Embassy Suites 2925 Emerywood Pkwy, Richmond, VA 23294 November 16, 2023 @ 3:00 PM

Members Present: Staff: **Members Absent:** Dan Norville Ron Passmore Marybeth Mizell Kim Craig Scott Winston George Lindbeck Ed Rhodes Beth Adams Estee Warring Anthony Wilson Theresa Kingsley-Varble Janet Blankenship Cody Jackson David Hoback

Greg Woods

	Discussion	Recommendations, Action/Follow-up; Responsible Person
Call to Order	 I. Call to Order @ 3:00 pm a. Introductions b. Approval of draft agenda @ 3:03 II. a. Approval of Minutes @ 3:04 	
OEMS Updates	 III. OEMS Staff Reports We have had a number of resignations or announcement of retirement. Adam Harrell, our associate director resigned towards the end of the summer. Gary Brown, the director has announced his retirement effective December 1st. 	

Others:

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We've also had some budgetary issues that have come up moving from one fiscal year to the next.

There's a lot of activity surrounding our budget deficit both internal through VDH internal audit, as well as an external investigation involving a number of federal and state agencies. There will be a presentation tomorrow by the health commissioner Dr. Shelton and she'll be accompanied by the Chief Operating Officer who's Christopher Lindsay. They are going to be presenting some information to the board, kind of providing a high level overview of our current budgetary situation and, an explanation of how the money's flow through DMV registrations to the Health Department and the Office of EMS.

Looking at some of the expenditures that have occurred in the last fiscal year and prior fiscal years that have resulted in the deficit in our budget that's impacting all of our programs and services. A number of organizations have not received any payments including localities. Individuals aren't receiving any funding for EMS scholarship, our regional councils are not receiving any funding, our RSCF grant recipients are not receiving any funding at the moment.

It has had a huge ripple across the entire system in terms of our current budget situation. There'll be more to come. Hopefully there'll be some, up until this point I've heard a number of comments about, information that had been filling voids and some of that information is not quite accurate.

But, the lack of transparency and the lack of regular and consistent communication, you know, people talk and what we want to do is try to get in front of that to the best that we can. Understanding that there are some external investigations that are going on that could lead to some criminal charges that we need to be mindful of as we proceed.

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So, if you're available tomorrow, I'd encourage you to come and attend the board meeting, starts at 10 o'clock here.

The quarterly report has been completed. It's been done for several weeks, but due to some change in policy and practice that has been held up and requires further review prior to release. It is our intent to post the quarterly report on the OEMS website as soon as we get final approval.

General Assembly session begins the 10th, the second Tuesday of January. It's an even year, so it'll be a long session. And I anticipate there'll probably be a number of measures that are introduced related to some of the circumstances that we're currently dealing with.

For the Regulation Compliance and Enforcement Division, some updates to the DEA Board of Pharmacy Task Force is working. We've been doing several Board of Pharmacy OEMS CSRC presentations to agency leaderships and council boards. Recent information about new laws coming into place from the FDA with tracking and tracing, just came to light recently and I have not dived through that, so I'll bring back information about that when I know more.

Still having some challenges with getting stuff to the Board of Health through the Office of Regulatory Management. The process has changed, we had chapter 66 where we just changed the style and format of that chapter to match the current requirements, but it got held up at the 11th hour before it was supposed to go to Board of Health. So that's now been pushed back to December of 23 which is going to subsequently push chapter 32 back as well. I think we're looking at spring or summer of '24 before it gets, before the Board of Health for approval to be entered into stage 2, that's nothing that we can control.

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Unfortunately, the policy analyst we had Clay is no longer with the office. which knocks us down to Mohammad. So, we just have one policy analyst to help work on that.

Medical direction had some assistance from legislative and planning. The work groups they want to put together to address the term EMS physician. EMS physician is in Virginia Administrative Code as defined and has been there for 20 years. We haven't from a regulatory standpoint referred to an OMD in regulations at all. It's been EMS physician.

Now that there is a board certification for physicians as an EMS physician, there's some concern for medical direction committee members that it could be confusing.

But that's one of three projects.

The second project is looking at the expanded roles for mid-level providers or nurse practitioners or PAs in the EMS and then formalizing the duty physician process. We have exemptions in the Virginia Beach locality where we have physicians doing scene response, not providing medical direction, but providing scene response in the area. Those three things are coming before legislative planning in the morning.

Action item for Air Medical, medevac wants to change the title of their committee which is going before GAB in the morning for approval? Nowhere in regulations does the term medevac appear, it is referred in regulations as Air Medical.

I have no variances or exemption requests that need attention from this committee.

We had no new Portal updates to make you aware of.

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All of the chapter 32 documents are on the website and on our home page.

Staffing

In our division, Lenny Mascaro resigned back in August. We do not have approval replace him at this point. Our team has met and we've taken our existing field staff of seven investigators and we have redrawn the Commonwealth into seven jurisdictions which just increased workload, agency and vehicle volume.

We are also having to look at processes and since we're having to do more with less people, how can we be more efficient with how we're doing? And I will say, this'll be the first public announcement of this, if you will. There'll be documents coming out about it. We are moving away from automatic vehicle inspections or agency inspections. We're not going to be doing that any longer. Just don't have the time to do that. So, we'll be doing 100% spot inspections. 24 hours a day, seven days a week, your vehicle can be boarded by an investigator. And I will say I'm famous for being out at midnight and looking at trucks in ER bays in the middle of the night., I think when you find how a truck looks realistically. Investigators do have the ability to inspect all the trucks if they choose to, but not compelled to do that. I really think the people that are going to suffer the most are the bound tree sales reps that aren't going to get the big fat commission from everybody buying up stuff when it's time for inspection to come around. So, just keep your trucks stocked, at all times and it shouldn't be a problem.

MS. ADAMS: When does this go into effect?

MR. PASSMORE: Already. We've already put it in effect.

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MS. ADAMS: Perfect.

MR. PASSMORE: So, as they're going through, they're letting agencies know, they may show up for your agency inspection. They may give you a list of five vehicles. They will pick what five vehicles they want, and it should always be ready. So, because there's...

MS. ADAMS: Have the triage tag minimum dataset concerns been resolved.

MR. PASSMORE: No.

MR. RHODES: EMS remount vehicles that the Star of Life & VIN must match.

Mr. PASSMORE: agreed.

MR. WINSTON: How does it affect new agency applications?

MR. PASSMORE: New agency applications they won't be affected. Yeah. This will be for relicensure only. New vehicles, so if you're applying a permit for a new vehicle, it's going to be inspected as well. This is simply for by the Virginia Beach area. When in the past, we'd have to send four of our guys down there for a day to hit all hundreds of those vehicles in one day. We don't need to be doing that any longer. So same with grant verifications. No longer is Ron Kendrick going to drive five hours across his jurisdiction to verify somebody bought a 12-lead monitor on a rescue squad assistance fund grant.

He may call them up on FaceTime, have a video and have them walk to the monitor and turn the monitor around, let him see the serial number on the monitor. We're going to try to be smarter with, more efficient with some of the ways that we're conducting business. Because

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	everything that we do is codified and we medesignated to us or how we must do it. So, technology and be smarter about it. Any ided things more efficiently.	t and use		
	MS. ADAMS: Have triage tag minimum	dataset concerns had been resolved.		
	Mr. Passmore: No			
	During the discussion re: no longer 100% inspection,	vehicle inspection during re-licensure (DEMS	
	MR. NORVILLE: Any suggestions for, so a motion? Do you support the change to A	Ç.	need to make	
	MR. PASSMORE: I think we can just let	it fly. I think they've already.		
	MR. NORVILLE: I think it flies by itself;	no pun intended.		
	MR. PASSMORE: I think if we had a cha an error of medical, I did have a concern.	illenge to it, we would air our concerns	with it. But	

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Members Present: Members Absent: Staff: Others: **Unfinished Business** IV. Unfinished Business a. None____ **New Business** V. New Business a. None____ **Public Comment** VI. Public Comment a. None $\Re = R/R/A = Review/Revise/Approve$ **Next Meeting:** All meetings begin at 3p.m. and will be held in-person at the Embassy Suites Hotel, 2925 Emerywood Parkway, Richmond, VA 23294.

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Adjourned	Motion to Adjourn @ 3:36 pm	
		Minutes taken by M
		Mizell