



Mark Marchetta, Sr., Chair  
 Mark Resanovich, Vice  
 Chair

Dr. Carol Cunningham, State Medical Director



Department of  
 Public Safety

Ohio Emergency Medical Services

**STATE BOARD OF EMERGENCY MEDICAL, FIRE, AND TRANSPORTATION SERVICES**

**DIVISION OF EMERGENCY MEDICAL SERVICES  
 OHIO DEPARTMENT OF ADMINISTRATIVE SERVICES  
 4200 Surface Road, Columbus, Ohio**

**FINAL MEETING MINUTES**

**April 16, 2024**

**Board Meeting Date and Location:** Tuesday, April 16, 2024, Ohio Department of Administrative Services, 4200 Surface Road, Columbus, Ohio.

**Board Members Present:** Tom Allenstein, Kent Appelhans, Dorothy Battles, Karen Beavers, Geoff Dutton, Brian Hathaway, Ruda Jenkins, Mark Marchetta (chair), Dr. Amy Raubenolt, Mark Resanovich (vice chair), Darin Robinaugh, Dr. Hamilton Schwartz, Kevin Uhl, Dave Viola, John Weimer, and Dudley Wright

**Board Members Absent:** Patrick Ferguson and Jeff Fishel

**DPS and EMS Staff Members Present:** Johanna Burgess, Robin Burmeister, Dr. Carol Cunningham (State Medical Director), Joel Demory, Dave Fiffick, Valerie Koker, Edward Long, Rick Miller, Joe Stack, Deputy Director Dan Swords, Executive Director Rob Wagoner, Michael Wise and Glenda Woodgeard.

**Public Present:**, Diane Simon

**EMFTS Board Meeting**

**Welcome and Introduction**

The meeting was called to order at 1:04 a.m. Mr. Marchetta welcomed everyone.

**Roll Call**

Mr. Thomas Allenstein	Present	Mr. Mark Marchetta (Chair)	Present
Mr. Kent Appelhans	Present	Dr. Amy Raubenolt	Present
Ms. Dorothy Battles	Present	Mr. Mark Resanovich (vice chair)	Present
Ms. Karen Beavers	Present	Mr. Darin Robinaugh	Present
Mr. Geoff Dutton	Present	Dr. Hamilton Schwartz	Present
Mr. Patrick Ferguson	Present	Mr. Kevin Uhl	Present
Mr. Jeff Fishel	Absent	Mr. Dave Viola	Present
Mr. Brian Hathaway	Present	Mr. John Weimer	Present
Ms. Ruda Jenkins	Present	Mr. Dudley Wright	Present

## **Board Member Responsibilities – Mike Wise**

### Open Meetings Act

- Meetings must take place in public view
- Applies when:
  - Discussion or deliberations on Board business
  - Majority of members present
    - Avoid reply to all emails
  - All committees and subcommittees
- Executive Sessions
  - Permitted closed-door session by a public body
  - Attended by the Board and invited guests
  - Requires a motion and a roll call vote
  - Motion must be specific
  - Only permitted in limited circumstances (personnel matters, pending court action, matters required to be kept confidential)
  - No vote of formal decision may be made during the executive session
  - Motion or vote is not required to return to the public session
  - Recommend discussion be treated as confidential

### Quasi-Judicial Deliberations

- Public Bodies whose responsibilities include adjudicative duties are considered “quasi-judicial”. Deliberating in private is permitted to allow for the resolution of any disputes.
  - Not considered a meeting
  - Public vote is not required
  - Cases: Hearing, Goldman Reviews, and Summary Suspensions
  - Board determines the sanction – may disregard the hearing officer’s recommendation

### Investigations

1. Complaint
2. Investigation
3. Case Review
4. Board Action
  - a. Close
  - b. Consent Agreement
  - c. Notice of Opportunity for Hearing

### Post Notice Review

1. Hearing
  - a. Hearing Officer Report
  - b. Exhibits as needed
  - c. Subject’s Objections to Hearing Officer
2. No Hearing Request (Goldman)
  - a. Affidavit
  - b. Exhibits as needed

### Ethics Guidance

- Avoid any action that might give rise to the appearance of impropriety
- Do not represent any of your personal opinions as that of the Board
- Withdraw completely from questions or issues that involve a conflict of interest
- Abstain from issues involving funding for your employer or close associates
- Do not solicit or accept anything of value from anyone doing business with the Board
- Avoid seeking or providing services on matters that come before the Board

### **EMFTS Board Committees – Mike Wise**

Mike Wise defined a committee, a subcommittee, an ad hoc committee and a workgroup. He stated that there are four statutory committees to include the following:

- Firefighter and Fire Safety Inspector Committee
- Trauma Committee
- Medical Transportation Committee
- Critical Care Subcommittee
- New Committees – The Board may create, establish, restructure, or discontinue committees and subcommittees.

### **Committee and Subcommittee Structure**

(does not include FFSI or Trauma Committee)

- Appointment by the Board
- Qualifications (Anyone)
  - The public, appropriate state and local agencies of government, EMS organizations, and other interested parties
  - Good faith effort to ensure educational, professional, cultural and geographical diversity, and afford adequate representation by those affected by the work of the committee
- Term: Two years (Renewal)
- Chair and Vice-Chair: Chosen by the Board Chair
  - Vacancy filled by the Board
  - Temporary chair chosen by committee
  - Any committee member may serve as chair
- Size
  - Committee: 15 unless waived
  - Subcommittee: No size limitations
- Two Board Member Minimum
  - For both committees and subcommittees
- Meeting Schedule
  - Call of the Chair
  - Location approved by the Executive Director
- Quorum: Majority of all members of the committee
- Open Meetings Act Applies
- Meeting Notice
  - Regular Meeting – Reasonable notice to inform the public
  - Special Meeting – Twenty-four hours notice, Statement of Purpose
  - Emergency Meeting – Notify Public Immediately, Statement of Purpose
- Chair presides

### Workgroups

- “Workgroup” means a group appointed by a committee chair, which is tasked with a focused project
- Accomplish goal then disbanded
- Presents findings to the committee
- Size determined by committee chair
- Open Meetings Act does not apply
  - Members must be less than majority of committee members
  - Minutes required, submit to committee chair

### Certification Discipline, Mike Wise

EMS, Fire, and Transportation

#### Investigations

- Complaint
- Investigation
- Case Review
- Board Action
  - Close
  - Consent Agreement
  - Notice of Opportunity for Hearing

#### Post Notice Review

##### Hearing Process

- Attorney General Representation
- Trial: Testimony/Exhibits
- Hearing Examiner Report
- Objections to Hearing Examiner’s Report

##### No Hearing Request (Goldman)

- Affidavit
- Attorney General may present to the Board

##### Standard of Review

- Preponderance of the Evidence:
  - It is more likely than not that a violation of certification standards has been proven?

### Violations

#### Criminal

- Any Felony
- Misdemeanor in the course of practice
- Misdemeanor of moral turpitude

#### Criminal (Initial Applicant)

- See prohibited offenses on website

#### Continuing education

Application falsehoods (criminal convictions)

Violation of consent agreement or adjudication order

Scope of practice  
Standard of Care/Competency  
Patient Confidentiality  
Improper delegation  
Impairment-drugs/alcohol  
Discipline from other jurisdictions/professions  
Medical records

#### Board Sets Discipline

- Permanent Revocation
- Revocation (one year out, reapply)
- Suspension of any length
- Fine - \$1,000 maximum per violation
- Reprimand
- Limit

#### “Limit” a Certification

- Criminal background check(s)
- Evaluations (mental health, chemical dependency)
- Drug screens
- Continuing education – remedial
- Anger management
- Comply with court-ordered probation
- Notify EMS employers of violation
- Probation

#### Criminal Violations (Already Certified)

- Any felony
- Misdemeanor in the course of practice
  - Theft (gas card, time, ethics)
  - Accident
  - OVI
- Misdemeanor of moral turpitude

#### Moral Turpitude Defined

- Means the act of baseness, vileness, or the depravity in private and social duties that one owes to society, contrary to accepted and customary rule of right and duty between human beings. Shocked/Depraved/Look to the facts.

#### Moral Turpitude Categories

- Sex Crimes – Yes
- Dishonesty – Yes
  - Fraud, Theft
- Violence – status of victim
  - Spouse/significant other/child
  - Police/health worker
  - Animal cruelty

- OVI/Drugs – No
- Gun Possession – No

Moral Turpitude – Violence

Consent Agreement

- Reprimand
- \$250 fine
- Anger management-Licensed Professional
- Background check

Impairment

Standard: the illegal use or illegal acquisition of controlled substances, alcohol or other habit-forming drugs or chemical substances that impair the certificate holder's ability to practice.

- On the job
- Hard drugs
- Multiple instances/proximity

Impairment

Consent Agreement

- Consider: Allow the person to practice?
  - Evaluation
  - Follow treatment recommendations
  - Drug screens
  - Background check
  - Notify employer

Initial Applicant

Criminal Record

List of Prohibited Offenses

- No moral turpitude
- No felony/misdemeanor distinctions

Time Period

- Five years of a clean record
- Sexually Oriented Offense – Infinite
- Offense of Violence – Infinite

Standard of Review

- Serious of offense
- Passage of time
- Relationship of the offense to the duties provided
- Evidence of rehabilitation and treatment

Summary Suspension

- Immediate suspension (prior to hearing)
- Clear and convincing evidence
- Standard:
  - Danger of immediate and serious harm to the public

AND

- One of the following:
  - Felony or misdemeanor committed in the course of practice or involving gross immorally or moral turpitude
  - Exceeded the scope of practice
  - False information to the Board

### Medical Transportation

#### Violations

- Vehicle Inspections and Equipment
- Staffing Compliance
- Insurance Coverage

#### Sanctions

- Revoke, Suspend, Reprimand
  - License or Permit
- Fine: \$1,500 per violation
- Vehicle out of service
- Summary Suspension (immediate and serious harm)

### Appeal Rights

- Common Pleas Court—Certificate Holder's Residence
- Motion to Stay the Board Order— "Unusual Hardship"
- Standard: Board order supported by reliable, probative, and substantial evidence and in accordance with law.
  - Written Briefs
- Further Appeal Possible: Court of Appeals, Ohio Supreme Court

### **EMFTS Board Seats Status Update, Rob Wagoner**

- Three EMFTS Board seats currently vacant:
  - Seat #2: Trauma Surgeon (exp. 2021)
    - Nominated by the Ohio Chapter of the American College of Surgeons and the Ohio Osteopathic Association
  - Seat #8: EMS Instructor (exp. 2021)
    - Both nominating organizations are defunct (Ohio EMT Instructors Association and the Ohio I/C Society)
  - Seat #5: Trauma Program Manager or Director (exp. 2022)
    - ONA, OSTNL, Ohio State Council of the ENA
- **EMFTS Trauma Committee Seats Current Status:**
  - **Appointed by ODPS Director Wilson:**
    - Trauma Surgeon: M. Chance Spalding, MD
    - Physical Medicine & Rehab. Physician: Timothy Hake, MD
    - Chief Air Medical Officer: Bradley Raetzke, MD
    - Trauma Center Administrator: Brian Fletcher
    - Non-trauma Center Hospital Administrator: Stephen Feagins
    - Fire Chief: Aaron Jennings
    - EMS Provider: Steven Berry, II

- Victim Advocate: Mary Moran
- Non-trauma Center Hospital Representative: Shaheed Koury
- Non-trauma Center Hospital Representative: Staci Trudo
- **Currently Vacant:**
  - Seat #4: Burn Surgeon
  - Seat #22: Non-trauma Center Hospital Representative

**Legislative Successes CY2023,** Rob Wagoner

- **Identify sustainable funding source(s) for DEMS:**
  - GRF operational funding
  - Seat belt fines plus \$300k for total dedicated grants \$2.9 mil FY24-25
- **Approved to add three staff positions:**
  - Investigator
  - Data: Epidemiologist 2
  - Data: Program Administrator 2
- **Revise ambulance specification requirements to include NFPA and CAAS standards**
- **Update nominating organizations, number of nominees, timeline for replacement of the incumbent, and other options for appointment to the EMFTS Board and Trauma Committee**
- **HB 138:**
  - “Mother May I” language removed with; driver, meet at scene; removed volunteer requirement for EMR certification; EMS able to recognize DNR by PA and APRN in addition to physician; decoupled scope of practice items from law and moved into rule

**Legislative Needs as of 4/18/ 2024,** Rob Wagoner

- **General**
  - **Impaired practitioners language similar to other health professionals**
    - Legal has advised and recommended that we move forward with rule promulgation under broad authority of ORC 4765.11 to facilitate safe haven/confidential program
      - “Inactive” or “Idle” certification
        - “Cannot use ‘Inactive’?”
  - Fix OMTB name reference in 4766.23 and correct to EMFTS
  - Create quality improvement language for data sharing that permits sharing of PII in a protected manner?
    - EMS response times: agency, time, location, patient condition, outcomes
- **EMS**
  - Emergency Medical Dispatch (EMD) training and certification
  - Legislation authorizing the creation of additional EMS certifications (CCP, MIHP, CP, FP, etc.)
  - Require medical oversight/direction for all certification levels operating in emergency and non-emergent settings, e.g. EMRs in industrial settings
  - Add language to provide immunity coverage to RPAB members
- **Fire**
  - Remove the identified maximum # of hours of education for VFF
    - **ORC 4765.55(A)** .....The rules adopted to regulate training programs for volunteer firefighters shall not require more than thirty-six hours of training.
- Add the ability to summarily suspend fire certificates to practice analogous to EMS code
- Necessity/advantages/value of ProBoard accreditation?



- Expand membership of FFFSI Training Committee by two members to replace the two that were lost with the merger/formation of the EMFTS Board
  - Help with potential quorum challenges

### **Projects and Engagement, Rob Wagoner**

- Remain engaged with SEOC, ESF8, ODH, and planning for April 8, 2024 Total Solar Eclipse and other various exercises
- ODPS liaison to OhioCARES Board
- Fire & Emergency Services Instructor I/II
- Elimination of newly issued AFI and EMSAI certifications
- SB 21 Acute Stroke Protocols website repository with yearly updates required (requested 4/2024)
- Upgrade EMSIRS to NEMSIS v3.5 standards project
  - Passed NEMSIS v3.5 compliance testing Dec. 2023
  - National CARES data elements
- Recruit SMEs to electronically review fire service item banks
- Implement revised reciprocity procedures in compliance with regulatory changes
  
- Remain engaged with SEOC, ESF8, ODH, and planning for April 8, 2024 Total Solar Eclipse and other various exercises
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- Recruit subject matter experts to electronically review fire service item banks
- Implement revised reciprocity procedures in compliance with regulatory changes
- Appointed as ODPS Representative to the PSAP Operations 9-1-1 Subcommittee
- Participated in ODPS Job Fair, Hilltop Bash, and Ohio State Fair
- Attended ODPS Wellness Conference
- Attended NEMSIS Conference
- NASEMSO conference, regional meetings, various council meetings (HMP, Data Managers, Education, Medical Directors)
- Ohio EMS Medical Director Conference
- Sent Ellen Owens off to retirement after 37.66 years
- Continued working to fill various positions
- 2024-2029 EMFTS Board Strategic Planning Focus Group workshop

### **Rules Review/Update/OAC Filings, Joe Stack**

#### **OAC Filings – 2023**

##### **Medical Transportation (0 rules filed)**

- No rules were filed for Medical Transportation in 2023
- No rules for Medical Transportation reached their five-year review deadline in 2023
- One chapter (4766-5, Air) is due for five-year review in November 2024

EMS (36 rules filed)

- 40 EMS rules reached their 5-year review deadline during 2023
- 5 EMS rules were filed with JCARR on April 27, 2023; 4 rules filed August 29, 2023; 27 rules filed September 26, 2023
- 28 rules were amended, 7 filed with no changes, 1 new rule filed (5 rules were rescinded)

Fire (57 rules filed)

- 59 Fire rules reached their 5-year review deadline during 2023
- 57 Fire rules were filed with JCARR on October 26, 2023
- 42 rules were amended, 12 filed with no changes, 3 new rules filed (5 rules were rescinded)
- This constitutes ALL Ohio Fire rules under DEMS authority

***\*please refer to the attached 2023 Annual Report for EMFTS Board Retreat for additional information on particular OAC Filing***

**EMS Star of Life Awards**, Valerie Koker

EMS Agency of the Year

- City of Monroe Fire Department

EMS Provider of the Year

- Jarrod Tupps

EMS Medical Director of the Year

- Jay Carter, M.D.

Frank Giampetro Distinguished EMS Educator of the Year

- Patty Willson

Jack B. Liberator Lifetime Achievement

- David P. Keseg, MD

***EMS Stars***

- Akron Fire Department
- City of Eaton Fire and EMS
- Columbus Division of Fire
- Jackson Township Fire Department
- Marysville Division of Fire
- Medina Life Support Team
- Physicians Ambulance
- TEMS Joint Ambulance District
- Troy Fire Department

The EMS Star of Life Awards ceremony will be held at the Ohio Department of Transportation auditorium on May 22, 2024 beginning at 1:00 pm.

**Ohio Professionals Health Program (OPHP)**, Kelley Long, MBA and Jennifer Hayhurst

The Ohio Professionals Health Program (OhioPHP) is a nonprofit organization that started as a group of physicians wanting to support their peers struggling with mental health or substance use disorders.

Today, OhioPHP assists hundreds of healthcare workers across the state with a wide range of concerns including stress, burnout, mental health, or substance use disorders and much more!

**Confidential Well-being Programs**

- Community Resource Referrals
- Well-being Screenings

- Confidential Monitoring Services

**Safe Haven Programs**

- A clearly defined confidential path for individuals to seek help for burnout, mental health disorders, or substance use disorders

A safe space for early intervention before patient safety becomes a concern

Access to quality clinical screening/evaluation, treatment, long-term monitoring and support

A therapeutic alternative to disciplinary action for illnesses such as mental health disorders or substance use disorders

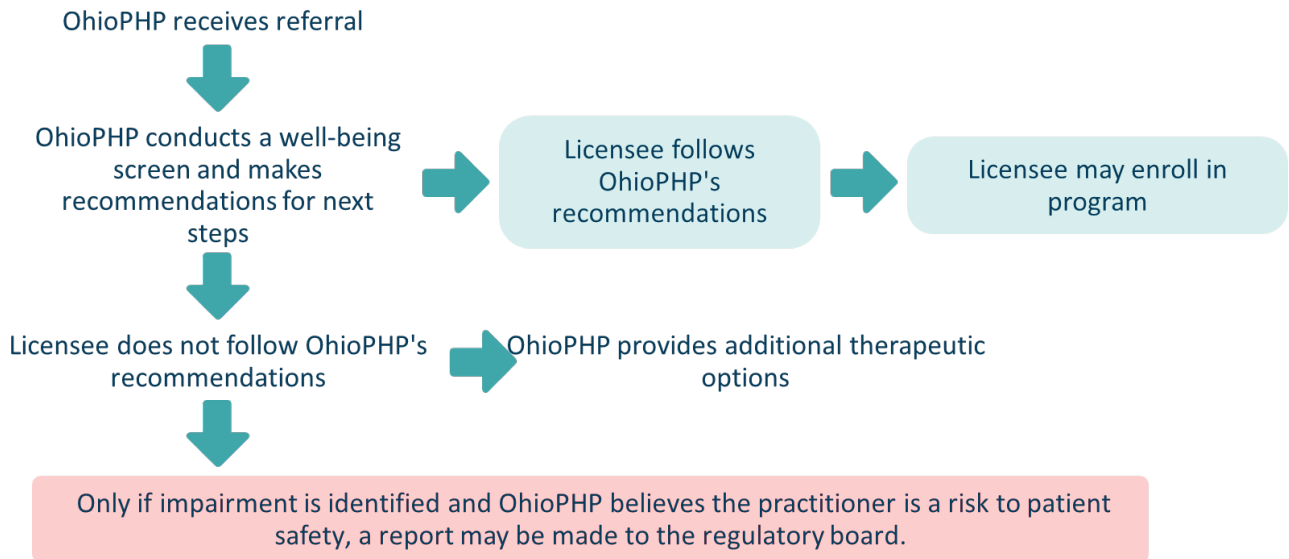
Safe Haven Programs and Confidential Monitoring Program

Who can use OhioPHP's services?

Licensees, certificate holders, and applicants who may experience any of the following:

- Burnout/Stress
- Substance Use Disorders
- Anxiety
- Depression
- PTSD
- Distressed/Disruptive Behaviors
- Others

OhioPHP Process, How safe haven programs operate



info@OhioPHP.org

**\*\*\*Please refer to the attached 2023 Annual Report for EMFTS Board Retreat for additional information on OhioPHP.org**

**National Governors Association Learning Collaborative,** Dr. Carol Cunningham

Learning Collaborative on Expanding the Role of EMS to Prevent Overdose

- Purpose: To support up to four states in implementing and/or strengthening strategies aimed at supporting the growth and development of utilizing emergency medical services (EMS) as a mechanism to address overdose
- Sponsored by the Center for Disease Control and Prevention (CDC)
- National Governors Association Center for Best Practices – technical assistance partner
- Competitive application process with a required letter of support from the Governor
- November 19, 2023: Notification from the NGA that Ohio was selected
- Ohio is one of five states selected to participate
  - Kentucky
  - South Carolina
  - Vermont
  - Wisconsin
- Governor DeWine designated the Ohio Department of Public Safety as the lead agency with Executive Director Rob Wagoner of the Division of EMS as the core team leader

#### Learning Collaborative: Ohio Core Team

- Ohio Department of Public Safety, Division of EMS
  - Ohio Department of Mental Health and Addiction Services
  - Ohio Department of Health, State Office of Rural Health Community Paramedicine/MIH Program
  - State of Ohio Board of Pharmacy
  - Ohio EMS Chiefs' Association
  - Ohio Fire Chiefs' Association
  - EMFTS Board, Regional Physician Advisory Board (RPAB)
  - EMFTS Board, Medical Oversight Committee
- 
- Project timeline: January 1, 2024 with final report by July 31, 2024
  - Kick-off meeting: January 23-24, 2024
    - Development of action plan for Ohio
    - Networking with other selected states
  - Monthly teleconferences with the NGA
    - Action plan updates
    - Collaborate on the creation of solutions to address identified gaps and impediments
  - Optional on-site visit in spring 2024
  - Wrap-up meeting: July 8, 2024

#### The Landscape of the Opioid Overdose Crisis

- Fatal drug overdose is now the leading cause of injury death
- Almost 90% of poisoning deaths are caused by drugs
- Although the number of deaths from drug overdose is higher in metropolitan areas, **the rate of deaths from drug overdose (per capita) is highest in the rural areas**
- According to the CDC, Ohio has **7th highest death rate** (number of deaths per 100,00 population) of drug overdose mortality in the nation

**\*\* Please refer to the attached 2023 Annual Report for EMFTS Board Retreat for additional information on the National Governors Association Learning Collaborative**

#### Components of the Bridge

- Increased access to Suboxone®
- Partnerships with mobile integrated healthcare, mobile community mental health, and law enforcement first responder teams

- Improved linkage of out-of-hospital response teams to the network of psychiatrists who specialize in substance use disorder (SUD)
- Increased utilization of telehealth resources
- Recent legislative measures
  - DEA extension of waiver that permits prescribing a 30-day supply of Suboxone® via telehealth until December 31, 2024
  - Ohio hospitals must report the names of patients resuscitated with naloxone to the Ohio Department of Health effective April 8, 2024

#### Ohio EMS: Considerations to Support Bridge Programs

- Support the entry points into SUD bridge programs via 911 and mobile integrated healthcare response teams
- Expansion of the Ohio EMS scope of practice
  - Add buprenorphine administration for substance use disorder to the list of approved medications for advanced EMTs
  - Add oral Suboxone® administration as an added competency for EMTs
- Create and/promote networks of non-medical transportation resources for patients with SUD
- Identify funding sources to support EMS participation in SUD bridge programs
- Community engagement
  - Drug prevention programs
  - Elimination of stigma

#### Goals

- Develop local and regional networks between EMS agencies, mobile integrated healthcare teams, mobile community mental health teams, and opioid recovery centers to create effective Suboxone® bridge programs
- Identify a variety of actionable bridge program models and best practices that align with the available public and private resources within rural, suburban, and metropolitan communities
- Facilitate the ability of the EMS workforce to empower communities to support opioid addiction treatment programs and substance use disorder prevention measures

*\*\*These minutes approved on June 26, 2024 at the EMFTS Board meeting.*