

## Meeting Record



### Present

#### Officers

President - Kyle Thornton (NM)  
President – Elect: Any Gienapp (WY)  
Immediate Past President: Keith Wages (GA)  
Member – at- Large on EC: Stephen Wilson (AL)

#### Regions

South: Stephen Wilson (AL)  
West: Wayne Denny (ID)  
Western Plains: Jim De Tienne (MT)

#### Councils

Medical Directors: George Lindbeck (VA)  
Pediatric Emergency Care: Morgan Scaggs (KY)  
Personnel Licensure: Jamie Gray (AL)  
Trauma Managers: Alyssa Johnson (MT)

#### Members

#### Federal Partners

NHSTA OEMS: Gam Wijetunge  
NHSTA OEMS: Jon Krohmer

#### NASEMSO Staff

Beth Armstrong  
Rachael Alter  
Dia Gainor  
Kathy Robinson  
Hilary Bikowski

### Absent

Secretary: Steve McCoy (FL)  
Treasurer: Gary Brown (VA)  
East Region: Jason Rhodes (RI)  
South Region: David Newton (GA)  
West Region: Todd McDowell (AK)  
Western Plains: Joe House (KS)

Western Plains: Marty Link (SD)  
Data Managers: Tom McGinnis (CA)  
Health & Medical Preparedness: Joe Schmider (TX)  
Medical Directors: Matthew Sholl (ME)  
Personnel Licensure: Curt Shreckengaust (KS)  
Trauma Managers: Eileen Worden (MI)  
HRSA/EMC: Tee Morrison-Quinata  
NHSTA OEMS: Dave Bryson

The meeting was called to order at 2:00 PM EDT.

## **Call to Order / Roll Call**

President Kyle Thornton called the meeting to order at 2:02 p.m. Eastern time and Hilary Bikowski called roll. A quorum was present.

## **Secretary's Report**

On behalf of Steve McCoy, Hilary Bikowski presented the January 16, 2020 Board meeting minutes.

**ACTION:** Kyle Thornton moved, and Keith Wages seconded, that the minutes should be approved as distributed. The motion passed unanimously.

## **Treasurer's Report**

### **Financial Performance**

On behalf of Gary Brown, Beth Armstrong reported total income from operations as of January 31 of \$473,032, an additional \$33,087 in other income from interest, dividends and realized gains, total expense of \$576,158 yielding a year-to-date net deficit of (\$70,039). There are accounts receivable due from federal contracts, per usual.

## **Program Committee**

On Gary Brown's behalf, Dia Gainor reported that the annual meeting program is finished. The committee is still pursuing sponsorship opportunities. The hotel information will be posted shortly.

## **President's Report**

Kyle Thornton reported that the Executive Committee continues to meet on a weekly basis.

## Federal Partner Updates

### HRSA/EMSC

No representation from HRSA/EMSC

### NHTSA OEMS

Gam Wijetunge and Jon Krohmer, MD reported that NHSTA would be hosting a call with DHS and HHS and Dr. Krohmer will be involved in the call next Tuesday. Kyle thanked Dr. Krohmer for the work he has done on discussing COVID-19. Dr. Krohmer thanked NASEMSO for all their work.

Dr. Krohmer said that they are doing a lot with the Coronavirus situation. If NASEMSO identifies any issues other than the availability of the N95 resuscitation masks, let him know.

## Executive Director's Report

### Current Projects

#### NHTSA National EMS Projects of Significance

Dia Gainor reported that NASEMSO had received two invitations in the last two weeks. The first one was to participate in a closed meeting of American Association of State Highway and Transportation (AASHTO) asking for a representative from NASEMSO to attend the meeting on February 25, 2020 in Washington DC to meet with their leadership.

The second invitation came from The Council of State and Territorial Epidemiologists (CSTE) to form an advisory group to develop EMS case definitions for non-fatal overdose scenarios on behalf of the state epidemiologists to promote how to use EMS data.

Make it a multidisciplinary group but stress that the state NEMSIS is different than the national NEMSIS. There are multiple versions of NEMSIS.

Dia reported that the advisory group would begin with conference calls to start. She said that there is the possibility of a face-face meeting in the future. She will keep the Board advised.

Dia Gainor reported that the NHSTA National EMS Assessment is now in final stages. Received results from all 50 states, DC and 2 territories. Analysis of the graphical and the narrative is going on now. The final report will be available in 3-4 weeks and will have it to NHSTA for review.

Presentation of the results at an upcoming National EMS Advisory Council meeting will occur in April.

## **Executive Director's Report**

### **Current Projects**

#### **State Systems of Care**

Kathy Robinson reported that the States Systems of Care is winding up their data collection. Kathy said that there were obstacles in getting the information because not all state systems of care are located in the EMS offices, but in other offices. They are still reviewing and editing some of the responses.

#### **Specialty Care Assessment**

The project team deeply appreciates and is proud to announce that 100% of states were recorded for the purpose of the assessment, although a few of them are under review and edit presently. We've learned a lot about the status of systems of care development and look forward to presenting our observations to you soon.

#### **NHTSA Fatigue in EMS**

Kathy Robinson reported that several milestones were accomplished in January to support the project. While at NAEMSP, our Principal Investigator was able to establish contact with several EMS medical directors interested in having their agency personnel participate in the experimental study. The study has been enrolled at [clinicaltrials.gov](https://clinicaltrials.gov) as "The EMS Sleep Health Study: A Randomized Controlled Trial." You can look up more detailed info using the identifier NCT04218279. The Pitt IRB has concluded its review and process related to the study protocol and all systems are go from their perspective. We have submitted an application to CAPCE for CE credit and are in negotiations with an LMS to adopt the modules and provide them for free to EMS personnel when the project is completed. Unfortunately, just yesterday our funding partner requested that we hold on implementation while they review all OMB and IRB approval documentation related to the protocol. Hopefully, this situation can be resolved quickly as it would be very challenging to incorporate any additional edits and any delay has a profound impact on our ability to complete our deliverables within the established period of performance. The web tool or Phase 3 is currently under development. We have a mock-up and are currently editing various metrics that serve the instrument.

#### **EMS for Children Innovation & Improvement Center Update**

Rachael Alter reported that the recompet application was submitted in January. The review process should start in the next few weeks.

Rachael reported on the work that is being done for pre-hospital pediatric care in EMS systems. She reported that they are working on educating prehospital

providers to be prepared for pediatric care. The committee is in the process of developing a check list based on a study for pediatric preparedness. Creating timelines for finalizing the project and putting the test kit together.

### Pending Projects

#### **Safe Transport of Children Crash Test Project**

On Mary Hedge's behalf, Dia Gainor reported that the STC Committee continues to finetune the proposal, summary and supporting documents to share with other groups and organizations when discussing the project.

The group continues to identify funding opportunities for this project. If any of you know of someone in your organization that might assist the group with getting into the door to discuss possible funding. Please send the names to Dia, Mary or Rachael.

There is a sub-committee of the STC committee that is focusing just on funding opportunities. Both groups meet on a bi-weekly basis.

#### **Analysis of Ground Ambulance Crash Data**

Dia Gainor reported that after last month's Board meeting, she heard the award went to a private sector organization. She is hoping that they will reach out to NASEMSO for assistance.

#### **Support for State EMS System Development**

Dia Gainor reported that support of state EMS acquisition phases is ongoing. Hopefully we should receive more information on this award.

#### **Innovations in Post Overdose Response (ASTHO)**

Association of State and Territorial Health Officials (ASTHO) is interested in convening a meeting in Atlanta, 3/10-3/11 to begin a dialogue about the opportunities throughout the United States and polling state EMS directors about programs that may be out there, but we are not aware of them. This project will move to Current Projects for reporting on the March BOD call.

#### **Fall Prevention (NACCHO)**

NASEMSO's work with NACCHO on Fall Prevention will also move up to Current Projects.

Dia Gainor concluded the Executive Director's report.

### **Action Items**

#### **Draft NASEMSO Comments on NIOSH Strategic plan:**

- NIOSH FRN re 2020 - 2029 Strategic Plan
- CDC Strategic Plan

- NASEMSO Comments

#### Discussion

This is an opportunity to comment on the NIOSH Center for Motor Vehicle Safety Strategic Plan, 2020-2029.

There are 3 documents included for your review.

The Federal Register Notice provides the rationale for the NIOSH Center for Motor Vehicle Safety Strategic Plan, 2020 – 2029. Motor vehicle crashes are the leading cause of work-related injury deaths in the United States. Millions of workers drive or ride in a motor vehicle as part of their jobs. The risk affects workers in all industries and occupations who drive as part of their job, whether they use a tractor-trailer or a passenger vehicle.

Tasked the HITS Committee with reviewing the 3 documents and to provide comments. The committee supported the documents, but clearly felt that there is room for EMS services be included in the strategic plan. EMS services should be mentioned where law enforcement is mentioned while working on roads. HITS recommended that the definition be expanded to include EMS personnel.

Purpose of the NIOSH Strategic Plan is to promote research in reducing work related injuries and fatalities resulting from vehicular crashes.

NIOSH coordinates research, communication and policy activities in work-related vehicle safety. With partners, they conduct research and develop strategies to prevent work-related motor vehicle crashes and resulting injuries.  
policy activities in work-related motor vehicle safety by:

The HITS Committee prepared comments on the behalf of NASEMSO for submission to NHSTA. The committee would like the Board's approval to submit the comments for consideration by NIOSH.

**ACTION:** Kyle moved, and Andy Gienapp seconded, that the HITS Committee should submit their comments based on research to NIOSH. The motion passed unanimously.

#### **Code of Ethics for EMS Medical Directors**

Dr. Lindbeck presented from the Medical Directors Council, the draft Code of Ethics for EMS Medical Directors. They are asking the Board's approval to finalize the document to submit to the Pre-hospital Emergency Care Journal for publication.

Andy Gienapp thanked Dr. Lindbeck and members of the Medical Directors Council for developing this paper.

**ACTION:** Kyle moved that the paper be adopted as presented, and Andy seconded that the Code of Ethics for EMS Directors be adopted as presented. The motion passed unanimously.

### **Ketamine Position Paper**

Ketamine position paper – Dr Lindbeck main question why we have a position paper that focuses on one specific medication. Low-dose or sub-dissociative ketamine is a safe and effective analgesic that can be used for adult and pediatric trauma patients as an alternative to opioids, with opioids for synergistic effect, or for patients taking buprenorphine products with minimal effects on hemodynamic stability. Ketamine dissociative doses are safe and effective in adult and pediatric trauma patients and an ideal agent for induction of RSI, post-intubation sedation/analgesia and procedural sedation in the hypotensive patient. It has a wide therapeutic window and thus can be used for acute agitation and excited delirium. Ketamine sub-dissociative dose policies and procedures should follow those of other analgesic agents administered by nursing staff and EMS personnel.

**ACTION:** Andy Gienapp moved, and Keith Wages seconded, that we should endorse the use of Ketamine in the prehospital setting. The motion passed unanimously.

### **State Legislatures**

Andy Gienapp said that across several states, new laws are being presented regarding EMS services.

He said that there are several bills in the Indiana State Legislature, and we should be aware of them. One of them would establish EMS as an essential service in Indiana making counties accountable to EMS services.

There is a bill up for vote in Utah as well. This relates to ambulance services allowing APRNs and PAs to serve as medical directors. Wyoming has one up for vote as well.

There being no further business, the meeting adjourned at 2:49 PM EDT at the motion and second of Andy Gienapp and Keith Wages

*Meeting record respectfully submitted by Project Coordinator Hilary Bikowski.*