Welcome to the Joint National EMS Leadership Forum



Friday February 27, 2015 @ 0900-1200 EST

Baltimore MD Hilton Poe Room The mission of the **Joint National Emergency Medical Services Leadership Forum** (JNEMSLF) is to facilitate a shared vision, collaboration, and unity in purpose to improve emergency medical services and conditions that affect emergency medical services throughout the country.

It is the vision of the **JNEMSLF** that timely, stable and accountable local and regional emergency medical services systems with the capacity and performance to ensure optimal patient outcomes must be available throughout the United States. The **JNEMSLF** will achieve this vision through:

- <u>Maintaining contemporary and mutual awareness</u> of the priorities, challenges, and accomplishments of national associations with a leadership role in emergency medical services systems in the United States
- <u>Fostering an environment of trust and information exchange</u> among and between national EMS associations and partners in the executive branch of the federal government
- <u>Identifying matters of mutual importance and developing consensus-based positions</u> for emergency medical services stakeholders and partners at the all levels – local through federal
- <u>Serving as a collective voice</u> for interactions with federal and national organizations when a multi-association, multidisciplinary educational approach is of benefit to all stakeholders

- Introductions
- Agenda Review/Additions
- Prefiled Burning Platforms
- Emerging Priorities/Select Action Topics
- NEMSIS: progress and next steps
- Federal Partner Updates
- Select Next Meeting Date Range
- Adjourn by 1100

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"Prefiled" Burning Platform (02/15)

- MIH/CP Toolkit
- Pull available resources together and contextualize them
- Have identified types of resources to gather
- NEMSAC categorization
 helpful
- Nomenclature discussions

- NAEMSE has the floor
- Will be listing resources next
- Participation open to all
 - NEMSAC
 recommendation to
 convene National
 Healthcare Stakeholder
 Strategy Meeting building
 on previous consesnus
 work:

- NEMSAC Recommendation re MIH/CP:
- Integration
- Education
- Common data
- Sustainable models
- How CP/MIH can enhance patient experience
- Medical direction

- mihpresources.org includes a 60 page "principles" document
- Point persons may come back to NEMSAC to see if voids can be filled
- Workgroup will have a call in the next 2-4 weeks
- Lack of definition risks no ownership in 40 years
- 6 demo projects funded by CNMI

- Can we look at the 6 projects and identify promising practices?
- Thought: invite reps of all 6 projects to share amongst each other and JNEMSLF
- Three are invited to a special workshop at Pinnacle already
- A final audit will tally all of their results

- Staffan will be presenting the post pilot sustainability results
- CPIF is held monthly, 5 out of 6 have been on previous calls (available on archive)
- Reno publishing data now and updating every Q
- 3 projects expire in July
- How to use tools is valuable in addition to sharing results

- "Tactic copying" may not be successful, capture strategy instead
- Stakeholders outside of the EMS community need to be included (e.g., payers)
- JNEMSLF needs to keep its eye on the ball, evaluate baseline capabilities and practices

- Don't know if we have "what it's all pointing towards" down
- What can we do to make sure these 6 are successful (the whole can be bigger than the sum of the parts)—together what can they provoke in the future?
- The Pinnacle workshop will result in a paper in addition to a venue for them to speak

- What about the larger population of grantees?
 Potential for EMS to be part of another program?
- We have a vested interest in their outcome
- BOMBSHELL: do we become an endorsement organization?

- Endorsement by list versus as a federation of organizations
- That may force formality
- Set aside organizational issue
- How can JNEMSLF express support & willingness to help with NEMSAC recommendation?

"Prefiled" Burning Platform (02/15)

- ANSI Accreditation of CAAS GVS-2015
- NFPA is ANSI accredited, as is NFPA1917
- In revision, if there is no appeal, the 2nd edition would be issued in May 2015
- Drafted a letter to CAAS which will be forwarded to ANSI

- NFPA has the floor
- No concerns about CAAS becoming ANSI accreditation, rather GVS-2015 becoming accredited
- ANSI rules prohibit duplicative standards

ANSI Accreditation of CAAS GVS-2015

- Will ANSI rules block GVS-2015 outright?
- There can be standards on the same subject of they cover two different areas (e.g., one covers Type 2, the other covers Types 1 & 3)

Emerging Priorities for ACEP:

- Board approved EMS **Committee policy** change: joint ACS spinal injury (not endorsed) and returned a policy on reduction of backboard use, medical direction, eliminate use in interfacility transfers, and EMS personnel judgement
- Out of hospital severe hemorrhage control policy: tourniquet use, hemostatic gauze, etc., white paper forthcoming
- Assisting NAEMT with EMS Field Bill

Emerging Priority for NAEMSP: the DEA

- 1000 people at January meeting
- Meetings with FDA and DEA re written Rx's
- FRN due out in the fall re regulatory changes that are expected to be sweeping controlled substance changes
- DEA coming to UT to address medical directors, concerns that changes will not be appropriate.
- Example of MD who was warned by the DEA that because he had multiple ALS sites he was going to have to get a distribution license

Emerging Priority: the DEA

- Uncertainty about FRN publication date
- Imperative for a pile on letter to be generated to file as public comment

Emerging Priority for NAEMT: MIH/CP

- NAEMT did a second survey
- 134 responses, filtered down to 110 programs able to complete the survey and had credible answers
- Questions ranged from training, MD oversight, operations, etc.

 Creating a summary analysis

Emerging Priority for AAA

- Stars of Life April 15, at the Smithsonian
- National Treasures invited to speak
- Dropped their Medicare Relief bills, thanked AHA, IAFC, NVFC for support letters
- Every 10 years the feds review rural and superrural status, a large # of zip codes changed

- Conversion from rural to urban has a significant financial impact
- No threshhold analysis was performed
- AAA created color coded map
- 3 states have had an extension of prior auth issued for dialysis transports
- Interested in reducing the burden of cost reporting to CMS
- Has met with CMS and conversion of ICD9 to 10

Emerging Priority for ITLS

- 90 programs wordlwide
- 8th edition due out soon
- Position papers describe changes
- Challenge to provide education to rural areas

Emerging Priority for NASEMSO:

- REPLICA Endorsements
 welcome
- CO likely to be first state
- Will take until next legislative season to get to ten states
- EMS Compass—the EMS performance measures initiative

- MY Meeting in April in 2015 in San Antonio
- Changing our MY/AM timing to make the annual meeting

Emerging Priority for NASEMSO: Specialty Certification

- NASEMSO leadership met with BCCTPC yesterday on new strategy document
- Multiple parameters for recognition by employers
- What do states require? Passing exams is one component, internship, competency assessments
- Input from other regulatory boards
- In contrast to 1970's where many levels emerged, states want to improve consistency in requirements

- Uniform set of requirements by states for individuals to function in a given role
- Difference between state recognition and credentialing by certification board
- State role: Protect the public
- States or industry request?
 Role of Cooperative Agreement
- Differences of focus:
 - Certification boards
 - State
 - Employers

Emerging Priority for NASEMSO: Specialty Certification

- NASEMSO trying to provide a service to the states
- Uniform approach
- Entry level assessment/minimum competency-certification body
- Fitness to practice- states
- Researched/benchmarked with Federation of Associations of Regulatory Boards (FARB)

- Administrative board to assist states
- Input from stakeholders is being sought
- Survey link at <u>www.nasemso.org</u>

Emerging Priority for IAED: AACN, MIH

- Working on CAP with ACEP
- Communications Center protocols for MIH programs in use in four locations in the US
- PTSD in the 911 community (includes chronic over time)
- IAED has formed an alliance with the 911 Wellness Foundation to focus on PTSD

 Keith serving as the EMS Compass Stakeholder Communications Group

Emerging Priority for NVFC: Ken Knipper

 Juan Bonita from Idaho stepping up as EMS Committee Chair

Emerging Priority for IAFC:

- Medicare Bill and collective support
- Bill being introduced in the US Senate this afternoon Volunteer Protection Act to allow local 501c(3) agencies to provide up to \$600 in incentives
- Survey of members indicated monitoring legislation, reimbursement and billing, and MIH were the highest priorities

Emerging Priority for AAMS:

- HR822 Medicare rate adjustment for air medical transports pending data submission, seeking companion bill sponsor
- AAMS spring meeting will have several high pro speakers in Crystal City

• AMTC in October

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Action Items

- Scott & Kevin: to continue MIH/CP resource ID and gathering
- Scott & Keith & Tom: Invite all 6 MIH/CP CNMI grantees to a JNEMSLF meeting (Pinnacle), FRAME IT for them in advance and make it a longer meeting
- Letter of Support on NEMSAC MIH/CP stakeholder consensus recommendation to DOT et al. (consider timing of when it should be held)

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HHS/ASPR

- FOA released last week--\$204 million for imroving Ebola preparedness at the state level, primary targets are hospitals. SHOs have to include EMS as a component of their HPP program.
- State EMS Directors should reach out to them, especially to work on transport issues
- Solicitation for a national transport is cancelled
- ASPR working closing with CDC for maximum alignment with their funding opportunity
- New law provides reimbursement for unreimbursed medical expenses for treatment AND transportation of confirmed Ebola patients
- ASPR released the National Health Security Strategy Implementation Plan within the last week

HHS/EMSC

- George Gentile's first meeting
- 2016 performance measures will be posting and others retired for next fiscal year and next FOA
- Interested in where EMSC aligns with the priorities discussed here.
- Noah reinforced how EMS Compass will coordinate with the state grantee measures

NHTSA OEMS

- NAEMSP strategy to develop, promote and implement evidence based guidelines for prehospital care
- Ongoing ambulance safety efforts
- Shared first ever findings from across 40 ambulance crash investigation:
 - 81% ambo occupants unrestrained
 - 44% of pts were wearing both lateral AND shoulder restraints
- Emergency vehicle operator training: proposing survey of over 20,000 organizations about training courses and requirements (local and state)
- Other recommendations from NEMSAC were to study efficacy and identify improvement opportunities
- FRN is a required notification

NHTSA OEMS

- Next NEMSAC 3/31-4/1
- Naloxone/National Office of Drug Control Policy will be on the agenda, public hearing in July
- Candidates for appointments to NEMSAC are being considered now, should be made by late April

DHS OHA

- Dr. Brinsfield has been appointed Assistant Secretary
- Preparing for shutdown
- NASEMSO's EMS Domestic Preparedness Improvement Strategy recently released
- REPLICA status: dead in VA, filed and moving in CO and MO. ID, NV, UT were all working on getting it filed, but too late in their legislative session. Activity obvious is at least four other states
- Rick Patrick was granted a fellowship to work on Capitol Hill with Senator Feinstein on health issues for the next year
- Several bills printed already related to Human Trafficking, potential for EMS

First Network Authority Board

- State consultation visits occurring
- Firstnet.gov has a map and single point of contact
- Have to get EMS to the table
- This is the first time all of EMS has been included in a large communications initiative

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JNEMSLF 2015 Meeting Date Options

- –Pinnacle August 3 (Amelia Island, FL)
- –EMS World Expo September 24-28 (Las Vegas)

-FICEMS, maybe NEMSAC sometime in December

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