

**NASEMSO Board of Directors Retreat
Tuesday-Wednesday, December 15-16, 2015
Meeting Record**



PRESENT

Chris Bell (VT), East Region
Gary Brown (VA), Treasurer
Jim DeTienne (MT), Immed Past President
Joe Ferrell (IA), EPSC
Andy Gienapp (WY), West Region
Katherine Hert (AL), Pediatric Emerg Care
Joe House (KS), North Central Region
Paul Patrick (UT), President
Paul Sharpe (VA), Data Managers
Peter Taillac MD (UT) Medical Directors
Kyle Thornton (NM), Secretary (partial)
Keith Wages (GA), President-elect
Alisa Williams (MS), South Central Region
Sherri Wren (NE), Trauma Mgrs (partial)

ALSO PRESENT

Mike Berg (VA), AVL
Kathy Bishop, OnStar (partial)
Sherry LeBeck, OnStar (partial)
Tré Rodriguez, NREMT (partial)
Tom Abram, NREMT (partial)

STAFF PRESENT

Rachael Alter, Program Manager
Beth Armstrong, EVP
Dia Gainor, Executive Director
Mary Hedges, Program Manager
Kevin McGinnis, Program Manager
Kathy Robinson, Program Manager
Leslee Stein-Spencer, Program Manager

CALL TO ORDER / MEETING OVERVIEW / MEETING MATTERS

President Paul Patrick (UT) called the meeting to order at 9:00 a.m. ET; a quorum was present. Paul shared thoughts about this week's meeting intent, and the agenda was reviewed. He expressed challenges associated with NASEMSO's position and brand as an organizational leader in EMS. He expressed appreciation for staff supporting this success.

Each NASEMSO council and committee is prepared to present one priority activity to undertake with a measurable deliverable, to provide technical assistance for state EMS offices in 2016-17. As part of their homework, they identified milestones and how it will improve state EMS systems.

ACTION: Rachael Alter reviewed the 2016 schedule for councils and committees meetings. Updates were made and the document will be sent to the Board.

SECRETARY'S REPORT

Secretary Kyle Thornton (NM) presented the October 14, 2015 Meeting Record.

ACTION: Paul Sharpe moved, seconded by Chris Bell to approve the Record as circulated. The motion carried.

TREASURER'S REPORT

Treasurer Gary Brown reported that as of November 30, 2015, the total income from operations is \$1,042,233 with expenses of \$942,778 resulting in a net excess of \$99,455. We have net assets of \$924,920 in cash and investments. \$263,240 is in cash at TD Bank, there are accounts receivable of \$8,407 and total investments of \$716,011 at UBS.

COUNCIL REPORTS

- **Data Managers** – Paul Sharpe reported that their priority focus item is to **ascertain expanded functions of the state EMS data role**. Their focus could include licensure and certification, EMS workforce data, performance measures, trauma data, the CARES Registry, Health Information Exchanges and general integration with other data systems. Their current mission-vision-goals are limited to NEMSIS. Their measurable will be to survey each state office to ascertain what other data manager functions they are fulfilling, then revise the mission-vision-scope, incorporate the expanded focus areas into their routine business, and build GoogleDocs library to include additional reference tools.
- **Education & Professional Standards** – Joe Ferrell shared that their priority project will be to **develop training for investigators and inspectors**. Milestones include development and delivery of courses. This will provide resources for state EMS offices and will allow monitoring of implementation of and drift from the education agenda. This may also serve as a basic for future planning in the development of the Scope Model changes and Education Agenda revision.
- **Medical Directors** – Dr. Peter Taillac indicated that they are **updating the model clinical guidelines** based on AHA Guidelines and other current literature. The work group is meeting monthly. They intend to integrate the Model Guidelines document with other evidence-based projects (EBG Consortium, EMS Compass, etc.). Additionally, they continue to develop draft language to amend DEA regulations impacting EMS. Remove the doctor as the registration-holder for controlled substance use, and transfer it to the agency.

ACTION: Gary Brown moved, seconded by Christ Bell to approve the BLM paper presented by the Medical Directors Council. The vote was unanimous and the motion carried.

- **Pediatric Emergency Care** – Katherine Hert proposed that PEC **combine CP/MIH and injury prevention goals**. Providers need tools to address injury prevention issues. The impact on EMS systems is to keep children out of the system.
- **Trauma Managers** – Sherri Wren noted that their focus is leadership in trauma systems development. They intend to finalize and disseminate the **Trauma Monograph** this year, identify key issues and develop trauma-related position statements, collaborate with internal and external partners to better utilize NEMSIS and registry data to improve patient care.

COMMITTEE REPORTS

- **Air Medical** – Kathy Robinson reports that the committee awaits response from Gam Wijetunge on model rules. She met with AAMS Executive Director Rick Sherlock recently, and spoke about UAV interference with crash scenes. **Intend to develop resources to supplement model rules**, for state EMS offices.
- **Communications and Technology** – Kevin McGinnis reported that they will undertake activity to **engage state ems offices in a meaningful way in national EMS communications dialogue** and advancement. The intent is to assemble an

accurate list of the single point of contact for each state EMS office, and share it with DHS, FirstNet and other appropriate points of contact that impact EMS communications needs. The Committee will track participation in FirstNet consultation and other types of activities to improve communications systems. The NASEMSO web site will offer a state-by-state listing of communications systems development.

- **Domestic Preparedness** – Leslee Stein-Spencer reported the Committee plans to **enhance the EMS Domestic Preparedness Implement Strategy**.
- **Community Paramedicine-Mobile Integrated Health Committee** – Jim DeTienne presented plans to **develop needs assessment methodology and sample legislative and regulatory language** to assist states in establishing, nurturing and overseeing CP-MIH.
- **Rural EMS** – Kevin noted the focus is to support the Joint Committee on Rural Emergency Care (JCREC) work plan, including:
 - Planning and completion of the April 21-22, 2016 **National Rural EMS Conference**;
 - Review and publish 2016-17 update of **Rural and Frontier EMS Agenda for the Future**;
 - **Promote rural EMS leadership training**.
- **Government Information** – Jim DeTienne stated that the GIC serves to educate and inform members about current legislative and EMS policy matters. They meet bi-monthly to accomplish this.
- **HITS** – On behalf of Donnie Woodyard, Mary Hedges reported that they plan to promote and demonstrate **collaboration between state EMS officials and state highway safety officials** at bi-monthly meetings of HITS Committee, on web site and national meetings. Milestones include examples of collaboration to be featured at every HITS Committee meeting. NASEMSO leadership will participate in national transportation safety meetings. This will help optimize safety for all using the nation's transportation systems.
- **Safe Transport of Children** – Mary Hedges presented this group's intent to examine current resources and pursue research such as crash-testing, **to develop specific recommendations and best practices for safely transporting children in ground ambulances**. This will optimize safety for pediatric patients as well as for the EMS personnel transporting them.
- **Agency & Vehicle Licensure** – Mike Berg indicated that AVL intends to publish a **monograph on state licensure requirements, exemptions and special conditions for EMS agencies based out of state**. This will allow states to compare requirements, identify gaps in regulation and enable identification of best practices.

NASEMSO HOMELAND SECURITY PRIORITIES

On behalf of Domestic Preparedness Chair Joe Schmider, Leslee Stein-Spencer presented two draft priorities to be presented to the National Homeland Security Consortium by December 30:

- Ensure that EMS has an appropriate role in homeland security planning, and

- Ensure EMS responder safety including adequate PPE, training and other considerations.

ACTION: Jim DeTienne moved, seconded by Joe House to approve these priorities. The vote was unanimous and the motion carried.

- **New EMS Initiative** – Kevin McGinnis explained that within the CP-MIH world, there has been a fair amount of debate over terminology. Joe House, Andy Gienapp, Joe House, Jim DeTienne, Kyle Thornton will form a task force to help write CAP-1 deliverables and differentiate this focus from NHTSA’s EMS Agenda for the Future.

EXECUTIVE DIRECTOR’S REPORT

- **EMS COMPASS** – NASEMSO received \$1.7 million to develop performance measures using an approach based on the National Quality Forum. There is a steering committee, measurement design group, technology designers group and communications committee. Dia expressed a current project challenge to reverse engineer measures that have been developed due to a midcourse request of NHTSA OEMS to add a layer of literature review and GRADE process for evidence-based guidelines. Also, OEMS is advocating that the Prehospital Guidelines Consortium be the eventual home of the performance measures. She reports that a no-cost extension to the period of performance is being requested.
- **EMS Innovation & Improvement Center Funding Opportunity** – Dia reminded the Board that only medical schools and states are eligible for funding from EMSC. Katherine Hert has been leading a proposal writing team for NASEMSO, assessing various engagement options associated with the EIIC venture. Baylor approached NASEMSO after the NASEMSO proposal team made an initial decision to partner with Carolinas Health Services; their strengths are considerable and their only detraction is overlooking the importance of EIIC services to state EMS offices as the primary customer base. Dia posed the question to the Board about whether they prefer NASEMSO to take significant risk and time to pursue an award with CHS, or opt for a smaller advisory role, negotiating upwards with Baylor.

ACTION: Keith Wages moved, seconded by Peter Taillac for NASEMSO to cooperate with Baylor’s proposal rather than competing with them. The vote was unanimous and the motion carried. NASEMSO will seek an FTE through Baylor to support EIIC services to state EMS offices.

ONSTAR BRIEFING

Kathy Bishop shared details about OnStar’s Emergency Medical Dispatch process, policies, its injury severity prediction tool and new technology that can help EMS response. The Board engaged in good dialogue about OnStar logarithms and other considerations.

CAP-1 PROPOSAL 2016-17

The Board reviewed the December 10 email from NHTSA OEMS, giving feedback to NASEMSO’s concept paper for the scope of work. NHTSA used it to justify the sole source

justification. Staff will add specificity based on today's discussion, identifying milestones, deliverables and specific impact to the nation's EMS.

NASEMSO CORPORATE ENGAGEMENT

Kathy shared the idea of selling fewer interaction opportunities to those vendors willing to partner with the association, with the intent of making the engagement more meaningful. This could also help develop regional and council-level relationships and support.

The meeting recessed on Tuesday at 4:53 p.m. and reconvened Wednesday at 8:30 a.m.

ASMI ANNUAL EVALUATION

The Board conducted its annual evaluation of ASMI services in executive session. Paul Patrick will prepare a written report. The Board reviewed 2015 areas for improvement identified in 2015 and noted they all have been satisfactorily addressed.

FIELD EMS BILL

The Board discussed IAFC's response to NAEMT's October 26 email. IAFC detailed specific points of disagreement (with which NASEMSO may or may not concur):

1. "The bill includes an overly-broad definition of field emergency medical services that defines a continuum of care that stretches past the emergency response scene and initial emergency medical response to include hospitalization and post-trauma therapy. We believe that a definition of field emergency medical services should be focused upon on-scene treatment and transport to the appropriate destination (historically, the emergency room, but, in the future, to include alternate destinations of care).
2. The bill would make for-profit companies eligible for federal grant programs. We continue to oppose this concept as being bad public policy.
3. The bill would designate HHS as the lead federal agency for routine emergency medical care, including field EMS. We believe that EMS is a public service that touches many disciplines and perspectives. It is part public health, part public safety, part homeland security, etc. Currently, the responsible federal agencies communicate and coordinate with each other through the Federal Interagency Committee on EMS, which we fully support.
4. The bill would be funded by a "check-off" box on federal tax forms. This approach is a gimmick, and we do not think that it would provide consistent, regular, adequate funding at the level that the Field EMS Bill requires."

ACTION: Gary Brown moved, seconded by Chris Bell that while the concept of the field EMS bill is a good idea, NASEMSO does not support it in its current form. Paul Patrick tasked the Government Information Committee to draft NASEMSO's articulation of the rationale in time for January's Board meeting. The vote was unanimous and the motion carried.

PEDIATRIC PERFORMANCE MEASURES

Katherine Hert expressed concerns with measures enforcing NEMSIS compliance, proficiency of pediatric-specific equipment and other areas.

ACTION: Katherine Hert moved, seconded by Chris Bell for PEC to prepare comments for the Executive Committee to take action on official NASEMSO comment. The vote was unanimous and the motion carried. Data Managers are requested to provide input to help the PEC finalize the comments.

REPLICA SUPPORT BY NREMT

Executive Director Tré Rodriguez and Legal Counsel Tom Abram joined the NASEMSO Board Meeting and briefed NREMT's belief that the Compact will support both NASEMSO and NREMT needs. The proposal is to provide support to build the Compact infrastructure. There should be minimal cost to Compact states. One of the collateral benefits is clean-up of state data and another is detailed analysis of the EMS workforce.

ACTION: Jim DeTienne moved, seconded by Joe Ferrell for NASEMSO to gratefully accept NREMT's phenomenal offer and continue to work with them on implementation. The vote was unanimous and the motion carried.

FUTURE NASEMSO MEETINGS

Alisa Williams briefed the Board on deliberations taken by the regional representatives after the Fall Meeting in Louisville. Themes emerged:

- States would like to continue to have input into the selection.
- A three-year rotation is agreeable by most.
- Cost should be considered for both the attendee and the association.

ACTION: Keith Wages moved, seconded by Chris Bell to remain on the current rotation of regions and task NASEMSO staff to present to the membership for decision a list of options for each year, by region, based on suggestions from states within the region and based on NASEMSO professional staff experience. Staff will analyze options and present cost and other considerations. NASEMSO will not have a Fall Meeting beginning in 2018 but will defer that timeframe for regional face-to-face meetings as desired. Limited staff support may be available for regional meetings. The vetting process will begin with the East region in 2018; North Central region in 2019; West region in 2020. The vote was unanimous and the motion carried.

OTHER

- **Nominating Committee** – Keith Wages announced that the Committee will convene in Bethesda at the Spring Meeting, consisting of the regional representatives or their designees along with Keith. The person elected will serve for 2.5 years.
- **Staff “Executive Session”** – staff expressed gratitude to NASEMSO for the opportunity to work in partnership with such high quality leadership.
- **Dean Cole Retirement** –

ACTION: Paul Sharpe moved, seconded by Joe House for Beth to prepare a resolution recognizing Dean. The vote was unanimous and the motion carried.

- **Medicaid EMS Assessment Law** – Paul Patrick briefed colleagues on tools to counteract illegal activity.
- **Traffic Incident Management System** – Donnie Woodyard shared information about training.

ACTION: Chris Bell moved, seconded by Gary Brown for NASEMSO to send a letter NREMT asking it to authorize continuing education credits for the TIM course. The vote was unanimous and the motion carried.

- **Mentoring for State EMS Directors** – Jim DeTienne identified this as an ongoing unmet need.
- **NASEMSO Program Content** – Gary Brown asked colleagues to help ensure that the content is of value, and provide suggestions for speakers and topics.

ADJOURNMENT

There being no further business, the meeting concluded at 11:25 am ET.

Meeting Record respectfully submitted by NASEMSO Executive Vice President Beth Armstrong and Secretary Kyle Thornton (NM).

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