



STATE OF WEST VIRGINIA  
DEPARTMENT OF HEALTH AND HUMAN RESOURCES

Joe Manchin III  
Governor

Martha Yeager Walker  
Secretary

**MEMORANDUM**

**TO:** All EMS Agencies  
All Regional Program Directors  
All Medical Command Center

**FROM:** William D. Ramsey, M.D.  
State EMS Medical Director

**DATE:** August 23, 2008

**SUBJ:** Update on West Virginia EMS Data System

A handwritten signature in blue ink, reading "W.D. Ramsey".

WVOEMS has just completed a two day work session with the EMS Performance Improvement Center (EMS-PIC) establishing the master plan, implementation details, and time line for implementation of the West Virginia EMS Data System.

This memo is to provide updated general information and direction to EMS agencies concerning this very important project. All future information and updates concerning this project will be provided on-line, therefore agencies should check the web-site regularly for updated information.

As you are aware, the Electronic Patient Care Record (EPCR) is part of the overall Trauma and Emergency Medical Information System (TEMIS). The other two components are the State Trauma Registry (STR) and the Medical Command Record (MCR). Since West Virginia has partnered with North Carolina's EMS Performance Improvement Center to implement a comprehensive EMS resource information management system which includes the EPCR component, from this date forward the EMS component of TEMIS will be called the **West Virginia EMS Data System**.

This update addresses three specific areas as follows. This information will also be available directly on-line.

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### **Overview of West Virginia EMS Data System:**

The WV EMS Data System is composed of four interdependent components. A brief summary of these components is as follows:

- **Credentialing Information System (CIS)**  
CIS forms the basis upon which all functions of the data system are built. Contained within CIS are all EMS personnel, agency, vehicle, and educational information and management tools. WV OEMS plans to fully implement the entire CIS system by June 30, 2009.
- **Pre Hospital Medical Information System (PreMIS)**  
PreMIS is the "electronic patient care record" portion of the system. PreMIS implementation details and time line is discussed below.
- **State Medical Asset Resource Tracking Tool (SMARTT)**  
SMARTT provides up-to-date tracking of EMS, hospital, and other medical resources. SMARTT will be implemented for EMS agencies as they implement PreMIS.
- **EMS Performance Improvement Toolkits (EMS Toolkits)**  
EMS Toolkits provides a comprehensive performance improvement package that is usable at all levels from individual EMS personnel to statewide system evaluation. The Toolkits will be available to individual agencies approximately three months after they have fully implemented PreMIS.

### **Implementation of PreMIS**

Planning and background programming has been ongoing over the past year. Implementation is set to begin in September 2008. Implementation for 212 EMS agencies necessarily must be staged and phased-in through a controlled and organized process. In order to accomplish this task in an organized manner, agencies will be placed in a queue based on information obtained in a readiness survey conducted by OEMS. This survey will not only assist OEMS in developing the time-line queue for agencies to begin implementation of the system, but will also help OEMS assist agencies in determining the type of participation which might be best for them. The survey will also help identify possible obstacles or unresolved issues which may delay an agency's participation. The goal is to have a successful implementation process which ultimately leads to improved patient care and better information to make system improvements. Once OEMS has received and reviewed the information, a queue will be developed to sequentially phase in each agency. Following are key activities and target dates in the implementation process for both vendor based and web-based PreMIS users. These dates are targets and remain flexible.

Activity	Date	Comments
Commercial vendor software certification begins	8/18/08	
Test agency implementation begins	9/01/08	
Establish agency readiness requirements and criteria	9/01/08	
Survey agencies for readiness	9/15/08	
Queue agencies based on readiness survey results	9/30/08	
Configuration of agencies begins based on queue order	10/01/08	Continues thru 10/01/09
Agency training begins	10/15/2008	Continues thru 10/01/09
Web-based agency implementation begins	10/15/2008	Continues thru 10/31/09
Agency specific vendor commercial software certification begins	9/01/2008	Continues thru 10/01/09
Agency test certification begins	PRN	Continues thru 10/01/09
Agencies with commercial vendor software implementation	PRN	Continues thru 10/31/09
All agencies utilizing WV EMS Data System	10/31/2009	

### Printed Patient Care Record Requirement

The following additional information is provided to assist commercial vendors in becoming certified for use in the WV EMS Data System.

As outlined in item number 4 (four) in the vendor requirement document, the vendor software must be capable of printing a properly formatted patient care record. After more detailed evaluation of this requirement and in reviewing the master implementation plan, there are now two methods by which the vendor can meet this requirement:

1. The vendor may produce a printout which exactly matches the web-based PreMIS format as outlined in the original vendor requirement document, **OR**

2. The vendor may utilize a customized patient care record printout as long as it meets the following criteria:
  - a. Must contain the full name of the licensed EMS agency completing the document.
  - b. Must report at a minimum all of the required WV EMS Data System elements.
  - c. Must contain the following statement as a header and/or footer on each page of the printed document:

***“WVOEMS accepted EMS Patient Care Report App# \_\_\_\_\_”***

In order to utilize option #2 above, the vendor must submit a printed record to WVOEMS for review and certification as an accepted printed patient care report. Specific instructions on how to submit the printout for review can be obtained by contacting Bob Dozier at the WVOEMS office. Upon approval of the printed document, OEMS will assign an approval number to the specific printed document. Vendors cannot change the printed format of the document without approval of OEMS.

Final resolution of several issues will occur during the implementation period. These include, but are not limited to:

- Mechanisms for hospitals to receive patient care report information or copies.
- Refusal documentation and signatures.
- Special billing documentation and signatures.

These items are already being addressed by WVOEMS. Additional information on these, or any other issues surrounding implementation, will be made available as soon as possible.

Please note it is important that agencies respond promptly to the Data System Readiness Survey.

WDR/nll