



## **The NASEMSO Health and Medical Preparedness Council**

Annual Meeting Record

8:30 a.m.-3 p.m. EST

May 20, 2018

**Attending:** Joseph Schmider, Jay Taylor, Paul Patrick, Paul Leinas, Robert Wagner, CDR. Bruce Dell, Ray Mollers, Dr. Richard Niska, Melissa Trumbull, Sam Hurley, Jean-Marie Bakehouse, Justin Romanello, Abdullah Rebayem, Chris Hutto, John Montes, Mark Miller, Chuck O’Neal, Paul Phillips and Leslee Stein-Spencer (NASEMSO).

**Call to order/Roll Call:** Joe Schmider, Chair called the meeting to order at 8:30 a.m.

**Approval of Minutes 3/2018:** Meeting minutes approved.

**National Registry Emergency Medical Technician (NREMT) Update:** Greg Applegate gave the update for the NREMT. He outlined the new changes in the organization structure and staffing at the NREMT. The goal is to become more user friendly and better serve the needs of their stakeholders. The NREMT hosted a few listening sessions at the NASEMSO annual meeting and were getting great feedback from state officials. They are also reaching out to the states in order to identify what their needs are. They avg. approximatley 100, 000 calls per year which can be overwhelming.

**FICEMS update:** Joe gave an update from the last FICEMS meeting. The Agenda 2050 is out for comment and he encourage members to comment. They are also looking at development of a strategic plan and also looking at developing an implementation plan for the MUCC rollout.

**Compact Update:** Joe gave an update on EMS Compact. There are currently 13 states that have laws in place with 3 additional states waiting for the Governor’s signature. There are still some national groups that are against the Compact as the feel the following: not needed; ruin current jobs, and foster EMS personnel to work in one state but live in another. Jean-

Marie shared how misinformation spread in Colorado and how they had to go to the elected officials to clarify and dispel the rumors. On Tuesday, May 22, at the annual meeting, staff, state official and the NREMT staff will meet to review a contract to allow NREMT to assist in the day-to-day operations of the Commission . The concepts of the Compact could be used in many states who have experienced a major disaster and needed EMS resources. The Compact is not removing the need for the National Ambulance Contract or EMAC.

### **NFPA 3000:**

John Montes gave an indebt overview of NFPA 3000. To validate the need for this, John shared with us stats that the FBI keeps for active shooter events (FBI classifies these as 4 or more dead). There have been 220 active shooter events from 2000-2016. In 2017 there were 30 incidents involving an active shooter. Earlier active shooter events averaged 4-5 deaths; today's average number is in double digit.

NFPA is an accredited standard that came out on May 1<sup>st</sup>.The information contained in the document is to help mitigate the loss of life and the impact it as and the material is for NGO's, first responders, health care facilities, emergency management and the public. It is not a prevention document nor does it go over tactical operations.

Johns power point is included but some of the highlights include:

- 4 main concepts: whole community, unified command, integrated response and planned recover;
- Risk assessment: identify threats, analyze consequences and assess hazard risks.
- Facility Readiness Chapter which includes: Characteristics, Emergency Action Plan, Integration, Notification and exercises.
- Communications Center Support: Coordination, relationships and Interoperability.
- Law Enforcement Responder Competencies: knowledge based on tasks and competencies by a, federal, state and or local requirements, threat based medical care
- Teaching competencies to zone you expect to be working in
- Fire and EMS are one chapter as many areas overlap including tasks by zones. For warm and hot zones: Ballistic Vest, Identifiable garment (decided at the local level) and means of communication. If the decision is not to wear a vest and a responder is injured than it needs to be noted in the AAR.

- Training: must include risk assessment, tests performed, time available and financial commitment.
- Chapter on Warning, Notification and Crisis Communications including social media
- Chapter on Continuity of Operation from NFPA1600
- Chapter on receiving hospitals
- Phases of recovery

**Action item:** Rob Wagner discussed the class being taught in Ohio and he will see if he can share with the Council.

**Action item:** states should look at developing a proposal to NFPA to develop standards for teaching this class.

**Action item:** John Montes will share his power point to include with the minutes

**Action item:** Jay Taylor from Pa agreed to represent NASEMSO once approved on NFPA 3000 and Chuck O'Neal from Kentucky will be the alternate.

### **Federal Update:**

**CDC and ASPR:** Although Ebola is back in the news; it is really always an issue in Africa. CDC will need to update some of their documents as they have expiration dates on them. Now is a good time though to review PPE and transporting patients with a High Consequence Infectious Disease (HCID). ASPR has approved the HCID documents that NASEMSO was given a grant to develop and these documents are now posted on the HMPC site. In addition, all council members were sent the link to these documents. More information will be shared during the federal partners update during the annual meeting.

**Action item:** Florida will share information on 10 teams they have developed for a transport of a patient with a HCID. These teams are on call and always available to respond.

### **Federal report by Ray Mollers**

Federal staff continues adjusting to their new offices one of which is Combating Weapons of Mass Destruction (CWMD) office. This office will be responsible for CBRN detection, planning and preparedness for these increased threats to include CBNE. Some of their primary responsibilities and priorities include:

- Support operators by providing equipment and expertise to frontline personnel who protect the nation from WMD terrorism.

- Coordinate with operators to determine their need and requirements to protect the nation,
- Help strengthen the medical first responder system nation-wide to prepare for emergencies.
- Close capability gaps
- Improve technology
- Continue with “Stop the Bleed” program
- Continue to support “Active Shooter” programs
- Develop a “Treating of Canines-EMS Care” manual (secret service will be the lead)

Ray then let the discussion from NASEMSO’s Strategic Preparedness Plan in which EMS Barriers were identified as well as 10 goals for EMS. Unfortunately, due to funding to NASEMSO to provide technical assistance or develop plans to meet the goals, that document has remained on the “shelf”. Melissa from NAEMT recommended bringing together key agencies to work on an EMS Preparedness document. Their chair sent a letter to FICEMS requesting this (letter attached)

**Action item:** Ray provide his power point to go along with the minutes

**Action item:** Paul will provide information on Florida’s response teams

**Action item:** Leslee will include the NASEMSO’s EMS Preparedness and Improvement Strategy Document.

### **Executive Board:**

President Keith Wages, President-elect Kyle Thorton and NASEMSO’s Executive Director Dia Gainor came to the meeting and addressed the importance of the HMPC and what a key role this council plays in the organization. Dia asked for a volunteer from the Council to be part of a working group sponsored by NHTSA to look at Improving Trauma Care. There are approximately 22 questions to be discussed over 6 weeks.  
Action item: The Council will recommend Chuck O’Neal from Kentucky for the working group

### **New Business identified as top issues that need to be addressed and priorities identified as future Action items:**

- **Notification of State EMS Offices for Disasters:** The council will look at developing a communication drill for state EMS Directors to assure that notification procedures are in place.
- **EMS Disaster Took Kit:**

- **NFPA 3000 education and training**
- **PPE for work force under Active Shooters to include vests**
- **K-9 care by EMS**
- **Strategic Plan for preparedness to include the 10 identified priorities.**
- **Identify and responding to vulnerable populations during a disaster**

**Next Medical and Health Preparedness meeting: July 25, 2018 2 pm CST.**