



**RICHMOND AMBULANCE AUTHORITY
BOARD OF DIRECTORS MEETING MINUTES
AUGUST 17, 2021**

Present: Matt Conrad, Chairman
Weet Baldwin, Vice Chairman
Richard Bennett, Treasurer
Kristen Larson, Director
Beth Matish, Director
Brandon Mencini, Director
Kirk Roberts, Director
Sheila White, Director

Absent: Julia Hammond, Secretary
Carlos Hopkins, Director
Lincoln Saunders, Director

Counsel: Jonathan Joseph, Esq., Christian & Barton (*via telephone*)

Guests: Zoe Thorsen, RAA System Status Controller (*via MS Teams*)

Staff: Chip Decker, Chief Executive Officer
Joseph Ornato, M.D., Operational Medical Director
Terone Green, Chief Administrative Officer
Michael Colman, Chief Operating Officer
Wayne Harbour, Chief Clinical Officer
Michael Dixon, Chief Human Resources Officer
Laura Bickham, Senior Executive Assistant and Assistant Secretary to the Board of Directors



I. CALL MEETING TO ORDER

Matt Conrad called the meeting to order at 8:05 a.m.

II. APPROVAL OF MINUTES – MAY 18, 2021

Motion: To approve the May 18, 2021 meeting minutes.

Made By: Weet Baldwin

Seconded: Richard Bennet

Discussion: None

Motion Passed: The votes were recorded as follows:

Ayes:

Weet Baldwin
Richard Bennett
Matt Conrad
Beth Matish
Brandon Mencini
Kirk Roberts

Nays:

None

III. NEW BUSINESS

A. Professional Collection Services RFP

Motion: To approve the evaluation criteria for the issuance of the Professional Collection Services Request for Proposals (RFP).

Made By: Beth Matish

Seconded: Brandon Mencini

Discussion: Chip Decker reported RAA needs to go out to bid for professional collection services. The contract was awarded to two vendors; a primary and a secondary collection service, in 2019. However, one vendor ceased operations this past June, and RAA is giving notice to terminate the contract to the second vendor due to underperformance. Kirk Roberts asked what percentage of RAA's total revenue is generated from the collection agencies, to which Terone Green responded 30%. He then retracted his response, advising he would confirm the information.

The RFP has been drafted and will be finalized upon approval by the Board of the evaluation criteria contained in today's meeting packet. Chip Decker then asked the Board for a member to serve on the Selection Committee, at which time, Brandon Mencini volunteered to serve.

Motion Passed: The votes were recorded as follows:

Ayes:

Beth Matish
Brandon Mencini
Matt Conrad
Weet Baldwin
Richard Bennett
Kirk Roberts

Nays:

None

IV. SENIOR MANAGEMENT / STANDING COMMITTEE REPORTS

A. Chief Executive Officer Report: Chip Decker reported the following:

- 1) At City Council's Public Safety Committee meeting in July, RAA's ordinance request to allow for the implementation of a BLS-tiered response system was considered. Matt Conrad asked if all members were on board, and Chip Decker responded affirmatively, adding the Committee was in full support and approval was recommended.
- 2) RAA Board appointments were also considered at the July Public Safety Committee meeting. Currently, there are five vacancies and six applicants (five of which are reappointments to include Matt Conrad, Julia Hammond, Beth Matish, Kirk Roberts and Brandon Mencini). Dr. Michael Ferras, a physician with VCU, has also applied. There has been some back and forth as to whether term limits apply to the RAA Board. The current legal opinion indicates they do not. However, there is a resolution patroned by a former Councilmember, Parker Agelasto, indicating that even though term limits do not apply to Authority Boards, they should. While the law states the maximum number of years a member can serve is eight, Council has the authority to decide not to apply these limits on a case-by-case basis. Reappointment applications received for Council consideration next quarter include Carlos Hopkins and Weet Baldwin.

Note: Kristen Larson arrived to the meeting during the CEO's Report regarding Board appointments.

- 3) Due to the timing of RAA's annual audit, no financial reports were included in today's meeting packet. CliftonLarsonAllen (CLA), RAA's outside financial audit firm, conducted their audit remotely last week, with the exception of one day when they worked onsite. The Board can expect to receive the draft audit document in the coming months, and will be asked to vote to accept it in November.
- 4) RAA just completed the reaccreditation process with the Commission on Accreditation of Ambulance Services (CAAS). CAAS conducted their onsite (virtual) reaccreditation review last month. Prior to the review, there is an extensive application process. RAA was informed the agency was 100% compliant with no deficiencies identified. As such, reaccreditation for the maximum period allowed, three years, was granted.

Chip Decker thanked the staff for all the hard work that went into making this happen. Terone Green recognized the efforts of Shawn Wray, RAA's Compliance Manager, noting it was the first time he had led RAA's CAAS reaccreditation application process. He then expressed appreciation to Laura Bickham, Senior

Executive Assistant, and Chip Decker, CEO, for all the assistance provided to Shawn Wray.

Note: Sheila White arrived to the meeting during the CEO's Report regarding CAAS reaccreditation.

- 5) Michel Colman, Chief Operating Officer, is leaving RAA having accepted the position of EMS Director for Volusia County, Florida. His last day with RAA is August 20th. RAA has begun a national search for his replacement with Fitch & Associates. Fitch & Associates implemented the RAA EMS structure, the Public Utility Model (PUM), back in the early 1990's and is known across the industry as the premier EMS consultant. RAA is hopeful to have the position filled by late November/early December.
- 6) Western Star Health Authority ("Western Star") was previously denied their request for an *en banc* hearing. He reminded the Board Western Star's lawsuit was filed in response to the Veterans Administration's (VA's) RFP issued for the provision of non-emergency transport services in the City which required proposers hold a permit to operate EMS vehicles in the City. The City did not grant Western Star a permit. They had until mid-June to appeal to the United States Supreme Court, however, an appeal was not filed.
- 7) The U.S. Attorney's Office-Eastern District of Virginia applied for the High Intensity Drug Trafficking Areas (HIDTA) grant. It provides grant funding to assist agencies operating in areas determined to be critical drug-trafficking regions of the U.S. The Attorney's Office named the program, "Project RECOVER." Chip Decker is a member of a large taskforce, referred to as the Central Virginia Opioid Working Group. The Project RECOVER program includes one Peer Support Specialist and one Supervisor for the City of Richmond, Chesterfield, Henrico and Hanover Counties. RAA has agreed to provide a place for the Peer Support Specialist to sit, equipped with a phone and a computer, while he/she waits to receive a call for assistance. RAA is still working out the details of how best to use this person's skills in the field. The grant pays to provide the Specialist with the necessary equipment as well as gas reimbursement. Currently, RAA partners with the Richmond City Health District in the program, "First Responders for Recovery," aimed at connecting addicts to recovery resources in the metro-Richmond area.
- 8) He requested the Board to "save the date," to join staff in the celebration of RAA's 30th anniversary, coming up on September 23rd. A reception is planned from 4:00 p.m. to 6:00 p.m. Further details will follow shortly.
- 9) Chip Decker advised he recently returned from the Pinnacle conference; an EMS leadership conference sponsored by Fitch & Associates attended by industry leaders from across the country. The three, major overarching themes were: 1) staffing shortages, 2) hospital diversion, and 3) who will successfully make it through another surge of COVID-19?

The Old Dominion EMS Alliance (ODEMSA) is RAA's regional council and handles the coordination and implementation of mutual aid agreements. ODEMSA is one of 11 regional councils; each of which is assigned by the Virginia Board of Health. ODEMSA develops the central Virginia region's medical protocols and diversion plan. If a hospital declares they are at maximum capacity or cannot accept additional

patients, they are placed on, what is called, diversion. Five or more area hospitals on diversion triggers the system to go into "Code Red." When this occurs, RAA communicates with Medical Control to determine a patient's destination. When eight area hospitals go on diversion, a "Code Black," status is declared. For the first time in several years, Code Black status has been declared on a more frequent basis. Prior to the pandemic, RAA's goal to transfer care and clear out of a hospital was within 20 minutes. Now, this can take anywhere from 30-60 minutes (sometimes, crews are waiting as long as two to two and a half hours). The inability to offload patients in a timely manner prevents RAA from responding to other calls.

Richard Bennett asked if RAA considered working with Patient First® and/or other urgent care facilities to handle non-emergent situations, to which Michael Colman responded management had already pursued the idea at the corporate level, however, they were not interested, adding that Chesterfield County also tried a similar approach (unsuccessfully). Chip Decker reported RAA has also attempted to work with the free-standing ER's. Unfortunately, their contractors are experiencing similar offload issues. Richard Bennett commented it might be necessary to get legislation passed at the State level requiring stand-alone facilities to accept these lower acuity patients.

- 10) He reminded the Board RAA had been selected by the Center for Medicare & Medicaid Services (CMS) to participate in the Emergency, Triage, Treat and Transport (ET3) payment model. ET3 is designed to provide greater flexibility and new payments to ambulance providers to help address emergency healthcare needs of Medicare Fee-for-Service beneficiaries following a 9-1-1 call. It is hoped CMS will expand the program to include Medicaid recipients, which would make this payment model much more beneficial to RAA.
- 11) Kirk Roberts recalled a recent call which received a great deal of media coverage. Chip Decker advised RAA is bound by HIPAA while Richmond Fire & Emergency Services (RFD) is not. Prior to releasing information to the media, RAA's Public Relations/Media Manager and RFD's Public Information Officer agreed to release the facts surrounding the case, however, unbeknownst to RAA, this did not happen. He reiterated RAA's inability to release details surrounding a response as a HIPAA-covered entity. Kristen Larson advised she was notified of this call, commenting how others approached the release of the facts from a different angle from what may have actually occurred. Chip Decker concurred, adding how the story portrayed was quite different from the on-scene accounts. He reiterated how RAA cannot even acknowledge a particular call even existed in the first place (due to HIPAA regulations). Matt Conrad stressed the Board should not be responding to media inquiries and to allow the CEO to handle such requests.
- 12) Kirk Roberts reworded his question presented earlier regarding collections and asked what percentage of RAA's bills are sent to the collection agencies and what percentage of collections makes up RAA's overall revenue. Terone Green confirmed he would look into it, and provide the appropriate answers.

B. Chief Human Resources Officer Report: Michael Dixon reported the following: Chip Decker stated staffing and time on task continue to be the biggest challenges. Matt Conrad asked how RAA is working to address the current staffing shortages. Michael Dixon reported RAA has taken on several new initiatives to include radio, print and

billboard advertising. RAA has established partnerships with professional organizations and has expanded its use of social networking and media to find candidates. Wayne Harbour has provided Michael Dixon with every person in Virginia who currently holds the necessary EMS certifications. Shortly, HR will be sending them all a communication encouraging them to apply, along with an overview of RAA's new wage structure.

Since the Board met last, RAA has hired 33 people. By the end of August, seven certified professionals will be coming on board. HR is slowly beginning to see a positive impact. Recruiting a qualified Talent Acquisition Specialist has proven difficult, having made three offers to three different candidates; all of which were declined. Nonetheless, the HR team remains focused on getting Operations staffing where it needs to be.

Brandon Mencini inquired about RAA's efforts to "grow its own," talent, to which Wayne Harbour explained RAA's EMS Placement Program. It is an innovative program launched in 2019 geared towards individuals looking to start a career in EMS (referred to as "cadets"). Cadets may have little to no EMS experience and are provided the training and the opportunity to secure their EMT (Basic) certification at no cost. In turn, cadets are required to make a two-year commitment to remain working at RAA. The class is taught every three months. Michael Dixon commented on the success RAA has seen through the cadet program. Richard Bennett commented on the need for the Board to become more visible to staff. Matt Conrad suggested having Laura Bickham notify the Board of RAA recruitment or retention events suitable for Board participation.

Matt Conrad asked if Michael Dixon is seeing any particular pattern with regard to turnover. Michael Dixon responded the reasons people leave are different. He explained HR's exit interview process shows a significant factor was pay, along with many people moving out of the area. Others were COVID-related, resulting in the decision to leave the healthcare industry altogether.

V. OPERATIONAL MEDICAL DIRECTOR: Joseph Ornato reported the following:

- 1.) He referenced the previous discussion regarding RAA's time on task and reported how COVID cases among VCU staff has surged (five to six cases per day). Staff are back to wearing full Personal Protective Equipment (PPE) as when the pandemic first hit. He commented on a recent shift he covered was one of the worst he's worked in the last 30 years, adding how waiting rooms are packed with people waiting up to six hours. This pandemic is becoming more and more challenging for all healthcare workers.
- 2.) The National Institute of Health (NIH) and VCU together have decided it would be best to delay the project for the drone delivery of naloxone. This is in response to the Federal Aviation Administration (FAA) pushing their timetable back for the issuance of new approvals by about six months. While the NIH is still interested in allowing the project to move forward, they will likely be asking for a delay in issuing its final decision until January 2022 to allow for the provision of additional grant funding in order to get through the delayed FAA regulations approval process. To optimize VCU's chances of becoming the NIH's project of choice, VCU will likely move forward with delaying the project.

Note: Richard Bennett left the meeting prior to the Operational Medical Director's Report.

VI. NEXT MEETING DATES

The upcoming meeting dates are as follows:

- A. November 16, 2021
- B. February 15, 2022

VII. ADJOURNMENT

Matt Conrad adjourned the August 17, 2021 Board of Directors meeting at 9:15 a.m.

ADOPTED

 11/16/21

Laura Bickham, Assistant Secretary