

April 2012 Strategic Plan: Kansas Board of Emergency Medical Services

Overview

Purpose

This document outlines the Strategic Plan for the Kansas Board of Emergency Medical Services, as created by the Board in April 2012.

In this document

This document contains the following topics.

Topic	See Page
Board Purpose: Mission, Vision, and Values	2
Internal and External Factors Affecting the Board: SWOT	3
KBEMS Strategic Goals, 1-6	7

Board Purpose

Mission Statement We provide a framework for Emergency Medical Services excellence through commitment to a system of quality patient care.

Vision When our Mission is successful, we:

- Create productive collaborations with our local, regional, state, and national stakeholders
- Adopt state-of-the-art renewable, integrated, and sustainable systems
- Develop Statutes and Regulations linking both clinical and operational components of Emergency Medical Systems
- Advance the recognition of the professionalism of Emergency Medical Services in Kansas
- Ensure the highest level of out-of-hospital care to all Kansas citizens, residents, and visitors

Core Values In carrying out our Mission and achieving our Vision, our guiding values are:

- **Integrity:** We recognize our moral and ethical responsibilities to others, and meet them consistently.
- **Professionalism:** We acquire and maintain our knowledge and skills in a way that brings credit to the Emergency Medical Services industry.
- **Honesty:** We communicate openly, accurately, and without bias.
- **Trust:** We do what we say we will, and we expect the same from others.
- **Leadership:** We use our influence responsibly to advance the practice of Emergency Medical Services

Internal and External Factors Affecting the Board

- Internal factor:** Internal strengths identified by the Board, representative staff members, and stakeholders that can be leveraged to help the Board achieve its Mission and Vision include:
- Board Strengths**
- Board and agency staff:
 - Tenured and knowledgeable staff
 - Staff expertise in multiple areas
 - Representation of constituencies
 - Regionally diverse representation
 - Representation of several constituencies
 - The expertise brought by MAC representatives
 - Regions continue to receive funding and have representation at meetings
 - KEMIS
 - KRAF
 - EIG
 - Passion for the Board and its work
 - Commitment to provide quality patient care
 - Passion of staff and Board members for Emergency Medical Services in Kansas
 - Willingness of the Board and staff to complete a process for updating its Strategic Plan, including involvement of the stakeholders
 - KBEMS structure
 - Independence as a stand-alone agency
 - Availability of resources to KBEMS
 - Ability to make regulations
 - Direct connections to the legislature
 - Clout held within the State
 - Constituencies and stakeholders involvement
 - KBEMS accepts public input
 - Passionate meeting participants
 - The access KBEMS has to the stakeholders’ input, and those stakeholders’ substantial impact on successful outcomes
 - The regional councils are now closer than ever

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Internal and External Factors Affecting the Board, Continued

Internal Factors: Board Weaknesses

Internal weaknesses identified by the Board, representative staff members, and stakeholders that can inhibit the Board from achieving its Mission and Vision include:

- Board Structure
 - Lack of participation and attendance by some board members
 - Commitment conflicts keep some Board members from meetings
 - Board size is unwieldy
 - Lack of turnover in Board membership causing stale ideas A lack of consensus exists on whether the Board adequately represents a balance of stakeholders' interests
 - Processes that keep the Board from being able to change things quickly
 - Effects of Statutes and Regulations in slowing processes
- Relationship with stakeholders/constituents
 - Negative public image
 - Lack of involvement of KBEMS at a national level
 - Focus on punitive actions
 - Perception of stakeholders that the Board doesn't care
 - Communication statewide to all agencies, not just those attending meetings
 - Unclear, incomplete, or absent communications of important information stakeholders or constituents need to know
 - A perceived inability to make, and then stand by, decisions
 - Kansas EMS service providers perceive a disconnect between KBEMS and themselves
- Relationships within the Board and the agency
 - Strong personalities can prevent the Board working together effectively
 - Staff conflict can impede efficient functioning of the agency
 - Unclear, incomplete, or absent communications of important information Board members or staff need to know
 - Board members and constituents alike perceive individual agendas by Board members
- Board behaviors
 - Preparation and time required for meetings
 - Indecisiveness
 - We tend to overthink things due to trying to get buy-in from all stakeholders
 - Our focus on regulation over the clinical aspects of care
- Staff behaviors
 - Staff sometimes cannot react quickly enough to constituent needs, questions, or concerns

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Internal and External Factors Affecting the Board, Continued

External factors: Opportunities

External opportunities identified by the Board, representative staff members, and stakeholders that can be leveraged to help the Board achieve its Mission and Vision include:

- Relationships with stakeholders/constituents
 - Interact with other health care agencies to build improved relationships
 - Improve presence and recognition on both regional and national levels
 - Take advantage of the expertise MAC holds
 - Take advantage of the help outside groups like EMS DOK are willing to provide
 - Collaborate with associations and agencies for statewide training
 - Take advantage of statewide and national expertise
 - Hold regional meetings and conferences to gather public opinion
 - Increase dialogue with attendants through approaches such as regional meetings
 - Make civic presentations
 - Seek means to actively collaborate with the groups of stakeholders who consistently attend Board meetings
- Funding: Seek and apply for grants from outside organizations
- Relationships within the Board and agency
 - Utilize Board members' individual strengths to enhance the Board
- Board structure:
 - Explore the Board's make up and the possibility of term limits
- Board Behaviors
 - Access to data (KEMISIS) will soon become a strength
 - Solicit assistance in problem-solving from statewide EMS talent
 - Integrate multiple existing databases to improve ability to analyze available data
- Changes in practice
 - “Scope” is changing the care that EMS is going to be able to provide
 - Advocate for and create processes for implementing technology-based communications
 - Create a central collection point for information
 - Affect change on the educational process
 - Affect change on EMS safety

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Internal and External Factors Affecting the Board, Continued

External factors: Threats

Threats from external sources identified by the Board, representative staff members, and stakeholders that can inhibit the Board from achieving its Mission and Vision include:

- Resourcing
 - Lack of funding from traditional sources
 - Continuing weakness of the Kansas economy
 - Political context
 - Potential legislation that might change KBEMS structure, nature, or function
 - Movement within the State to have larger State agencies take over smaller agencies to justify the moneys
 - Fear that KBEMS may be eliminated
 - External, self-serving political influences
 - Public perception of KBEMS value
 - Constituencies and stakeholders lack understanding of statewide diversity (biases)
 - Other agencies have rules or regulations that may interfere with KBEMS authority
 - The perception of KBEMS by the public and/or the EMS community
 - The vocal nature of the EMS community may politically drive undesired changes to the Board
 - Changes in the EMS environment or practice
 - Changes may occur faster than the Board’s ability to address them
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Kansas Board of Emergency Medical Services Board Strategic Goals

**Goal 1:
Regulation
review**

Goal #1 Enact a standardized process of regulation review and development.

Strategy #	Description	Completion Target
Strategy 1	Review existing flow charts and revise as needed	April 2013

**Goal 2:
Representation**

Goal #2 Increase the effectiveness with which the Board represents the interests of Kansans.

Strategy #	Description	Completion Target
Strategy 1	Create an Attendance Policy for Board Members	April 2013
Strategy 2	Create methods for ensuring effective, meaningful dialogue with constituent groups	Two to Five Years
	Substrategy 2A: Identify those Constituent Groups with active stakes in Board actions and decisions, and <ul style="list-style-type: none"> • Survey groups from feedback to see if they felt they were heard • RSS list feed • Work within the KOMA laws appropriately 	April 2014
	Substrategy 2B: Hold regional meetings	April 2015
	Substrategy 2C: Using tools such as the RSS list feed, and working within the KOMA, survey constituent groups for feedback to see if they felt they were heard	April 2015
	Substrategy 2D: Use an online Bulletin Board to post articles and legislation that would be of interest to the identified constituents groups.	April 2013

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Kansas Board of Emergency Medical Services Board Strategic Goals, Continued

**Goal 3:
Emerging
technologies**

Goal #3 Utilize emerging technology to improve efficiencies and effectiveness of Board operation.

Strategy #	Description	Completion Target
Strategy 1	Manage data for use in Board and agency decision-making.	April 2017
	Substrategy 1A: Develop and implement a means for obtaining, managing, storing, analyzing, and retrieving data regarding patient care	
	Substrategy 1B: Develop a means for sharing patient care data with Kansas Emergency Medical Care providers and other interested constituent groups	
Strategy 2	Make revisions to the Licensure Renewal Process that finds efficiencies in Board processing and simplifies the process for the customer.	April 2017
Strategy 3	Implement a communications strategy that improves the transparency with which the Board operates	April 2014
	Strategy 3A: Publish draft minutes for both Board and Committee meetings to the website in timely fashion	April 2013
	Strategy 3B: Publish policy revisions to the website in timely fashion, including revision dates and/or version number.	April 2013
Strategy 4	Develop means for communication with technicians in the vehicles for the purposes of gathering patient data, etc.	April 2022

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Kansas Board of Emergency Medical Services Board

Strategic Goals, Continued

Goal 4: Public education

Goal #4 Use Education and Awareness approaches to aid the recognition of the professional nature and services provided by Emergency Medical Services providers.

Strategy #	Description	Completion Target
Strategy 1	Create educational opportunities for appropriate stakeholders	
	Substrategy 1A: Coordinate periodic educational events for Commissioners and similar stakeholders to learn about and understand the nature and value of Emergency Medical Services work.	April 2017
	Substrategy 1B: Coordinate periodic educational events for Service Directors to continue to manage their agencies effectively.	April 2017
Strategy 2	<p>Create events that improve the awareness of other groups or the general public to raise general awareness of the functions of and services provided by Emergency Medical Services agencies. These may include:</p> <ul style="list-style-type: none"> • Presentations • CPR training • Brochures • Ambulance tours or demonstrations • Publishing an Annual Report • EMS awareness Month/Week 	April 2013

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Kansas Board of Emergency Medical Services Board

Strategic Goals, Continued

Goal 5: Level of care Goal #5 Improve the level of out-of-hospital care received from Emergency Medical Services providers in Kansas.

Strategy #	Description	Completion Target
Strategy 1	Signing onto National Registry	April 2017
Strategy 2	Implement a Statewide Model Protocol	April 2017
Strategy 3	Institute a Performance Improvement Plan EMS agencies within Kansas can adopt	April 2017
Strategy 4	Implement a Medical Director Training program for Kansas EMS agencies	April 2017
Strategy 5	Implement a Statewide EMS Plan as required by statute. Among other things, the plan should clarify trauma levels.	April 2022

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