

TIDEWATER EMERGENCY MEDICAL SERVICES COUNCIL, INC.

**Board of Directors
MINUTES, June 8, 2017**

Directors Present

Stewart W. Martin, MD, President, Virginia Beach
Richard A. Craven, MD, Vice Pres., At Large
Wayne E. Shank, Treasurer, Virginia Beach
Edward M. Brazle, Virginia Beach
Hollye B. Carpenter, Northampton Co.
Frances E. Emerson, Norfolk
Vincent P. Holt, Franklin
Paul S. Kea, Southampton Co.
Dennis J. Keane, Special Operations
Genemarie W. McGee, RN, VHHA (remote attendee)
Janice E. McKay, RN, Tidewater ENA
Daniel A. Norville, Norfolk
Darren Padilla, Chesapeake
Lewis H. Siegel, MD, VaCEP
James B. Spicer, Suffolk

Directors Absent

Christopher I. Jacobs, JD, Virginia Beach
W. Travis Kirby, PA-C, EVMS
Donna Marchant-Roof, Virginia Beach
John W. McNulty, Chesapeake
Jeffrey J. Meyer, Portsmouth
Charles Ray Pruitt, Accomack Co.
Thomas E. Schwalenberg, Chesapeake
Jeffrey T. Terwilliger, Isle of Wight Co.
Jeffrey F. Wise, Norfolk

Others Present

Jim Chandler, executive director and secretary
Wayne Berry, Virginia Office of EMS

1. Opening – Dr. Martin called the meeting to order at 6:00 pm. Directors and guests recited the Pledge of Allegiance and then everyone introduced themselves. A **motion** was made, seconded and passed to approve the Board of Directors meeting minutes of 3-9-2017 as distributed.
2. Treasurer's Report – Mr. Shank called attention to the financial statements ended April 30, 2017 posted on website. There were no questions. Mr. Shank asked directors to provide feedback regarding the financial statements and also of the work of the Audit and Finance Committee.
3. Other Committee Reports – none.
4. Consent Agenda – Dr. Martin asked if any director would like to remove any item from the consent agenda for separate discussion and vote. There were no requests, and a **motion** was made, seconded and passed to approve the items on the consent agenda as presented.
 - A. Approve letter of support for MMRS program request for State Homeland Security Grant funding.
 - B. Designate the Kent J. Weber Education and Research Fund as a "Board Designated" fund; Reaffirm other "Board Designated" funds: MMRS fund, Tidewater Regional Technical Rescue Team fund, Eastern Shore fund and Hospital Preparedness Program fund.
 - C. Acknowledge OMD Committee approval of revisions to the current regional EMS protocols and appendices, including Ambulance Diversion Plan (Hospital Closure Policy), Supplies Restocking Policy and Medication Kit Exchange Policy.
 - D. Ratify TEMS-EVMS ATLS Coordinator Services Agreement 5-2017 to 11-2017.
 - E. Acknowledge and congratulate 2017 TEMS annual award recipients.
5. Other Unfinished and New Business
 - A. Consider TEMS FY18 Regional Medical Director (RMD) Contract – Dr. Martin turned the meeting over to vice president Dr. Craven for this item on the agenda. Mr. Chandler highlighted the revisions compared to the FY17 contract and following brief discussion, a **motion** was made, seconded and passed to approve the FY18 RMD Contract between the council and Stewart W. Martin. Dr. Martin abstained from the vote.
 - B. Consider FY18 TEMS-VDH EMS program services contract - Mr. Chandler indicated the proposed contract had been reviewed by the regional EMS directors who provided various recommendations for revision, and the final document has not yet been received. The funding amount is expected to be unchanged from FY17 or \$356,435. Following brief discussion of some of the proposed revisions, a

motion was made, seconded and passed to authorize the president to sign the FY18 TEMS-VDH EMS Services contract when received if the terms are agreeable, and to ratify the contract during the next board meeting.

- C. Consider FY18 TEMS-VDH EMS Training Funds MOU 517 18 M030 – Mr. Chandler overviewed this new funding contract which is for the regional EMS council to assist the Virginia Office of EMS to distribute continuing education (CE) course and auxiliary course funding in the region. The council would be paid an administrative fee of \$29,990 and then would be reimbursed up to \$249,940 for qualified auxiliary courses conducted (\$60/student) and up to \$23,100 for CE courses conducted (\$35/hour for up to two 33-hour category 1 courses per locality). The council would contract with agencies or instructors, or would employ individuals, to teach these courses. An open RFP process would satisfy purchasing requirements and identify those interested in teaching these programs. He indicated staff is continuing to work through the purchasing and course contracting process, and while the administrative fee is plugged into the proposed TEMS operating budget as income, no specific expenses associated with administering this program have been firmed up but will be brought to the board for consideration during its next meeting. Following discussion, a **motion** was made, seconded and passed to approve the FY18 TEMS-VDH EMS Training Funds Agreement.
- D. Consider FY18 local government financial support requests – Mr. Chandler noted the FY17 “return to localities” funding amounts have not yet been posted by the state Office of EMS, and this is the figure TEMS uses to calculate its annual financial request from the local governments; however, the amounts are not expected to vary much from the previous year. A **motion** was made, seconded and unanimously passed to request FY18 financial support from each TEMS city and county calculated based on 5% of the amount each locality receives from the state “return to localities” funding.
- E. Consider goals and appropriate uses of Kent J. Weber Education and Research fund – Mr. Chandler reviewed the creation of the Weber Fund by the Board in 2015 and highlighted the out-of-state conference travel grants provided by the council in 2015 and 2016 as well as the local EMS research grants provided by the council between 2003 and 2012. He then reported on a \$30,000 bequest by Kent Weber as well as \$1500 in additional memorial donations received at the request of the Weber Family, all directed to the Weber Fund. He also reported the 2017 Sentara and Bon Secours annual contributions have been deposited in the Weber Fund as well. The fund total at this time stands at \$61,500. He noted that while the board adopted guidance for the conference travel grants, no overall goals for the Weber Fund were established by the board so he wished for discussion and input so that overall goals and guidance could be developed. During discussions, board members suggested the following:
- Support local EMS research projects
 - Support initiatives that improve EMS data analysis
 - Better educate the EMS educators
 - Build EMS educator capacities
 - Seek input from the Weber family
 - Seek input from other council committees
- F. Consider TEMS FY18 Operating Budget – Mr. Chandler reviewed some key differences between the FY17 and FY18 budgets:
- The VAEMS category includes the new training funds administrative funding as income, some of which was applied to cost increases such as salaries and health insurance. The balance will likely be allocated to other costs to administer the new training funds and will be discussed during the next board meeting.
 - Annual hospital contributions and any income or costs related to educational programs (like the Expo or quarterly CE training) have been moved from the TEMS Local category to the Weber Fund. This year’s overage in TEMS Local Repairs and Maintenance line was due to the moisture damage to the building trim discovered during painting and a decision, supported by the Executive Committee, to repair the damage and apply aluminum or vinyl trim to all exposed wood on the upper portions of the building. The decrease in the TEMS Local Instructors, Educational Supplies and Educational Courses lines this year was because we did not conduct the annual Education Expo but instead planned for less expensive quarterly CE workshops. The Printing line decreased due to the decision to convert the Response newsletter to an email

format in January (associated with a decision by Medical Transport to no longer fund the Response printing).

- The EVMS-TCLS category is substantially reduced and represents a small contract for ATLS coordinator services through November.
- The EVHC, Eastern Shore, Technical Rescue and MMRS categories remain essentially the same.
- The Management and General costs (primarily bookkeeping and audit) are allocated back to each program as a management fee, with each program's share calculated based on each program's prior year income as a percent of total income.
- Personnel salaries are budgeted with a cost of living increase of 1% (for those earning greater than \$50k) or 2% (for those earning less than \$50k). There is a one-time adjustment for the HPP program manager of 10% (approved by the funder, the Virginia Hospital and Healthcare Association) and a one-time adjustment for the Eastern Shore Field Coordinator of 7% to offset the loss of a retirement program contribution (this position is not eligible for the new 401k plan).
- No capital expenditures are proposed at this time.

Following brief discussion, a **motion** was made, seconded and passed to approve the FY18 operating budget as proposed.

G. Consider revisions to council procurement policy, within Fiscal Management Policy – Mr. Chandler explained the Virginia Office of EMS urged the regional EMS councils to ensure they have appropriate purchasing procedures in place to accommodate the distribution of the EMS continuing education and auxiliary course funds. He noted the existing council policy does have a threshold that, if a purchase is expected to exceed \$2000, must include obtaining prices from three vendors. He felt the policies should be strengthened and brought into alignment with some basic state purchasing policies. As a result he drafted several changes including creation of a "small purchase" threshold of less than \$5000. Several questions were addressed. A **motion** was made, seconded and passed to adopt the procurement policy and related revisions within the Fiscal Management Policy as proposed.

6. Governance – Dr. Martin provided a brief update on the workings of the Operational Medical Directors Committee. He reported the committee continually monitors drug shortages and makes decisions regarding substitutes or protocol adjustments related to drug shortages as needed. The committee members conduct oral interviews of Intermediate and Paramedic students, coupled with a written regional exam, to help ensure competence prior to independent field practice. The committee receives reports on changes to hospital capabilities and adjusts protocols or triage policies as needed. An example is a presentation last week by representatives of the Children's Hospital of the King's Daughters which is seeking status as a pediatric trauma center. Their site visit is in July and the OMD committee will work with the protocol workgroup and trauma PI committee to have needed triage changes in place and ready for implementation once the CHKD trauma center is approved. The OMD committee is also receiving updates from the PI committees which will impact protocols, policies, operations and/or training in the future. A recent stroke and trauma PI presentation indicated that local and regional data collection and analysis is improving and regional benchmarking can begin, but data entry improvements are still needed. STEMI data is very good at this point, regional benchmarking has been ongoing for nearly two years and a combination of outcome data and partner cooperation have led to system, and patient care, improvements throughout the region.
7. Announcements – other dates, news and training on www.tidewaterems.org
 - Quarterly CE workshop, June 23 or 24 (Note: this has been postponed until August)
 - Sign up for email Response news www.tidewaterems.org/listserv
8. Adjournment – With no additional business, Dr. Martin adjourned the meeting. The next meeting is scheduled for Thursday September 14.