Vermont Emergency Medical Services Advisory Committee

Meeting Minutes

Date: July 15, 2026
Time: 1403 hrs – 1625 hrs
Location: Barre Town Municipal Building, Barre, VT & Microsoft Teams

Chair Drew Hazelton called the meeting to order at **1403 hrs.**

Roll Call

Member	Status	Member	Status
District 1	Present	District 12	Present
District 2	Present	District 13	Present
District 3	Present	VAA	Present
District 4	Absent	IREMS	Present
District 5	Present	PFFV	Present
District 6	Present	VCFC	Present

District 7	Present	VSFA	Present
District 8	Present	VAHHS	Absent
District 9	Absent	VLCT	Present
District 10	Present	VDH	Present
District 11	Absent		

Also Present: Various members of the public.

Approval of Previous Meeting Minutes

The Committee considered the previous EMSAC meeting minutes.

- **Motion:** Richard Bowman
- **Second:** Billy Fritz
- **Vote:** Unanimous. Motion carried.

Project Manager Report

The Project Manager report was presented, reviewing upcoming deadlines and data initiatives. The data breakout session is scheduled for July 28th at 10:00 AM at Waterbury Ambulance Service (or Waterbury State Office Complex). Stakeholders were requested to submit data-related topics and gaps by the end of the week. It was noted that workgroups (with the exception of Finance) will wrap up their work prior to the August 19th meeting, which serves as the final deadline for accepting consent items for full committee review.

OEMS Report

Dr. Rick Hildebrant provided a brief departmental update remotely, noting ongoing recruitment and administrative hiring efforts within the office.

Workgroup Reports

- **Governance:** The Governance Workgroup reported that several consent items were prepared for today's agenda and that work continues on additional system recommendations.
- **Operations:** The Operations Workgroup reported no new updates as the group had not met since the last full committee meeting. The next workgroup meeting is scheduled for July 22nd.
- **Healthcare Integration:** The Healthcare Integration Workgroup provided an update on discussions surrounding interfacility transfer (IFT) categorizations. The workgroup is developing standardized descriptors combining clinical acuity with operational context (e.g., capacity transfers, higher level of care, non-medical/transportation limitations) to integrate into future SIREN reporting.
- **Education & Workforce Development:** Bill Camarda reported that workgroup discussions focused primarily on refined consent items on today's agenda and volunteer incentives under development for the strategic plan.
- **Medical Direction:** The Medical Direction Workgroup reported that two consent items were finalized for committee consideration today.
- **Finance:** Charles Piso reported that the Finance Workgroup continues to review passed consent items, assigning estimated dollar values, funding sources, and cost categorizations (personnel, administrative, service) in preparation for post-August planning deadlines.

Consent Agenda

CI-EWD-011 – Paramedic Education Degree Requirement (Rev. B)

The Committee reconsidered the recommendation establishing an associate degree as the minimum educational requirement for newly licensed paramedics. Key changes in Revision B were reviewed, including setting the requirement to Year 5 of the Vermont EMS Plan, granting a non-sunsetting 5-year conditional license upon application, establishing pathways for higher-education bridge programs, and aligning the recommendation with the Paramedic Practitioner framework (CI-EWD-012).

Discussion centered on balancing professional advancement with workforce shortage concerns, the financial and administrative burden on rural EMS agencies, and the availability of degree programs within Vermont higher education institutions.

- **Motion:** Pat Malone
- **Second:** David Danforth

Member	Vote	Member	Vote

District 1	Yes	District 12	Yes
District 2	No	District 13	No
District 3	No	VAA	Yes
District 4	Absent	IREMS	Yes
District 5	No	PFFV	No
District 6	Yes	VCFC	No
District 7	No	VSFA	No
District 8	Yes	VAHHS	Absent
District 9	Absent	VLCT	Yes
District 10	No	VDH	Abstain
District 11	Absent		

Yes: 7 | No: 9 | Abstentions: 1 | Absent: 4

Motion failed.

CI-GOV-004 – Regulation of Special Activities (Rev. A)

The Committee reviewed a recommendation establishing that organizations or individuals knowingly providing patient care in the out-of-hospital environment beyond basic first aid and CPR/AED (e.g., ski patrols, organized event medicine) be licensed and regulated as EMS agencies under Vermont EMS statutes and protocols.

Discussion focused on jurisdiction, administrative burden, enforcement feasibility, distinctions between private property and public lands, volunteer retention within ski patrols, data collection, and integration of National Ski Patrol / Outdoor Emergency Care (OEC) standards.

- **Motion:** David Danforth
- **Second:** Charles Piso

Member	**Vote**	**Member**	**Vote**
District 1	No	District 12	Yes
District 2	Yes	District 13	Yes
District 3	Yes	VAA	Yes
District 4	No	IREMS	Yes
District 5	Absent	PFFV	Yes
District 6	Yes	VCFC	Abstain
District 7	Yes	VSFA	Yes
District 8	Yes	VAHHS	No

District 9	Absent	VLCT	Abstain
District 10	Yes	VDH	No
District 11	Absent		

Yes: 12 | No: 4 | Abstentions: 2 | Absent: 3

Motion carried.

CI-GOV-005 – Regionalization and EMS Consortium Development Support (Rev. A)

The Committee reviewed a recommendation establishing a state-funded, two-phase grant program to support voluntary EMS regionalization, consortium development, and cooperative service models among agencies, municipalities, and stakeholders.

Discussion addressed the terminology surrounding "regionalization," clarifying that participation is entirely voluntary and intended to foster bottom-up collaboration, shared administrative/educational resources, joint coverage, or regional service delivery (e.g., MIH or shared paramedic response).

- **Motion:** Lee Krohn
- **Second:** Pat Malone

Member	**Vote**	**Member**	**Vote**
District 1	Yes	District 12	Yes
District 2	No	District 13	Yes
District 3	Absent	VAA	Yes

District 4	No	IREMS	Yes
District 5	Yes	PFFV	Abstain
District 6	Yes	VCFC	Yes
District 7	Absent	VSFA	Yes
District 8	Yes	VAHHS	Yes
District 9	Absent	VLCT	Yes
District 10	Yes	VDH	Yes
District 11	Absent		

Yes: 14 | No: 2 | Abstentions: 1 | Absent: 4

Motion carried.

CI-MED-003 – Service Level Medical Direction (Rev. A)

The Committee reviewed a recommendation requiring all licensed EMS agencies to maintain physician-led service level medical direction appropriate to the agency's size, scope, and operational complexity, implemented no later than Year 2 of the EMS Plan.

Extensive discussion occurred regarding credentialing terms ("Vermont licensed provider" vs. "physician"), liability, oversight structure for Advanced Practice Providers (APPs/PAs), medical director compensation rates, and financial impacts on rural municipalities and first responder squads. Several members and physician advisors expressed concern that substituting broader provider language could create legal and structural ambiguity regarding top-level physician oversight.

- **Motion:** Billy Fritz
- **Second:** David Danforth

Member	Vote	Member	Vote
District 1	No	District 12	No
District 2	Yes	District 13	Yes
District 3	No	VAA	Yes
District 4	No	IREMS	Yes
District 5	No	PFFV	Yes
District 6	Yes	VCFC	No
District 7	Absent	VSFA	No
District 8	Yes	VAHHS	No
District 9	Absent	VLCT	Absent
District 10	Yes	VDH	No

District 11	Absent		

Yes: 8 | No: 9 | Abstentions: 0 | Absent: 4

Motion failed.

(Note: CI-MED-004 was tabled due to time constraints and scheduled for consideration at the August 5th meeting).

Open Discussion / Public Comment

The Committee held brief open discussion regarding the statutory authority of EMS districts and the transition of District Medical Advisor (DMA) roles.

Adjournment

- **Motion:** Richard Bowman
- **Second:** Billy Fritz
- **Vote:** Unanimous. Motion carried.

The meeting **adjourned at 1625 hours.**