DRAFT

F-01922 (12/2019)

OPEN MEETING MINUTES

Name of Governmental Body: EMS Quality and Data Subcommittee			Attending: Attendance: Christopher Eberlein, Andrew Pain, Matthew Bouthilet, Ryan Gibbons, Michael Spigner,
Date: 11/19/2024	Time Started: 10:00am	Time Ended: 10:57am	Ryan Homman Other attendance: Margaret Wogahn (note-taker)
Location: MS Teams			Presiding Officer: Dr. Christopher Eberlein
Minutes			

Strategic Planning

Called to order at 10:00am

Follow up for strategic planning for this committee.

Previous strategic planning (2022):

- Mission: Provide Emergency Medical Services Data for supporting best practices in EMS including documentation, clinical practice and Quality improvement.
- Goals:
 - Sub-committee with Data Manager to work on day to day improvements/functionality
 - Data useful for funding needs
 - o CQI rules development
 - Expand Wards training both virtual and in person
 - Develop place for sharing best practices between agencies
 - Develop live dashboard for State EMS Data for all services including ability to compare agency to regional and State Data
 - o 5 year:
 - All EMS runs entered into WARDS including EMR
 - Develop EMR/non transport templates for WARDS
 - Hospital to EMS patient data sharing
 - Link State Protocols to WARDS System for CQI real time reports

Current Strategic Planning: Review of the components of the framework as drafted by Michael S. and sent via email.

- Mission: like the broadness and having documentation as a goal not necessarily in the mission. Unanimous agreement to move forward with statement as written.
- Vision: no vision statement last time strategic planning happened. Research, how do we feel about this? Many research entities in the state, so feel it's important to keep. Shows the value of the data. Important for funding too. Unanimous agreement to move forward with statement as written.
- Values:
 - o additional of "healthcare systems" into collaboration.
 - Consider adding "stewardship" as a value? Does it tie into integrity? Due to recent events and focus on data security, would like to have separate.
 - With additions, unanimous agreement to move forward with statement as written.
- Goals:
 - #1, do we consider ease of use language into this? Easy and user friendly for those putting in the data. Addition of "user-centered" and "usability"? Consider a separate dot point for the input side. #1 committee accepted.

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 #2 added to include "ensure that data collection practices consider of human factors and designed with user centeredness. Consider all levels. Will be reworded, committee is accepting of the intent of the content, will be distributed via email.

- #3 Unanimous agreement to move forward with statement as written.
- #4 intent was the survey where CQI appointees expressed they do not know how to do QA. Would be good to tie to a project to take on. Can be very basic concepts that are offered in webinars in small snips. Unanimous agreement to move forward with statement as written.
- #5 ensure cross-collaboration. Include stakeholders that were listed above. How do we highlight the rural vs urban and the ones with resources vs not? Disparities in capability, how do we ensure what we are providing to your capabilities and needs? Do we need to explicitly spell out that we are going to do this? Important to work "with" them. Does this go back to goal #1, with consistency then have rural vs urban as an objective? Will include in strategies. With additions, unanimous agreement to move forward with statement as written.
- #6 change to "facilitate the use of" because we are not the ones doing it, but can help those who need
 it. With additions, unanimous agreement to move forward with statement as written.
- #7 we aren't doing the research, just supporting. Unanimous agreement to move forward with statement as written.
- Anything missed in these goals?
 - Discussion in the past regarding the data integration between the pre-hospital EMR and the hospital EMR. Interoperability should be added.
- #8 added, "promote the development of interoperability of HER systems between healthcare systems and EMS" Will be reworded, committee is accepting of the intent of the content, will be distributed via email.

Strategies:

- #1: rural agencies added. Will be reworded, committee is accepting of the intent of the content, will be distributed via email.
- #2 "rules and validation" is this consistent with what we are doing? Unanimous agreement to move forward with statement as written.
- #3 intent to help with reports to assess data completeness and data quality. Is this our strategy or for
 the state data manager/epi? This is a partnership with those roles so we don't have to be the ones doing
 it but it can be a request to the state. Unanimous agreement to move forward with statement as
 written.
- #4 addition of healthcare systems and general public. With additions, unanimous agreement to move forward with statement as written.
- o #5 Unanimous agreement to move forward with statement as written.
- #6 establish and publish indicators and how to guides, then allow for agency to compare against state performance. More expectations of performance. Unanimous agreement to move forward with statement as written.
- #7 more benchmarking of comparing to like agencies, state and nationwide. Unanimous agreement to move forward with statement as written.
- #8 could take many forms (newsletter, video, etc). What is the overlap with the education committee?
 Curriculum word of interest. Curate was chosen intentionally; this can be a cross collaboration.
 "Collaboration with the other DHS committee, as indicated". With additions, unanimous agreement to move forward with statement as written.
- Objectives for next time.

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Meeting adjourn: 10:57am.

Prepared by: Margaret Wogahn on 11/19/2024.

These minutes are in draft form. They will be presented for approval by the governmental body on: 12/3/2024