NASEMSO Data Managers Council

MEETING MINUTES

September 18, 2018

Call to Order

Meeting was called to order @2:34p eastern

Roll Call

DMC Members

Chas Becvarik (NM)
Chip Cooper (NH)
John Cramer (ID)
Chelsea Dubie (VT)
Donna Etheridge (MS)
Ridgley Ficks (MA)
Doug Fuller (NE)
Chuck Happel (WI)
Michelle Johnson (DE)
Dan Lee (IL)
Dipti Patel (GA)
Kevin Putman (MI)
Tim Seplaki (NJ)

Others

Rachael Alter (NASEMSO)
Cathy Curley (PA)
Chris Handley (DoD)
Camry Hess (IN)
Kaylen Irwin (PA)
Jeremy Kinsman (NHTSA)
Josh Legler (Associate Member)
Clay Mann (NEMSIS TAC)
Mamadou Ndiaye (?)
Brian Ritchie (AK)
Lawrency Scholl, PhD MPH (CDC)
haron Steele (NE)
Robin Stump (IN)
Lisa Young (NEMSIS TAC)

Secretary's Report

July 31st minutes approved.

Regional Reports

No reports

Council Project & Committee Reports

No reports

New Business

Overview of CDC's Enhanced State Opioid Overdose Surveillance (ESOOS) program – Lawrence Scholl, PhD, MPH

Dr. Scholl provided an overview of the CDC's Enhanced State Opioid Overdose Surveillance (ESOOS) program. The primary aim of the ESOOS is to support and build surveillance of opioid overdoses (both fatal and non-fatal). Currently 32 states are funded as part of this project; they are submitting data every 6-months.

Challenge: Some states injury prevention offices don't have a good connection with EMS offices and aren't well acquainted with 1) EMS data 2) vendor challenges 3) transition to newer versions of NEMSIS 4) missing data feeds (e.g. not all agencies sharing data) – and various timeframes 5) adopting standard case definitions.

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Questions:

- Are states aware that you're a part of ESOOS? Michigan has heard the term, but done through Bureau of Epidemiology.

- Should we do a needs assessment? What relationship do you have with ESOOS? What data do you share? What version of NEMSIS? What can we standaradaize? Chip agreed that it's worth a try to get a good collective picture. Discussion: somehow capture what each state's goals are. May speak to how they are extracting and looking at data.

  ACTION: Tim will put together a needs assessment.

- Jeremy Kinsman: ED vs EMS data, can you look at the outcome from ED? Getting aggregate counts, so can't get to case level.

- For the states, is the money directly reaching your office? Michigan: not getting the money directly, and struggle to give anyone large amounts of data. Epi is looking at purchasing a different system from the vendor to get the data they need.

- Is on of the challenges the pace of moving to other versions of NEMSIS? Are there opportunities to slow the progress?
  Kevin – NEMSIS probably can't be slowed down any more.
  Chip – the reality is that as soon as you are in v3, the opiate fields aren't affected.
  Kevin – it's not so much that it's transitioning too quickly, it's that agencies are on different version (not a pace thing, but a transitioning issue).

Additional information can be found here:
https://www.cdc.gov/drugoverdose/foa/state-opioid-mm.html
https://www.cdc.gov/drugoverdose/data/nonfatal.html
https://www.cdc.gov/drugoverdose/epidemic/index.html

NEMSIS V3 Implementation Meeting Review – Tom McGinnis

Tom was unable to attend – Dr. Mann covered this topic during the TAC session

Partner Reports

NHTSA OEMS – Jeremy Kinsman

Appreciates being a part of the discussion; enjoyed attending the NEMSIS Implementation meeting and meet with people face-to-face. If you have questions or concers, don't hesitate to call or email. The OEMS will be reaching out to individuals to talk about challenges you may be facing in your states.

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NEMSIS TAC – Dr. Clay Mann

- Deer Valley Workgroup Discussions
  - Responses from the 8 Workgroups have been added to the website for each of the topics that the workgroups discussed
  - Next stage in revision requests for 3.5.0
    - NEMSIS Public JIRA Project (issues tracking program) potential changes and progress can be tracked.
- Rollout of the Vendor Version Data Submission Dashboard
  - Vendors can check in to see how their software is performing (average schematron warnings per day). Most throwing only 1 warning per record (on average). There are real differences by software, indicating that there is good software and bad software. Vendors can compare themselves against others (no names but your own, but it will show them where they are at in relationship to other vendors in the market). Also tells them that TAC is watching. Will see value in moving themselves towards the 'good side'. Vendors also have access to the Data Quality Metrics to see where errors are occurring.
  - DMC wondered if can this be made public (would be beneficial on the consumer end).
    TAC: trying to remain neutral in competitive/pricing arena. Not yet resolved. For states, you can go to the average warnings to see who isn't doing well and who is performing well (you can see the vendor and packages and version that are working in your state).
    Discussion – this is a great driver for competitor improvement
- Progress Since v3 Implementation Meeting
  - Workgroup meeting on eDisposition.12
    - Workgroup trying to polish the decisions made on eD.12 (meeting every week). Should be done in 3 weeks.
  - Review of Late Breaking Revision Requests (Clay)
    - 10 requests –will plan a DMC call to review the revisions and hold a vote.
  - Workgroup meeting on CARES/NEMSIS harmonization (Chip)
    - Identified areas for improvement. Had a meeting with CARES last week; started well, then were informed that they've been doing it for so long and no changes will be made.
- Review of 2017 v3 Dataset
  - Last steps of cleaning the v3 dataset. 1st version of the dataset will include 8 million records.
  - Data quality: data is much cleaner than v2 data. Two areas struggling with: Suggested lists (i.e. – there are over 1300 'cause of injury').

Other Business

- Updates to Karen's position? Lisa mentioned that they're still in the process of evaluating candidates.

- Dan's been asked about eOther07 (intentional or unintentional disaster) – mostly would be not applicable or blank. Wouldn't be much burden, but could be of value to add this (although could be too late) to identify disasters. Thoughts on recommending this as a National Element?
  Jeremy mentioned that they have been discussing this at the national level – the more disasters that happen, the more people recognize the value of EMS; although this probably can't be part of 3.5.0, but could be useful in a future version. Jeremey will talk to federal emergency management partners to see if there is an opportunity to find a state(s) to test how providers would fill this out.

Next Meeting

October 23, 2018 – 2:30p eastern.

Adjournment

There being no further business, the call concluded at 4:21pm eastern.

Meeting minutes respectfully submitted by Rachael Alter, NASEMSO staff