

**Memorandum of Understanding  
Between  
THE NATIONAL ORGANIZATION OF STATE OFFICES OF RURAL HEALTH  
(NOSORH)  
and  
THE NATIONAL ASSOCIATION OF STATE EMS OFFICIALS (NASEMSO)  
and  
The NATIONAL RURAL HEALTH RESOURCE CENTER (The Center)  
and  
The NATIONAL RURAL HEALTH ASSOCIATION (NRHA)**

**The National Organization of State Offices of Rural Health (NOSORH), the National Association of State EMS Officials (NASEMSO), the National Rural Health Resource Center (The Center) and the National Rural Health Association (NRHA) agree that the membership of each of these organizations will benefit from collaboration.**

**NOSORH, NASEMSO, The Center and the NRHA share mutual goals whose outcomes will benefit this partnership.**

**To that end, each organization's mission and strategic goals are shared below for purposes of furthering this Memorandum of Understanding (MOU).**

NASEMSO: The mission of NASEMSO is to support its members in developing EMS policy and oversight, as well as in providing vision, leadership and resources in the development and improvement of state, regional and local EMS and emergency care systems. NASEMSO achieves this mission by the participation of all the states and territories, by being a strong national voice for EMS, an acknowledged key resource for EMS information and policy, and a leader in developing and disseminating evidence-based decisions and policy.

NOSORH: The mission of NOSORH is to promote the capacity of state offices of rural health to improve health care in rural America through leadership development, advocacy, education, and partnerships. NOSORH seeks to strengthen the leadership and capacity of State Offices of Rural Health, provide a forum for the exchange and distribution of rural health information, promote the development and maintenance of State Rural Health Associations, and provide leadership for state and community-based rural health activities.

The Center: The National Rural Health Resource Center provides technical assistance, information, tools and resources for the improvement of rural health care. It serves as a national rural health knowledge center and strives to build state and local capacity.

NRHA: The National Rural Health Association is a national membership organization with more than 20,000 members whose mission is to provide leadership on rural issues through advocacy, communications, education and research.

Whereas, NASEMSO, NOSORH, The Center and the NRHA, herein called "the organizations," desire to improve the quality of emergency care in rural and frontier communities; and

Whereas, the organizations maintain committees of special interest in each other's area of professional focus; and

Whereas, the organizations agree that these committees of special interest would be more effective if they worked jointly.

Therefore, let it be resolved that the organizations agree to the terms of this MOU (including those specified in the attached Description of Organizational Activities) for the time period July 1, 2012 to June 31, 2014.

*Seryl Eisinger*

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NOSORH Director

\_\_\_\_\_  
Date

\_\_\_\_\_  
NASEMSO President

\_\_\_\_\_  
Date

\_\_\_\_\_  
The Center President

\_\_\_\_\_  
Date

\_\_\_\_\_  
NRHA President

\_\_\_\_\_  
Date

***Description of Organizational Activities***  
***July 1, 2012 – June 31, 2014***

Let it be resolved that the organizations agree:

- 1) To maintain and expand the Joint Committee on Rural Emergency Care (JCREC), originally established between NOSORH and NASEMSO, to now include The Center and the NRHA. JCREC will adhere to all policies and procedures of all organizations.
- 2) To maintain momentum and activity, the current core structure of JCREC will not be changed immediately:
  - a. It is currently managed by two co-chairs, one primary contact each from NOSORH and NASEMSO, who will serve as co-chairs of JCREC, sharing administrative duties as delineated in (4).
  - b. NASEMSO and NOSORH have also appointed five additional members from each organization to JCREC.
- 3) To review the structure of JCREC (by June 31, 2013) to determine the appropriate future structure ensuring:
  - a. appropriate representation from all participating organizations,
  - b. representation from additional organizations has been considered, and
  - c. the organizational, leadership and financial infrastructure is solid and sustainable
- 4) To include individuals not serving as appointed members of JCREC (whether members of the organizations or not) in JCREC activities and mailing list including the JCREC Google Group.
- 5) To ensure that the co-chairs of JCREC represent both an EMS and Rural Health foci respectively and that the lead alternates every twelve months between the two foci. If the primary co-chair becomes unavailable to undertake the duties of the office, the co-chair from the other foci will assume the duties of primary chair.
- 6) That business which requires voting by JCREC can be performed during any meeting (face-to-face, teleconference or through other means) or by email. Voting is limited to only the appointed members of JCREC.
- 7) To establish a joint work plan, prior to January 1 annually, for submission to the leadership of NOSORH, NASEMSO, The Center and the NRHA for approval. The work plan will identify annual goals, strategies and responsibilities.
- 8) To develop a JCREC budget, prior to January 1 annually, that supports the work plan for submission to the leadership of NOSORH, NASEMSO, The Center and the NRHA for approval. It is recognized that project financial support may vary between organizations, and is dependent on organizational funding availability and priorities.
- 9) JCREC co-chairs will provide a report to the leadership of NOSORH, NASEMSO, The Center and the NRHA annually of the activities, projects and accomplishments of the committee.
- 10) To waive registration fees for the co-chair organization's and provide complimentary space for a display by the other organizations at the organizations' respective annual

meetings.

- 10) To hold conference calls and other meetings as needed to accomplish the work specified in the workplan. The primary chair will be responsible for planning and conducting conference calls and other meetings during their 12 month period as primary chair, and disseminating notices to JCREC members regarding meeting logistics and access information. Meeting costs will be identified in the approved budget.
- 11) This MOU can be cancelled by either organization with 60 days written notice to the other organizations. The organizations agree that at the time such notice is tendered, they will continue joint projects, develop a means to bring such projects to their planned completion and/or cooperate in the transition of project materials.