



Thomas Jefferson EMS Council

**Strategic Plan
2009 Edition**

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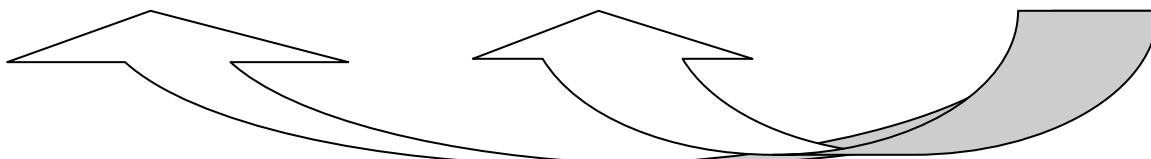
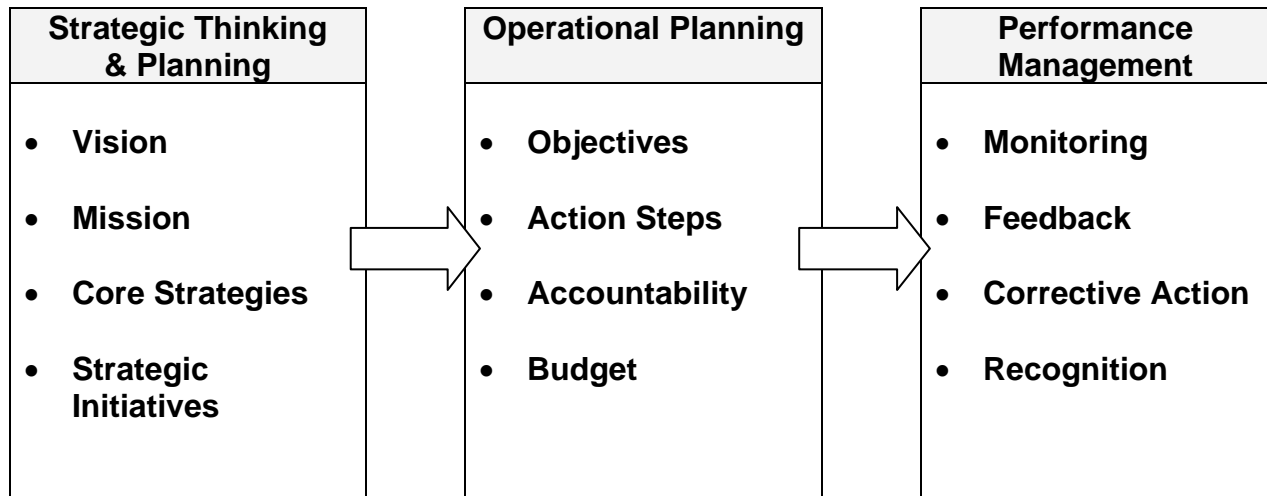
Strategic Planning Process

Introduction

The Thomas Jefferson EMS Council, Inc. (TJEMS) is an integral part of the EMS system whose function (in cooperation with local EMS agencies, localities and other stakeholders) is to assess, identify, coordinate, plan and implement an efficient and effective regional EMS delivery system in partnership with the Virginia Office of EMS and the Governor’s EMS Advisory Board. To that end, challenges facing this region include, funding for existing and new programs, personnel recruitment and retention (career and volunteer), resource allocation, EMS and Trauma System performance improvement, disaster management and response, and the implementation of standardized emergency medical dispatch (EMD).

This strategic plan serves as a guide to the Board of Directors and staff. Accordingly, its focus is limited to those strategies and initiatives of import to the region. Operational and performance management planning are internal processes and are not addressed in this document.

TJEMS Integrated Planning Process



SWOT ANALYSIS

STRENGTHS

- Emphasis on coordination and delivery of educational programs.
- Strong and stable leadership and governance-combination of Board and staff resources.
- Current participation on EMS Advisory Board and grassroots representation.
- Well positioned geographically, related to established catchment areas.

WEAKNESSES

- Differences in programs and services.
- Travel distances and natural barriers act as a hindrance to direct interaction at all levels – Board, committees and staff.

OPPORTUNITIES

- Standardization of planning and programs.
- Increased sharing of best practices and the potential for increased technology across service area boundaries.
- Recruitment and Retention benefit, based on standardized credentialing processes.

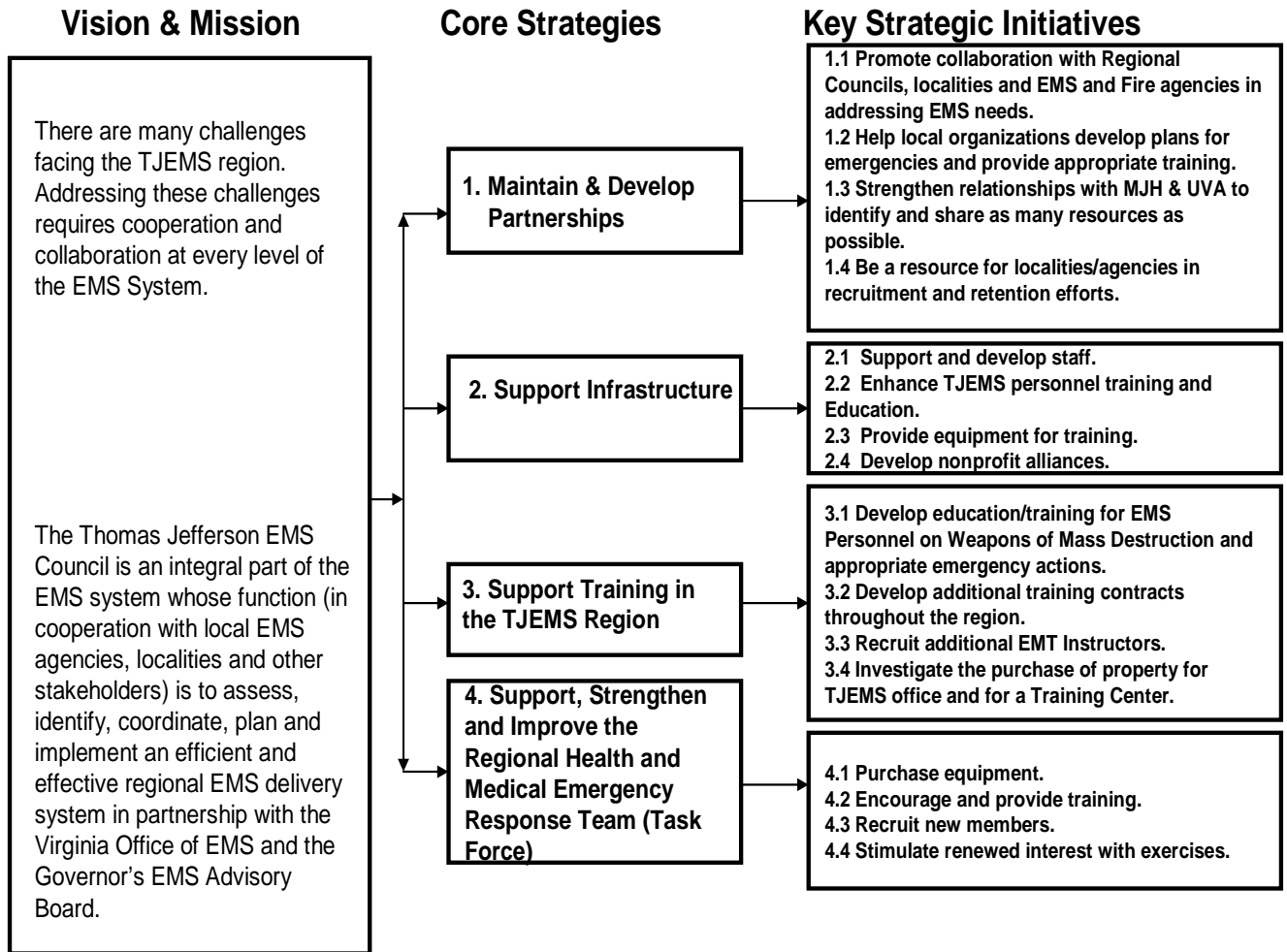
THREATS

- Forced Consolidation (any proposed map)
 - Negative impact on locality funding
 - Lack of personal/ local contact
 - Dilution of coordinated programs and services
 - Increased administration/ bureaucracy
 - Decrease in participation due to time/ travel increases
 - Loss of local identity/ representation.
- Present economic climate

This SWOT was prepared in the fall of 2008 in conjunction with the Regional PAT, as requested by Virginia OEMS.

This plan acts as a challenge for TJEMS to make improvements and to enhance our partnerships within the EMS community.

Strategic Plan Overview



Core Strategy 1: Maintain & Develop Partnerships

Key Strategic Initiatives

1.1 Promote collaboration with Regional Councils, localities and EMS and Fire agencies.

1.1.1 Participate in quarterly meetings with Regional representatives from CSEMS, LFEMS and REMS.

A. Developing a shared or common training calendar.

B. Develop expanded regional protocols beyond CSEMS and TJEMS to include LFEMS and REMS.

1.1.2 Provide localities with budget requests and justifications.

1.1.3. Attend locality meetings and budget hearings.

1.1.4. Be a liaison between the localities/agencies and the OEMS.

1.1.5. Attend meetings that promote effective and efficient collaboration.

1.2 Help local organizations develop plans for emergencies and provide appropriate training.

1.2.1. Incorporate local organizations into the emergency planning process.

1.2.2. Assist local organizations and businesses (schools, daycares, other non-profit agencies, etc.) with emergency planning and training.

1.3 Strengthen relationships with MJH, UVA, AMC and CRH to identify and share as many resources as possible.

1.3.1. Attend Trauma QI meetings.

1.3.2. Participate in the development and maintenance of the Regional Trauma Plan.

1.3.3. Continue to collaborate with hospitals on restocking agreements.

1.3.4. Attend and provide necessary training to enhance the EMS System.

1.4 Be a resource for localities/agencies in recruitment and retention efforts.

1.4.1. Provide appropriate and timely information.

1.4.2. Collaborate with OEMS on recruitment and retention efforts.

1.4.3. Continue to update website with necessary information for recruitment and retention.

1.4.4. Provide training for localities and agencies who wish to establish recruitment, retention and/or revenue recovery programs.

1.4.5. Attend health fairs, etc.

1.5 Be responsive to initiatives regarding regional coordination.

1.5.1. Provide appropriate and timely information.

1.5.2. Collaborate with localities, agencies and providers, as well as, other stakeholders, to identify and advocate for the service delivery that most effectively meets the system needs in this region.

Core Strategy 2: Support Infrastructure

Key Strategic Initiatives

2.1 Support and develop staff.

- 2.1.1. Acquire needed work process items.
- 2.1.2. Respond to and assist with personnel issues.
- 2.1.3. Provide the best work environment for the greatest number of people.
- 2.1.4. Continue monthly staff meetings.

2.2 Enhance TJEMS personnel training and education.

- 2.2.1. Allocate additional funding for staff training and education.
- 2.2.2. Permit outside training opportunities for staff.

2.3 Provide equipment for training.

- 2.3.1. Allocate additional funding for equipment.
- 2.3.2. Coordinate efforts of localities, businesses and agencies to provide more funding for equipment.

2.4 Develop nonprofit alliances.

- 2.4.1. Identify local and regional nonprofit resources for potential partnership.
- 2.4.2. Foster within the Council greater understanding of and adherence to nonprofit practices and advantages.

Core Strategy 3: Support Training in the TJEMS Region

Key Strategic Initiatives

3.1 Develop education/training for EMS personnel on Weapons of Mass Destruction (WMD) and appropriate emergency actions.

- 3.1.1 Work with UVA (Marge Sidebottom), MJH and the Northwest Hospital Task Force on developing and implementing training for EMS personnel on Chempacks (biological, chemical and radiological threats).
- 3.1.2. Allocate additional funding for WMD response and training.
- 3.1.3. Allocate additional staff time and resources for WMD response and training.

3.2 Develop additional training contracts throughout region.

- 3.2.1. Solicit agencies, businesses, *etc.* for training TJEMS currently provides or anticipates providing.
- 3.2.2. Hire additional part-time staff to provide training throughout the region.

3.3 Recruit additional EMT Instructors.

- 3.3.1. Recruit individuals interested in becoming EMT Instructors.
- 3.3.2. Use the mailing system, email and CE classes to attract potential candidates.
- 3.3.3. Assist in the training and preparation of EMT Instructor candidates.
- 3.3.4. Support EMT Instructor candidates throughout the recognition process.
- 3.3.5. Maintain accountability for EMT Instruction.

3.4 Investigate the purchase of property for TJEMS office and for a Training Center.

- 3.4.1. Identify potential properties for purchase.
- 3.4.2. Construct a training center for TJEMS training staff to provide education and training. This training center would also be a site that other agencies could use for their training.
- 3.4.3. Collaborate and partner with localities, businesses and agencies on obtaining funding for this training center.

Core Strategy 4: Support, Strengthen & Improve the Regional Health and Medical Emergency Response Team (Task Force)

Key Strategic Initiatives

4.1 Purchase equipment.

- 4.1.1 Allocate additional funding to provide needed equipment for the Task Force.
- 4.1.2. Obtain and maintain the Task Force equipment trailer.

4.2 Encourage and provide training.

- 4.2.1. Provide membership training for interested parties.

4.3 Recruit new members.

- 4.3.1. Contact agencies and localities to solicit interested parties.
- 4.4.1. Produce a brochure that provides information on the Task Force (purpose, vision and mission).

4.4 Stimulate renewed interest with exercises.

- 4.4.1. Hold more frequent meetings.
- 4.4.2. Keep members involved in equipment purchases.
- 4.4.3. Hold more training and exercises geared toward survival skills.
- 4.4.4. Maintain contact information and update as necessary.

Appendix

Glossary of Terms

Core Strategy: A main thrust or action that will move the organization towards accomplishing your vision and mission.

Mission: Why the organization exists and how it serves its stakeholders.

Objective: A specific, realistic and measurable statement under a strategic initiative.

Strategic Initiative: An action that will address areas needing improvement or set forth new initiatives under the core strategy. This is the planning part of strategy that when combined with the vision, mission and core strategies complete the strategic effort.

Strategic Plan: How the organization intends to deliver its services and/or products to its constituents in a manner that meets their needs. The plan generally has a 4-5 year horizon and is updated annually.

Strategic Thinking: This is the thought process that is the foundation for both the strategic plan and operational plans that follow.

Vision: How the organization wants those they serve to see them.

Resources

The Virginia Department of Health, Office of Emergency Medical Services. P.O. Box 2448 Richmond, VA 23218-2448. Ph. 1-800-523-6019 (VA only).

www.vdh.virginia.gov/oems

Strategic Plan of the Virginia Office of Emergency Medical Services. September 2005.

Code of Virginia: The State Legislative mandates for OEMS. (32.1-111.3).

EMS Agenda for the Future: A document created by the National Highway Traffic and Safety Administration (NHTSA) that outlines a vision and objectives for the future of EMS. August 1996.

EMS Agenda for the Future Implementation Guide (NHTSA). May 1999.

OEMS 5-Year Plan: July 1, 1997-June 30, 2002: This included a status report completed in 1998.

Service Area Plan for OEMS (40290) which describes the statutory authority and expectations for OEMS and identifies the growing EMS needs of the citizens and visitors of Virginia.

The Strategic Planning, Service Area Planning, Performance Based Budgeting, Training Document –Sessions 1 & 2. May 2005.

Agency Planning Handbook: A Guide for Strategic Planning and Service Area Planning Linking to Performance-Based Budgeting: Department of Planning and Budget 2006-2008 Biennium, May 1, 2005.

Joint Legislative Action Review Commission (JLARC) Report – House Document 37, Review of Emergency Medical Services in Virginia. 2004.

Joint Legislative Action Review Commission (JLARC) Report – House Document 62, The Use and Financing of Trauma Centers in Virginia. 2004.

Renaissance Resources, Business Consultants 9100 Arboretum Parkway, Suite 270 Richmond, VA 23236 Ph. (804) 330-3088. www.renaissanceresources.com