

**NASEMSO Board of Directors Retreat
Tuesday-Wednesday, December 6-7, 2016**

Meeting Record



PRESENT

Officers:

President: Keith Wages (GA)
President-elect: Kyle Thornton (NM)
Past President: Paul Patrick (UT)
Treasurer: Gary Brown (VA)
Secretary: Alisa Williams (MS)

Regions:

South: Donna Tidwell (TN)
East: Jason Rhodes (RI)
Great Lakes: Kathleen Wahl (MI)
Western Plains: Andy Gienapp (WY)
West: Wayne Denny (ID)

Councils:

Educ & Prof'l Stds: Joe Ferrell (IA)
Medical Directors: Ken Williams MD (RI)
Pediatric: Carolina Roberts-Santana MD (RI)
Trauma Managers: Carol Mayes (MD)

ABSENT

Data Managers: Lindsey Narloch (ND)

STAFF PRESENT

Rachael Alter, Program Manager
Beth Armstrong, Executive Vice President
Joe Ferrell, NCBP Advocate
Dia Gainor, Executive Director
Mary Hedges, Program Manager
Sue Prentiss, REPLICA Advocate
Leslee Stein-Spencer, Program Manager
Kathy Robinson, Program Manager

ALSO PRESENT

Mike Berg (VA), AVL Committee
Steve McCoy (FL), HITS Committee
Joe Schmider (TX), Domestic Prep.

CALL TO ORDER / ROLL CALL / QUORUM

President Keith Wages called the meeting to order at 9:00am and self-introductions were made. He noted that this gathering has more new Board members than prior years. He noted that the meeting agenda has been re-structured from the traditional format and discussion will be based on input collected from state EMS offices on organizational structure, priorities and functions. He introduced Kevin McGinnis to facilitate the discussion.

EMS 3.0 UPDATE

Kevin briefed the board on the process and the leadership team – he is providing lead staff support.

ACTION: The Board agreed that Kevin should continue the coordination role.

THE STATE EMS OFFICE AND NASEMSO OF THE FUTURE

The Board analyzed recent survey findings on common configurations of principal EMS board or committee structure, staffing, and functions.

MEETINGS UPDATE

Beth went over upcoming plans and locations (March 6-8, 2017 – New Orleans; September 2017 – OKC; Spring 2018 – Rhode Island).

ACTION: The Board approved locating the 2019 Spring Meeting in the Western Plains region. Staff will collect information to locate in St. Louis, Denver, and other viable options.

ACTION: The Board accepted Rhode Island hosts' recommendation that May 2018 dates are preferable to March 2018 despite a conflict with EMS Week, and prefer the Providence location given lower rates than Newport properties over that timeframe.

PROJECT UPDATES

REPLICA – Sue Prentiss has spent considerable time on a legislative strategy for Year 1 and Year 2 to identify target states. Simultaneously, she has been developing plans and tools to have in place for a “joint public agency” with representatives from all states to oversee the Compact operation once the 10th state enacts the legislation. A communications strategy is also being developed.

Model Clinical Guidelines for EMS – Mary Hedges noted that a core group of guidelines was developed in 2014. Updates are being made now and new guidelines will be added to the core set – the goal is three complete documents.

CAP-7 – Dia Gainor indicated that EMS Compass released 14 measures at EMSCompass.org. They are not complete as whole families of measures – the goal is to have a living laboratory to test them. Plans are being drafted on sustainability of the project.

TREASURER'S REPORT

Gary Brown presented the finance report as of November 30 noting total net assets of \$993,539.

ACTION: Kathleen Wahl moved, seconded by Andy Gienapp to accept the report as presented. The vote was unanimous and the motion carried.

The meeting recessed at 4:00pm on Monday, December 6 and reconvened at 8:00am on Tuesday, December 7.

EXECUTIVE SESSION

The Board went into executive session 8:30-9:45am and addressed performance of the management firm/staff.

THE STATE EMS OFFICE AND NASEMSO OF THE FUTURE, CONTINUED

Functions of the State EMS Office of the Future were identified:

- rule promulgation;

- strategic planning;
- board and council management; safety (culture, mental health, provider, patient);
- system planning and development (anticipation of needs/priorities, reimbursement/finance, workforce adequate pay);
- changing healthcare system/demands (CP/MIH);
- workforce development (recruitment and retention);
- finance (CMS – need ability to bill for CP, national advocacy, create path forward for states and develop resources to help);
- fiscal stability (toolkit, ensure all meetings have value);
- technology/communications (advocate for FirstNet, remain at the table, position statements or standards (FirstNet resolution), automated truck RFID for inspection monitoring, RFID in EDs for equipment tracking, more robust licensure system);
- data (collaborate with TAC re tools and resources, advocate for NEMESIS, use data for system building and report meaningful use. Don't collect just to collect); education (confront increase in education standards, get better at responsibilities regarding education such as accreditation of institutions, consistent and rigid requirements for educators, be at table with NAEMSE);
- rural (delivery, service assurance, new models);
- systems of care (what does it look like at the state EMS office level, distinction between pathologies is important, fear of dilution);
- violence;
- PHAB.

ACTION: Maintain Trauma Managers Council and establish a committee on Emerging Systems of Care.

NASEMSO INFRASTRUCTURE

Dia Gainor presented a brief history of the organizational development of NASEMSO and current HQ capabilities.

NASEMSO ORGANIZATIONAL ANALYSIS

Based on data collected in November 2016 from state EMS offices.

Gary Brown reviewed findings regarding strengths and weaknesses:

Strengths – the great strengths are seen as networking, information sharing and staff support; followed by resources/products, education/awareness/coalition-building, staff and leadership. Also identified were level of involvement and commitment; relationships.

Weaknesses – focus/identity (priorities?); satisfying all assistance needs for state directors; website/online database difficulty; perception that NASEMSO is elitist/arrogant.

Member Benefits – Kyle Thornton presented the respondents’ assessment of current NASEMSO member benefits – quality and importance. Most valued are resources generated and networking. There were no current benefits that were flagged to be eliminated.

NASEMSO is doing a good job at ... Alisa Williams presented the rankings of the following activities:

1. Serving as clearinghouse
2. Educating national-level decision-makers
3. Influencing professional standards
4. Influencing public policy
5. Increasing visibility of the profession.

Criticism – Alisa summarized 18 responses criticizing lack of visibility (6), lack of travel support (2), not messaging with a single voice (2), organizationally too close to NREMT (1). The Board concluded that the only concern to address is the one that came from multiple respondents – perceived lack of visibility.

Threats – Paul Patrick sorted responses into three areas: funding (limited dues, loss of federal funding and no other sustainable sources); “others wanting to be us” (NAEMT, AAA, other supposedly credentialing agencies) – solve this through collaboration. No fresh new or original ideas “same old same old” approach and people.

ACTION: Consider work groups to address funding sustainability options and organizational relationships/outreach.

Opportunities – Keith Wages sorted findings in this area: outreach and communications including both internal and external; expanding partnerships and advocacy.

ACTION: Schedule a forum limited to state EMS directors while councils are meeting.

Regional Activity – On behalf of Donna Tidwell, Alisa Williams presented evaluation of information received at the regional level. Respondents rating it fairly low. Alisa can help with more coaching on meeting agendas.

ACTION: Regional representatives approach non-respondents and ask why they didn’t.

Councils – Respondents evaluated the importance of each council; 20% of respondents did not value the Pediatric Emergency Care but otherwise, at least 80% felt each council was important or extremely important.

ACTION: Alisa and Kyle will create a proposal considering changes to the Education & Professional Licensure Council, in order to capture potential amendments to bylaws that would be circulated by February 6, 2017. The consideration is whether to refocus the E&PLC to licensure, and address education topics at a committee level.

ACTION: Form a task force that involves system development and sustainability, workforce, finance, recruitment/retention.

ACTION: Alisa Williams moved, seconded by Andy Gienapp to form a Health & Medical Preparedness Council that absorbs activities formerly undertaken by the Domestic Preparedness Committee. The vote was unanimous and the motion carried.

ACTION: Any recommendations that NASEMSO makes should consider implications for rural systems.

COUNCILS/COMMITTEE MEETINGS AND PLAYBOOK REVIEW

Dia Gainor explained that staff produced a document to help NASEMSO council and committee chairs and representatives in leadership roles.

SECRETARY'S REPORT

ACTION: Paul Patrick moved, seconded by Jason Rhodes to approve the 11-10-2016 meeting minutes. The vote was unanimous and the motion carried.

ADJOURNMENT

There being no further business, the meeting adjourned at 3:55 p.m. Eastern time.

Meeting Record respectfully submitted by NASEMSO Executive Vice President Beth Armstrong.