total</b>	<b>116,173</b>

## Meeting Attendance and Training Participation

During the fourth quarter of 2022, the OEMS Epidemiology Program Manager and OEMS Epidemiologist Senior participated in several meetings and training opportunities, including:

- the 2022 Virginia EMS Symposium,
- VDH Data Learning Collective meetings,
- Stroke Registry meetings,
- OEMS-Qlarion-ESO working sessions,
- Microsoft migration trainings,
- ESO Trauma Registry Report Writer training sessions,
- a Virginia Stroke Systems Taskforce meeting,
- VDH Data Release Guidelines team meetings,
- VDH Epidemiology Advisory Committee meetings,

- a Gun Injury and Violence Advisory Board And Collaborative Network (GIVEBACK) meeting,
- Tableau Analytics User Group meetings,
- Council for Public Health Informatics Advisory Council meetings,
- EMS Advisory Board committee meetings,
- OEMS-Biospatial meetings,
- an Overdose Surveillance and Prevention Workgroup meeting,
- a VDH All-Epidemiology meeting,
- VDH Coffee Chats,
- DataCamp training sessions on SQL and Tableau, and
- VDH Tableau and Excel study groups.

- **Support**

For the 4<sup>th</sup> quarter of 2022, the Informatics team responded to 150+ support tickets under ZenDesk from the EMS agencies & facilities. OEMS support has worked on exporting Agencies DEM files from ImageTrend.

Tickets which were responded by the OEMS support from the agencies/facilities with different issue types are listed below:

- Tickets on ESO onboarding
- Tickets on Data Quality reports
- Tickets on Access to ESO for agency data quality and submissions
- Tickets on submissions and failed records
- Tickets on validation errors
- Access to Hospital Hub
- Access to Patient Tracker
- Issues with Logins/adding facilities under user accounts
- Access to Elite Historical site for old runs

- Missing runs under repository
- Follow up on the tickets submitted to ESO/ImageTrend support for issues related to the EMS agencies and facilities

Daily tasks consisted of responding to the support Tickets under ZenDesk and answering support phone calls from the agencies.

- **Virginia Elite System – Historical**

The Informatics team continues to provide access to the historical ImageTrend Elite site when EMS agencies need to retrieve older EMS run sheets. On a positive note, the transition of the historical records and their corresponding PDFs was completed towards the end of the quarter. The process has now moved into the next phase where ImageTrend, ESO, OEMS, and other consulting groups will begin the task of reviewing the migrated data. Updates around this process will be covered in future reports.

- **ImageTrend Elite system**

Since the transition to ESO in 2021, an ImageTrend system has been provided through the Western Region for use by Virginia EMS agencies. Agencies using this system were ones that were previously using the OEMS provided ImageTrend system prior to the ESO transition and have selected to continue using this EMS software platform.

The basic stats for the utilization of this system for the quarter was:

Number of agencies documenting one or more records	52
Records submitted under this Elite system	14,875
Percentage of records submitted for the 4th quarter from this Elite system (Percentage is based on total records submitted 4th quarter)	3.42%
Number of agencies that submitted less than 100 records	27
Number of agencies that submitted between 100 to 999 records	23
Number of agencies that submitted 1000 records or more	2
Number of documented patient contact records	13,616
Number of documented non-patient contact records	1,259

Please note that the above data is based on the information provided by the EMS agencies.

- **Virginia EMS (ESO) Data Repository**

For this quarter, the Informatics team has worked with ESO and new agencies to ensure agencies are onboarded to the ESO system in a timely manner. During this time, 12 new agencies were onboarded to with ESO. ESO works with all new agencies to ensure personnel are trained and the system is set up to meet their needs. The Informatics team works with ESO to ensure all Virginia requirements are put into place and to ensure demographics (DEM) data is collected and submitted to both the Virginia EMS data repository and to the National Emergency Medical Services Information System (NEMSIS).

In regard to general support items, the team consistently collaborates with ESO on support when and where needed. ESO is now providing a list of all support-related items to the Informatics group for review and evaluation via a dashboard. As this is a new process, it is still evolving but the goal of this is to help ensure EMS agencies get issues resolved as quickly as possible

- **EMS Data Submission and Data Quality**

As was covered the in the last quarterly report, issues were discovered when EMS agencies began reviewing the data quality reports published in the 2nd quarter. In this quarter, both ESO and OEMS have been actively working to address those issues. As of this report, ESO feels that all of the issues have been resolved. Working with ESO, we will begin publishing reports starting in January of 2023.

As was our intention before, these reports will be provided with the intent to provide agencies with data quality feedback so they could begin reviewing issues. We will be working with all agencies that have data quality issues and we are committed to working both EMS agencies and all EMS software vendors with customers in Virginia to ensure data quality standard can be met. Part of this will be to utilize our relationship with the EMS software vendors. OEMS will begin to review data quality by vendor for the sole purpose of helping those vendors address data quality issues they may not be aware of. As before, since this process is new and we want all parties to have sufficient time to become familiar with the reports and review processes, data quality standards requirements are on hold.

There is one item that we feel we can make immediate progress on. That is the number of licensed agencies that continue to show as “Failed to Report” on the data quality report. Typically, this number averages around 80 agencies per month. Since all EMS agencies are required to report data to the EMS data repository we want to see if we can streamline this process. So, we will be developing a process where the EMS agency superuser can send a single email to OEMS support. Within this email, the superuser only has to identify their agency and state they have no runs to report for the month that just ended. This way, the EMS agency does not have to log into a system they hardly use or worry about user account credentials expiring.

For the quarter, the repository received 438,182 records averaging out to approximately 146,000 records per month. 65% or 284,820 of the total records received for the quarter were related to patient encounters. All data is based on the dates and the dispositions reported by the EMS agencies.



- **Trauma Registry/Biospatial**

The 2023 data dictionary was released (Dec 1<sup>st</sup>, 2022) and was sent to all the contacts for the facilities in Virginia. A copy of the document was also sent to ESO to get the development work completed for implementation by Jan 1<sup>st</sup>, 2023. Implementation was rescinded the last week of Dec since we haven't been able to get some answers about trauma centers software capabilities. We are now aiming to implement by Q2 2023. The trauma lead within the team will be working with ESO, trauma staff from the facilities in Virginia, and OEMS colleagues to update issues discovered after reviewing the dictionary in depth. This can be anything from punctuation to logical definitions and data elements within the document. We received great feedback with our initial release. All updates completed will be documented in the change log. We also continue to monitor data submissions monthly and contact facilities in arrears. Data submission reminders are sent out monthly to the non-trauma facilities and quarterly to the trauma centers. This is aligned with the submission requirements between the designated and non-designated facilities.

Training for ESO registry anywhere has been completed and the videos are available to anyone wanting to gain more knowledge producing reports. Registry anywhere is the reporting feature (report writer) for Gen6 records. The videos are posted on the homepage of Gen6. We were also given admin access to report writer to edit users as needed. This will prove to be helpful in the future when needed to avoid submitting a ticket to ESO. Besides daily routine work, the trauma lead continues to attend HDE meetings and stroke meetings which continue to make lead way. The stroke data mode and data dictionary are nearing the completion stages. Most facilities have completed the necessary paperwork to join the HDE network.

ODMAP is now up and running for all the agencies in Virginia. OEMS submits all overdose runs from agencies to ODMAP. It is something that we are still transitioning to, but we are learning the in and outs of the system. Biospatial submits this information from all the data they receive from OEMS. Trauma data is now being sent to Biospatial. We will be following up on updates for when that will be available in the system during our monthly meeting. Symposium was a success, and we did receive a lot of interest in the Biospatial platform from agencies in attendance.

## **H) Sequoia Project Annual Meeting**

On December 14, the Virginia Office of Emergency Medical Services' Associate Director Adam Harrell presented at The Sequoia Projects' national annual meeting in Washington, D.C. The Sequoia Project is an independent, trusted advocate for nationwide health information exchange. The Sequoia Project, through their initiatives and engagement with government and industry, identify the barriers to interoperability and pioneer processes to make health information exchange work on a national level. They are a neutral body, inclusive of diverse participants, which allows them to create practical solutions to data exchange problems. As a nonprofit operating in the public interest, their governance process ensures transparent oversight of this work.

During the annual meeting, Adam Harrell presented on two topics with other panel experts, including Mike Sarkissian with the VDH's Office of Information Management. The first presentation focused on

Trusted Exchange Framework and Common Agreement and public health. This session addressed the need to support exchange for public health purposes. Panel experts highlighted specific challenges facing public health data sharing and plans to expand interoperability. The second session focused on interoperability, emergency readiness and lessons learned from the pandemic. This session covered a new public health interoperability policy roadmap for adoption by cities, counties and states.

To learn more about The Sequoia Project, visit: <https://sequoiaproject.org/>.

## **I) OEMS Employees Complete Commonwealth Management Institute**

The Virginia Office of EMS' Associate Director Adam Harrell and Public Relations Coordinator Marian Hunter recently participated in and graduated from a weeklong training series that is part of VCU's Performance Management Group (PMG) Commonwealth Management Institute (CMI). PMG offers an integrated series of professional development programs and is a valued training for Virginia state government managers. CMI is about affecting positive change within yourself, others and your state agency. It promotes the exchange of information, the development of creative ideas and the cooperation and future collaboration among program participants. Participants must be nominated by Agency level leadership and accepted into this highly competitive program. Learn more at: <https://pmg.vcu.edu/professional-development/cmi/>.

# EMS on the National Scene

## **II. EMS On the National Scene**

### **National Association of State EMS Officials (NASEMSO)**

*Note: The Virginia Office of EMS is an active participant in the NASEMSO and has leadership roles on the Board of Directors and in each NASEMSO Council. The National Association of State EMS Officials is the lead national organization for EMS, a respected voice for national EMS policy with comprehensive concern and commitment for the development of effective, integrated, community-based, universal and consistent EMS systems. Its members are the leaders of their state and territory EMS systems.*

#### **A) National EMS Information System (NEMSIS) Liaison**

NASEMSO introduced the newest full-time member of their team, Randall Eimerman. On January 3, 2023, he began serving as the NEMSIS Liaison. In this capacity, he will provide support to the NASEMSO Data Managers Council and interface with the NEMSIS Technical Assistance Center (TAC) on issues of national significance as well as state-specific challenges. The creation of this position signifies a new generation of the National Highway Traffic Safety Administration (NHTSA) Office of EMS, the University of Utah (NEMSIS TAC) and NASEMSO working together to support the state EMS offices and collaborating to ensure a collective national voice about EMS data-related issues.

Randall was the State EMS Data Manager during the past five years working in the state of Indiana before transitioning to the Commonwealth of Kentucky. He has been a Paramedic in Wisconsin, Illinois, and Indiana. Randall has an Associate's Degree from Lincoln College and completed data manager training for the National Fire Incident Reporting System (NFIRS). Randall worked with the NEMSIS TAC for five years in his state EMS data manager capacity and has had the opportunity to work with many ambulance services, hospital organizations, and patient registries. He looks forward to continuing his efforts on a national level.

Randall's email is [randall@nasemso.org](mailto:randall@nasemso.org). He may be reached by phone via 317-767-9838.

## **B) NASEMSO Responds to U.S. Transportation Secretary Pet Buttigieg Regarding National Roadway Safety Strategy**

The National Association of State Emergency Medical Services Officials (NASEMSO) members are the state agency staff that have regulatory and system development legislative mandates focused on ensuring and improving Post-Crash Care in the interest of protecting the public. State EMS offices in all 50 states, the District of Columbia and five territories regulate ambulance services and other local emergency medical services agencies that respond to 911 calls, and license EMS personnel such as paramedics and emergency medical technicians. Equally importantly, state EMS officials are the engineers and stewards of statewide systems of care for time sensitive emergencies such as trauma caused by transportation incidents.

NASEMSO members are diligent in our commitment to the Post-Crash Care element of the National Roadway Safety Strategy. Our conviction and evidence-based premise is that until prevention is 100% successful, state EMS and trauma care systems represent the last chance the bicyclist, pedestrian, or other roadway incident victim has for survival.

We applaud the Secretary's adoption of the Safe System Approach, especially given the evidence of its efficacy in other countries. Post-Crash Care, one of five core elements in the Safe System Approach, is the safety net and last opportunity for vulnerable humans and the redundancy called for in the Safe System Approach. Many system design factors and numerous rapid—and correct—human decisions have to be made in the Post-Crash Care phase to prevent moderate injuries from becoming serious injuries, to prevent serious injuries from becoming permanent disabilities, and prevent severely injured victims of roadway related incidents from becoming fatalities. By the time an incident is detected and 911 is activated, it's too late to talk about the cause of the crash, but not too late to prevent the cause of death.

We look forward to continuing our ongoing collaboration with the National Highway Traffic Safety Administration and the Federal Highway Administration to improve Post-Crash Care at the incident level and systemwide while serving as the collective voice of the nation's EMS systems.



**Dia Gainor, MPA, QAS**

Executive Director

National Association of State EMS Officials

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[dia@nasemso.org](mailto:dia@nasemso.org) | [www.nasemso.org](http://www.nasemso.org) | (208) 861-4841

**C) Note: You can read the complete National Roadway Safety Strategy: [here](#).**

**A brief summary of the Post-Crash Care section of the National Roadway Safety Strategy follows:**

## **Post-Crash Care**

**Enhance the survivability of crashes through expedient access to emergency medical care, while creating a safe working environment for vital first responders and preventing secondary crashes through robust traffic incident management practices.**

Our ability to save lives does not end when a crash occurs. Appropriate medical care for people injured in a crash to prevent their injuries from becoming fatal is critical.

The timely arrival of emergency responders and well-trained Emergency Medical Services (EMS) clinicians is a major factor ensuring an injured person receives the medical care they need to survive a crash. This is especially critical in rural and Tribal communities, where response times are longer and EMS resources more limited.

Through the NRSS, the Department is committed to supporting activities that improve post-crash care. Managing the scene of a crash and providing a safe environment for first responders and passing travelers are also critical elements of delivering effective post-crash care.

## **Key Departmental Actions to Enable Safer Post-Crash Care**

### **5.1 Action Summary:**

**Develop and implement an outreach plan for EMS personnel for on-scene safety and traffic incident training.**

Lead(s):	FHWA, NHTSA
Action Type:	Information, Technical Assistance
Target Completion:	2024
NRSS Objective:	Post-Crash Care
Current Status:	In Progress

## **5.2 Action Summary:**

**Advance Traffic Incident Management training and technologies targeted at improved responder and motorist safety.**

Lead(s): FHWA  
Action Type: Information, Technical Assistance  
Target: 2024  
NRSS: Post-Crash Care  
Current Status: In Progress

## **5.3 Action Summary:**

**Expand the use of and support for the National Emergency Medical Services Information System — the national database that is used to store EMS data from the U.S. States and Territories — by funding applied research and data quality improvements.**

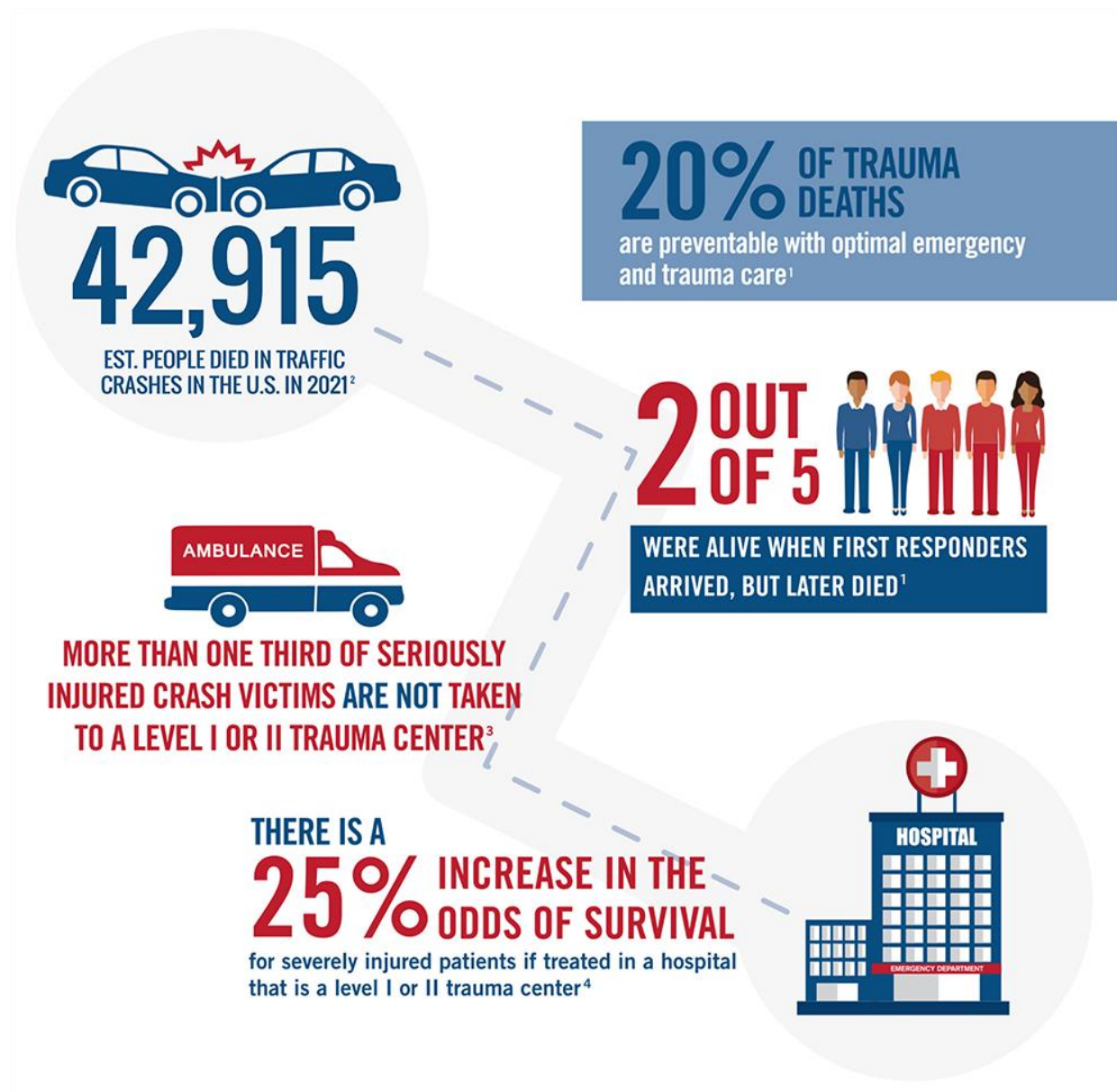
Lead(s): NHTSA  
Action Type: Program Oversight  
Target Completion: 2024  
NRSS Objective: Post-Crash Care  
Current Status: In Progress

## **5.4 Action Summary:**

**Improve the delivery of EMS throughout the nation in collaboration with the Federal Interagency Committee on Emergency Medical Services and the National Emergency Medical Services Advisory Council by focusing on shortening ambulance on-scene response times.**

Lead(s): NHTSA  
Action Type: Stakeholder Engagement  
Target Completion: Ongoing  
NRSS Objective: Post-Crash Care  
Current Status: In Progress

## Access to Emergency and Trauma Care Is Critical to the Survivability of Crashes



### D) EMS Fatigue study now freely available

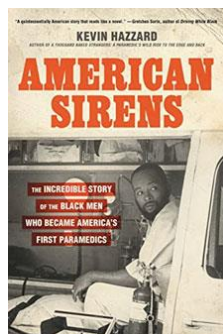
The National Association of State EMS Officials (NASEMSO) along with its partners at the University of Pittsburgh (“Pitt”) and the National Highway Traffic Safety Administration (NHTSA) are pleased to announce that the results of the experimental study on fatigue in EMS has been published in Sleep Health, the official Journal of the National Sleep Foundation. “The Emergency Medical Services Sleep Health Study: A cluster-randomized trial” supports the hypothesis that tailored sleep health



education improves sleep quality and fatigue among EMS workers. Thanks to generous support from Pitt, the manuscript and all related illustrations are available as an open access article at <https://www.sciencedirect.com/science/article/pii/S2352721822001814?via%3Dihub>. Sleep Health is an evidence-based, multidisciplinary journal that serves as the foremost publication for manuscripts that advance the sleep health of all members of society. We are extremely grateful to our expert panelists, all study participants, and our organizational partners in EMS for their input and support throughout the project, which officially concluded in 2022. NASEMSO's web site at [Emsfatigue.org](http://Emsfatigue.org) continues to display all project materials and links related to these efforts.

The significance of this incredible accomplishment by our Principal Investigator, Dr. P. Daniel Patterson, is that the research will be freely available to anyone looking to improve sleep health among EMS workers.

### **E) NASEMSO Annual Meeting to Feature Author and Central Figure of American Sirens, the Story of Freedom House Ambulance**



The NASEMSO Annual Meeting 2023, June 11-15, in Reno, Nevada, will feature paramedic and author, Kevin Hazzard, who will share his gripping account of Freedom House Ambulance as told in his latest book, *American Sirens*. What's more, Freedom House paramedic John Moon, who is believed to have performed the first endotracheal intubation in the field, will be a guest of honor. He will join Hazzard to share the remarkable story of a largely forgotten group of Black men in Pittsburgh who became America's first paramedics. Due to the vision of Dr. Pater Safar, the courage of medical director Dr. Nancy Caroline, and the determination of a group of unlikely individuals who in 1967 had been recruited off the inner-city streets in Pittsburgh, Freedom House Ambulance broke ground in EMS when they demonstrated how paramedics could perform advanced medical skills with the right training and support. Recently featured on *Good Morning America*, Hazzard and Moon share snippets of the birth of modern EMS.

The clip from *Good Morning America*: [How 24 Black Men Became the Country's First Paramedics](#)  
For more information about the NASEMSO Annual Meeting 2023, click [here](#).



# Division of Accreditation, Certification & Education

Virginia Office of Emergency Medical Services

### **III. Accreditation, Certification and Education**

#### **Committees**

- A. The Training and Certification Committee (TCC): The October Training & Certification Committee meeting scheduled for January 4, 2023 was held at the Embassy Suites in Richmond, VA

Copies of past minutes are available on the Office of EMS Web page here:

<http://www.vdh.virginia.gov/emergency-medical-services/education-certification/training-certification-committee-standing/>.

- B. The Medical Direction Committee (MDC): The Medical Direction Committee meeting scheduled for January 5, 2023 was held at the Embassy Suites in Richmond, VA.

Copies of past minutes are available from the Office of EMS web page at:

<http://www.vdh.virginia.gov/emergency-medical-services/education-certification/medical-direction-committee-standing/>

#### **Accreditation**

All EMS programs that are in need of a site visit having gained accreditation either through Letter of Review or through full accreditation have been granted an extension of expiration until December 31, 2023.

- A. EMS accreditation program.

1. Emergency Medical Technician (EMT)

- a) The following EMT programs are under Letter of Review:

- (1) Arlington County Fire Department
- (2) Fauquier County
- (3) Hampton Roads Regional EMS Academy
- (4) Augusta County
- (5) Rockingham County Dept. of Fire and Rescue
- (6) Gloucester Volunteer Fire and Rescue
- (7) Fairfax County Fire and Rescue
- (8) Albemarle Co Dept of Fire
- (9) Roanoke Valley Regional Fire/EMS Training

## 2. Advanced Emergency Medical Technician (AEMT)

- a) The following AEMT programs are under Letter of Review:
  - (1) Newport News Fire Training
  - (2) Fauquier County
  - (3) Hampton Roads Regional EMS Academy
  - (4) Augusta County
  - (5) Rockingham County Dept. of Fire and Rescue
  - (6) King George Fire, Rescue and Emergency Services
  - (7) City of Virginia Beach Division of EMS
  - (8) Germanna Community College
  - (9) Richmond Ambulance Authority

## 3. Paramedic – Initial

Brightpoint Community College (formerly known as John Tyler Community College) has named Damien Coy as their new Program Director.

Thomas Nelson Community College has been renamed to Virginia Peninsula Community College.

Patrick Henry Community College has been renamed to Patrick and Henry Community College.

Lord Fairfax Community College has been renamed to Laurel Ridge Community College.

National accreditation occurs through the *Committee on Accreditation of Educational Programs for the EMS Professions* (CoAEMSP – [www.coaemsp.org](http://www.coaemsp.org)).

- a) Henrico County Division of Fire will have their accreditation site visit on February 16 & 17, 2023.
- b) Chesterfield Fire and EMS has completed their first cohort class. Based on the date the Letter of Review was issued for Chesterfield Fire, the next class will be considered their first cohort by CoAEMSP. They have named Hunter Elliott as the new Program Director.
- c) Hanover Fire/EMS is completing their first cohort class and the students will be testing in the next few weeks.
- d) Newport News Fire has been issued a Letter of Review for their initial cohort class.

#### 4. Paramedic – Reaccreditation

National accreditation occurs through the *Committee on Accreditation of Educational Programs for the EMS Professions* (CoAEMSP – [www.coaemsp.org](http://www.coaemsp.org)).

- B. For more detailed information, please view the Accredited Site Directory found on the OEMS web site at:

<https://vdhems.vdh.virginia.gov/emsapps/f?p=200:1>

### National Registry

#### **National Registry Update on Technology Enhanced Items in ALS Exams**

The National Registry will debut three new item types, referred to as Technology Enhanced Items (TEIs) in the testing industry, on the ALS examinations beginning in late January 2023. These new items aim to create a more authentic, field-related, and engaging testing experience for AEMT and Paramedic candidates. They simply use innovative computer technology to ask an examination question that collects more information than a standard multiple-choice response.

While our current ALS examination has featured a TEI that performs as a multiple-response item, we will debut three new item types:

- B. Build list
- C. Drag and drop
- D. Option/check box

If you are interested in interacting with TEIs, [click here](#). These items will assist us in testing clinical judgment, as they provide a deeper understanding of the candidate's depth of knowledge of a particular topic. The National Registry will continue to work closely with EMS field experts, subject matter experts, and psychometricians to develop and test the new items to ensure all standards and accreditation requirements are met.

### General Updates

#### **2021 National EMS Education Standards Rollout**

The Office of EMS has completed its rollout of the 2021 National EMS Education Standards (NEMSES) to all Education Coordinators across the Commonwealth.

Information about the 2021 National EMS Education Standards can be found at the link below:

- <https://www.vdh.virginia.gov/emergency-medical-services/education-certification/educator-resources/2021-national-ems-education-standards-rollout/>

### **CE Credit from College Transcripts**

On October 1, 2023, the National Registry changed their policy on the issuance of continuing education credit based on college courses. While we are still able to award CE for these courses (10 hours for every one hours of college credit in the science related courses), we are only able to award these in the LCCR/ICCR (Category 2) area. All NCCR (Category 1) CE hours must be completed through either traditional or online courses. There is no limit on the number of CE hours that can be completed in CAPCE accredited courses.

An unofficial college transcript can now be provided and should be forwarded to Debbie (Deborah.T.Akers@vdh.virginia.gov) for review and the awarding of the Category 2 CE credit. As in the past, Education Coordinators should not be awarding CE from college transcripts.

<b>Education Program</b>
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### **Education Coordinator Institutes**

The ACE Division just completed an institute in Abingdon at the Southwest Virginia Higher Education Center. Candidate preparation was excellent and it appears as though the EC Mentorship process is beginning to meet its original intention.

The next institute is scheduled for June in Blacksburg.

We are currently in the planning stages for Institutes for the remainder of the 2023.

<https://www.vdh.virginia.gov/emergency-medical-services/education-certification/educator-resources/ems-instructor-resources/ems-education-coordinator-requirements/>

### **Education Coordinator Updates**

Due to the COVID extension of EC certification expirations in June 2022, 98% of EC's all recertified at the same time and in the same year. We will only hold five (5) EC Updates in 2023:

- January – Southwest Virginia
- February in Virginia Beach
- March in Weyers Cave
- June in Blacksburg
- September in Virginia Beach

Registration is required to attend all EC/ALS-Coordinator updates and can be found online at: <https://www.vdh.virginia.gov/emergency-medical-services/ems-educator-update-schedule/>

### EMS Training Funds

<b>Table. 1 – Virginia EMS Scholarship Program – FY23</b>					
<b>Certification Level</b>	<b>Q1</b>	<b>Q2 (cum)</b>	<b>Q3 (cum)</b>	<b>Q4 (cum)</b>	<b>Amount Awarded (cum)</b>
EMR	0.00	0.00			0.00
EMT	\$207,374.00	\$259,790.00			207,374.00
AEMT	\$22010.00	\$22,101.00			22010.00
Paramedic	\$642,874.00	\$887,628.00			642,874.00
<b>Grand Total</b>	<b>\$872,258.00</b>	<b>\$1,169,428.00</b>			<b>872,258.00</b>

### Psychomotor Test Site Activity

- A. BLS Psychomotor Testing (CTS) has been replaced effective January 1, 2023 with the new program based Terminal Psychomotor Competency Exam. Details can be found here: <https://www.vdh.virginia.gov/emergency-medical-services/education-certification/educator-resources/terminal-competency-psychomotor-exam-date-request-nemses/terminal-competency-psychomotor-exam-defined/>
- B. ALS psychomotor test sites can be found on the OEMS website at: <https://www.vdh.virginia.gov/emergency-medical-services/psychomotor-testing/als-certification-testing/>

### Other Activities

- A. Debbie Akers continues to serve on the Competency Based Education workgroup and the Competency Based Education Steering Committee with the National Registry.
- B. Debbie Akers continues to serve on the Advanced EMT Psychomotor Competency workgroup with the National Registry.
- C. Debbie Akers participated in the Performance Examination Review Panel that was held in Hurst, Texas on December 13 – 15, 2022.





## **IV. Community Health and Technical Resources**

### **Planning and Regional Coordination**

#### **CHaTR Website and Division Information**

The CHaTR division has its own section on the Virginia OEMS website at the link below:

<http://www.vdh.virginia.gov/emergency-medical-services/chatr/>

#### **Regional EMS Councils**

The OEMS continues to maintain a Memorandum of Understanding (MOU) with the Regional EMS Councils for the current fiscal year...and extended for development of the next version of the MOU. The Regional Councils submitted their Second Quarter reports throughout the month of January and are under review. OEMS continues to utilize the web based reporting application for the Regional EMS Councils to submit quarterly deliverables.

OEMS staff and the Regional Council Executive Directors held numerous meetings in 2022 to discuss various aspects of the regional council programs including council updates, discussion of the current MOUs, and the future Regional EMS Council designation processes. Work sessions were held on May 4, June 2, August 3, and October 18, 2022. Council directors have submitted work plans to OEMS for review as part of the process for developing the 5 year MOU. OEMS and the traditional regional councils have established fully executed MOUs through 30 June 2027. OEMS did meet with the Regional Council executive directors on February 1 at OEMS.

CHaTR staff continue to assist in the coordination of Personal Protective Equipment (PPE), distribution of COVID test kits, and associated COVID activities with the Regional EMS Councils as it is requested.

CHaTR staff have attended board meetings and committee meetings for the Tidewater, Old Dominion, Northern Virginia, Peninsulas, Western, Lord Fairfax and Thomas Jefferson councils.

The most recent round of the Regional Council designation process was completed in 2022. In October 2021, the councils submitted their applications and supporting documents to the Regional Council Portal for review. Site reviews were conducted from March 16 through April 20, 2022. Following the site reviews, the review teams reported their findings, OEMS compiled those findings into a final report recommending the continued designation of all eleven Regional EMS Councils. The final report was presented and unanimously approved by the EMS Advisory Board on May 6, 2022. The State Board of Health unanimously approved the designation on June 23, 2022.

## Medevac Program

The Medevac Committee met on February 2, 2023. The minutes of previous Medevac Committee meetings are available on the OEMS website linked below:

<http://www.vdh.virginia.gov/emergency-medical-services/advisory-board-committees/medevac-committee/>

The amount of data submitted to the Medevac Helicopter EMS application (formerly known as WeatherSafe) continues to be robust. In terms of weather turndowns, there were 354 entries into the Helicopter EMS system in Q4 of the 2022 calendar year. 68% of those entries (244 entries) were for interfacility transports, which is consistent with information from previous quarters. The total number of turndowns is an increase from 316 entries in Q4 of 2021. For the 2022 calendar year, there were 1,445 entries into the system, which was an increase from the 1,282 entries for the 2021 calendar year. This data continues to demonstrate a commitment to the program and maintaining the safety of medevac personnel and equipment.

The Committee continues to evaluate the increased use of unmanned aircraft (drones), and the increased presence in the airspace of Virginia. A workgroup continues work to raise awareness among landing zone (LZ) commanders and helipad security personnel.

The Office of EMS developed a form intended for health care providers to notify a patient or his/her authorized representative that the health care provider is requesting air medical transport for the patient who may not have an emergency medical condition.

The form can be found via the link below:

<http://www.vdh.virginia.gov/content/uploads/sites/23/2019/03/Air-Medical-Transport-Authorization-Form.pdf>

A workgroup has been created to look at communications integration - especially across state lines - in a similar fashion to the VIPER system that exists in North Carolina, and involves all air medical entities in that state.

The CHaTR Division Director participates on the NASEMSO Air Medical Committee. OEMS and Medevac stakeholders monitor developments regarding legislation and other documents related to Medevac safety, regulation, and cost of providing air medical services.

## State EMS Plan

The Virginia Office of EMS Strategic and Operational Plan (The Plan) is mandated through *The Code of Virginia* to be reviewed and revised on a triennial basis.

Review and revision of the State EMS Plan began in spring of 2022. Committee chairs, OEMS staff, and Regional EMS Council staff received the plan and guidance documents for the review and revision of the plan.

Reports from committees for edits were compiled into the draft of the 2023-2025 State EMS Plan. This draft was reviewed, edited and approved by the Legislative and Planning Committee on September 23,

2022, and approved by the Advisory Board on November 18, 2022. The State Board of Health will be presented with the Plan for approval in March of 2023.

The current version (2020-2022) of the State EMS Plan is available on the OEMS website:

<http://www.vdh.virginia.gov/emergency-medical-services/state-strategic-and-operational-ems-plan/>

## State Telehealth Plan

During the 2020 session, the Virginia General Assembly passed House Bill 1332, which directs the Board of Health to complete a State Telehealth Plan by January 1, 2021.

The Virginia Department of Health (VDH) created several workgroups to address the specific provisions of the bill language. The Office of EMS (OEMS) worked with the Office of Health Equity (OHE) and leadership from the Injury and Violence Prevention Program to coordinate stakeholders to participate in the development of the State Telehealth Plan. Stakeholder workgroup meetings were held virtually in August and September.

The VDH workgroup delivered the plan to VDH leadership in early February 2021, and was submitted to the General Assembly in March of 2021.

At the direction of the Health Commissioner, the internal VDH Telehealth Plan Workgroup has begun preparations to create the Telehealth Advisory Workgroup.

During the 2022 Virginia General Assembly Session, House Bill 81, and its Senate companion, Senate Bill 436 were entered for consideration. The language of both bills *“Requires the Board of Health to consult with the Virginia Telehealth Network in amending and maintaining the Statewide Telehealth Plan. The bill requires the Board of Health to contract with the Virginia Telehealth Network, or another Virginia-based nongovernmental organization focused on telehealth if the Virginia Telehealth Network is no longer in existence, to (i) provide direct consultation to any advisory groups and groups tasked by the Board with implementation and data collection, (ii) track implementation of the Statewide Telehealth Plan, and (iii) facilitate changes to the Statewide Telehealth Plan as accepted medical practices and technologies evolve.”*

The language for both bills can be found below:

<https://lis.virginia.gov/cgi-bin/legp604.exe?ses=221&typ=bil&val=HB81>

<https://lis.virginia.gov/cgi-bin/legp604.exe?221+sum+SB436>

OEMS staff have been working with the Virginia Telehealth Network (VTN) at the end of 2022, and into 2023 to develop the next steps in the integration of telehealth into all aspects of healthcare in Virginia.

## State Rural Health Plan

CHaTR staff continue the excellent collaboration with the State Office of Rural Health, including in assisting with the development of the State Rural Health Plan.

In early 2022, the Office of Health Equity received the final version of the plan. The plan is posted to the Office of Health Equity's webpage and was mailed to selected stakeholders. It is available for the public to view and can be found at the following weblink:

[https://www.vdh.virginia.gov/content/uploads/sites/76/2022/01/Virginia-Rural-Health-Plan\\_Book\\_POST\\_1-24-22\\_LR.pdf](https://www.vdh.virginia.gov/content/uploads/sites/76/2022/01/Virginia-Rural-Health-Plan_Book_POST_1-24-22_LR.pdf)

## **Technical Assistance**

### **EMS Workforce Development Committee**

The EMS Workforce Development Committee (WDC) meets on February 2, 2023. Previous WDC minutes are available on the OEMS website:

<http://www.vdh.virginia.gov/emergency-medical-services/advisory-board-committees/workforce-development-committee/>

The goals of the WDC include: the EMS Officer program, the Standards of Excellence (SoE) program, the introduction of military personnel and veterans into the Virginia EMS workforce, and supporting the recruitment and retention of the EMS workforce in Virginia.

#### **EMS Officer Program:**



CHaTR staff resumed instruction of EMSO1 (post pandemic) at the 2021 Virginia EMS Symposium. Due to high demand, EMSO1 was offered as two concurrent classes at the 2022 Virginia EMS Symposium with 47 successfully completing the program. An additional twelve (12) course offerings are being planned for 2023. During the EMSO1 classes, an additional instructor is on-boarded to the program's instructor cadre.

The EMSO workgroup continues development of a Train-the-Trainer program, as well as the development of the EMS Officer II program.

The EMSO1 online education modules were formatted to a Learning Management System (LMS). The input from the students and instructors has been extremely positive and is utilized to make changes to future versions of EMSO1.

The EMS Officer section of the VDH/OEMS webpage has been updated to reflect the recent progress with the program, at the link below:

<http://www.vdh.virginia.gov/emergency-medical-services/agency-leadership-resources/ems-officer-i/>

## **Standards of Excellence (SoE) Program:**



The SoE Assessment program is a voluntary self-evaluation process for EMS agencies in Virginia based on eight areas of excellence - areas of critical importance to successful EMS agency management, above the requirements of the *Virginia EMS Regulations*.

Each area is reviewed using an assessment document that details optimal tasks, procedures, guidelines and best practices necessary to maintain the business of managing a strong, viable and resilient EMS agency.

CHaTR staff continues to provide technical assistance to agencies wishing to become Agencies of Excellence. City of Fairfax Fire Department is the newest Agency of Excellence, effective December 16, 2022.

All documents related to the SoE program can be found on the OEMS website at the link below:  
<http://www.vdh.virginia.gov/emergency-medical-services/virginia-standards-of-excellence-program/>

## **EMS Recruitment and Retention**

CHaTR continues to be a statewide resource to assist with recruitment and retention throughout the Virginia EMS system.

The Virginia Fire & EMS Recruitment Network (<https://www.varecruitretain.com/>) is composed of membership from Virginia, Maryland and West Virginia with over 300 members. The mission of the Virginia Recruitment and Retention Network is “to foster an open and unselfish exchange of information and ideas aimed at improving staffing” for volunteer and career fire and EMS agencies and organizations.

The network revamped their website, which offers resources for agencies as well as contact points for individuals interested in Fire and EMS. The network is continuing to add additional content including obtaining member information.

The link to the website can be found on the CHaTR Recruitment and Retention page at the link below:  
<https://www.vdh.virginia.gov/emergency-medical-services/chatr/recruitment-retention/>

Several changes have been made to the Recruitment and Retention page on the OEMS website to give it a more streamlined appearance. The network continues to be strongly encouraged to work with OEMS to provide updated information and resources through the website and social media for recruitment and retention across Virginia. In addition, CHaTR staff have been working with staff from WVEMS to restore the VAEMSJobs website.

## EMS Needs Assessment

OEMS partnered with Virginia Commonwealth University's Performance Management Group (PMG) to conduct an updated needs assessment in 2021. EMS agencies across the commonwealth were notified to expect correspondence from PMG and encouraged to submit a response to the assessment.

The online survey was deployed from early August until late September 2021, with some agencies opting to complete a hard copy of the assessment. All responses have been collected and the data has been analyzed.

The final report was generated and the results of the needs assessment was presented to the EMS Advisory Board on March 11, 2022.

A Tableau dashboard is being created from the responses to the 2012 and 2021 assessments and will be updated with data from subsequent assessments. Users will be able to identify trends in the EMS system and utilize regional data. The sizable dataset must undergo a data cleansing process before it can be visualized for the public.

## System Assessments/Miscellaneous Technical Assistance

CHaTR staff assists the Virginia Department of Fire Programs (VDFP) with evaluations of the Fire and EMS systems in localities in Virginia.

The most recent study was held in Pulaski County on December 11-13, 2022. The final report of the Pulaski County study has not been released by the VDFP.

Evaluation reports from previously conducted studies can be found via the link below:  
<https://www.vafire.com/about-virginia-department-of-fire-programs/virginia-fire-services-board/virginia-fire-services-board-studies/>

On March 30, 2020, Center for Medicare and Medicaid Services (CMS) released notification to allow for an expansion of the list of allowable destinations for ambulance transports, including any destination that is able to provide treatment to the patient in a manner consistent with state and local Emergency Medical Services (EMS) protocols in use where the services are being furnished.

On April 9, 2020, the Virginia Office of Emergency Medical Services (OEMS) distributed guidance in the form of a white paper to both EMS agencies and facilities considered to be allowable destinations for ambulance transports under the CMS guidance.

The white paper includes guidelines for agencies transporting patients to alternative sites, the protocols that outline the transportation options, funding for transportation to an alternate site, as well as further considerations for transportation to an alternate site.

The white paper can be found at the link below:  
[http://www.vdh.virginia.gov/content/uploads/sites/23/2020/04/EMS-Transport-to-Alternate-Sites-White-Paper.FINAL\\_.pdf](http://www.vdh.virginia.gov/content/uploads/sites/23/2020/04/EMS-Transport-to-Alternate-Sites-White-Paper.FINAL_.pdf)

## **Mobile Integrated Healthcare/Community Paramedicine (MIH/CP) and Rural EMS**

The MIH/CP workgroup that was created in 2015 reconvened on September 19, 2018, with Dr. Allen Yee again serving as chair.

Previous meeting minutes may be viewed at the link below:

<http://www.vdh.virginia.gov/emergency-medical-services/community-paramedicine-mobile-integrated-healthcare/>

The workgroup created a MIH-CP white paper and a letter of intent for agencies that are performing system evaluations to determine the feasibility of providing MIH-CP service. These documents were unanimously approved by the Medical Direction Committee at their meeting on January 16, 2020.

The white paper and letter of intent were approved by the State EMS Advisory Board at their meeting on February 7, 2020. The process for agencies to begin advertising to the public that they are providing MIH or CP service to the public will begin August 1, 2022.

CHaTR staff is also working with the State Office of Rural Health to perform assessments of EMS systems that have Critical Access Hospitals (CAH) in their service areas.

The CHaTR Division Director participates with the CAMTS MIH Program Standards workgroup, the NASEMSO CP-MIH workgroup, the National Association of Mobile Integrated Healthcare Providers (NAMIHP), the Joint Committee on Rural Emergency Care (JCREC), and is a member of the Virginia Rural Health Association (VRHA) Board of Directors. In July, Tim Perkins was appointed as the chair of the NASEMSO Rural EMS Committee.

## **EMS For Children (EMSC) Program**

### **EMSC Booth at Symposium Successful**

The EMSC booth in the vendor hall at the Virginia EMS Symposium was an excellent forum for conversation about children's issues in EMS and for dissemination of information about the EMS for Children program in general. Some of the topics discussed were:

- Designating Pediatric Champions for EMS agencies (or groups of EMS agencies).
- The use of ambulance child restraints and safe transport in ground ambulances..
- Skills checking of EMS providers (pediatric equipment).
- Incorporating children into pediatric disaster plans and exercises..
- The annual EMS agency survey (January-March), and how to use its data.
- Pediatric policies, procedures and readiness for EMS agencies.
- Volunteering for EMSC program work groups.

### **Emergency Child Restraints Ready for Placement**

OEMS-EMSC still has a small inventory of grant-funded Emergency Child Restraints (patient range 4-110 lbs.) available. EMS agency leaders with a legitimate need for these should contact Dave Edwards with requests. For larger numbers of child restraint systems, OEMS recommends applying for



restraints through the Rescue Squad Assistance Fund (RSAF), and a reminder that the appropriate restraint of children being transported by ground ambulance in Virginia is a priority issue. Also, EMS agencies are strongly encouraged to adopt safety policies and procedures requiring the use of child restraints by their providers, and the Virginia EMSC program is available to assist in this.



*(Funding for the child restraint systems was through the EMSC State Partnership Grant [H33MC07871] via the Health Resources & Services Administration [HRSA] and administered by the Maternal and Child Health Bureau [MCHB] Division of Child, Adolescent and Family Health.)*

### **EMSC Program Supported Attendance at Symposium**

The EMSC Program covered basic registration costs for eighteen EMS providers to the 2022 Virginia EMS Symposium in early November. To be eligible for a registration award, these participants had to sign up for at least three pediatric-related classes.

### **EMSC 2023 Annual EMS Agency Survey (*Launched January 3*)**

The annual national EMSC EMS Agency Survey will be conducted during the first three months of 2023 (January-March) in conjunction with the EMSC Data Center (EDC). The goal of the annual survey is to improve understanding of EMS agencies' ability to care for children by collecting data on two specific EMSC performance measures:

- EMSC Performance Measure 02 (assesses if an agency has access to a pediatric emergency care coordinator (PECC))
- EMSC Performance Measure 03 (focuses on an agency's process for skill-checking on pediatric equipment)

Last year over seven thousand EMS agencies responded to the [EMS for Children Survey](#), which was sent to agencies across 58 states and territories. Results of the 2023 assessment will be shared with EMS agencies, the state EMS Advisory Board and the EMSC Committee once the data has been processed.

### **New EMSC State Partnership Grant Submission by OEMS**

An application for a continuing continuation of the EMSC State Partnership Grant was submitted to the Health Resources and Services Administration (HRSA) in early November. If successful, this grant will be for four years (2023-2027) with a possibility of a one-year extension at the end. Every state in the US is eligible to receive one EMS for Children grant, as well as six U.S. protectorates. It is anticipated that the grant will be funded at a level of \$205,000 per year (an increase of more than 36% over previous years funding). Some of the grant activities proposed are below:



- Fund the designated Pediatric Track at the annual Virginia EMS Symposiums.
- Support increased regional pediatric training courses (NRP, PEPP, ENPC, Handtevy, etc.).
- Provide training for EMS agency Pediatric Champions.
- Facilitate EMS agency acquisitions of ambulance child restraints—purchase and disseminate child restraints as funds allow to volunteer EMS agencies.
- Purchase of pediatric manikins, support pediatric skills checking
- Develop voluntary hospital facility recognition program (EDs)
- Develop EMS agency pediatric readiness recognition program
- Support travel of OEMS leadership to NASEMSO meetings (and Pediatric Council)
- Expand role of Family Advisory Network (FAN) representative(s)
- Facilitate pediatric disaster planning with hospitals and EMS agencies
- Assess hospital EDs for current level of pediatric readiness (upon request and free)

### **Join an EMSC Program Work Group!**

The EMSC Program is always seeking volunteers to help with EMSC work groups. If you have passion and/or expertise concerning pediatric emergency care issues, and can donate some time, the Virginia EMSC Program can use your assistance. Please contact Dave Edwards if you interested in helping with any of the following topics:

- Pediatric Champions Work Group support developing EMS Agency Pediatric Champions (also sometimes referred to as Pediatric Emergency Care Coordinators—PECCs).
- Child Transport Policies & Procedures Work Group - develop template(s) for suggested EMS agency policies and procedures for restraining children during ground ambulance transport.
- Facility Recognition Work Group - explore creating a voluntary recognition program for hospital EDs that can demonstrate a specified basic readiness level in caring for children (medical).
- Emergency Transfer Guidelines and Agreements Work Group to develop templates for written *hospital emergency transfer guidelines and agreements* that specifically refer to pediatric patients. These would be intended as a technical resource available to Virginia hospitals.

### **EMS for Children Request of Virginia Hospital Emergency Departments:**

- Please weigh and record children in kilograms (to help prevent medication errors).
- Please Include children specifically in hospital disaster/emergency plans.
- Please designate a Pediatric Champion (Pediatric Emergency Care Coordinator--PECC). (*This is the single most important item a hospital can implement to ensure pediatric readiness, including patient safety.*)
- Please ensure pediatric patients are included in the quality improvement process.
- Please review and adopt pediatric safety policies (radiation/medication dosages, abnormal VS).

### **HandTevy Update**

The Office of EMS launched the partnership with Handtevy in January of 2022. The project offers the HandTevy Classic technology (with licenses for each ALS provider) and one length-based pediatric tape for each permitted EMS vehicle at no cost to Virginia ALS agencies. Additionally, Virginia has negotiated discount pricing on Handtevy durable equipment components. Since the January 2022

launch, 244 agencies have signed on for the Handtevy technology. For additional information on the Handtevy project, please contact Tim Perkins.

### **Suggestions/Questions**

Please submit suggestions or questions related to the Virginia EMSC Program to David P. Edwards via email ([david.edwards@vdh.virginia.gov](mailto:david.edwards@vdh.virginia.gov)), or by calling 804-888-9144 (direct line), or Tim Perkins via email ([tim.perkins@vdh.virginia.gov](mailto:tim.perkins@vdh.virginia.gov)) or by phone (804-888-9100).

The Virginia EMSC Program receives significant funding for programmatic support through the EMSC State Partnership Grant (H33MC07871) awarded by the U.S. Department of Health and Human Services (HHS) via the Health Resources & Services Administration (HRSA), and administered by the Maternal and Child Health Bureau (MCHB) Division of Child, Adolescent and Family Health.



# Division of EMS Emergency Operations



## **V. Division of Emergency Operations**

### **Division of Emergency Operations**

#### **Staff Members**

Office Number for Staff Members 804-888-9100

Karen Owens	Division Director Staff Support – Provider Health and Safety Committee karen.owens@vdh.virginia.gov
Sam Burnette	Emergency Services Coordinator Staff Support – Communications Committee samuel.burnette@vdh.virginia.gov
Kari Magner	Emergency Services Planner Staff Support – Emergency Management Committee kari.magner@vdh.virginia.gov
Devin Chinault	Emergency Services Communications Specialist devin.chinault@vdh.virginia.gov

### **Operations**

- **2022 EMS Symposium**

The Division of Emergency Operations supported the 2022 EMS Symposium in a variety of roles. The staff is responsible for setting up and operating a radio communications system that provides coverage throughout the three hotels used by the Symposium. Staff also delivered training programs to include a Mass Casualty Incident Management class, a Mass Casualty Incident Management Class Train the Trainer class, and a class that reviewed the mental health resources offered by the Office of EMS, as well as the results of the updated mental health survey. Staff participated in room hosting and other ancillary duties supporting the event.

- **Tropical Storm Nicole – Weather Update**

November 9, 2022, Kari Magner attended a weather update in preparation for weather impacts to the Commonwealth, specifically Norfolk, VA, since the EMS Symposium was currently being held. This allowed for planning efforts to be implemented in case of weather.

- **Ebola Outbreak Preparedness**

Karen Owens and Kari Magner participated in a variety of meetings and activities related to the update of plans pertaining to a potential Ebola response. While cases were not found in the U.S. the occurrence of an outbreak in west Africa required the update of plans and resources for EMS treatment and transport of potential Ebola patients. The OEMS website was updated to reflect changes in planning documents. Karen participated in meetings related to fatality management, EMS transport capabilities, and training needs. Kari developed and administered a survey related to EMS agency transport capabilities.

- **National Association of State EMS Officials Participation**

Karen Owens continues to actively participate with the National Association of State EMS Officials. As the chair of the Health & Medical Preparedness Council, Karen attends the monthly NASEMSO board meeting and in December attended the NASEMSO Board retreat in Alexandria, Va to review the strategic plan and discuss status updates for various projects.

Karen Owens also continues to serve as the Chair of the Health and Medical Preparedness Council. In her role she works with NASEMSO staff to coordinate bi-monthly meetings to discuss pertinent issues related to EMS and emergency preparedness.

- **National Homeland Security Consortium Meeting**

Karen Owens Attended the annual National Homeland Security Consortium Meeting in San Francisco, California, on December 1, 2022, as a representative of the National Association of State EMS Officials. The meeting brought together representatives from a variety of homeland security agencies across the country to discuss a variety of issues including, funding, active threat events, fentanyl and the opioid crisis, and a variety of other topics.

- **Federal Partners Presentation**

On January 10, 2023, Karen Owens attended the Federal Partners briefing at the Virginia Emergency Operations Center. The event provided an opportunity for state agencies to present information and updates on their capabilities during emergency events within the Commonwealth. Karen spoke on the role of OEMS and the resources available to assist localities.

- **Virginia Crisis Standards of Care**

During this quarter, Karen Owens, participated in multiple meetings of the EMS workgroup for the revision of the Crisis Standards of Care document for Virginia.

## Training and Exercises

- **Mass Casualty / Active Shooter Drill**

Sam Burnette observed a mass casualty incident / active shooter drill held in Isle of Wight County on Sunday, November 20, 2022. The event brought together local law enforcement, school personnel, fire, and EMS personnel to participate in a simulated active shooter in an elementary school. The event also served as a mass casualty incident management class exercise for an EMT class.

- **Mass Casualty Incident Management Class**

On November 16, 2022, Sam Burnette assisted a newly released instructor with a Mass Casualty Incident Management class held for the Fredericksburg Fire Department. The class included about fifteen fire and EMS providers from the Fredericksburg Fire Department.

- **Virginia Department of Human Resource Management OSHA Safety Course**

Sam Burnette completed a Virginia Department of Human Resource Management (DHRM) OSHA 30-hour training course on January 9 – January 12, 2023. The course, held at Pocahontas State Park, covers the OSHA 30-hour General Industry. The material learned will not only be utilized in daily operations but will be integrated into related training programs.

## Communications / 911 Centers

- **9-1-1 Services Board Regional Advisory Committee (RAC)**

During this quarter, Sam Burnette continued to participate in monthly meetings of the 9-1-1 Services Board Regional Advisory Committee. The meetings provide an opportunity for public safety representatives to discuss pertinent communications issues or actions related to public safety communications in the Commonwealth. Sam has been appointed to both the Training and Public Safety Grants subcommittees of the Regional Advisory Committee.

- **SAFECOM Survey**

Sam Burnette has been selected to serve as test group participant for the upcoming CISA SAFECOM Nationwide Survey (SNS). The SNS is a nationwide data collection effort to obtain actionable and critical data that drives our nation's emergency communication policies, programs, and funding. Any agency or organization that is charged with a public-safety related mission and uses emergency communications technology is encouraged to take the survey. To achieve statistical validity of results,

CISA SAFECOM needs respondents from various disciplines, geographies, and levels of government.

- **FCC Licensing**

Utilizing the FCC Universal Licensing System (ULS), Devin Chinault completed a survey of FCC licenses for common radio frequencies used by EMS agencies in the Commonwealth of Virginia to include the HEAR and the Statewide EMS channels. The collected data will be used for various projects in the future.

- **FEMA Region 3 Regional Communications Summit**

Sam Burnette and Devin Chinault participated in a FEMA Regional Emergency Communications Coordination Summit held on November 1-2, 2022. The FEMA sponsored event held at the VDOT/VSP Joint Operations Center in Chesterfield, brought in representatives from throughout FEMA Region 3 as well as subject matter experts on various emergency communications related topics.

- **PCTel Public Safety Testing Solution Training**

Devin Chinault completed training on the PCTel Public Safety Testing Solution. This product tests cellular coverage across all the major carriers and bands. It can test both indoor and outdoor coverage. The Division of Emergency Operations will be using the equipment to test cellular signal strength and coverage

- **Radio Cache Programming**

Devin Chinault continued to update the programming for the Division of Emergency Operations radio cache to include the National Interoperability Field Operation Guide (NIFOG) frequencies. The Division is working to expand its radio capabilities across multiple frequency bands utilized by EMS agencies in mutual aid responses.

- **Antenna Propagation Mapping**

During this quarter, Devin Chinault started developing antenna propagation maps for the radio system utilized in Norfolk at the Symposium. This information will ensure the proper antennas are used and placed in the ideal locations for use during the Symposium.

<b>Planning</b>
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- **EMS Emergency Management Committee**

The EMS Emergency Management Committee held a quarterly meeting in November, in conjunction with the EMS Advisory Board meeting. The committee received a presentation

for the workgroup that reviewed the current triage approach and discussed next steps in moving forward with the recommendations of the committee.

- **Long-Term Care Cross Collaboration Meeting**

Karen Owens participated in a meeting of Long-Term Care facilities and health department partners on November 1, 2022. The meeting provided an opportunity to discuss the response to COVID and steps to strengthening capabilities and response for future pandemics.

- **Central Virginia Health Care Coalition**

Kari Magner continues to represent the Virginia Office of EMS on the Central Virginia Health Care Coalition during their monthly meetings (November 25, December 16, 2022, and January 27, 2023).

- **Hampton Roads Mass Casualty Incident Response Guide Workgroup**

Sam Burnette and Kari Magner participated in several meetings for the HRMCIRG as representatives for OEMS to work between the regional councils and the State on updating the MCI plans for those regions. On December 13, 2022, they virtually participated in a demo on Pulsara, a patient tracking system the region was interested in using for MCI events.

- **THIRA/SPR Workgroup**

Karen Owens continued to participate in meetings of state partners to review the Threat and Hazard Identification and Risk Assessment as part of the Stakeholder Preparedness Review.

- **Winter Weather Preparedness Seminar**

Kari Magner and Sam Burnette attended a VDEM sponsored Winter Weather Preparedness Briefing on November 18, 2022. The National Weather Service and other stakeholders from across the Commonwealth discussed their plans for the upcoming winter weather season.

- **FEMA Resource Typing Workgroup**

Karen Owens participated in monthly meetings of the FEMA resource typing workgroup. The workgroup is focused on reviewing and editing the resource typing sheets for ground ambulance and other EMS resources that might be requested and deployed in emergency events.

- **National Resilience EXCH Summit 2023**

Karen Owens, Kari Magner, and Sam Burnette participated in the All-Hazards Consortium Virtual Summit held on January 24-26, 2023. Over the course of three half-days, participants learned and collaborated with critical infrastructure partners, state and local emergency managers, and other key stakeholders to address areas of concern regarding resiliency from disasters.



- **Community Awareness Briefing**

On December 9, 2022, Kari Magner participated in a DCJS sponsored briefing on Homemade Violent Extremism. Information from the program will be used to raise awareness to radicalization to violence by EMS in the Commonwealth.

<b>Health and Safety</b>
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- **Flu, RSV, COVID-19, and Other Respiratory Threats This Fall and Winter**

Kari Magner attended this webinar on November 29, 2022, to gather additional updates on respiratory conditions in the Commonwealth and what EMS may need to know.

- **Provider Health and Safety Committee**

The Provider Health and Safety Committee met held its quarterly meeting in conjunction with the EMS Advisory Board meeting. The committee received an update on the plan to secure decedent test kits for provider exposure response. They also discussed the lack of a centralized process for reporting struck-by incidents. Jack Sullivan, a committee member representing the safety industry, shared the [www.reportstruckby.com](http://www.reportstruckby.com) website and outreach material with committee members.

- **Traffic Incident Management**

During this quarter the Karen Owens attended a meeting of the statewide Traffic Incident Management committee at the Virginia State Police Headquarters. The meeting provided an opportunity for each representative to provide an update on their outreach and education opportunities related to traffic incident management.

# **Division of Public Information and Education**

## **VI. Division of Public Information and Education**

### **Public Relations**

#### **Public Relations**

##### **Public Outreach via Marketing Mediums**

###### *Via Virginia EMS Blog*

The OEMS continues to share important updates and information via the Virginia EMS Blog. This blog replaces the EMS Bulletin, which was an online newsletter that went out twice a year. This blog allows OEMS shares information in a more timely, concise and in a web-friendly format. It also offers more interactive features so readers can comment or ask questions through the blog.

###### *Via Virginia EMS Listserv (October – December)*

- 10/6/22 - Last Chance to Register for the 2022 Virginia EMS Symposium - Registration Closes Friday, October 7
- 11/4/22 - Important Reminders for the 42nd Annual Virginia EMS Symposium
- 11/10/22 - Important Updates Regarding Hurricane Nicole and Impacts in Virginia
- 11/14/22 - No Cost Naloxone for Licensed Virginia EMS Agencies

###### *Via Social Media Outlets*

We continue to keep OEMS' Twitter and Facebook pages active, educational and relevant by posting daily and/or weekly updates that provide important announcements and health-related topics to increase awareness and promote the mission of OEMS and VDH. Some of the subjects that were featured from October - December are as follows:

- **October** – Final days to register for symposium reminders, EMSC symposium registration award, Homeland Security state and local cybersecurity grant program, ACE Division conducts rollout of the 2021 National EMS Education Standards, Virginia EMS Portal and all web applications associated with the portal database maintenance.
- **November** – 2022 Governor's EMS Awards ceremony promo video, trucks packed and headed to Norfolk for the 42<sup>nd</sup> Annual Virginia EMS Symposium, Virginia EMS Symposium Flu & COVID-19 Vaccination Clinic, thanks to symposium sponsors, save time & money with quick lunch options from the Marriott & Sheraton, thank you cards from Virginia elementary and middle schools to EMS providers, Retail Row and Exhibit Hall hours, important updates regarding hurricane impacts in Va., CISM/Peer support team meeting, ESO special sessions, free registration for 43<sup>rd</sup> annual Virginia EMS Symposium, Symposium game night, vendor reception, 2022 Governor's EMS Awards

livestream, symposium event wrap-up, 2022 Governor's EMS Award recipients announced and holiday office closures.

- **December** – Agency email platform conversion/no access to email Dec. 9-12, 2022, during the system update, Governor's EMS Awards and Symposium recap video, holiday office closures and winter weather preparedness tips.

### Customer Service Feedback Form (Ongoing)

- PR Assistant provides monthly reports to EMS management regarding OEMS Customer Service Feedback Form.
- PR Assistant also provides biweekly attention notices (when necessary) to OEMS Director and Assistant Director concerning responses that may require immediate attention.

### Social Media and Website Statistics

As of January 19, 2023, the OEMS Facebook page had 9,173 likes, which is an increase of 106 new likes November 2, 2022. As of January 19, 2023, the OEMS Twitter page had 5,254 followers, which is a decrease of 38 followers since November 2, 2022.

**Figure 1:** This graph shows the total organic reach\* of users who saw content from the OEMS Facebook page, October - December. Each point represents the total reach of organic users in the 7-day period ending with that day. **Our most popular Facebook post was posted on Nov. 8, 2022. This post garnered 6,006 people reached and 209 engagements (including post likes, reactions, comments, shares and post clicks.)**

*\*Total Reach activity is the number of people who had any content from our Facebook Page or about our Facebook Page enter their screen. Organic reach is the number of unique people who saw our post in the newsfeed or on our page, including people who saw it from a story shared by a friend when they liked it, commented on it, shared our post, answered a question or responded to an event. Also includes page mentions and check-ins. Viral reach is counted as part of organic reach. Organic reach is not paid for advertising.*

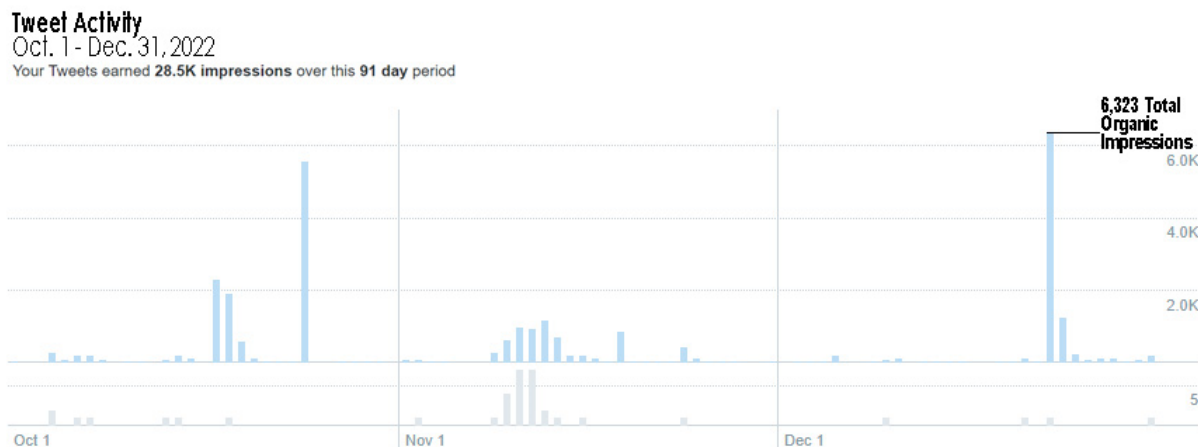
**Facebook Reach Activity**  
Oct. 1 - Dec. 31, 2022



**Figure 2:** This graph shows the total organic impressions\* over a 91-day period on the OEMS Twitter page, October - December. **During this 91 day period, we earned 313 impressions per**

day. The most popular tweet received 1,884 organic impressions.

*\*Impressions are defined as the number of times a user saw a tweet on Twitter. Organic impressions refer to impressions that are not promoted through paid advertising.*



**Figure 3:** This table represents the top five most downloaded items on the OEMS website from October - December.

October	<ol style="list-style-type: none"> <li>1. Authorized Durable Do Not Resuscitate Form (320)</li> <li>2. Scope of Practice Formulary (229)</li> <li>3. Scope of Practice Procedures (215)</li> <li>4. TR-57 Virginia Recertification Requirements (145)</li> <li>5. TR-06 Course Roster (144)</li> </ol>
November	<ol style="list-style-type: none"> <li>1. Authorized Durable Do Not Resuscitate Form (403)</li> <li>2. 2022 Symposium On-site Guide (220)</li> <li>3. Scope of Practice Procedures (199)</li> <li>4. Scope of Practice Formulary (178)</li> <li>5. Quick Guide NREMT Recert 2022 (165)</li> </ol>
December	<ol style="list-style-type: none"> <li>1. Authorized Durable Do Not Resuscitate Form (358)</li> <li>2. Quick Guide NREMT Recert 2022 (282)</li> <li>3. Scope of Practice Formulary (186)</li> <li>4. Scope of Practice Procedures (178)</li> <li>5. TR-57 Virginia Recertification Requirements (159)</li> </ol>

**Figure 4:** This table identifies the total number of unique pageviews, the average time on the homepage and the average bounce rate for the OEMS website from October - December.

	Unique Pageviews	Average Time on Page (minutes: seconds)	Bounce Rate (Average for view)
October	7,197	00:47	26.63%
November	6,318	00:52	28.85%
December	5,862	00:52	28.02%

## Google Analytics Terms:

A **unique pageview** aggregates pageviews that are generated by the same user during the same session. A **unique pageview** represents the number of sessions during which that page was viewed one or more times.

The **average time on page** is a type of visitor report that provides data on the average amount of time that visitors spend on a webpage. This analytic pertains to the OEMS homepage.

A **bounce rate** is the percentage/number of visitors or single page web sessions. It is the number of visits in which a person leaves the website from the landing page without browsing any further. This data gives better insight into how visitors are interacting with a website.

If the success of a site depends on users viewing more than one page, then a high bounce rate is undesirable. For example, if your homepage is the gateway to the rest of your site (e.g., news articles, additional information, etc.) and a high percentage of users are viewing only your home page, then a high bounce rate is undesirable.

The OEMS website is setup in this way; our homepage is a gateway to the rest of our information, so ideally users should spend a short amount of time on the homepage before bouncing to other OEMS webpages for additional information. Generally speaking, a bounce rate in the range of 26 to 40 percent is excellent and anything under 60 percent is good.

## Events

### EMS Symposium

- The PR Coordinator continued to update the Symposium webpages on the OEMS website.
- PR Coordinator continued to work with the symposium sponsorship coordinator on sponsored items, inserts for symposium packets, signage requirements, etc.
- The PR Coordinator finalized on-site event signage and submitted it for print.
- The PR Coordinator completed the design of the Symposium On-Site Guide and submitted it for print Oct. 24, 2022.
- The PR Coordinator continued updating information for the 2022 Symposium mobile app on Apple and Android devices.
- The PR Coordinator and PR Assistant continued promoting Symposium registration utilizing the Symposium ads that highlighted programs offered at the symposium, via the OEMS website and listserv email.
- The PR Assistant organized and ordered supply items that would be needed for Symposium prep.
- The PR Assistant edited course descriptions and updated the course locations into the Symposium web program.
- The PR Assistant assisted with name badge coordination for Symposium attendees and organized all vendor name badges.
- Coordinated handouts from sponsors and OEMS staff to be included in the registration packets. The last week of October, OEMS staff stuffed and packed 1,800+ registration packets.

- Fielded calls and emails from providers regarding registration, cancellations and vendors requesting sponsorship opportunities and the availability of vendor hall space.
- The PR Coordinator and the PR Assistant attended the 42<sup>nd</sup> Annual Virginia EMS Symposium, Nov. 8-13, 2022. Assisted with the loading and unloading of event supplies and equipment, registration and putting out signage, coordination of the Governor's EMS Awards ceremony and reception. Assisted with the vendor hall and updated social media sites with classroom/instructor updates and other event info.
- PR Assistant coordinated the attendances of nominees and guests, the administration of badges and admission of award nominees into the Governor's EMS Awards Banquet. Regulation and Compliance Division staff assisted with the advanced admittance of award nominees into the banquet hall.
- After the conclusion of the Symposium, the PR assistant verified CE credits and emailed Leadership and Management honorary certificates to eligible Symposium attendees who signed up for and met the certificate requirements.
- PR Assistant coordinated the OEMS "Thank You" Project in conjunction with the annual Virginia EMS Symposium.
  - Reached out to various middle and high schools across the state requesting their student's participation in providing handwritten or digital thank you cards and drawings to show appreciation to the EMS providers in their communities.
  - OEMS received over 700 thank you notes and drawings from 11 Virginia schools.
  - The thank you notes were put on various displays throughout the Virginia EMS Symposium for participants to enjoy. Displays were also posted at the Governor's EMS Awards banquet.

### **Governor's EMS Awards Program**

- The PR Coordinator created the Symposium Governor's EMS Awards agenda for the table place settings.
- Prior to the event, the PR Assistant worked with the video crew to verify Governor's EMS Award nominees and recipients' names, award categories and affiliations.
- The PR Assistant prepared the presentation book that contained the award winners' brief bios, which were read during the awards ceremony.
- The PR Assistant and PR Coordinator (and other OEMS staff) attended meetings on-site with the film crew to go over walk-thru of the Governor's EMS Awards Ceremony and the process of events for the award ceremony.
- The PR Coordinator prepared the Governor's EMS Award recipients' bios and pictures and posted it on the OEMS website.
- The PR Coordinator sent out a statewide press release announcing the Governor's EMS Award winners November 15, 2022.
- PR Coordinator promoted award recipients through OEMS Facebook and Twitter social media sites.
- PR Coordinator fielded media inquiries and sent additional award winner information and photos as requested from public and media contacts.
- PR Assistant designed the 2023 Regional EMS Council Awards flyer.

- PR Assistant provided the Regional EMS Councils with updated nomination forms, awards promotional flyer and posted updated forms to the OEMS website.

## Media Coverage

The PR Coordinator and PR Assistant are responsible for fielding the following OEMS media inquiries October - December, and submitting media alerts for the following requests:

- **November 28** – Reporter from Northern Neck News requested info about the 2022 Governor’s EMS Award recipients.

## OEMS Communications

The PR Coordinator and PR Assistant are responsible for the following internal and external communications at OEMS:

- On a daily basis, the PR Assistant monitors and provides assistance to the emails received through the EMS Tech Assist account and forwards messages to their respective divisions.
- The PR Assistant is the CommonHealth Coordinator at OEMS, and as such, she sends out weekly CommonHealth Wellnotes to the OEMS staff and coordinates events within the office.
- The PR Coordinator and PR Assistant design certificates of recognition and resolutions for designated EMS personnel on behalf of the Office of EMS and State EMS Advisory Board.
- Upon request, the PR Coordinator and PR Assistant create certificates for free Symposium registrations to be used at designated events.
- Upon request, the PR Coordinator and PR Assistant provide assistance for the preparation of responses to constituent requests.
- The PR Coordinator and PR Assistant respond to community requests by sending out letters, additional information, EMS items, etc.
- The PR Coordinator and PR Assistant provide reviews and edits of internal/external documents as requested.
- The PR Coordinator and PR Assistant update OEMS website with content and documents upon request from office Division Directors and Program Managers.
- The PR Coordinator is responsible for monitoring social media activity and requests received from the public. She forwards questions to respective OEMS division managers and provides responses to the inquiries through social media. The PR Assistant provides back-up to all social media for OEMS and VDH.
- The PR Coordinator is responsible for coordinating and submitting weekly OEMS reports to be used in the report to the Secretary of Health and Human Resources. The PR Assistant provides back-up assistance.
- When applicable, the PR Assistant submits new OEMS hire bios and pictures to be included on the New Employees webpage on the VDH intranet.
- The PR Assistant is the designated FOIA Officer for the OEMS and the PR Coordinator provides back-up assistance as needed.



## **VDH Communications Office**

**VDH Communications Tasks** – The PR Coordinator and PR Assistant are responsible for covering the following VDH Communications Office tasks:

- **October – December** – The PR Coordinator is responsible for working with the Communications Office to assist with coverage for media alerts, VDH in the News, weekly Commissioner’s message, media assistance, team editor, VDH social media and other duties upon request.
- The PR Assistant is responsible for logging/sending VDH media alerts, replying to website feedback via the VDH website, providing back-up assistance for the Commissioner’s clinician letters and assisting the Communications Director with entering Media Alerts.

### **Ongoing communications duties:**

- The PR Coordinator assists with sending statewide press releases and posting on the VDH website, serves as a backup for VDH social media posts (and primary for OEMS) social media and website, submits RAPs, assists marketing contractors with access to VDH social media advertising sites, provides backup assistance to upload videos to VDH YouTube page.
- The PR Assistant logs media inquiries into the VDH Media Alert Generator, serves as back to monitoring the VDH web feedback submissions, assists with posting and sharing OEMS information and updates and sends statewide press releases and posts them on the VDH website. The PR Assistant also serves as secondary backup for VDH social media, listserv emails.
- **VDH Communications Conference Calls (Ongoing)** - The PR Coordinator participates in conference calls and polycoms for the VDH Communications team.
  - PR Coordinator and PR Assistant attend the bi-monthly communications check-in meetings.
  - PR Coordinator and PR Assistant participate in bi-monthly Agencywide Communications Workgroup.
- **Commissioner’s Weekly Email** – The PR Coordinator submitted the following OEMS updates to the commissioner’s internal weekly email, from October - December.

### **OEMS Hosts 42<sup>nd</sup> Annual Virginia EMS Symposium**

The Virginia Office of Emergency Medical Services (OEMS) recently hosted the 42<sup>nd</sup> Annual Virginia EMS Symposium. The largest EMS training event in the state, and one of the largest in the country, welcomed more than 2,300 registered attendees, including staff, faculty, volunteers and vendors; and a total of 4,000 participants including guests. The symposium offered 15 course tracks and 365 courses, covering everything from hands-on training in trauma, medical and cardiac care to education for pediatrics, operations, and health and safety. Approximately 24,173 hours of continuing education (CE) credits were issued to EMS providers attending the symposium.

The symposium app for Apple and Android devices was also available for download. It included class schedules, course evaluations, important updates, on-site event information and more. This convenient mobile app continues to receive positive reviews from event participants. During the five-day training event, a two-day rescue camp for youth (ages 8-12) and teens (ages 13-18) was offered, and it taught basic lifesaving skills. A total of 24 youth and 16 teens attended the rescue camps. The week-long educational event was capped off with the Governor's EMS Awards ceremony. These awards, given in Governor Glenn Youngkin's name, recognize EMS providers and organizations from across the Commonwealth for their outstanding level of excellence and dedication to the EMS System. Read the press release: <https://www.vdh.virginia.gov/news/2022-news-releases/2022-governors-ems-award-recipients-announced-at-42nd-annual-virginia-ems-symposium/>.

Many thanks to the entire OEMS staff whose assistance and dedication make this event a continued success. Additional thanks go to staff responsible for preplanning, event coordination and on-site assistance: **Gary Brown**, director; **Scott Winston**, assistant director; **Adam Harrell**, associate director; **Dr. George Lindbeck**, state medical director; **Deborah Akers**, Accreditation, Certification and Education division director; **Chad Blosser**, education program manager; **Crystal Cuffley**, OEMS help desk; **Kimberly Fuller**, quality assurance/quality improvement specialist; **Tristen Graves**, public relations assistant; **Irene Hamilton**, admin and office specialist III; **Norma Howard**, continuing education specialist; **Jacqueline Hunter**, accreditation and scholarship coordinator; **Marian Hunter**, public relations coordinator; **Wanda Street**, executive secretary; **David Thomas**, fleet and logistics administrator, **Jasper Williams**, blackboard administrator. Thanks also to the following OEMS staff for their support: **Mohammed Abbamin**, **Mary Kathryn Allen**, **Becky Anhold**, **Daisy Banta**, **Michael Berg**, **Wayne Berry**, **James Burch**, **Samuel Burnette**, **Melinda Carter**, **Frank Cheatham**, **Devin Chinault**, **Sudheer Dadivela**, **David Edwards**, **Paul Fleenor**, **Chad Gregg**, **Douglas Layton**, **Daniel Linkins**, **Manoj Madhavan**, **Kari Magner**, **Leonard Mascaro**, **Stephen McNeer**, **Lori Meadows**, **Karen Owens**, **Robert Page**, **Ron Passmore**, **Tim Perkins**, **Wayne Perry**, **Sean Regan**, **Kelsey Rideout**, **Jessica Rosner**, **Chris Vernovai**, **Scotty Williams** and **Greg Woods**.

### **Norfolk Department of Public Health Participates in Flu Shot and COVID-19 Booster Clinic at Annual Symposium**

The Norfolk Department of Public Health, in collaboration with the Virginia Office of EMS, hosted a flu shot and COVID-19 booster clinic to help prevent and combat the spread of influenza and COVID-19. This event was open to all EMS providers and symposium participants. Approximately 86 vaccines (65 flu and 21 COVID-19) were administered to attendees. Many thanks to the Norfolk Department of Public Health's staff: **Patricia Andrews**, contract RN; **Lisa Billow**, contract RN; **Kelley Cuffy-Moe**, contract RN; **Ella Daniels**, contract RN, **Denise Koziol**, contract RN; **Frankie Fisher**, PHN Sr.; **Hilary Noska**, PHN; **Natalee Jordan**, PHN; **Nicole Whitfield**, PHN; **Summer Atseye**, MRC Program Coordinator; **Rick Dollar**, MRC

volunteer; **Dominick Ramos**, MRC volunteer; **Megan Hill**, Program Support Tech; **Lavenia Woodhouse**, Outreach Worker; **Delores Paulding**, Nurse Manager; **Phelecia Riddick-Debnam**, Clinic Nurse Supervisor and **Eve Zentrich**, Emergency Planner.

# Division of Regulation & Compliance



## **VII. Regulation and Compliance**

The Division of Regulation and Compliance Enforcement performs the following tasks:

- Licensure & Permitting
  - EMS Agencies and vehicles
- Regulatory Compliance Enforcement of:
  - EMS Agencies
  - EMS Vehicles
  - EMS Personnel
  - EMS Physicians
  - RSAF Grant Verification
  - Regional EMS Councils
  - Virginia EMS Education
  - Complaint\Compliance Investigations
  - Drug Diversion Investigations
  - LCR Database Portal Management
- Endorsement of EMS Physician (Operational Medical Director)
- Background Investigations (review finger-print based criminal histories)
  - Determine eligibility for EMS certification and/or affiliation in Virginia
- Litigate on behalf of the OEMS in appeal hearings to defend enforcement actions
- EMS Regulation Variance/Exemption application determinations
- EMS Psychomotor Examination Accommodation Request determinations
- Creation and/or Revision of EMS Regulation(s)
  - Utilizing the Virginia Division of Legislative Services, Regulatory Information System, and Department of Planning and Budget as required

- Provide Virginia General Assembly legislative session OEMS representation
  - Provide written and verbal consultation regarding proposed legislation being debated or considered, that involves or impacts the delivery of EMS in the Commonwealth of Virginia
- Virginia EMS Regulation & Compliance Enforcement Educational Resource
  - Educational programs provided on request and during most EMS conferences throughout the Commonwealth of Virginia
- Provide support to all Committees of and for the State EMS Advisory Board
- Provide EMS regulatory and compliance consultation services for EMS agencies and localities within the Commonwealth of Virginia
- Represent the Virginia Office of EMS, Regulation & Compliance Enforcement Division on national boards and/or committees

*We perform these tasks to protect the health, safety, and welfare of the public when accessing or utilizing the EMS System in the Commonwealth of Virginia.*

The following is a summary of the Division's activities for the fourth quarter, 2022:

#### **EMS Agency/Provider Compliance Enforcement Activity**

<b>Enforcement</b>	<b>2022 1st Quarter</b>	<b>2022 2nd Quarter</b>	<b>2022 3rd Quarter</b>	<b>2022 4th Quarter</b>	<b>2022 YTD Totals</b>	<b>2021 Totals</b>	<b>2020 Totals</b>
<b>Citations</b>	<b>6</b>	<b>3</b>	<b>4</b>	<b>8</b>	<b>21</b>	<b>19</b>	<b>29</b>
EMS Agency	1	3	3	0	7	5	10
EMS Provider	5	0	1	8	14	14	19
<b>Verbal Warning</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>2</b>	<b>7</b>	<b>7</b>
EMS Agency	0	0	0	0	0	2	1

EMS Provider	1	0	0	1	2	5	6
<b>Correction Order</b>	<b>4</b>	<b>4</b>	<b>5</b>	<b>1</b>	<b>14</b>	<b>18</b>	<b>6</b>
EMS Agency	2	3	3	1	9	7	0
EMS Provider	2	1	2	0	5	11	6
<b>Suspension</b>	<b>9</b>	<b>17</b>	<b>12</b>	<b>14</b>	<b>52</b>	<b>28</b>	<b>34</b>
EMS Agency	3	1	0	1	5	3	0
EMS Provider	6	16	12	13	47	25	34
<b>Revocation</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>6</b>	<b>0</b>
EMS Agency	0	1	0	0	1	0	0
EMS Provider	0	0	0	0	0	6	0
<b>Compliance Cases</b>							
Investigations Opened	63	75	73	53	263	196	180
Investigations Closed	62	63	84	59	268	173	168
<b>Drug Diversions</b>	<b>6</b>	<b>2</b>	<b>2</b>	<b>3</b>	<b>13</b>	<b>11</b>	<b>10</b>
<b>Variances</b>	<b>26</b>	<b>86</b>	<b>27</b>	<b>19</b>	<b>158</b>	<b>96</b>	<b>87</b>
Approved	5	54	16	8	83	50	49
Denied	21	32	11	9	73	44	38

<b>RSAF Grant Verifications</b>	<b>61</b>	<b>34</b>	<b>55</b>	<b>44</b>	<b>194</b>	<b>195</b>	<b>258</b>
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<b>Quarterly EMS Agency &amp; Vehicle Inspection/Licensure Activity</b>
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<b>Licensure</b>	<b>2022 1st Quarter</b>	<b>2022 2nd Quarter</b>	<b>2022 3rd Quarter</b>	<b>2022 4th Quarter</b>	<b>2021 Total</b>	<b>2020 Total</b>
<b>Total Agencies</b>	563	560	557	558	566	573
New Agency	2	3	1	7	7	10
New Vehicles	112	133	120	77	295	232
<b>Total Quarterly Inspections</b>	631	1070	928	716 (3345 YTD)	3121	3082
Existing Agencies Inspected	76	69	52	47	321	250
Existing Vehicles Inspected	270	702	607	501	2429	2683
Unscheduled “Spot” Inspections	171	163	148	84	308	149

*Quarterly IFFC = Informal Fact Finding Conferences (APA) appeal hearing update*

There were no Administrative Processes Act - Informal Fact Finding Conferences (hearings) held during this quarter.

Both Cam Crittenden, R.N., and Ron Passmore, NRP, have completed courses at the National Judicial College on a tract to obtain non-attorney, Administrative Law Judge (hearing officer) credentials. Ms. Crittenden is the sole hearing officer for all Regulation & Compliance Enforcement Division cases.



## Background Investigation Unit

Background Checks	2022 1st Quarter	2022 2nd Quarter	2022 3rd Quarter	2022 4th Quarter	2021 Total	2020 Total
OEMS Processed	2,215	2,558	2,426	2,221	9,813	6,410
Eligible	1,986	2,359	2,094	2,027	9,249	6,310
Non-Eligible	6	22	6	4	34	54
Manual Review Criminal history	304	125	324	228	1,225	430
Pending Review	121	62	29	62	Not Cumulativ e	Not Cumulativ e
Rejected Fingerprint cards	6	37	10	5	51	56
Jurisdictional Ordinance Processed	96	78	287	123	530	1,119

## EMS Physician Endorsement

<b>Operational Medical Directors</b>	<b>2022 1st Quarter</b>	<b>2022 2nd Quarter</b>	<b>2022 3rd Quarter</b>	<b>2022 4th Quarter</b>	<b>2021 Total</b>	<b>2020 Total</b>
Active & Endorsed	229	221	221	221	228	208
OMD Applications processed	14	18	15	21	66	39
OMD Applications approved	13	12	7	15	57	34
OMD Applications denied	1	6	7	4	9	5
OMD Endorsement Expired	5	5	3	6	12	8

The 2023 OMD Workshop schedule started at the EMS Symposium in Norfolk on November 10, 2022.

The 2023 OMD Workshop schedule is available and can be found on the OEMS website, under Regulation & Compliance Enforcement tab, then click EMS Medical Director sub-tab, then click the link titled EMS Medical Director Workshops 2022 – 2023.

## Regulatory Process (Chapter 32) Update

OEMS Regulation & Compliance Enforcement Division continues to work with key EMS stakeholder groups to review suggested revisions to all sections of the current EMS Regulations (Chapter 31).

- **Stage 1** - A Notice of Intended Regulatory Action (NOIRA) posted in the Virginia Register of Regulations (Vol. 33 Issue 19) on May 15, 2017. The deadline for public comment was June 14, 2017. No public comments were submitted. OEMS Staff is working to complete the required documentation for the next step for the “Proposed” EMS Regulations.
- The Final Draft of “Proposed” EMS Regulations (Chapter 32) was submitted for review and approval by the Rules & Regulations Committee at their January 2023 meeting. Once approved it will be manually entered into the RIS as project 5100.
- The required Town Hall (TH-02) form will also be completed following the State Advisory Board approval. (May 2023) This form details all changes in regulatory language from Chapter 31 to 32 by comparison. This form must be submitted to the Regulatory Town Hall following approval of the Final Draft of Chapter 32 by the Board of Health in September 2023.
- Office of EMS will then submit the approved final draft of Chapter 32 to the State Board of Health (Sept 2021) for approval to enter into Stage 2 of Regulatory Process (Executive Branch Review and Public Comment period)
- **Stage 2** - Submission of the completed TH-02 document for project 5100 (Chapter 32) will initiate the Executive Branch Review process which requires the Office of Attorney General, Department of Planning and Budget including an Economic Impact Analysis, Cabinet Secretary, and Governor of Virginia to review; then posted for a 60 day public comment period on the Virginia Regulatory Town Hall *\*(Target Goal for this phase is fall of 2023)*
- Following the 60 day comment period, all comments will be considered (adopted) and final regulatory language will be revised
- **Stage 3** – Submission of the completed (TH-03) document for project 5100 as the final regulatory package via the Town Hall to again receive a repeat Executive Branch review and final public comment period before adoption into law.

### **Additional Regulation & Compliance Enforcement Division Work Activity**

- ❖ The Regulation and Compliance Enforcement Division bi-monthly staff meeting(s) were held on October 12<sup>th</sup> through 14<sup>th</sup> and November 30<sup>th</sup> through December 2<sup>nd</sup> in Glen Allen, VA.
- ❖ Division Task Team(s) met on October 12<sup>th</sup> & November 30<sup>th</sup> to work on Regulation & Compliance Enforcement Division specific work projects and templates.
- ❖ Division Leadership Team (Division Director & Field Supervisors) met on October 12<sup>th</sup>, and November 28<sup>th</sup> to review, plan, and monitor the 2022 Division deliverable goals.
- ❖ Attended the following 28 meetings this quarter:
  - Oct 4<sup>th</sup> – CHaTR Division – MIH/CP Application form review Meeting
  - Oct 5<sup>th</sup> – Training & Certification Committee Meeting
  - Oct 5<sup>th</sup> – Policy Analyst Round table meeting - VDH
  - Oct 5<sup>th</sup> – Rules & Regulations Committee Meeting
  - Oct 5<sup>th</sup> – Medical Direction Committee Meeting
  - Oct 17<sup>th</sup> – Meeting with VCU Home Hospital Program – EMS Agency inquiry
  - Oct 26<sup>th</sup> – Reg & Compliance Enforcement Team meeting – case review
  - Oct 26<sup>th</sup> – IT meeting – special status code review
  - Oct 27<sup>th</sup> – OEMS Symposium Walk Thru planning meeting
  - Nov 1<sup>st</sup> – Long Term Care Cross Collaboration Assembly
  - Nov 15<sup>th</sup> – VDH Regulatory Development & Review Process Training
  - Nov 15<sup>th</sup> – IT meeting – Special Status Code development
  - Nov 15<sup>th</sup> – Draft Paramedic Legislation review meeting
  - Nov 15<sup>th</sup> – Meeting with VHHA Executive Director – legislation review
  - Nov 16<sup>th</sup> – Regional EMS Directors Meeting
  - Nov 16<sup>th</sup> – The Paramedic Will See you now – CP/MIH Community based care
  - Nov 17<sup>th</sup> – Medevac Committee Meeting
  - Nov 17<sup>th</sup> – Workforce Development Committee Meeting

- Nov 17<sup>th</sup> – Trauma Pre-hospital Committee Meeting
  - Nov 17<sup>th</sup> – EMS for Children Committee Meeting
  - Nov 17<sup>th</sup> – Executive Committee Meeting
  - Nov 18<sup>th</sup> – State EMS Advisory Board Meeting
  - Nov 28<sup>th</sup> – Compliance Case review meeting
  - Nov 28<sup>th</sup> – Regulation & Compliance Enforcement Leadership Team meeting
  - Nov 30<sup>th</sup> – IT meeting – review of electronic signature ability
  - Dec 20<sup>th</sup> – Compliance Case review meeting
  - Dec 28<sup>th</sup> – Compliance Case review meeting
- ❖ DEA/BOP/OEMS Task Force continued meeting schedule to work collaboratively in developing manageable pathway for EMS agencies to comply with BOP regulations and upcoming new DEA rules once they are posted. More on this to come in the future.
- [pharmbd@dhp.virginia.gov](mailto:pharmbd@dhp.virginia.gov) – email address to send Board of Pharmacy any EMS Agency specific questions regarding CSRC's.
  - No New updates as of the time of this report.

❖ **Regulation & Compliance Enforcement Division website updates:**

- Division Section of OEMS website has been updated and reorganized as follows:
  - Regulation & Compliance Enforcement Division Home page
    - Quick links for most common forms
  - There are 10 division subtabs as follows:
    - Agency Licensure
    - Regulation
    - Guidance Documents and Memo's
      - *EVOC Equivalents Listing – (UPDATED)*
    - Criminal History Record

- Fingerprint Submission
- EMS Interstate Compact (REPLICA)
- Data Compliance Report
  - *Updated information regarding agency data compliance posted*
- Durable Do Not Resuscitate (DDNR)
- EMS Medical Directors
- Sample Policies and Agreements

## Regulation and Compliance Enforcement Division Structure Profile

### **Ronald D. Passmore, NRP, TS-C**

Division Director, Regulation and Compliance Enforcement

Phone: (804) 888-9131

Oversees the Division of Regulation and Compliance Enforcement, focus is on the following broad areas:

- EMS Physician initial and re-endorsement
- EMS agency initial and re-licensure
- EMS vehicles permitting and renewal
- EMS regulations development and enforcement
- Variances and Exemptions processing for provider, agencies and entities
- OEMS policy advisor to Executive Management
- Provide technical assistance & guidance to all committees of and the state EMS Advisory Board
- OEMS Staff Liaison to the Rules and Regulations Committee
- Manages Operations Education Track for Virginia EMS Symposium
- Technical assistance to local governments, EMS agencies and providers
- Background investigations on EMS certified personnel and EMS students

- Regulatory enforcement, complaint processing
- National issues involving licensure and regulations

**Marybeth Mizell**

Senior Administrative Assistant,  
Physician Endorsement & Background Investigation Unit  
Phone: (804) 888-9130

- Provides direct administrative support to the Division Director and staff while managing all Virginia endorsed EMS physicians, to include all applications for OMD endorsement and re-endorsement, and provides technical support assistance to field team administrative assistants.
- Update and maintain listing of all Virginia endorsed EMS Physicians
- Provides staff support to the Rules and Regulations and Transportation committees

**Kathryn “Katie” Hodges**

Administrative Assistant,  
Background Investigations  
Phone: (804) 888-9133

Provides support to field team and coordinates background investigation activities to include:

- Receiving and processing results of all fingerprint based background investigations
- Notification to agencies regarding member eligibility status per background investigations
- Assist Field Investigators (Program Representatives) with all administrative tasks
- Assist customers by navigating requests to the appropriate resource for resolution

**OEMS Program Representatives (Field Investigators)**

Provides field support to EMS agencies, local government, facilities and interested parties in the development of EMS to include the following:

- EMS agency initial and renewal licensure by inspections
- EMS vehicle initial and renewal permits and spot inspections
- EMS regulation development and compliance enforcement
- EMS complaint investigations
- Verify awarded EMS grants to eligible recipients from RSAF program

- Liaison and OEMS representative at various local and regional meetings with organizations to include but not limited to local governments (county, city, town), regional EMS Councils, VDEM, VDFP, OCME, federal/state/local law enforcement agencies, etc...
- Subject matter experts on the delivery of EMS within the Commonwealth
- Facilitator for matters related to OEMS through the various Office of EMS programs

**Sr. Supervisor, Jimmy Burch, NRP** ([Jimmy.Burch@vdh.virginia.gov](mailto:Jimmy.Burch@vdh.virginia.gov)) – *Virginia - East*

**Chad Gregg, EMT-I** ([Chad.Gregg@vdh.virginia.gov](mailto:Chad.Gregg@vdh.virginia.gov)) – *Coastal*

**Steve McNeer, EMT-I** ([Stephen.McNeer@vdh.virginia.gov](mailto:Stephen.McNeer@vdh.virginia.gov)) – *Central*

**Doug Layton, EMT-P** ([Douglas.Layton@vdh.virginia.gov](mailto:Douglas.Layton@vdh.virginia.gov)) – *Shenandoah*

**Supervisor, Paul Fleenor, NRP** ([Paul.Fleenor@vdh.virginia.gov](mailto:Paul.Fleenor@vdh.virginia.gov)) – *Virginia - West*

**Ron Kendrick, EMT-I** ([Ron.Kendrick@vdh.virginia.gov](mailto:Ron.Kendrick@vdh.virginia.gov)) – *Appalachia*

**Scotty Williams, EMT-P** ([Scotty.Williams@vdh.virginia.gov](mailto:Scotty.Williams@vdh.virginia.gov)) – *Highlands*

**Len Mascaro, NRP** ([Leonard.Mascaro@vdh.virginia.gov](mailto:Leonard.Mascaro@vdh.virginia.gov)) – *Northern Virginia*

The Regulation and Compliance Team of professionals provide the Commonwealth of Virginia with more than 142 years of combined experience specific to EMS regulations and compliance enforcement; in addition, this team of twelve has more than 292 years of combined experience with the delivery of Emergency Medical Services as clinical providers and EMS administrators.



# **Division of Trauma and Critical Care**

## **VIII. Division of Trauma and Critical Care**

### **Staffing/Recruitment:**

- Trauma/Critical Care Manager Hired January 2023

### **Trauma/Burn Center Reviews:**

- 16 verification/designation/consultation reviews completed in CY 2022
- 2 verification reviews completed Q4 2022
- 10 currently scheduled for CY 2023

# **Central Shenandoah EMS Council**



## **IX. Central Shenandoah EMS (CSEMSC) Regional Office**

*This document contains hyperlinks to supporting documentation publicly available and submitted for approval to the Central Shenandoah EMS Council (CSEMSC) Board of Directors. The items outlined are in accordance with the Regional Council MOU's required deliverables.*

### **Fiscal Year 2023 - Second Quarter Report**

#### **Regional Infrastructure**

##### **A. Annual Financial Report**

1. In accordance with MOU 517-18-M037, the Central Shenandoah EMS Council contracts with Advantage Accounting & Tax Solutions. The 2022 audit was completed and presented to the CSEMSC Board of Directors in the October Annual Meeting. [Financial reports](#) are available online through the [CSEMSC website](#).

##### **B. Annual Report**

1. CSEMS Staff present an [Annual Report](#) to the Board of Directors at each annual meeting (October). This report outlines the activities of the Council and provides an outlook as to the organization's health. The report provides information about the financial activities, agency support, stakeholder representation, and the ongoing progress as a Hybrid Regional EMS Office.

##### **C. Continuity of Operations**

1. CSEMS/OEMS staff are in the process of building "GO Bags" for staff members so that each bag will provide most basic materials to work off-site and a place to store/carry laptop(s). These bags will ensure essential equipment needed when the Continuity of Operations Plan is amended. Currently, the Emergency Coordinator at the Virginia Office of EMS is reviewing the COOP for compatibility and uniformity with the VDH plans.

2. James Larrick, Technical Resource Assistant, has been developing an Action Board on Monday.com to allow for identification of and instruction for routine office tasks to be used in the case of partial or full COOP activation. This board will automate notifications and redirect communications pathways during COOP activations at any level.

D. Regional Policies and Bylaws

1. Pending policy development from OEMS, no action has occurred on policy development at the Hybrid Regional EMS Office.
2. Bylaws were amended to streamline purchasing processes by removing “line-item” amendment approval requirements by the full Board of Directors. The new changes permit the Executive Director and President to amend line-item budget adjustments within an approved budget, and to amend overall budget amounts when direct income is guaranteed. Examples would be contract modifications for procurement through state agencies or awarded grant funds. New [bylaws](#) changes were unanimously approved in [October, 2022](#) and are available online.

E. PI Schedule and Topics

CSEMS Performance Improvement topics are developed and monitored by the Medical Control Review Committee (MCRC). The MCRC identified the following topics for performance improvement:

1. Airway, Cardiac Care, and Resuscitation
2. Opioid Overdose Management
3. Pediatric and Neonatal Care
4. Sepsis Management
5. Stroke Management
6. Trauma Triage and Management

Performance plans were created in workgroups and approved by the MCRC. Specific schedules are still in development and CSEMS is working with one of ESO’s data researchers to draft reports in ESO Insights. The functionality of ESO Insights is improving and CSEMS is working on creating reports. CSEMS is also assisting agencies with data submission to the state repository and drafting a report for all agencies to utilize for this. The regional EMS Performance Improvement Plan is included [on the CSEMS website](#).

F. CIPS Team Semi-Annual Report

The Central Shenandoah EMS Council has an active CISM team available 24 hours 365 days per year. CSEMS has rebranded the team so as to distinguish some of the stigma surrounding CISM, and to embrace a more comprehensive approach to provider care. The Critical Incident Provider Support (CIPS) team had seventeen activations in Calendar Year 2022, however the team did not have any activations in the first or second quarter of FY23. CSEMS is actively seeking out businesses and programs to partner with in an effort to offer a plethora of services to first responders.

G. Quarterly Meeting Agendas and Minutes

1. [Regional Instructor Network Agenda](#)
2. [Regional Instructor Network Meeting Minutes](#)
3. [CIPS Meeting Agenda](#)
4. [CIPS Meeting Minutes](#)
5. [Pharmacy Meeting Agenda](#)
6. [Pharmacy Meeting Minutes](#)
7. [BOD Meeting Agenda](#)
8. [BOD Meeting Minutes](#)
9. [MCRC Meeting Agenda](#)
10. [MCRC Meeting Minutes](#)

#### H. Board & Committee Member Updates

1. [Board of Directors](#)
  - Appointment Changes-
    - No new appointments this quarter.
    - Effective 10/14/2022, Highland County representative Carl Williams resigned from Highland County EMS, and thus resigned from the CSEMS Board of Directors. Highland County has not yet appointed a replacement, so this seat remains vacant.
    - Chief Jeremy Holloway submitted an official resignation from the Board of Directors, appointing EMS Chief Steve Powell to serve as the primary representative for the CSEMS Board of Directors. Chief Holloway will remain the alternate representative.
  - Officer Elections
    - Vacant position of Vice President was filled by Steve Powell with a unanimous vote.
    - Gary Critzer was reelected to the position of President with a unanimous vote.
    - Donna Hurst was reelected to the position of Secretary/Treasurer with a unanimous vote.
2. [Medical Control Review Committee](#)
  - Appointment Changes
  - Pharmacy Subcommittee
    - John Lubkowski retired at end of quarter
      - (a) Augusta Health representative is being filled by Josh Dakon until new Director of Pharmacy is hired

I. Quarterly Financial Report

1. [Profit & Loss Statement](#)
2. [Budget vs. Actual Report](#)

J. Education Coordinator Activities

1. The first [Regional Instructor Network](#) meeting was held in October, 2022. During this meeting, staff and local instructors discussed future training needs, updates to CTS testing, and the NEMSES 2021 standards rollout from OEMS. Additionally, “Red Dot” skills were reviewed, and instructors were directed to resources for tracking and approving skills provided by CSEMS educational staff.
2. CSEMS staff conducted training opportunities as requested by EMS agencies in the region.
3. Staff and the planning committee have been actively meeting to plan the 2023 Shenandoah Valley EMS Expo. A Call for Presentations was posted early in the quarter, and nearly 50 presentations were submitted. Registration is now available at [www.svemsexpo.com](http://www.svemsexpo.com). For \$25, participants can attend a 3-day Symposium-type experience with free-parking, meals included, and included gifts. This Expo is a partnership between the [Thomas Jefferson EMS Council](#), [Lord Fairfax EMS Council](#), and [Central Shenandoah Regional Office/EMS Council](#). This quality educational experience is aimed to provide access to quality education and professional development for those unable to travel to the Virginia EMS Symposium.
4. Becky Anhold coordinated continuing education courses, along with maintaining Regional Protocol Orientation and developing new modules for [Needle Thoracentesis](#). In-person courses taught during the quarter included:
  - CE Course @ Highland - Death Scenes & Skills Drill (11/21/2022)

K. Community Training Center Activities

1. [American Heart Association](#)
  - The CSEMS AHA Community Training Center continues to teach classes at the Training Center and local businesses.
  - Staff offered a BLS Instructor Course in November.
  - Laurie Cook and Vicky Anderson attended a hands only CPR demonstration on October 8, 2022 at Bridge Christian Church’s health day

## 2. National Association of EMTs

- CSEMS/OEMS Staff continue to plan development of instructors for NAEMT classes but have not been able to offer courses due to candidate availability. The [REMS Regional Office](#) has been conducting courses under the CSEMS Training Center. Daniel Linkins and Charles Feiring assisted in teaching AMLS and PHTLS in November and December, respectively.
- [The NAEMT Community Paramedicine Series Motivational Interviewing](#) will be offered this year at the Shenandoah Valley EMS Expo during pre-conference sessions.
- CSEMS Training Center Activities for Q2 included:
  - REMS - Kelsey Rideout - AMLS - 11/29-30/2022
  - REMS - Kelsey Rideout - GEMS - 12/15/2022
  - REMS - Kelsey Rideout - PHTLS - 12/20-21/2022

## L. Technical Assistance Requests

1. CSEMS staff continue to provide excellent customer service, with a large percentage of surveys from the Office of EMS generated from CSEMS constituents.
  - October 2022 - CSEMS was referenced in 63.6% of OEMS survey responses.
  - November 2022 - CSEMS was referenced in 21.4% of OEMS survey responses (significant responses received from Symposium accounted for this decrease in percentage).
  - December 2022 - CSEMS was referenced in 42.9% of OEMS survey responses.
  - No negative feedback was mentioned regarding experiences with CSEMS employees.
  - Staff are frequently mentioned in comments for willingness to help and ability to provide information and direction as needed. This highlights the importance of accessible support that is close to the providers and agencies, and the success of the Regional Hybrid OEMS Model.



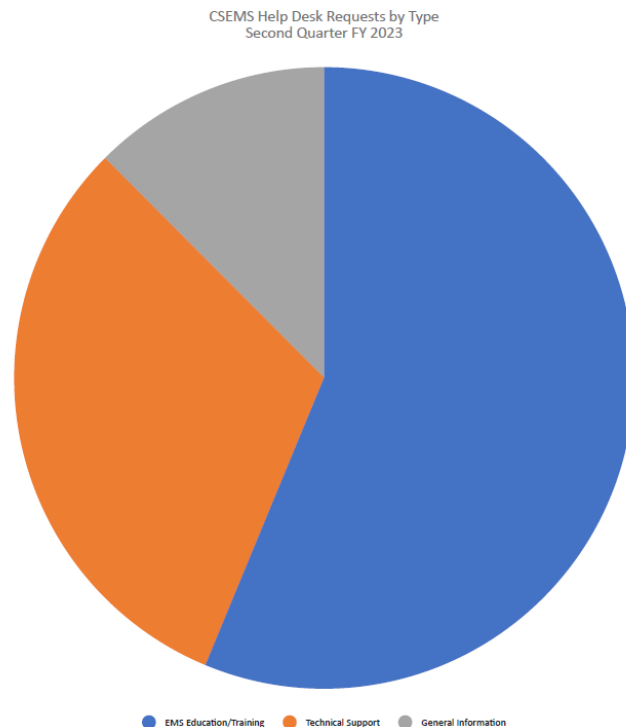
2. CSEMS uses a helpdesk ticket system to track technical support activities

Category Request Type	Qty of Requests
EMS Education/Training	9
Technical Support	5
General Information	2

in a variety of categories. A summary of these activities is provided below:

#### M. State Committee Participation

1. CSEMS appoints members to various committees of the state EMS Advisory Board. Appointed individuals are listed below:
  - Matt Lawler - State EMS Advisory Board, Training and Certification Committee



- Gary Critzer – State EMS Advisory Board (representing Virginia Board of Health), state EMS Advisory Board Executive Committee, Rules and Regulations Committee

- Donna Hurst - Financial Assistance Review Committee, State Medevac Committee
- Asher Brand - Medical Direction Committee

2. Staff attended state committee meetings as listed below: *Note: due to staff illnesses during this time, limited representation was available. Kelsey Rideout from the REMS Regional Office assisted in providing meeting notes and action items for CSEMS staff to review and share with stakeholders. This resulted in a collaborative meeting on best practices and linking of tracking boards for all Hybrid Regional EMS Offices using [Monday.com](https://monday.com).*

State EMS Advisory Board Meetings	Staff Assigned	Status	Date
Emergency Management Committee			
EMS Emergency Management Committee Meeting	James Larrick	Attended	2022-11-17 09:00
EMS for Children			
EMS for Children Committee	James Larrick	Attended	2022-11-17 15:00
Executive Committee			
Executive Committee of the State EMS Advisory Board meeting	Daniel Linkins	Attended	2022-11-17 17:00
Financial Assistance Review Committee Meetings Meeting			
Financial Assistance Review Committee	James Larrick	Attended	2022-11-17 13:00
State EMS Advisory Board Meetings			
GAB Meeting - 11.18.22	James Larrick, Daniel Linkins	Attended	2022-11-18 10:00
EMS Advisory Board Composition Workgroup meeting	Daniel Linkins	Attended	2022-11-17 11:00

Legislative and Planning Committee			
Legislative and Planning Committee	Daniel Linkins	Attended	2022-11-18 08:30
Medical Direction Committee Meetings			
Medical Direction Committee Meeting 10.06.22	Daniel Linkins, Amanda Loreti	Attended	2022-10-06 10:30
Provider Health and Safety			
Provider Health and Safety Committee		Unable to Attend	2022-11-18 08:30
Rules and Regulations Committee			
Rules and Regulations Committee 10.5.22		Unable to Attend	2022-10-05
Regional EMS Council Executive Director's Group Meetings			
Regional Council Directors Monthly Meeting 11.2.22	Daniel Linkins	Attended	2022-11-02 13:00
Regional Council Directors Quarterly Meeting 11.16.2022	Daniel Linkins	Attended	2022-11-16
State Medevac Committee Meetings			
State Medevac Committee	Daniel Linkins	Attended	2022-11-17 09:00
Training and Certification Committee Meetings			
TCC Meeting 10.5.2022		Attended	2022-10-05 10:30
Transportation Committee			
Transportation Committee 10.3.22	Charles Feiring	Attended	2022-10-03
Trauma Administrative and Governance (TAG) Committee Meetings			

Trauma Emergency Preparedness and Response Committee Meeting	James Larrick, Daniel Linkins	Attended	2022-11-17 08:00
Trauma System Improvement Committee	Kelsey Rideout	Unable to Attend	2022-11-17 10:00
Trauma Prehospital Care Committee	Kelsey Rideout	Unable to Attend	2022-11-17 13:00
Trauma Post-Acute Care Committee	Daniel Linkins	Attended	2022-11-17 13:00
Trauma Acute-Care Committee	Daniel Linkins	Attended	2022-11-17 15:00
Trauma Administrative and Governance Committee	James Larrick	Attended	2022-11-18 08:00
Workforce Development Committee Meetings			
Workforce Development Committee	James Larrick	Attended	2022-11-17 10:30

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#### N. Other Regional Engagement Activities by Staff

1. Council staff attended the following regional meetings in an advisory capacity for this Quarter:
  - Augusta County Emergency Officers Association monthly meetings
  - Augusta County Task Force Meeting
  - Augusta Health EMS Advisory Board Meeting
  - Rockbridge Volunteer Emergency Officers Association monthly meetings
  - Harrisonburg/Rockingham Emergency Management Task Force quarterly meetings
  - Northwest Regional Health Care Coalition monthly meetings and exercises
  - RUSH monthly meetings
  - Sentara Rockingham Memorial Hospital (RMH) EMS Task Force Meeting
  - Staunton West End Business Association monthly meetings

- Unite Us VA Meeting
  - VDH Weekly Staff Forum
    - VDH Health District Collaborative meetings to discuss EMS integration - Chesterfield Health District, Chickahominy Health District, Blue Ridge Health District
    - VDH “Coffee Club” collaborative information sharing
2. Staff continue to develop the RUSH Initiative for Children program in cooperation with UniteUs, Beyond Lucid Technologies, the VDH Office of Family Health Services - Care Connection for Children, Rockingham County Fire-Rescue, Rockingham County Schools, Thorne Ambulance Services, and the Central Shenandoah Health District. A meeting in December resulted in a draft proposal to begin applications for grant funding.
  3. Staff continue to develop the deployment of the UCAPIT systems in the region:
    - Training videos are being developed and agency vehicle data is being gathered. Initial deployment is anticipated in February 2023 pending physical and system infrastructure.
  4. CSEMS participated in the Festival of Lights in Gypsy Hill Park in Staunton as this quarter’s Staff Team-Building Activity:
    - Display that was produced is reusable to allow for future involvement.
  5. Staff developed a Customer Relations Management on [Monday.com](https://Monday.com) to track assistance requests and personnel contact information to improve continuity and tracking by council staff
    - 13 recorded requests were fulfilled since October 20, 2022
    - Requests primarily involved relaying job and CE postings.
  6. SWEBA Block Party
    - Staff attended the Staunton West End Business Association’s community outreach block party on October 15, 2022 running a hands only CPR training booth
  7. Multi Council Collaboration
    - On December 14, 2022 Regional Office Staff participated in a networking event with BREMS and REMS Regional Offices to reduce workload duplication and improve operational efficiency between hybrid offices. This also provided an opportunity to network, connect with similar positions in other regions, and

share ideas and process best-practices. Additional staff will be included in future Regional Office Exchange activities.

8. Shenandoah Valley EMS Expo

- Regular planning meetings accelerated from monthly to weekly at end of quarter
- Event will be located at Blue Ridge Community College (BRCC)

9. **Early Access to Resuscitation by Laypersons and Law Enforcement (E.A.R.L.L.E).** This initiative aims to supplement recent legislation to deploy TeleCPR and Emergency Medical Dispatch in Communications Centers in Virginia. EARLLE is a multifaceted approach to improving resuscitation outcomes, particularly in rural areas with extended EMS response times.

- In October 2022, CSEMSC received a \$20,000 grant from the Titmus Foundation in Sutherland, VA to initiate AED placement on law enforcement Vehicles in Bath and Highland Counties. The total need for this portion of the project is approximately \$60,000. With these funds, and special pricing from Stryker, 11 AEDs



have been ordered with expected delivery in May or early June 2023. These devices are compatible with LP-15 monitors used by EMS agencies in these areas, and will provide pad compatibility to support interoperability.

- Another portion of this program is funded by the OEMS workplan and MOU, along with a partial grant from the PulsePoint Foundation. Regional implementation of PulsePoint will allow emergency communications centers to alert trained bystanders in proximity of a cardiac arrest, communicate a response, and provide the responder with locations of nearby public access AEDs. To date, six (6) of the seven (7) 9-1-1 centers in the CSEMS region have initiated the process to implement PulsePoint. Of these, one (Harrisonburg/Rockingham) was already using the system, while Staunton City and Augusta County have signed scope of work agreements and initiated kick-off planning.



Central Shenandoah EMS Council (CSEMS) provides regional EMS planning and technical support services and American Heart Association First Aid, CPR and AED training to its five cities and five counties, eleven towns and many public agencies within its boundary. Localities served by the Council include: the cities of Buena Vista, Harrisonburg, Lexington, Staunton and



Waynesboro and the counties of Augusta, Bath, Highland, Rockbridge and Rockingham. The region mirrors the boundaries of Virginia's Sixth Planning District which covers a geographic area of 3,439 square miles with a population of over 290,000. This makes the region the Commonwealth's largest planning district, geographically speaking, and fifth largest in terms of population. The member EMS agencies include non-profit, government and commercial services with a mixture of both paid and volunteer staff.

In 2018, the Council entered an agreement with the Virginia Office of EMS to become the Commonwealth's first Regional Office of EMS, in which operations and oversight will be directly provided by Virginia Office of EMS Staff, with collaboration and regional planning by the CSEMS Board of Directors and regional committees. Established in 1979, the Council continues to facilitate regional planning and implementation of the regional EMS system in the Central Shenandoah Valley in partnership with the Virginia Office of EMS.

The Central Shenandoah EMS Council's mission is *to provide regional planning and support services that will help reduce death and disability resulting from sudden or serious injury and illness in the communities we serve through planning and development of a comprehensive, coordinated regional EMS system and the provision of high-quality educational resources to enable the EMS community to provide the highest quality emergency medical care possible to those in need.*

# **Blue Ridge EMS Council**





## **X. Blue Ridge EMS (BREMS) Regional Office**

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**RE:** Second Quarterly Report FY 23 (October – December 2002)

**OBJECTIVE:** To provide information to the Office of EMS on the BREMS Quarterly Activities

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### **PROJECTS/PROGRAMS:**

#### **DART**

BREMS is continuing to work with DART, Data to Action Resource Team, on the data captured. Meetings will resume in January for FY 23.

#### **ESO**

BREMS continues to work with local EMS agencies and Centra for programs with ESO and HDE.

#### **Lifeline**

Update based on December 3, 2022: Virginia State Police have received the quote for the structural analysis at Long Mountain. The structural analysis was completed in order for BREMS to place additional equipment needed for the Farmville extension at Leigh Mountain. The original contract began in September of 2021 and BREMS received \$171,600.00 in October for the Farmville Extension project. BREMS administered 50% of the grant amount upfront for the purchase of equipment. As of December 3, 2022, the other remaining 50% of the original grant was still outstanding due to a delay of state contracts for DGS, structural analysis, etc. December 3, 2022, BREMS paid a progress payment of \$42,900 (half of the 50% remaining) to

the VTR Contractor, for equipment received, bench testing, microwave link programmed and tested, and the indoor equipment installed on Long Mountain. The remaining \$42,900 will be paid to the VTR Contractor upon full completion of the project.

### **Strategic Plan**

The BREMS Board of Directors are looking to start reviewing the strategic plan again beginning in the spring of 2023. It was last reviewed, updated, and approved in June 2022.

### **Regional EMS Office Update:**

- BREMS office furniture was delivered December 1, 2022. The conference room and front office furniture should be arriving end of January or the early part of February. BREMS purchased a portable screen and projector in order to hold meetings and trainings in the new location. It could be several months before our monitors, interactive white board, and security cameras are installed by Daly.
- BREMS officially moved on Thursday, December 15, 2022.
- Friday, December 16<sup>th</sup>- Jim Huffman, with the Regional EMS Council IT Infrastructure and Gene Dalton, with WVEMS Council, assisted BREMS staff with moving the internet, and phones to the new office.
- BREMS and the OEMS are finalizing the Hybrid Regional EMS Council contracts.
- BREMS continues to follow the current work plan. Our main work plans are the Wellness Program (CISM), Regional Training (to include Advanced Paramedic Program and AP Academy in January – April), and Recruitment and Retention.
- The Full Time Education Training Position- The first interview process did not yield a candidate. As of January 2023, BREMS is working with HR to reclassify the position.

### **Protocols/COI**

BREMS is continuing to work with the BREMS Benchmark Efforts with local EMS agencies who are working directly with ESO and Image trend to discover and develop data points in order to accomplish benchmarks for regional EMS protocols. Protocol peer review meetings have been placed on hold until the BREMS Regional Medical Director search is finalized. The treatment protocols are near completion and the next steps are the formulary, scope of practices, and procedures and policies.

### **Advanced Paramedic (AP) Program**

BREMS Training Coordinator is working to contact APs in the region to get their perspective on what is needed in the program, how they are doing, and what they may need. BREMS has scheduled the Spring AP Academy beginning in January 2023 with the application process and the first class on February 24<sup>th</sup>, second class on March 24<sup>th</sup>, and the third class on April 28<sup>th</sup>. The

AP academy will include lecture, skills lab, and mentorship with APs, prior to class completion and the final test.

### **Coverdell Stroke Grant**

BREMS has entered the second year of the CDC Coverdell Stroke Grant. Saylor Hardin still continues to work with BREMS on the grant. Saylor is currently in graduate school and attends our staff meetings regularly and meets with the Regional Director as we continue to work on the Coverdell Grant. We have made great strides in the FY 23 second quarter with Unite Us platform Insights for patient referral. As Centra refers these patients we are able to follow them in the Insights platform. As we learn and grow in our use of ESO Insights, we are also able to begin using ESO and begin building dashboards for stroke data, etc.

- **Virginia Stroke Registry:** We are waiting to hear from OEMS on the plan for the Regional EMS Councils to have access to the data in the Virginia Stroke Registry.
- **EMS Survey:** The EMS stroke inventory survey has been completed by the state. We are waiting on data from this survey to begin review and analyzing the survey results from across our region and the entire state of Virginia.

### **ASTHO Stroke Grant**

The ASTHO (Association of State and Territorial Health Officials) grant gives BREMS the opportunity to work with many community partners. BREMS is working closely with the Centra Community Paramedicine Program, VDH, Unite Us, BEATStroke, Virginia Cooperative Extension, Lynchburg Social Services, and the Lynchburg Community Market. The grant deadline has been extended to June 30, 2023. BREMS, Centra, and VDH are developing year end reports for the ASTHO grant but will still be able to work and draw down money from the grant until June 30, 2023.

The BREMS Regional Director, Mandi Zemaiduk with Centra Stroke Team, and Jimmy Mitchell with the Centra Paramedicine group continue to meet weekly by conference call to provide updates on the program.

BREMS has purchased food storage containers, measuring cups/spoons, and food scales for participating individuals. Additional blood pressure monitors have been purchased for the grant participants.

### **Regional Wellness Committee**

BREMS is working with providers across our region to help develop a Regional Wellness Program. During this first quarter, BREMS met with Christina Ferrell, Go with That Consulting, LLC. After Symposium, BREMS, CSEMS, and REMS submitted a job description for the Program Coordinator/Peer Support Licensed position for each Council. This will provide insurance as well. We look to hear something during the FY 23 third quarter. More to come on this program next quarter in hopes of having a completed plan to present.

- BREMS is working on our website to include information for peer support, education, trainings, and mental health resources.
- We would like to have this team in place by the end of spring 2023. During this time we will continue to work on developing the team SOGs, resilience training, and team development.
- BREMS is working on setting up resiliency training in late Spring 2023 / early Summer 2023 for the region.

The end goal of the committee is to help develop a regional support system for overall wellness in the BREMS region.

### **Regional Blood Program**

BREMS is in the beginning stages of working on the development of a regional blood program. We expect this program to start as a pilot program with a couple localities in FY 24, and then open the program to all who wish to participate after the pilot program yields results. BREMS is excited for this new initiative within the region.

### **Ebola Planning**

Early December 2022, BREMS met with Central Virginia Health District Epidemiologist, and the Centra Infection Control Team to update and discuss Ebola planning. We met in December 2022 and we plan on continuing our team planning in January 2023. The draft plan has been sent out to all agency OMDs, and the Ebola planning team for any suggestions or changes.

### **Trainings**

- Second Quarter Trainings: December 7<sup>th</sup> 6pm – 7:30pm- Virtual Instructor Lead Training (VILT) Stroke Training was rescheduled to February 9, 2023 from 6pm – 7:30pm. We will have in-person training offered in the new BREMS building with food provided by the Centra Stroke Team and Dr. John Gaughen. This is a great educational opportunity and training information will be forth coming as plans are finalized.

### **Regional Medical Direction**

Currently, Dr. George Lindbeck, the Office of EMS State Medical Director, is serving as the Interim Regional Medical Director for BREMS. We hope to have completed the search for the Regional Medical Director position by February 2023 time frame. If you have any questions, please reach out to BREMS. Dr. Lindbeck's email is [George.Lindbeck@vdh.virginia.gov](mailto:George.Lindbeck@vdh.virginia.gov). We will keep you updated on this position.

Submitted by

*Mary Kathryn Allen*  
BREMS Regional Director

# **Rappahannock EMS Council**



## **XI. Rappahannock EMS (REMS) Regional Office**

### **Fiscal Year 2023 Second Quarter Report October 1, 2022 – December 31, 2022**

Submitted by: Wayne Perry, REMS Regional Director  
Virginia Office of EMS

Kelsey Rideout, Performance Improvement Specialist (PIS)  
Virginia Office of EMS

Linda Harris, Regional Education Coordinator  
Rappahannock EMS Council

Nana Noi, Regional Systems Coordinator (RSC)  
Rappahannock EMS Council

Tatiana Pedroza, Regional Field Coordinator (RFC)  
Rappahannock EMS Council

Lara Traylor, Office Manager  
Rappahannock EMS Council

## Rappahannock EMS Council, FY23 Q2

The Rappahannock EMS (REMS) Council exists to facilitate the development and continued operation of a high-quality, dedicated, and coordinated emergency response and preparedness system for Planning Districts 9 and 16.

In November 2022, the REMS Council Board of Directors (BOD) approved the final piece of a restructuring plan intended to support the [Regional Strategic EMS Plan for 2022-2025](#). With this final adjustment, the previous committee structure was replaced with something that better fits the needs of this updated vision. The REMS Board of Directors identified five flagship committees that would each have one of the region's strategic goals in their charge. After a stakeholder survey, an assessment of the regional EMS system, and a review of other vision documents such as the [EMS Agenda for the Future 2050](#), the [Virginia OEMS State Strategic and Operational Plan](#), and the [VDH Strategic Plan](#), the BOD approved a complete revision of the strategic EMS plan.

Strategic Goal #1: **Expert Clinical Care** is going to be monitored and administered by the Regional Medical Review Committee and will support the goal of VDH to be a trusted source of public health service.

Strategic Goal #2: **Health and Wellness** is to be addressed through the Regional Incident and Threat Mitigation Committee and will serve to foster healthy, connected, and resilient communities, another goal of the VDH strategic plan.

Strategic Goal #3: **Cultivate Talent**, which is aligned with the VDH Goal to "Maintain a competent and valued workforce" will be managed under the Regional Guidelines and Training Committee.

Strategic Goal #4: **Drive Innovation** aims to lead in the region's EMS system and the Executive Committee will be fostering those activities.

Strategic Goal #5: **Healthcare Collaboration** seeks to weave EMS into the broader healthcare system. Activities related to this goal, which will serve another VDH Goal to "Assure the conditions that improve health opportunity" will be led by the Regional Strategic Planning Committee.

Given this new structure, there has been a corresponding revamp of the quarterly reporting format. Progress toward the five strategic goals and the activities that support these initiatives will be described by seeking and completing a series of milestones outlined in the annual work plan.

## Strategic Goal #1: Expert Clinical Care

*Expert Clinical Care is provided widely throughout the Regional EMS System*

Strategies that were identified as important during the stakeholder analysis include the following:

- EMS clinicians and EMS system leaders receive rapid feedback, including patient outcome information and other patient data, from the healthcare continuum to improve performance measurement and provide quality improvement and education.
- EMS care is based on the best available evidence and best practices, with a focus on outcomes determined by the community and the patients, including patient-reported outcome measures – the outcomes, as well as the evidence-based process involved in achieving them – are measured and publicly reported.
- EMS data systems deliver real-time knowledge about patterns of disease, injury, and access to care. Information collected and shared in these systems informs decisions made related to healthcare operations, public health, and interventions related to social determinants of health and injury and illness prevention.
- EMS is a versatile and mobile community healthcare resource, integral to regional systems of care that prevent and treat acute illness and injury, as well as chronic ailments.

In order to achieve this strategic goal, the REMS Council developed a list of initiatives aimed at the strategies for **Expert Clinical Care**. To move toward these strategies in a measurable and distinct pathway, REMS put forward 36 specific milestones in the FY23 Work Plan to help ensure **Expert Clinical Care** is data driven, versatile, changes are evidence-based, care is exceptional and empowered clinicians are available throughout the region. Some milestones are ongoing throughout the year and others are specific to the second quarter. Below are the milestones and the activity or progress towards reaching these milestones.

### Ongoing Milestones:

- Provide technical support to EMS agencies and EMS Physicians
  - REMS staff participated in an ESO Meeting on 11/01/2022 with Orange County to provide technical assistance.
- Provide technical support to EMS agencies, advocating for compliance with BoP and DEA requirements for medication storage.
  - Still awaiting a response from the DEA with the new regulations in order to move forward with this project.
- Review regional capabilities and EMS call volumes.



- ESO data access and quality remain insufficient to address and complete this milestone.
- A 12-lead survey to ensure all EMS agencies in the region have EKG transmission capability is planned. REMS is currently building an electronic repository in Monday.com for EMS agency points of contact, similar to a customer relationship management (CRM) tool.
- Publishes best-practices.
  - In line with an article published on EMS1, the staff will be reviewing additional data on the benefits of heads-up CPR.
  - Based on information from the 2022 Virginia EMS Symposium, the staff will be evaluating data regarding a claim that SpO2 values displayed among patients of different races did not provide the same correlation to PaO2 values on an Arterial Blood Gas (ABG).
  - Based on information from the Pre-Hospital Research Care Forum, the staff will review data suggesting that high fraction Oxygen following ROSC in OHCA may increase reperfusion brain injury.
  - A request was made from an EMS agency in the region to receive an interpretation from EMS Physicians about the use of a seat belt restraint system that prevents patients from releasing stretcher straps (e.g. when transporting a psychiatric patient). The use case would be to prevent patient or provider injury when treating someone who is hypoxic/confused/disoriented and to prevent patients from leaving a moving ambulance. This was added to the agenda for the Medical Review Committee.
  - REMS Council circulated information among the committee and workgroup structures of the new mental health resources made available subsequent to Governor Youngkin's announcement of the new Behavioral Health Plan for Virginia - "[Right Help, Right Now](#)".
  - The REMS Council is collaborating with the Community Service Boards to promote and share the [Adult](#) and [Youth](#) Mental Health First Aid Training events.
  - REMS Staff participated in a CDC conference call discussing updates on bivalent vaccines and reviewing the most recent vaccine effectiveness data, the Centers for Disease Control and Prevention's clinical guidance for bivalent vaccines, and strategies for communicating with patients about COVID-19 vaccination.
- Report and publish time-critical/sensitive conditions.
  - ESO data access and quality remain insufficient to address and complete this milestone.

- Review and address shared-concerns received from stakeholders regarding EMS operations and patient care provision.
  - The Performance Improvement Specialist (PIS) received a shared concern inquiry in September 2022 that was reviewed and completed in early October.
  - The PIS also received two shared concern inquiries in December; both incidents are currently in the review process.

#### **FY23 2nd Quarter Expert Clinical Care Milestones:**

- Medical Review Committee meets quarterly. Heart and Stroke, Performance Improvement, Pharmacy, and Protocol Workgroups (WG) meet as needed to respond to PI data, plan objectives, or proposed changes.
  - MRC attempted to meet on 12/13/2022; no members attended
  - Heart and Stroke WG met on 09/19/2022.
  - Performance Improvement WG met on 10/19/2022 and again on 12/01/2022. A draft of a regional PI plan was reviewed by the WG and will be an agenda item for the next WG meeting in February.
  - Pharmacy WG met on 10/13/2022.
  - Protocol WG did not meet this quarter.
  - An employee work profile (EWP) was submitted to OEMS to add a clinical coordinator to the Critical Incident Stress Management (CISM) Team to enhance operational capabilities and resources.
- Measure and report scene times compared with the previous quarter
  - ESO data access and quality remain insufficient to address and complete this milestone.
- Measure & report OHCA survival rates
  - ESO data access and quality remain insufficient to address and complete this milestone.
- Measure/report PI Plan metrics
  - ESO data access and quality remain insufficient to address and complete this milestone.
- Maintain evidence-based patient care protocols, compliant with state scope of practice and formulary, to support the regional EMS system. Ongoing updates with quarterly reports of any updates/changes.
  - Triennial regional protocol update was completed in August, additional revisions were done in September and the BOD approved the final document at the November meeting.
  - Meetings were held to work on updating the regional stroke triage plan on 11/29/2022 and 12/29/2022.

- REMS performed work to identify the use rate of real-time CPR feedback devices. A survey was completed in December; sixteen individuals participated from twelve different agencies. The results showed that a minority of responses indicated the use of CPR feedback devices (only 6 out of 16) were using such technology. Of those agencies, all but 1 were using LP15 CodeStat and the other was using a Zoll product. Of the 10 agencies who are NOT using CPR feedback all but 2 were interested in adding this option to their cardiac arrest management. This information will be routed back to the WG to determine next steps.
- REMS provided a make-up Red Dot Advanced Practice Skills Session for area EMS providers on 11/04/2022.
- There was a Shared Concern Inquiry received for an EMS event in the region which was reviewed by the council and the agency on 11/07/2022.
- Stafford County EMS providers requested the use of the training center and support from staff to conduct scenario training for EMS providers from Company 12 on 11/08/2022. The training was offered again on 12/19/2022 for additional staff from Company 12.
- The Regional Director and the PIS attended the Virginia EMS Symposium in Norfolk in November, assisting with room hosting, offering staff support, and providing equipment for the training courses.
- The PIS participated in and supported Mary Washington Hospital for the EMS Night Out education offering on 12/15/2022.
- Two meetings were held by the Cultural Diversity WG to plan an educational session for a Q&A with local spiritual and cultural leaders to identify challenges in providing EMS care. For example, what are some challenges or barriers that may arise for EMS on the scene of a DOA who is Muslim, Jewish, or Seventh-Day Adventist?
- The Regional Training and Simulation Center in Fredericksburg (an AHA and NAEMT training site) is becoming more and more popular as the notice has circulated that we have a new and improved facility. The Training Center hosted 19 events at the facility, ranging from a few hours to a full week of use, with an attendance of 325 persons for Q3.
  - There were three uses requested by the community at-large. One provided CPR training, another allowed for skills review and practice by an EMT student, and a third was a practice session for a speech and debate club.
  - Two events were held by the FBI Tactical Section's National Operational Medical Unit under the School of Operational Medicine to teach an EMR Course and an EMT Refresher.
  - Mary Washington Healthcare, one of our regional healthcare collaboration partners, requested the training center for two ED Triage classes, an ENPC class, and a TNCC class.

- PHI Air Medical used the facility for new-hire candidate testing in October and November.
- Specifically related to EMS providers, REMS offered the following EMS education:
  - 11/22/2022      AHA BLS CPR Class
  - 11/29/2022      NAEMT Advanced Medical Life Support Class
  - 12/16/2022      NAEMT Geriatric Education for EMS (GEMS) Class
  - 12/20/2022      NAEMT Prehospital Trauma Life Support Class

## Strategic Goal #2: Health and Wellness

*Provider and Community Health, Safety, and Wellness are monitored and improved*

Strategies that were identified as key elements of monitoring and improving provider and community health, safety, and wellness include the following:

- EMS systems and vehicles take advantage of technology and data to expedite transit and reduce collisions.
- Leadership and EMS agencies promote and foster a culture of psychological safety where a challenge to current practice can be made without fear of retaliation.
- Standardized collection and reporting of data on medical errors, patient and provider injuries, and near-hits cause improvement, facilitate research, and improve procedures.
- EMS agencies are fully staffed with reliable, consistent manpower.

In order to aim for this strategic goal, the REMS Council developed a list of 12 key initiatives aimed at **Health and Wellness**. There were 30 specific milestones that REMS has put forward in the FY23 Work Plan to help ensure provider and community health, safety, and wellness are monitored and improved. As with the other goals, some milestones are ongoing throughout the year and others are specific to the second quarter. Below are the **Health and Wellness** milestones and the activity or progress towards reaching these milestones.

### Ongoing Milestones:

- Engage the EMS system to identify areas of improvement regarding unintentional injury, illness, and violence prevention and/or active shooter and hostile environment operations.
  - This objective has been approached as part of a collaborative effort from the REMS Staff. A survey, directed to EMS agencies in our region, has been created by our Regional Field Coordinator (RFC) to collect data and determine the current status. The survey will be distributed through Survey Monkey after one last review from the staff that is currently taking place. The survey will be sent to EMS agencies within the region during the fourth quarter.
  - The REMS Staff has become familiar with a suite of resources, including web-based training, that can allow bystanders to take potentially life-saving actions before emergency responders arrive. This is incorporated into training offered in the COPE outreach programs as well as offered to EMS agencies for their use. [You Are the Help Until Help Arrives](#) is being promoted throughout the region.

- The REMS Staff is promoting awareness of the FEMA program [National Continuous Improvement Guidance](#) which offers a framework to conduct consistent and rigorous continuous improvement activities before, during, and after incidents.
- Encourage EMS agencies to identify/address high-volume utilizers
  - This objective has been addressed as part of a collaborative effort from the REMS Team. The questionnaire directed to agencies in our region to collect data addressing this goal (and others) was created by our Regional Field Coordinator. There was an initial review by our Regional Director addressing scope and emphasis. The questionnaire was uploaded by our Regional Field Coordinator using Monkey Survey. One last revision from the REMS Team is currently taking place. The survey is expected to be sent to the agencies during the fourth quarter.
- Continue efficient operations of a regional public safety CISM team
  - This quarter the CISM team completed five outreach activities and held six interventions (1:1's and defusings).
- Coordinate and promote provider health and safety. Maintain a team of peers and mental health clinicians available to assist stakeholders.
  - The CISM team currently has 38 members representing the fire, EMS, law enforcement, dispatch, mental health, and chaplain disciplines. The team also utilizes three therapy dogs. It is available to respond 24/7/365.
- When requested, provide technical assistance and resources to agencies providing MCI or threat-mitigation training.
  - For preparation and background development, the RFC attended professional development training including IS-244.B Developing and Managing Volunteers FEMA, IS-289 Voluntary Agency Liaison (VAL) Overview FEMA, and Organizations Preparing for Emergency Needs (OPEN) training for Community-Based Organizations
  - REMS received several requests for ICS 300 and 400 training. This is being considered for addition to the FY24 work plan.
- Measure/report community engagement numbers for COPE/outreach
  - See details at end of this section.
- Publish effective provider/community health/safety social media alerts
  - Included in 2Q FY23 Media Report in Strategic Goal #5
- Encourage providers to access EAP and MH resources
  - The CISM team utilizes word of mouth and its own Facebook page to encourage providers to access services as needed.
- Support full-scale in-person exercises in both PD 9 and PD 16

- Staff has identified a jurisdiction and EMS agency interested in hosting an MCI drill. There are ongoing meetings to arrange the details and identify ways that REMS can support the agency.
- Provide life-safety education at regional community events
  - REMS staff reviewed a US Department of Justice document “[Ten Essential Actions to Improve School Safety](#)” looking for best practices and information to provide at community outreach.
- Engage with PSAP to ensure VHASS access, PAI and EMD use, and identify gaps and needs
  - REMS Regional Director and RFC are attending the Rappahannock Area Marcus Alert Meetings to engage with PSAP and identify gaps and needs.
  - REMS RFC and Office Manager were added to the VHASS System to have access to diversion and hospital status information.
  - REMS has begun to echo hospital status when diversion and closure is mentioned through VHASS to help EMS agencies make plans for patient destination.

#### **FY23 2nd Quarter Health and Wellness Milestones:**

- Incident and Threat Mitigation Committee will meet quarterly. The CISM team and other ad-hoc workgroups will assist as needed.
  - The ITM Committee did not reach a quorum on 10/20/2022
  - The CISM team met on 10/03/2022
- Provide technical support and engage EMS agencies with OEMS Special Projects (OMD workshops, agency communication, surveys, etc.)
  - The REMS Council will be hosting an OMD workshop with OEMS in February 2023.
- Create campaign encouraging residents to prepare/maintain an emergency kit
  - This goal was initially assigned during the first quarter, but staffing changes caused it to be pushed back and it is now included as part of the second quarter. The [campaign](#) has been created, budget and resources necessary for implementation are being studied, and other methods of collaboration (schools, community and faith groups, etc.) are being discussed.
- Identify intersections in PD9 that would benefit from response signaling
  - This objective has been addressed as part of a collaborative effort from the REMS staff. The survey directed to EMS agencies in our region to collect data addressing this goal - and others - has been created. The survey will be distributed during the fourth quarter.
- Submit quarterly report of CISM training and callout activities

- A quarterly report has been prepared for the REMS BOD and will be presented at the February BOD meeting.
- Measure/report community engagement numbers for Community Outreach and Patient Engagement (COPE) Outreach

COPE has over 65 community partners on board including the regional health department, private sector businesses, and other community-based organizations. The program is driving innovative healthcare services into the community through outreach and engagement. The COPE outreach facilitated health and social wellness checks to over 1000 people during calendar year 2022. It is expected that these numbers will double in calendar year 2023.



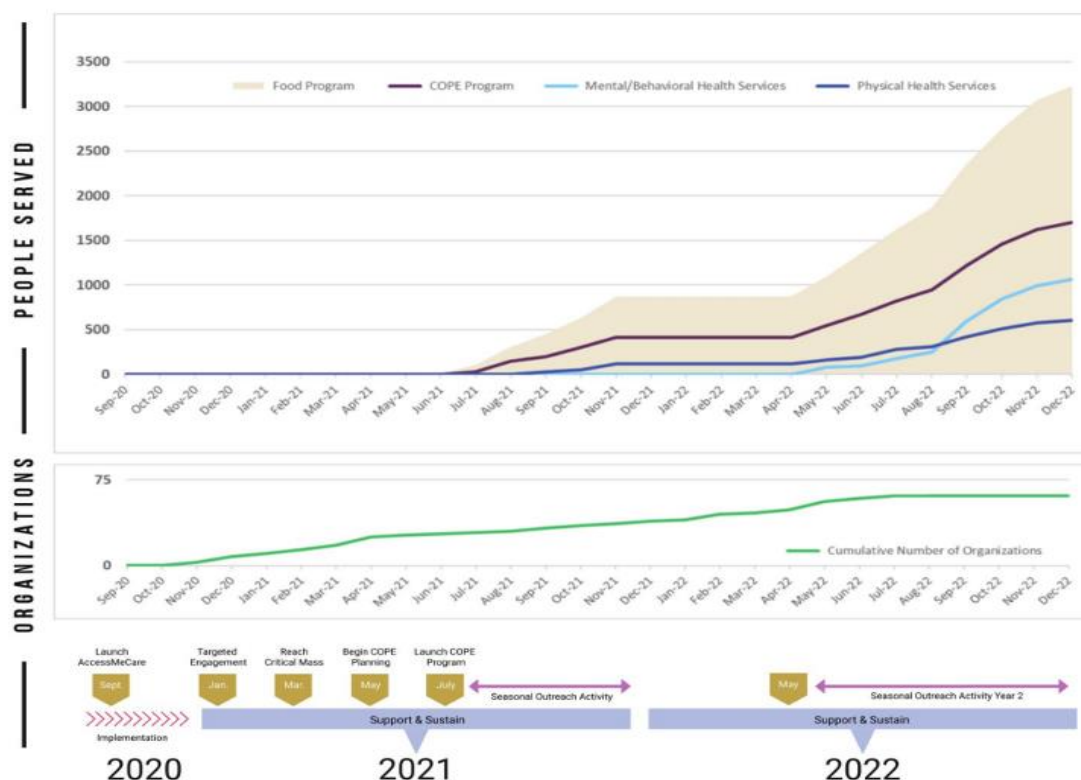
COPE currently offers four programs, the first of which is a partnership with St George's Episcopal Church's community market-style food pantry program known as "[The Table](#)"

COPE and our Community Partners provide emergency preparedness, health, and social wellness checks as well as training and education on health and wellness topics such as suicide prevention, stroke awareness, hands-only CPR, and Stop the Bleed. While The Table operates weekly, COPE participates every other Tuesday at Fredericksburg's Market Square during the summer and in the winter it re-locates indoors to Synod Hall. Since its first season 2021, attendance at the Table has increased by 273% based upon the number of participating community members present on the weeks when COPE is in attendance. The REMS staff working on COPE programs have been able to collaborate with other healthcare organizations, such as Rappahannock Area Health District, Moss Free Clinic, Encompass Health, and Rappahannock Area Community Services Board (to name only a few) which has provided 1,064 mental/behavioral health screenings and 609 physical health assessments during calendar year 2022 among a population of 382,000. The capitated



rate of engagement associated with mental/behavioral health is estimated at 111 per 100,000 people and 134 per 100,000 for physical health. This compares with 6 per 100,000 people and 5 per 100,000 respectively for the most well-established outreach program operating in North Carolina.

The impact of COPE's engagement with St George's Episcopal Church's community food program over two years is shown below in comparison to the number of network partners.



Another program, operated through COPE, and in support of this strategic goal is Stroke Smart FXBG (Stroke Smart Fredericksburg).

The three principal priorities associated with this initiative are:



- PRIORITY 1**  
Stroke Awareness, Recognition and Response
- PRIORITY 2**  
Prevention, Lifestyle & Risk Factor Management
- PRIORITY 3**  
Stroke Resources, Rehabilitation, and Support

Earlier in 2022, following the lead of Governor Northam proclaiming Virginia a [Stroke Smart Commonwealth](#) in December 2021, the City of Fredericksburg endorsed a similar

proclamation that was signed by Mayor Mary Katherine Greenlaw. This proclamation was included at a ceremony hosted at the REMS Council's Open House on May 25. Fredericksburg is the first locality in the REMS region to proclaim this designation, putting forth its commitment for citizens to "Spot a Stroke, Stop a Stroke, Save a Life" by learning the signs and symptoms. Joining in the effort "educating everyone in the Commonwealth of Virginia about stroke recognition", COPE and the City of Fredericksburg have formed a partnership to help citizens identify someone having a stroke and immediately call 911.

COPE intends to assist with educating everyone who lives, works, prays, and plays in the City of Fredericksburg to recognize the signs and symptoms of a stroke and to call 911. The REMS Council and COPE have established a Stroke Smart Task Force and boast members such as Alan Stillman who is the Founder of Stroke Smart, Mary Washington Healthcare, Encompass Health, Virginia Department of Health, Lloyd Moss Clinic, a stroke survivor, Fredericksburg Fire Department, and Stafford Fire and Rescue.

Since the inception of the COPE program, there have been Community Partner meetings on the third Wednesday of each month. This is the third element of COPE's ongoing programs and one that seeks to drive healthcare collaboration at the grassroots level. The topics for 2Q FY23 focused on Domestic Violence, Mental Health: Alzheimer's Disease, Veterans health, and holiday safety. The staff has prepared a roster of topics for 2023 which are aligned with the [2022 Rappahannock Area Community Health Assessment](#) (CHA) Report, support the RAHD concept that [health begins in our communities](#), and also match up with state and national monthly observances, such as addressing Veteran health in November.

The newest element of COPE is a Community Health and Wellness Initiative launching in 2023. The goal is to promote healthcare that helps keep citizens healthy and well in our communities and out of hospitals. The initiative encourages social connectedness and belonging for citizens to take care of each other, strengthening community self-reliance, well-being, and resiliency.

## **Strategic Goal #3: Cultivate Talent**

*Leadership and Education Supports a Well-trained, Competent Workforce*

Strategies that were identified as key elements of leadership and education that support a well-trained and competent workforce include the following:

- Educational programs will prepare EMS professionals to take on leadership roles, helping EMS systems develop leaders who can fill roles ranging from field to supervisory to executive roles.
- EMS education ensures that EMS professionals are prepared to collect, share, analyze, and use available data.
- Community leaders, elected officials, and other key stakeholders understand how EMS systems operate and the value they provide to communities.
- Education prepares EMS leaders to lead high-reliability organizations that are always seeking ways to improve, with a focus on safety and innovation to enhance patient outcomes.
- Incentive programs ensure high-quality EMS service in rural communities and for underserved populations; programs include tuition reimbursement for working in these areas.
- EMS clinicians are trained and fully prepared to treat, evacuate, and care for “hospital at home” patients and other residents of the community with special needs during a disaster.
- EMS clinicians have the education and training to adequately prepare them to meet the physical, emotional, and psychological needs of the people they are called to help.

In order to aim for this strategic goal, the REMS Council developed a list of 10 key initiatives designed to **Cultivate Talent**. There were 29 specific milestones that REMS has put forward in the FY23 Work Plan to help provide leadership and education that supports a well-trained and competent workforce. As with the other goals, some milestones are ongoing throughout the year and others are specific to the second quarter. Below are the milestones intended to **Cultivate Talent** and the activity or progress towards reaching these milestones.

### **Ongoing Milestones:**

- Plan, coordinate, conduct NREMT Advanced Psychomotor Testing Sites
  - NREMT Psychomotor Test Sites during the 2Q were held on 10/15/22 and 12/03/22. Additional sites are being scheduled for 2023.
- Support ALS and BLS release in the region with the BOD-approved ALS Release Program. Provide ID badges to providers.

- The REMS Council is tasked with reviewing and processing the release documentation for ALS providers seeking to practice in the region. Once the documentation packet is approved, the Regional Education Coordinator (REC) schedules an in-person meeting with the candidate to administer a written test, provide an ID badge, obtain EMS Physician validation, and finalize the documentation. The REC conducted the following ALS release meetings during this reporting quarter:
  - 10/24/2022 for King George County
  - 10/26/2022 for King George County
  - 11/09/2022 for Caroline County
  - 12/08/2022 for Caroline County
- Support regional education, promote and assist with scholarship program. Provide CEU to providers.
  - The PIS offered a total of sixteen classes this quarter (AHA, NAEMT, Stop the Bleed, “Red Dot” Advanced Practice Skills Sessions, and other customized CE programs for EMS agencies). Due to minimum student requirements, nine of those classes were held and seven had to be canceled due to low enrollment. Continuing education hours are offered to EMS providers for all applicable classes.
  - The PIS attended a NEMSES update, at PWC PSA, in Nokesville on 10/07/2022.
  - The Office Manager has aligned BLS instructor certifications with the REMS site. The RFC has registered for and completed the prerequisites to be BLS Instructor.
  - The Office Manager and the RFC have expressed an interest in gaining their EMT certifications; they are being sponsored to attend a hybrid EMT class beginning in January 2023.
  - The REMS Office Manager and Regional Director completed a Product Badge Certification for the Project Management System Monday.com which is used to manage programs and services offered at the REMS Council.
- Maintain status as an AHA and NAEMT training site
  - Completed as of March 2022.
- Develop a pool of instructors to provide low-cost access to national education programs through NAEMT and AHA
  - Completed as of March 2022.
- Monitor emerging threats and industry news regarding the need for tactical EMS, MCIM, and other specialty training issues.
  - The RFC completed IS-100.C “Introduction to Incident Command System” through FEMA.
- Monitor training needs in the region and support recruitment and retention needs, providing technical assistance as needed.

- Received and fulfilled a request from Stafford County for technical assistance regarding NREMT recertification
- Create an annual training plan for public education programs
  - This milestone was met by the REMS team through a collaborative effort. The RFC created the [annual training plan](#) based on input from the staff.

#### **FY23 2Q Milestones to Cultivate Talent:**

- Guidelines and Training Committee will meet quarterly. The ALS Release, ALS Preceptor, and Cultural Diversity workgroups will assist.
  - There was a Guidelines and Training Committee Meeting on 10/25/2022
- Develop/administer education/training that is needs-based from instructor feedback or PI data.
  - The PIS received requests from multiple sources for critical care education for our Advanced Providers throughout the region. Normally this type of training is only provided in-person to Flight personnel/Advanced Providers through closed classes by their employers, or is only available online. Therefore, there is a lack of in-person critical care training publicly available to our regional EMS providers. The PIS developed a Critical Care Continuing Education (CC CE) series which consists of four hours of dedicated CC CE every month with rotating topics. In addition to being approved by the Regional Medical Director, these CE hours were also approved in December by the International Board of Specialty Certification (IBSC) so they can be used towards recertification for providers who also hold IBSC Flight Paramedic- Certified (FP-C), IBSC Critical Care Paramedic- Certified (CCP-C), or UMBC's Critical Care EMT-P (CCEMT-P) certifications. Additionally, the PIS is seeking approval from the Board of Certification for Emergency Nursing (BCEN), so that our providers who hold dual certifications in both EMS and nursing can also use these hours toward their Certified Flight Registered Nurse (CFRN) recertification. This fills an identified need for our region and allows REMS to provide free, high-quality, in-person CC CE to both providers in the region who already hold advanced certifications, and those who are hoping to learn more and grow their practice.
  - In addition to the monthly CC CE classes, the PIS is also developing a 24-hour approved review class for Advanced Providers. There is only one other vendor who is approved to teach this course in the Commonwealth of Virginia; it is usually only taught once per year at EMS Symposium and is limited to less than thirty students. Taking an approved Advanced Provider review class is a requirement to renew the previously identified Advanced Certifications; therefore, the development of this approved review course will serve our providers who already hold those advanced

certifications, or other providers who are preparing to test for them. By obtaining approval to teach this in-person class in-house, the REMS Council will be able to provide highly sought after in-person training that is rare both within and outside of our region. The class is expected to be approved by spring 2023. The PIS is targeting summer 2023 for the first offering, and it will be advertised for a significantly discounted rate for REMS providers.

- Submit quarterly report of training and education activities.
  - Quarterly updates are provided to both the EMS Advisory Board through this document and to the REMS BOD at their quarterly meetings.
- Offer three NAEMT and/or AHA courses.
  - The REMS Council offered a total of seven AHA classes and five NAEMT classes during this quarter. Due to minimum required student counts, only two AHA classes and three NAEMT classes were actually held; the other classes had to be canceled due to low enrollment.
- Offer scholarship slots to regional EMS providers for AHA and NAEMT programs based off FY23 training schedule.
  - Of the five AHA/NAEMT classes that were held, a total of forty-one students registered. Twenty-two of them were REMS providers and received scholarship funds totaling \$2,470.
- Provide BLS 12-lead, MCIM, or crew-resource management training
  - The PIS provided both ALS/BLS 12-lead training as part of the NAEMT Advanced Medical Life Support Provider class on November 29-30th.
  - The PIS provided an MCIM I/II class that was held on June 28th. It was also offered on September 21st, but did not get enough registrations for the minimum student requirements and had to be canceled.
  - The PIS provided Crew Resource Management training as part of the NAEMT EMS Safety class on September 7th.

## Strategic Goal #4: Drive Innovation

### *Drive EMS Innovation Throughout the Region*

Strategies that were identified as key elements to drive innovation throughout the region include the following:

- Governmental and nongovernmental entities support innovative pilot projects with the potential to improve outcomes, using rigorous measurement and evaluation of protocols.

- EMS and public health data are integrated in ways that aid in the monitoring and identification of emerging outbreaks and demographic trends in injury and illness patterns.

- A real-time healthcare data system can be accessed remotely by both patients and clinicians through a safe and secure authentication process that delivers pertinent patient health information to EMS personnel in the field. The information is easily digestible and relevant to the care and treatment decision being made in the field.

- Every community has access to EMS technologies and treatment that have been shown to have a significant positive impact on patient outcomes.

To reach this strategic goal, the REMS Council developed a list of 10 key initiatives aimed to [Drive Innovation](#). There were 32 specific milestones that REMS has put forward in the FY23 Work Plan to help build a coalition willing to move beyond traditional EMS, adopt rigorous measuring and integrated monitoring, seek a shared consciousness, and build collaboration for research. As with the other goals, some milestones are ongoing throughout the year and others are specific to the second quarter. Below are the milestones intended to [Drive Innovation](#) and the activity or progress towards reaching these milestones.

#### **Ongoing Milestones:**

- Create / Participate in EMS data working group
  - The PIS has been participating in recurring meetings and webinars focused on data review and improving data quality since spring 2022. Through this collaboration, the PIS also assisted in the development of the Regional PI Forum, where the PI reps from each Regional EMS Council meet regularly to collaborate on projects and share lessons learned.
  - The REMS Council also participated in weekly ESO meetings seeking to improve data quality and access reports for PI projects.
- Attend periodic professional development offerings, such as Anatomage monthly training, or EMS CEU offerings such as EMS night out

- On 11/17/2022 REMS staff attended an American Heart Association Webinar on CPR Disparities.
- PIS attends and assists MWH with monthly EMS Night Out webinars to provide CE hours to attendees.
- The REMS Office Manager completed PER-343 “Social Media Engagement Strategies” hosted by the Ohio Emergency Management Agency in order to maximize communication across social media.
- The REMS RFC attended a seminar titled “How to best maximize technology in times of crisis” through FireRescue1
- Share lessons learned from incidents and events (local, regional, national)
  - No events in the region required lessons learned during this quarter.
- Publish guidance (plans/policies) based on evidence/best-practices
  - ESO data access and quality remain insufficient to address and complete this milestone.
- Encourage agencies to develop and exercise a COOP
  - REMS RFC and Office Manager met with an agency that recently updated their COOP and will be sharing lessons learned with REMS. The Office Manager is closely working with the state’s Emergency Planner to ensure both that the Council’s COOP meets new state guidelines, and that the template shared with agencies in developing and exercising a COOP is up to date. As of this quarterly report, the final format has not been released.

**FY23 2Q Milestones to Drive Innovation:**

- Executive Committee will meet quarterly. Grant, Regional Awards, and Personnel Workgroups meet as needed to respond to changing needs, plan objectives, or proposed changes.
  - The Executive Committee met as part of the transition team for the hybrid office transition. Formal quarterly meetings will begin in 3Q following the new structure.
  - The Grants Work Group Meeting was held on 10/05/2022.
  - The new 2023 Regional and Governor’s EMS Award program documents were received from OEMS and will be forwarded to the Grant WG for review.
- Increase the visibility of EMS in the community
  - The COPE program has significant exposure to the community through its existing programs. The REMS Council continues to monitor for opportunities to reach others.
- Host or participate in at least one monthly meeting addressing healthcare gaps and underserved populations in the community
  - Monthly meetings are held through the COPE program which identify and clarify the healthcare gaps in the region.



- The REMS Council is reviewing the [Rural Health Information Hub](#) for resources and information on rural healthcare disparities.
- The Better Life Lab produced a report on [Health, Work, and Care in Rural America](#) which is being evaluated for tools and best-practices related to healthcare gaps in the community.
- The REMS Staff is sharing and encouraging review of the FCC Notice of Funding Opportunity posted 11/10/2022 regarding an [Affordable Connectivity Outreach Grant Program](#) that supports expansion of broadband services needed for work, school, healthcare and more.
- Monitor/report ideas and proposals for R&D or Innovation
- Provide technical support/engage EMS agencies with OEMS Special Projects (OMD workshops, agency communication, surveys, etc)
  - The REMS Staff participated in a NEMSIS v3 implementation planning meeting on 10/26/2022.
  - The PIS participated on a Trauma Triage Revision Work Group under the OEMS Prehospital Trauma Care Committee on 12/15/2022.
- Provide annual plan and support outreach events, such as The Table, to enhance awareness of EMS and promote health and safety.
- Identify/evaluate benefit of FirstWatch
  - There were a couple of jurisdictions that were utilizing FirstWatch. The RFC met with user agencies to determine the cost/benefit in order to evaluate the potential opportunity to expand use throughout the region. A [report](#) of the findings was submitted by the RFC. It appears that there are new systems and emerging technologies that may have more features, a better price point, and be more efficient and productive to meet the needs of the EMS system. The staff will continue to monitor other options and technologies.
- Coordinate grant workgroup review and grading of RSAF application
  - The Grant WG met and graded submissions for the Fall RSAF sessions. Three grants totaling \$98,022.39 were evaluated. None of the submitted grants were ultimately funded by FARC. Utilizing objective measurements of items listed in the VDH RSAF Scoring Criteria guidelines, the WG will offer feedback sessions in January 2023 to help the agencies present a stronger package for the next funding cycle.

## **Strategic Goal #5: Healthcare Collaboration**

*Support Collaboration Across the Healthcare System and Integrate EMS*

Strategies that were identified as key elements to drive Healthcare Collaboration throughout the region include the following:

- EMS systems should be an integral piece of the public health and healthcare system focused on preventing injuries and illnesses, rather than simply responding to and treating them.
- EMS systems actively and honestly engage with their communities to educate the public about what EMS professionals do and how it improves the population's health on a day-to-day basis.
- Information and communication systems are connected and continuously updated and improved to ensure immediate access to the right resource for the right patient.

To reach this strategic goal, the REMS Council developed a list of 10 key initiatives aimed to increase **Healthcare Collaboration**. There were 29 specific milestones that REMS has put forward in the FY23 Work Plan to increase collaboration across the entire healthcare system to promote an effective healthcare system that allows for rapid change when facing emerging issues. Initiatives are laid out that positions EMS to integrate with public health, builds trust and promotes transparency in healthcare, supports the Triple Aim, and advocates for active patient engagement. As with the other goals, some milestones are ongoing throughout the year and others are specific to the second quarter. Below are the milestones intended to expand **Healthcare Collaboration** and the activity or progress towards reaching these milestones.

### **Ongoing Milestones:**

- Maintain business office with necessary staffing levels.
  - The REMS Council maintains a business office in Fredericksburg which is staffed throughout the week and offers extended evening and weekend hours to accommodate scheduling needs of the EMS system.
  - There is one FTE and four part-time administrative staff with the council and two FTE employed by OEMS. Two additional FTE through OEMS are in the pipeline.
- Provide, as needed/determined, technical assistance to stakeholders
- Maintain an interactive website and social media campaign to engage stakeholders. Post committee meeting minutes and recordings, as well as updates to regional plans and policies, to the website.
  - See Q2 FY23 Media Report attached below

- Liaison, attend planning and EMS meetings for regional, state, and national activities as required and available. Seek information to achieve strategic goals and report updates quarterly.
  - The REMS Council attended a ribbon cutting ceremony for BrightView on 10/27/2022.
  - On 12/06/2022 the PIS had a meeting with IBSC - Dave Bump to discuss CEU delivery in an upcoming series of critical care training courses.
  - The REMS Council continues to participate in a staff exchange program to support continuity of operations, share best practices, and collaborate on projects. On 11/01/2022 staff from CSEMS visited REMS and on 12/14/2022 staff from REMS visited CSEMS.
  - The REMS Staff attended the following EMS Advisory Board state committee meetings:
    - 10/05/2022 Rules and Regulations Committee Meeting
    - 10/05/2022 Training and Certification Committee Meeting
    - 10/06/2022 State Medical Direction Committee Meeting
    - 11/17/2022 Emergency Preparedness Committee Meeting
    - 11/17/2022 Medevac Committee Meeting
    - 11/17/2022 Trauma Systems Improvement Committee Meeting
    - 11/17/2022 Prehospital Care Committee Meeting
    - 11/17/2022 Trauma Acute Care Committee Meeting
    - 11/18/2022 Trauma Advisory Group Committee Meeting
    - 11/18/2022 Provider Health and Wellness Committee Meeting
    - 11/18/2022 State EMS Advisory Board Meeting
  - The REMS Staff also attended / participated in the following state/national meetings:
    - 10/18/2022 Regional Director's Group MOU Workshop
    - 11/02/2022 NEMSAC Meeting
    - 11/03/2022 NEMSAC Meeting
    - 11/16/2022 Health & Human Services Sub Panel Meeting
    - 11/16/2022 Virginia EMS Council's Regional Director's Group
    - 12/08/2022 NAEMSP, NAEMT, and NASEMSO Town Hall Meeting
    - 12/08/2022 FEMA 2022 National Household Survey webinar
    - 12/13/2022 CDC COCA COVID-19 update webinar
    - 12/15/2022 Virginia Board of Health
    - Weekly VDH Agency Forum Meetings

- Monitor/respond to requests for equipment loan and instructor resources
  - Two requests for equipment were received and completed during this reporting quarter.
- Engage EMS providers, community stakeholders, and other healthcare organizations to improve participation in regional committee meetings.
- Attend Northern and Northwestern Healthcare Coalition Meetings.
  - REMS Staff attended a Hazard Vulnerability Analysis meeting through the Northern Virginia Emergency Response System (NVERS) on 10/26/2022.
  - Staff also attended the NW Regional Healthcare Coalition meeting on 11/10/2022.

**FY23 2Q Milestones specific to Healthcare Collaboration:**

- Strategic Planning Committee will meet quarterly. By-laws, nominating, and finance workgroups will assist and meet as needed.
  - The by-laws workgroup provided a second reading of the by-laws change for the new committee structure and it was approved at the November 2022 BoD meeting.
  - The Strategic Planning Committee held an informal meeting to update the process of hybrid office transition and the implementation of the Regional Strategic EMS Plan.
- Monitor/report data quality information and reporting compliance
  - ESO data access and quality remain insufficient to address and complete this milestone.
- Communicate change in policies/procedures/plans to stakeholders
  - The REMS Council uses a website for EMS providers to access forms and policies, request use of the training center, and review committee meeting minutes and recordings.
  - Updates to policies and regional plans that are approved at BoD meetings are posted to the website and distributed to the regional EMS system.
  - The COPE program has a website to promote healthcare initiatives and public outreach.
- Develop/report metrics for ongoing programs, recalibrate annually
  - The Office Manager and RFC have requested additional training on pulling data and reports from ESO. Training will be provided by the PIS so that when ESO data quality is sufficient, staff will be prepared.
  - ESO data access and quality remain insufficient to address and complete this milestone.
- Fleet and asset management (equipment inventory)

- The REMS Council obtained a VDH contractor that is working on this project. The hope is to automate the inventory list so that it is easy to track and update.
- Arrange for and attend a quarterly meeting with RAHD and RRAHD to discuss public health priorities and engage with discussion of community risk reduction, population health, emerging public health issues, and EMS operations.
  - There is participation from the RAHD on several regional committees. There has been participation from RRAHD in the past, but it needs to be renewed.
  - The REMS Staff has become familiar with the [Resilience Analysis and Planning Tool](#) offered through FEMA that provides access to data and GIS mapping to help everyone understand their community. This and other tools are offered when providing technical assistance to the region.
- Interact frequently with EMS stakeholders at every level. Maintain and update an e-mail distribution list for agency super-users.
  - In progress of converting the previous MailChimp Super User email list over to a Google Group, and will also include additional POC's identified since transitioning to Monday.com to track contact information.
- Monitor and provide technical assistance for Fisdap scheduling
  - One request for assistance was received and it was handled by the REC.
- Identify intersections in PD9 that would benefit from response signaling
  - This objective has been addressed as part of a collaborative effort from the REMS Team. The survey referenced above will have multiple queries that will help guide this project moving forward.
- Create meeting schedule, plan to liaison with local government to educate/familiarize officials and leadership with the role of EMS.
  - The Regional System Coordinator is planning a meeting schedule for 2023 to both promote COPE and also engage individuals regarding EMS.
- Engage with and cause to be completed, a financial audit of FY22
  - The REMS Council has engaged in an agreement with Bishop Farmer CPA to complete the audit. It is underway and staff is working with the auditor to provide documentation and answer questions as needed.
- Compile and submit an annual report for CY23 activities
  - A draft of the annual report is ready and will be presented to the BOD at their February 15 meeting.

## REMS Council Q2 FY23 Media Report

The REMS Council has an interactive website and has started a social media campaign to engage both EMS and community stakeholders. After committee meetings are held, the minutes and meeting recordings, as well as updates to regional plans and policies, are posted to the website.

### Facebook:

Some of the subjects that were featured from October - December are as follows with relevant metrics (not all posts on FB have data available).

#### Definitions:

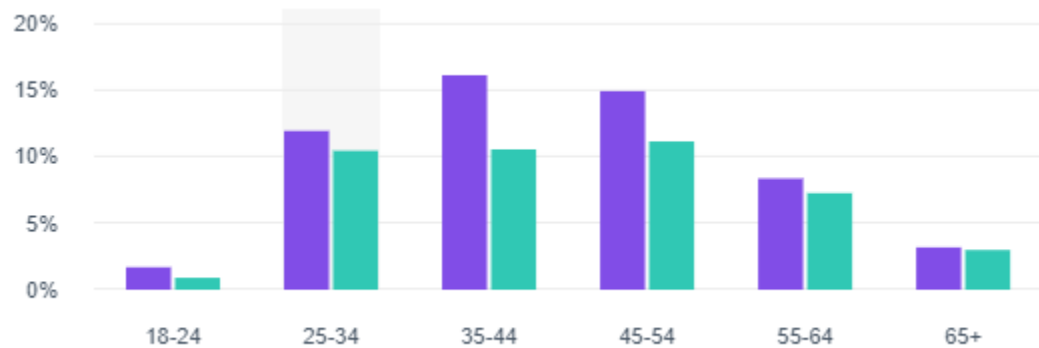
Post Reach: Represents the number of unique users who see a post or page

Engagement: The most common examples are reactions (including likes), comments and shares, but it can also include saves, viewing a video or clicking on a link.

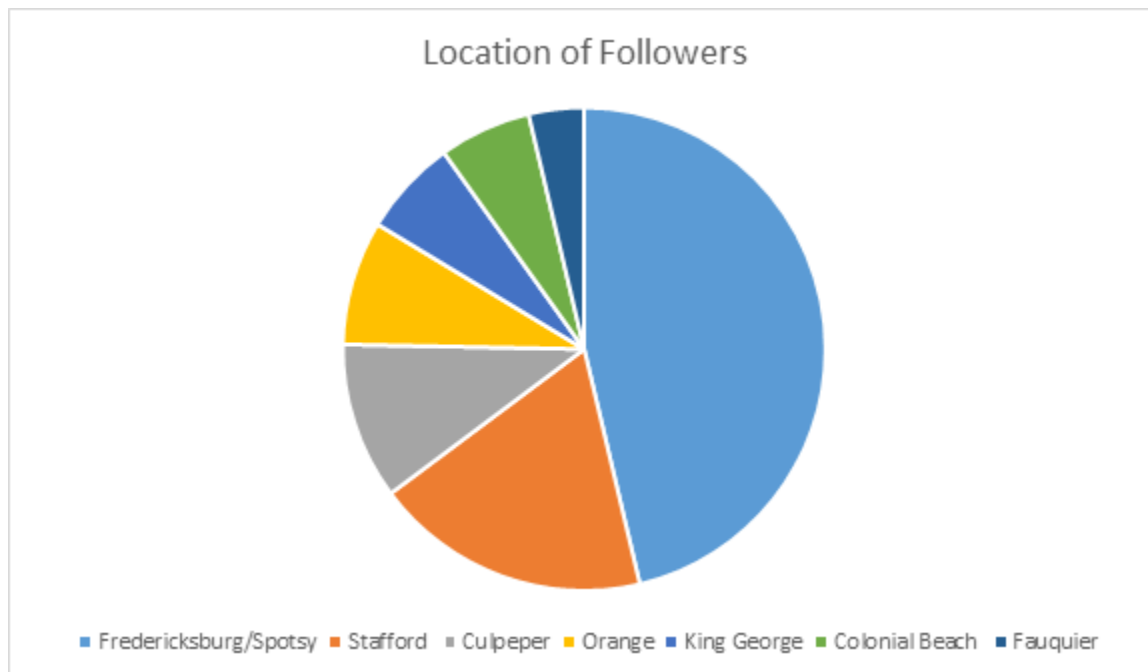
- October
  - **20<sup>th</sup> Anniversary for Linda Harris (post reach 1,683, engagement 414)**
  - Stop the Bleed Class
  - Lake of the Woods EMT Class Promotion
  - Fauquier Recognition
  - Sperryville Recognition
  - CPR Training (post reach 324, engagement 47)
  - EMS Symposium
  - Protocol Update (post reach 176, engagement 23)
  - Diversion Status Updates
- November 11/23/2022 – 1,042 followers, 2,332 post reach, 537 engagements

- Crash Responder Safety Week
  - Caroline FF/EMT recruiting and training Promotion
  - 1QFY23 AHA and NAEMT Training Announcement
  - 2023 Critical Care Education Series
  - Bob Page EMS Simulation Escape Room (post reach 516, engagement 38)
  - Diversion Status Updates
  - **AMLS Post – training event posts (post reach 481, engagement 177)**
  - Heart and Stroke Committee
- December 12/27/2022: 1,058 followers, 1,303 post reach, 643 engagements
    - Cultural Diversity Roundtable (post reach 114, engagement 10)
    - Culpeper County VFR Education Promotion
    - LOW EMT Training Promotion
    - EMS Night Out (post reach 76, engagement 4)
    - Diversion Status Updates (post reach 338, engagement 19)
    - Emergency Services Coordinator Positions
    - GEMS Class Promotion (post reach 70, engagement 4)
    - Registry Promotion
    - **Cadaver Lab Save the Date (post reach 778, engagement 98)**
    - Culpeper Recognition
    - Berea Training Recognition (post reach 390, engagement 67)

- Q12023 Pharmacy Medication Box
- Logo Competition
- Caroline EMT Training Promotion
- CPR Feedback Survey (post reach 240, engagement 14)
- Ray Tricarico Memorial



Audience: Male – purple, Female - green





**Twitter:**

The REMS Twitter account has been inactive since an October 2020 post with the Communications Survey. In the First Quarter of 2023 two posts were made to test the sign on and process.

This quarter was dedicated to restarting Twitter engagement.

As of 11/23/2022: 283 Followers

First quarter – two tweets 10 and 12 impressions each, zero clicks

12/27/2022: 282 Followers, engagement rate up 4.1%,

Second quarter – 15 tweets – 2 click through

**Website:**

Improved drop-down feature on NREMT and Regional Training for a more user-friendly experience.

Updated Events license for smoother course registration.

Updated Employment Opportunities page.

Installed Google Site Kit to monitor website usage:

**11/20/2022**

1<sup>st</sup> week Baseline:

Regional Training/Events and Regional Protocols were the most viewed pages

48% organic search, 31% direct search, 15.6% social, 4% referral

**12/27/2022**

Regional Training/Events and Regional Protocols were the most viewed pages

55% organic search, 36% direct search, 5% referral, 3% social media

# **Southwest Virginia EMS Council**



## **XII. Southwest Virginia Regional EMS Office**

### **Participation in Local, Regional, State EMS Activities**

SWEMS staff members attend and participate in local and regional activities related to the delivery of emergency medical services in southwest region and across Virginia. Meetings primarily relate to EMS agency operations, emergency planning and preparedness, and education; however, council staff participate in a wide range of meetings that might not directly fall into one of these categories. Regional meetings also include meetings to foster coordination and collaboration of operational/planning activities with other stakeholders. Staff routinely attend and participate in related state-level meetings as well. The following list outlines meetings supported by Council staff since the last report:

- Grayson County ALS Hiring Panel—November 7
- SWEMS Board of Directors—December 15 \*
- SWEMS Medical Direction Committee—December 21 \*
- Virginia Regional EMS Council Directors—November 16
- State EMS Advisory Board Executive Committee—November 17
- State EMS Advisory Board—November 18
- Legislative and Planning Committee—November 18
- Rules and Regulations Committee—January 4
- State Medical Direction Committee—January 5
- Town of Saltville Town Council—January 10
- Weekly Hybrid Office Director Info Sharing Meeting
- Monthly Regional Director Group Meeting

\* Meeting minutes are maintained on the Council's website for these meetings.

## **Regional EMS Council Operations**

### **State Regional EMS Office Transition**

The Southwest Virginia EMS Council continues its transition as a hybrid office. Significant progress has been made since the last report. Recruitment for the posted regional director position closed. A joint hiring committee comprised of regional council volunteers and OEMS staff members screened candidates and held interviews. After a nationwide search, Gregory Woods was selected as the SWEMS Regional Director. The SWEMS Executive Director participates in weekly information sharing meetings with the other hybrid regional EMS office directors and other OEMS division meetings as requested.

### **Professional Development**

The Council supports ongoing professional development. Staff members are encouraged to participate in related educational programs both in person and virtually. Two staff members are currently completing graduate coursework while another is completing undergraduate coursework.

### **Regional Planning**

The Code of Virginia (32.1-111.3) mandates regional EMS council involvement in EMS system planning activities. SWEMS facilitates regional EMS planning activities and promotes collaborative approaches to support EMS system planning and preparedness efforts. Plan review and development is accomplished through representative committees who review plans annually. The Board of Directors reviews regional plans annually and takes action on proposed changes. No plan updates were completed this quarter; however, Council staff assisted the Division of Emergency Operations with dissemination of a statewide Ebola Capabilities survey. Council conducted outreach to EMS agencies who had not completed the survey to ensure the best possible completion rate. Staff also participated in a number of regional planning and preparedness meetings.

### **General Operations**

The SWEMS maintains an office in Bristol, VA. Currently, the Regional Director is employed by OEMS. The remaining 6 positions are employed by the nonprofit. A hiring plan to fully staff the hybrid office is being developed to continue with the transition to the hybrid model. The nonprofit is hiring a part-time Field Liaison in order to establish a satellite office in Grayson County.

The Council is working with an engineering firm, WDP & Associates, for a building envelope study. This is the beginning phase of facility renovation. Our annual audit is

underway and is being finalized with an expected report date of January 2023. The Council's annual report was approved at the December 15 meeting.

## **Education & Projects**

### **Community Training Center**

SWEMS operates a community training center to support emergency cardiovascular care within southwest Virginia and adjoining areas. The center supports approximately 200 instructors. Advanced Stroke Life Support (ASLS) was added as a fourth discipline under our community training center. ASLS courses are now being offered. In addition to supporting members of our regional EMS community, our training center supports two hospitals, three colleges, numerous law enforcement agencies, numerous primary care clinics and dental offices, and another regional EMS Councils.

SWEMS also serves as an NAEMT training site and offers courses in Prehospital Trauma Life Support (PHTLS), Community Paramedic (CP), Emergency Pediatric Care (EPC), and Tactical Casualty Combat Care (TCCC) throughout the year in various areas of our service region. In addition, SWEMS maintains a regional lending library of CPR videos and equipment for use by educators and agencies throughout the region.

### **EMS Training**

SWEMS operates an accredited training program for EMT and EMT-Advanced. An EMT Course began in August 2022. Fifteen students are enrolled in the course. We are working with EMS Educators in Carroll County to establish an additional EMT-Advanced training site in that area where ALS offerings are limited. The Director serves on the Southwest Virginia Paramedic Program Advisory Committee to support other certification training initiatives in the region.

The Council coordinated CE education in the region to meet unmet training needs. Weekend training sessions were held in January. Additional course offerings are planned for the remainder of the year.

### **CDC Coverdell Stroke Grant**

SWEMS continues working with VDH on the Paul Coverdell Stroke Grant. SWEMS has entered the second year of the CDC Coverdell Stroke Grant. This multi-year grant program focuses on improving stroke care in Virginia. Funding was allocated to develop promotional materials for use statewide. In addition, funding was provided to expand prehospital stroke education in the region. The Council has completed requirements to add Advanced Stroke Life Support (ASLS) to its AHA course offerings. ASLS courses are being offered within the region. The Council is also working with local high schools to implement stroke awareness training within the public school systems.

### **CISM**

SWEMS provides administrative support for the Southwest Virginia CISM Team. A workgroup of the CISM team continues working toward team accreditation.

### **Regional EMS Awards**

SWEMS coordinates a regional EMS awards program to recognize the outstanding contributions of individual and/or agencies to the local, regional, and state EMS system. Applications are screened, and nominations were submitted for consideration in the Governor's EMS Awards program in eight categories. The 2023 cycle is now open and accepting nominations for the 2023 EMS Awards program.

**Respectfully Submitted**

**By**

**OEMS Staff**