

NORTH CAROLINA EMERGENCY MEDICAL SERVICES  
ADVISORY COUNCIL

Department of Health and Human Services  
Division of Health Service Regulation  
Office of Emergency Medical Services

Brown Building  
Dorothea Dix Campus  
801 Biggs Drive  
Raleigh, North Carolina

February 13, 2024  
11:00 A.M.

Members Present

Kim Askew, MD  
Jim Albright  
Andrew Baird  
Todd Baker  
Robert Bednar  
Barry Britt  
Kimberly McDonald, MD  
R. Darrell Nelson, MD  
Brian Pearce  
Robert Poe  
John Grindstaff  
Jim Gusler

Roberto Portela, MD  
Sarah Rivenbark  
Kevin Staley  
Douglas Swanson, MD  
Pascal Udekwu, MD  
Jefferson Williams, MD  
Rebecca Pittman  
Eric Toschlog, MD

Members Absent

Viola Harris  
William Atkinson, PhD  
Gail Shue  
Chuck Elledge

Staff Members Present

Tom Mitchell  
Susan Rogers  
David Ezzell  
Wally Ainsworth  
Todd Messer  
McKenzie Beamer  
Heather Majernik  
Anthony Davis  
Chuck Lewis

James Caldwell  
Mick Stewart  
Toshiba Oates  
Justin Bowers  
Doug Calhoun  
Dale Sutphin  
Melynda Swindells  
James Winslow, MD

Others Present

Bradley Cooper  
Chasidy Kerns  
Corey Lee  
Craig Carico  
Dale Hill  
Dianne Bunch  
Donovan Davis  
Haven Stiles  
Jackie Holmes  
Jeff Justice  
Jeff White  
Joel Faircloth  
Jennifer O'Neal  
Adam Culbertson  
Alex Belanovich  
Charlene Edwards  
Heather Lechner  
Jared Byrd  
Jeff Justice  
K. Vaught  
Angela Magill  
Anjini Joiner  
Aubrey Hamilton  
Dee LaDuke  
David Barr  
Don Morgan  
Chip Munna  
Joey Hundley  
John R. Turner  
Jonathon Hancock  
Joyce Winstead  
Kara Clarke  
Katrina Schweisthal

John W. Keating  
John Wells  
Kelly Urban  
Kendra Bissette Lowman  
Kevin Richards  
K.M. Holloman  
Kory Lane  
Larry Hunt  
Lee Westbrook  
Brad Baker  
Alan Brook  
Mark Davidson  
Mark Snelson  
Merle Hunt  
Nathan Miller  
R.E. Merrill  
Ryan Bayley  
Scott Suggs  
Scott Wilson  
Tara Tucker  
Travis Dalton  
Danny Willner  
Dillon Lowe  
Donny Lyon  
Crystal Pate  
Elizabeth Freeman  
Jason Theiling, MD

- (1) Purpose of the Meeting: The North Carolina EMS Advisory Council met virtually to hear reports/updates from Injury Committee, Compliance and Education, HealthCare Preparedness Program, Medical Director report and agency activity report. The Council also held annual elections for Chair and Co-Chair, as well as voting on the EMS Advisory Council Awards to be presented at the EMS Expo conference.
- (2) Actions of the Council:

Dr. Kim Askew, Co-Chairman of the Council, called the meeting to order at 11:00 a.m.

- a) Motion was made by Mr. Staley, seconded by Dr. Portela, and unanimously approved that:

RESOLVED: The EMS Advisory Council minutes from the November 14, 2023 meeting be approved.

- b) Motion was made by Mr. Baker, seconded by Mr. Grindstaff and unanimously approved that:

RESOLVED: Dr. Kim Askew be re-elected as Chairman of the North Carolina EMS Advisory Council

Explanation: Dr. Askew opened the floor for nominations for the office of Chairman. A motion was made to nominate Dr. Askew, and with no other names submitted, it was unanimously agreed that Dr. Askew would continue to Chair the Council. Dr. Askew thanked the Council for their confidence in him.

- c) Motion was made by Mr. Baker, seconded by Mr. Grindstaff and unanimously approved that:

RESOLVED: Dr. Darrell Nelson be re-elected as Vice Chairman of the North Carolina EMS Advisory Council

Explanation: Dr. Askew opened the floor for nominations for the office of Vice Chairman of the EMS Advisory Council. No other names were submitted. Dr. Nelson thanked the council for the opportunity to serve.

- d) Motion was made by Dr. Portela, seconded by Mr. Albright, and unanimously approved, with one abstention, Robert Bednar, that:

RESOLVED: UNC Hospitals' Level I designation be renewed for one year.

Explanation: University of North Carolina Hospitals was visited on October 11-12, 2023 by the ACS and NCOEMS staff for the consideration of a Level I reverification and redesignation. There were several notable strengths found; however, there were two deficiencies. Recommendation is that UNC Hospitals be awarded a Level I redesignation for a period of one year through November 30, 2024, with the ability to extend designation through November 2026 following a successful completion of a focused site review no later than their designation expiration date.

- e) Motion was made by Dr. Swanson, seconded by Mr. Grindstaff, and unanimously approved that:

RESOLVED: The Council accepts the recommendations of the 2024 Advisory Council Awards Committee for the nominations of Ms. Christina S. Warren to receive the Graham Pervier Award.

Explanation: The Graham Pervier Award is in recognition of his long term dedication to Emergency Medical Services serving on the EMS Advisory Council for 41 years, and as Chairman of the Council for 14 years. The award, given in the name of the Council and OEMS staff, is given to individuals who have made outstanding and long-lasting contributions to the development and improvement of Emergency Medical Services in North Carolina.

(3) Other Actions of the Council:

- (a) Dr. Askew welcomed guests to the Council meeting and announced to the guests and Council the following appointments and re-appointments:
- Mr. Todd Baker is re-appointed representing the American Heart Association. Todd is from Wake Forest and has been an active member of the Council for over ten years. He holds an emergency medical care degree and has over twenty-five years experience in the field of emergency medical care.
  - Dr. Doug Swanson is re-appointed representing the North Carolina College of Emergency Physicians. He has been an active member of the Council for over ten years. He is an attending physician with the Department of Emergency Medicine at Atrium Health Carolinas Medical Center and is the Medical Director for MedCenter Air, as well as Mecklenburg EMS.
  - Dr. Jeff Willimas is re-appointed also representing the North Carolina College of Emergency Physicians. He, too, has been an active member of the Council for over ten years. He serves as the Deputy Medical Director for the Wake County EMS System and is board certified in emergency medicine.
  - Sarah Rivenbark is re-appointed representing the Public Sector. She's from Burgaw, NC and has been an active member of the Council since 2021. She holds an active Paramedic credential and serves as the Mobile Integrated Healthcare Coordinator with New Hanover Regional EMS.
  - Rebecca Pittmann is a new appointment representing the American Red Cross. She is from Silva, NC and serves as the Regional Disaster Officer for the North Carolina Region. In her prior role, she served as the Division Disaster State Relations Director supporting North Carolina, South Carolina and Georgia.
  - Dr. Eric Toschlog is a new appointment representing the North Carolina Chapter of the American College of Surgeon's Committee on Trauma. Dr. Toschlog is from Farmville and serves as the Trauma Medical Director at Vidant Medical Center in Greenville. He Chief for the Division of Trauma and Acute Care Surgery for the Department of Surgery at the Brody School of Medicine at East Carolina University in Greenville.

Dr. Askew reappointed, without objection, Mr. Johns Grindstaff as Chairman of the Injury Committee, and he reappointed, without objection, Mr. Robert Poe as Chairman of the Compliance and Education Committee

- (b) Mr. John Grindstaff reported the following Injury Committee update:
- University of North Carolina Hospitals in Chapel Hill was visited on October 11 and 12, 2023, by an ACS survey team and NCOEMS staff for the consideration of a Level I reverification and redesignation. As noted in your report, there were several notable strengths found by the survey team. However, two deficiencies were identified:
    - ✓ Standard 5.31 Alcohol misuse intervention in that a minimum of 80% of patients who have screened positive for alcohol misuse must receive a brief intervention by appropriately trained staff.
    - ✓ Standard 7.3 Documented effectiveness of the PIPS program in that there is not enough evidence documented of loop closure
 OEMS staff recommendations are that the University of North Carolina Hospitals be awarded Level I redesignation for a period of one year through November 30, 2024, with the ability to extend designation for a period of two years through November 2026 following the successful completion of a Focused Site review no later than their designation expiration date.
  - Novant Health Presbyterian Hospital has submitted documentation showing the correction of their deficiencies from the August 2023 visit. Per the previous report to this Council, their designation as a Level II trauma center has been extended to the full designation period, ending on August 31, 2026. Additionally, their ACS verification has been extended to August 2026.
  - Womack Army Medical Center in Fayetteville has successfully completed a Focused Site review and has shown that the deficiencies identified during their site visit in January 2023 have been corrected. Per the previous report to this Council, their designation as a Level III trauma center has been extended to the full designation period, ending on May 31, 2026. Additionally, their ACS verification was also extended to May 2026.
  - Atrium Carolinas Medical Center was visited on December 12 and 13, 2023 by a joint ACS/NCOEMS team. We are still waiting for the ACS report and will present recommendation at the May Advisory Council Meeting.
  - ECU Health was visited on January 24 and 25, 2024 by a joint ACS/NCOEMS team. We are still waiting for the ACS report and will present recommendations at the May Advisory Council meeting.
  - WakeMed Raleigh is scheduled in June 2024 for a redesignation/reverification Level I visit.
- (c) Mr. Robert Poe reported the following Compliance update:
- For timeframe of 11-1-23 through 1-31-24, the Credentialing unit issued 1808 credentials with the following:
    - ✓ 345 EMD
    - ✓ 80 EMR
    - ✓ 1005 EMT
    - ✓ 115 AEMT
    - ✓ 263 Paramedi

- Turnaround Times Continue to be the same they have been. Staff is processing paperwork the same day it is received, with the exception if they need fingerprints. Fingerprint package can delay for around nineteen days, for those required to do a federal fingerprint check. Testing is approximately twenty days for those who need a fingerprint check. If no fingerprint check necessary, the turnaround is the same day. Military credential averaging about the same turnaround time, same day.
- From November to January 2024, on average 29% of all the cases that were held by the Disciplinary Committee were violent offenses. In addition, 23% were DWI and 5% were patient care issues. The Disciplinary Committee is a very active committee.

(d) Mr. Robert Poe gave the following Education report:

- Currently, there are forty Fully Accredited Institutions with twenty more under Letter of Review
- Instructor Workshops in 2023, there were seven offered with two-hundred sixty-two attendees. Instructor Workshops for 2024 there will be eight offered with a total of five-hundred thirty seats available. Six of these will be virtual and two will be in person. The two in person courses will be held July 15 in Rowan County and the second will be October 14 in Johnston County.
- In the year 2023 there were eight Program Coordinator Workshops offered with two-hundred four attendees. The 2024 Program Coordinator Workshops will be held at the EMS Administrators Winer Symposium in Wilmington with forty seats available. The first is on Tuesday, March 5 which is already full and the next is Wednesday, March 6 and it, too, is full. There will be two courses at EMS Expo with forty seats available. First one is Friday, April 26 and the second one is Saturday, April 27. Each has twenty-five to thirty seats available at this time.
- 2023 course results compared to the 2022 results in retention rate, testing and passing were within positive or negative 1-2%. There was not a large variance from 2022-23 as noted below:

Level	Enrolled	Completed	Tested NC	Passed NC
EMR	731	544	372	268
EMT	5391	3860	3062	2569
AEMT	464	321	287	259
Paramedic	1066	753	568	534
%	100	71.6%	80%	83.8%
Totals/2022	7652/- 1.1%	5478/+1.9%	4289/<1%	3630/+<1%

- Current courses ending through 6/30/24:

Level	Number
EMR	40
EMT	209
AEMT	25
Paramedic	55

- (e) Mr. David Ezzell gave the following HPP update:
- There has been much work done over the past year to make adjustments to the HPP funding formula. The program is fully federally funded and last year (FY2023-24) \$6.1M was received. In funding breakdown:
    - ✓ Approximately \$900,000 (15% cap) is kept out of the grant for operation expenses – salary, fringe, travel, etc.
    - ✓ Bulk of the funds go to the Healthcare Coalitions. Currently, there are eight Coalitions – approximately twenty-seven FTE and eight warehouses (each Coalition has a warehouse). This includes training, education courses, any exercises and the money they put towards our SMAT 2 and 3 program.
    - ✓ Lastly, funding of other statewide expenses that everyone utilizes – such as TERMS, RadioOp, iCams, etc.
  - There's concern as the program has been "level funded". Cost of business is going up and is not "level". Although the program received \$6.m from the Feds, expenses have risen. Over the past five years, warehouse expenses have gone up 24%, salary and fringe benefits have increased 17%, etc. To compensate for these increases, Coalitions have been forced to do less training, buy less equipment and less capabilities have been accomplished.
  - Due to this, the program created three workgroups to discuss the allocation of funding. The first workgroup was primarily made up with our Healthcare Preparedness Coordinators (8) and HPP staff. Meetings were held monthly. An Advisory Group was also created which was made up of lead hospital representatives, state partners (Public Health, Emergency Management and a representative from the EMS Administrators Association) and meetings were held every other month. The workgroup met with the HPC to get input and then reported back to the Advisory Group. There were also individual and small group meetings which reported back to the Advisory Group.
  - Meetings began in March of 2023. A draft plan was created by November 2023 and the final plan was released in January 2024.
  - Key considerations were maintaining the highest number of staff possible and keeping a minimum of 5% of the funds from the budget available in the event of an unexpected expense. The plan will be initiated in two phases; the first phase will be put into effect this July, which will be a reduction in part-time staff that will be cut out of the funding. It appears the Coalitions will continue these positions, they just will not be paid with grant funds.
  - The biggest change will be in July 2025. At that time, the program will reduce the number of Coalitions by two. Metrolina and Triad Coalitions will merge and there will be a UNC consolidation. Presently, there are three Coalitions in the Triangle, WakeMed, Duke and UNC. It was decided the UNC Coalition will be cut and we will continue with the WakeMed and Duke Coalitions. There will be no change or interruptions in service; all counties will continue to be covered. There will also be

adjustments to our regional boundaries. The east and mountains will see no changes; however, Metrolina and Triad will be merged and the Triangle will be split-east/west. Whereas the Triangle had three coalitions, it will now have two. There was talk of making one Coalition in the Triangle, all options were presented but there was concern about the size and number of population served; so it was decided to keep them separate.

- The goal is to be more fiscally responsible by cutting administrative costs by two Coalitions and its warehouses which frees a substantial amount of funds. The goal is to provide as many trainings as possible, exercises across the regions and have the ability to purchase and provide equipment needed.
- We want to promote the program value. Historically, the program has been poorly promoted so focus is on promoting the value and trying to maximize the funds and get value from the money spent.
- Hopefully, ASPR will continue “level funding”; however, if they make a cut then adjustments will have to be made.
- Every year there will be an annual review, with a full review by the workgroups every five years.
- We need to continue/start pushing for state appropriations to help fund the program. The program can bring a lot of value to the healthcare system.
- HPP is working on a disaster track for the EMS Expo. Partners from FEMA will be at Expo to talk about the FEMA ambulance contract and a vice president from Waffle House will be there to speak about how they manage disaster response.
- The PPE warehouse will be closing. Distribution will end on March 31, 2024. The plan is to move out of the warehouse by June 1, 2024 and a small cache of PPE will be integrated into the MDH/SMRS.
- State Medical Response Showcase was held on February 1 and 2. There were three sessions held with over 160 participants. A session for local partners (EMS, EM, Public Health, hospital staff, etc.), a session for DHHS and NCEM leadership (the NC General Assembly, the Healthcare Association and hospital leadership) and a session for the Medical Care Commission. The importance of state appropriations was a highlight of the showcase. Federal funding has decreased since 2003, yet disasters have increased.
- Several assets were set up for the showcase:
  - ✓ A five bed mobile ED. A short-term, quick response asset that can be mobilized within a couple of hours
  - ✓ Inpatient care area – set up a six bed inpatient care area. This is totally flexible, beds can be added or taken away, etc.
- There was an HPP Director from Kentucky who attended the showcase to see what assets North Carolina has and to discuss how they can partner with us during an EMAC.



- (f) Mr. Staley reported on the EMS Advisory Council Award Recommendations:
- Awards Committee consisted of Chuck Lewis, Chair, Told Baker, Kevin Staley and John Grindstaff. There were no nominations received for the Dr. George Johnson, Jr. award but there was for the Graham Pervier award. Ms. Christina Warren was nominated for the Graham Pervier Award.
- (g) Dr. Tripp Winslow gave the following Medical Director update:
- Still moving forward implementing medication system therapy bridge programs. Presently, there are sixteen counties who have active programs. Nine of the counties' data was presented at the National Medical Directors Council in Austin, TX and they showed a 70% overall long term success rate. Some counties in NC have as high as a 92% success rate
  - Currently, there is \$1.4 billion available in opioid settlement funding across the state which is enough for every system to implement some type of a bridge program. To access the funding, you can apply to the North Carolina Association of County Commissioners.
  - Dr. Roberto Portela will take over the co-chair position for the NCEP EMS Committee. Dr. Darrell Nelson, who has been the co-chair for ten plus years is stepping down.
  - NC Blood coalition has been working hard to help counties move forward.
- (g) Mr. Tom Mitchell gave the following agency update:
- OEMS staff will be participating in the upcoming EMS Administrators Symposium on March 5 through March 8 in Wilmington. The Administration has put together another great opportunity for EMS Administrators across the state to learn and network with other administrators and stakeholders. EMS Administrators are encouraged to become part of the NC Association of EMS Administrators or the NC Association of Rescue and EMS. The OEMS works with both of these organizations on topics related to EMS in North Carolina. The Association is an advocate that promotes change through their legislative liaisons and they keep updated on EMS topics at the state and national level.
  - HP 125 is still in effect after being signed by the Governor on October 2 2023. This bill made changes to approximately thirteen different pieces of legislation. Part of the bill extended the flexibilities for staffing of non-emergency transport providers statewide until May 11, 2024. A meeting is being arranged with a number of stakeholders to discuss a plan moving forward, per the requirements of the legislation. The staffing waiver is still available to emergency providers upon request. Questions may be directed to OEMS staff.
  - The proposed changes to administrative code, that was approved by the Council a little less than a year ago, are still moving forward. The changes were published in the North Carolina Register for public comment. Five comments were received, with three of those comments from OEMS staff to correct typographical errors. The proposed changes went to the North Carolina Medical Care Commission for final approval on February 2. The

changes are scheduled to go to the Rules Review Commission on March 21. If approved by Rule Review, they will become effective in April of 2024.

- There is a tentative plan to present to the Council at the next meeting a couple of proposed additional changes to Administrative Code. OEMS tries to maintain a current, updated set of rules that effectively reflects the EMS profession; this is a challenge in a field that is constantly changing.

There being no further business, the meeting adjourned at 11:52 am.

Minutes submitted by Susan Rogers