

**Town of Swansboro**  
**Board of Commissioners**  
**July 09, 2024, Regular Meeting Minutes**

In attendance: Mayor John Davis, Mayor Pro Tem William Justice, Commissioner Jeffrey Conaway, Commissioner Pat Turner, Commissioner Joseph Brown, and Commissioner Douglas Eckendorf.

\*\*\*\*\*

**Call to Order/Opening Prayer/Pledge**

The meeting was called to order at 6:00 pm. Mayor Davis led the Pledge of Allegiance.

**Public Comment**

Citizens were offered an opportunity to address the Board regarding items listed on the agenda. No comments were given.

**Adoption of Agenda and Consent Items**

On a motion by Commissioner Conaway, seconded by Commissioner Turner, the agenda was adopted unanimously.

**Appointments/Recognitions/Presentations**

*Parks & Recreation Month*

Mayor John Davis presented Parks and Recreation Director Stanley and her department with a proclamation designating July as the Parks and Recreation Month. Director Stanley shared that the success of parks & recreation was successful due to the collaboration and partnership with many local businesses, volunteers and support from employees and the other Town departments.

*Onslow Memorial Hospital*

Penny Burlingame-Deal, President and CEO of Onslow Memorial Hospital, presented on the hospital's achievements, challenges, and strategic plans. She highlighted the hospital's recognition for maternity care, cost-efficiency, and equity, as well as its recent financial turnaround with \$16 million in excess revenue. Despite improved finances, quality scores (Leapfrog C, CMS 2-star rating) lagged due to outdated data and hospice-related mortality reporting. The hospital faced emergency department capacity issues, exacerbated by behavioral health and social hold cases. Mrs. Burlingame-Deal also discussed workforce shortages and residency programs initiated to address them.

In response to inquiries from the board Mrs. Burlingame-Deal clarified the following:

- Plans for expanding services to outlying areas for satellite facilities had been considered but are still in the early stages of development.

- She encouraged feedback on loyalty and community perception, acknowledging the importance of these factors in improving hospital reputation and patient care experience.

## **Business Non-Consent**

### *Advanced Life Support Enhancement – Update*

Fire Chief Jacob Randall reviewed his slides, attached herein with the power point presentation of the meeting, for the proposal to transition the Swansboro Fire Department to an advanced life support (ALS) system to improve emergency medical services (EMS) and patient outcomes. The plan aimed to enhance response capabilities and address long response times, particularly in rural areas, where the average time reached 13 minutes. Swansboro's remote location and growing call volume were also contributing to delays in accessing critical care.

The phased proposal would implement paramedic-level services over three years, introduce a transport service, and acquire necessary equipment. Key challenges included recruiting and retaining personnel, and managing financial impacts, which were still under review. The next steps involved seeking approval for an interlocal agreement with Onslow County EMS, with a July 15th deadline to submit the proposal.

The following plan options were reviewed.

#### **Plan A – Paramedic (Recommended)**

- Provides Dedicated Provider per Shift on a Quick Response Vehicle - Consistency
- Alleviates Fire Apparatus from Scene Dedication
- Provides Personnel to Respond with Secondary Apparatus Type for Fire Incidents (ISO)
- Maximizes Operational Efficiency – Creating the Ability for Answering Overlapping Incidents
- Builds Foundation for Future EMS Division Growth (Transport – If needed)

#### **Plan B – Firefighter/Paramedic**

- Provides ALS Provider per Shift and Trained Fire Personnel
- Commits Fire Apparatus to the Scene of an EMS Incident – Awaiting Transport
- Increases Certified Fire Personnel - Eliminates Paramedic Abilities when Performing Fire Suppression Activities

#### **Plan C – Part-Time Providers**

- Staff Apparatus with Part-Time Personnel
- Requires a Significant Increase in Part-Time Personnel
- Inconsistent Personnel Daily Impacting Daily Operational Efficiency

- Impacts Program Quality & Management (Training, Report) Overall Consistency

After discussion on the various options presented, the board requested a cost comparison between the plans, with an emphasis on utilizing current staff and identifying potential funding sources, such as grants. Due to the deadline of July 15, 2024, the board agreed to hold a special meeting on Saturday, July 13, 2024, at 8:00 am for Chief Randall to provide cost comparison details and to provide a decision on proceeding with the process to establish an Advanced Life Support Enhancement System in the Town of Swansboro.

#### *Future Agenda Topics*

Future agenda items were shared for visibility and comments. In addition, an opportunity was provided for the board to introduce items of interest and subsequent direction for placement on future agendas. The following items were addressed:

- Discussion on tax reduction at a future meeting

#### **Public Comment**

Citizens were offered an opportunity to address the Board regarding items not listed on the agenda. No comments were given.

#### **Manager's Comments**

Manager Barlow shared in addition to his project brief, the 25 new Christmas decorations had been purchased along with 9 wreathes with bows. The poles which would be utilized to accommodate these decorations still needed power. Additionally, he shared that the resurfacing of Shore Drive had been completed.

#### **Board Comments**

Board members shared their appreciation to staff and the success of the July 3rd/4th event, and the Flag displayed over the bridge was complimented by many citizens.

#### **Adjournment**

On a motion by Commissioner Conaway, seconded by Commissioner Eckendorf, the meeting adjourned at 8:10 pm.

# Regular Meeting July 9, 2024



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1. Please turn cell phones to "off" or "vibrate".

2. The Board offers the public three opportunities to speak during the meeting:

A comment period is offered at the beginning and end of the meeting. Please note that a separate opportunity is provided for those items requiring a public hearing.

Public Hearing(s) – There are no public hearings scheduled for this meeting.

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# PUBLIC COMMENT

Citizen opportunity to address the Board for items listed on the agenda.

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# AGENDA AND CONSENT ITEMS

**Action Needed:** *Motion to Adopt the Agenda as prepared (or amended) and approval of the Consent Items*

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# Onslow Memorial Hospital

**Presenter: Penney Burlingame Deal – President & Chief Executive Officer for  
Onslow Memorial Hospital**

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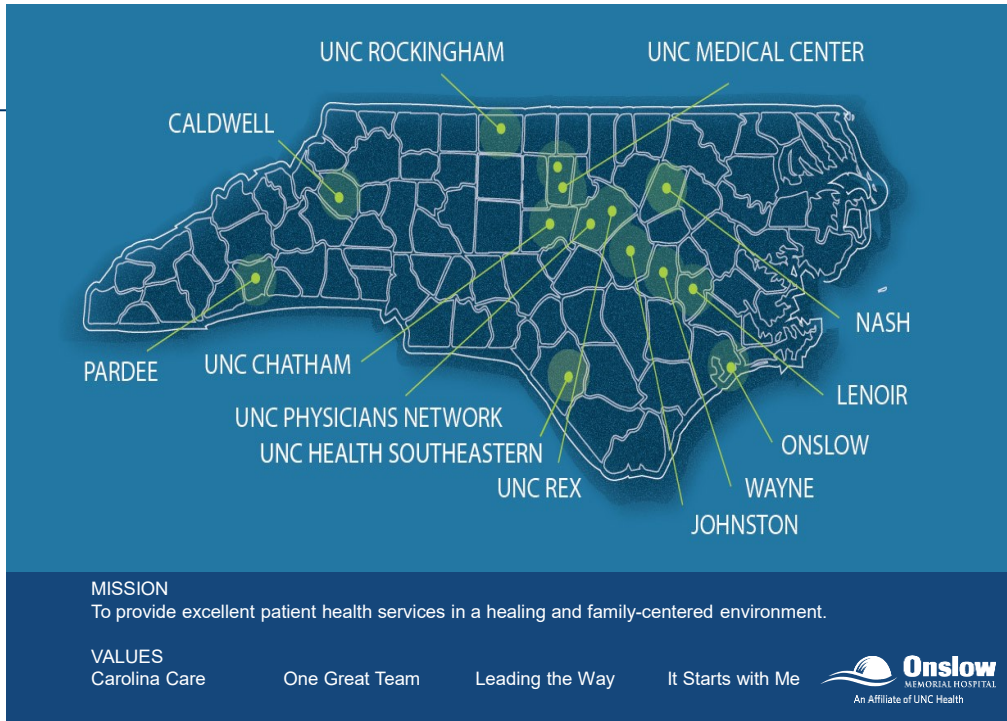
UNC HEALTH CARE

## Onslow Memorial Hospital CEO Report FY2023

June 2024



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## Overview of OMH

- Originally founded in 1944
- 162-bed acute care, community hospital
- Located in coastal North Carolina
- Serving the city of Jacksonville and greater Onslow County
- Nationally accredited by The Joint Commission



**1,179**  
Employees



**228**  
Active Med Staff



**15**  
Employed Providers



**13**  
Board Members



**30**  
Volunteers



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## Our Community



### Community Partnerships

- Onslow County Health Department
- Naval Hospital
- Aligned Partnerships – Home Health and Skilled Nursing Centers
- Onslow County EMS – Community Paramedic Program
- Caring Community Clinic
- Patient and Family Advisory Council



### Our Patients

- Avg age 27.4
- Cancer
- Heart disease
- Payor Mix:
  - 38% MCR
  - 18% MCD
  - 13% BC
  - 22% CO
  - 9% Self-pay



### Stroke Care

- Stroke Nurse Coordinator
- Free health checks
- Education on risk factors, prevention, and identification
- Primary Stroke Center certification through The Joint Commission



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## AWARDS, RECOGNITION, ACCREDITATION FY 2023:

- The Joint Commission Triennial Survey February 2024
- The Joint Commission Advanced Primary Stroke Recertification Survey February 17, 2023
- Blue Cross Blue Shield Blue Distinction Honor for Maternity Care 2023
- Commission On Cancer Accredited Center-American College of Surgeons: Community Cancer Program 2020 (Recertified Dec 2023)
- Get with the Guidelines for Heart Failure Gold with Honor Roll and Target: Type II Diabetes Honor Roll Achievement Award June 2023
- Get with the Guidelines for Stroke Gold Plus with Target: Type II Diabetes Honor Roll Achievement Award July 2023
- Intersocietal Accreditation Commission (IAC) Vascular Testing Accredited Facility: Extracranial Cerebrovascular Testing, Extracranial Cerebrovascular Testing, Peripheral Venous Testing, Peripheral Arterial Testing
- American College of Radiology Certifications
- Restorix Patient Satisfaction Wound Center Recognition 2023
- Restorix Clinical Distinction Wound Center Recognition 2023



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## AWARDS, RECOGNITION, ACCREDITATION FY 2023:

- 2023 “Onslow Memorial Hospital’s Multidisciplinary Collaboration to Deliver Evidence-Based Guideline Directed Medical Therapy for Heart Failure Patients” presented in Philadelphia and at the International Quality Showcase at Scientific Sessions on November 11, 2023
- UNC Quality Expo 2023 Poster Presentation October 19, 2023. “Initiatives Implemented For an Upward Trend in Early Management Severe Sepsis/Shock Bundle”.
- 2023 Implement HF Onslow Recognition - October 19, 2023 at Onslow Memorial Hospital



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## OMH Year in Review:

- **UNC Health Partnership MSA Renewal – Metrics**
  - QIOC
  - Pharmaceuticals
  - Clinical Integration
- **Prioritized alignment with UNC Health Culture, Values**
  - Workforce Engagement Survey -- SHARE (95% participation)
  - Equity and Inclusion Survey
  - Physician Engagement Survey (74% participation)
- **UNC Health Alignment with Organizational and Care Redesign Goals**
- **The Impact Project**
- **Chief Medical Officer**
- **Nurse Residency Program**
- **CNA Residency Program**
- **Leapfrog score of C**
- **CMS Star Rating 2**



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## OMH FY 2023 in Review (continued):

- |   |  |
|---|--|
| • 8.95% (9.63%) Percentage of Self Pay                    | • Admissions: 5,533 (5,223)                                      |
| • \$54,827,384 (\$46,823,329) in Uncompensated Care       | • ED: 55,746 (46,579) visits                                     |
| • 1,446 (1,338) births                                    | • ED Admissions: 6.8% of ED volume and 68.3% of OMH admissions   |
| • 5,351 (5,884) OR / EU Cases                             | • Wound Care – \$1,420,715 (\$1,419,693)                         |
| • 260 (297) Robotic Assisted Cases                        | • \$22,310 – Grants and \$291,552 Contributions – OMH Foundation |
| • 412 (393) Joint Center Cases                            | • Autopsies – 448 (470)  |
| • 3,548 (3,107) Surgicare Cases                           | • Onslow Diagnostics – 19,204 (20,569)                           |
| • 437 (482) Dental Service Cases                          | • OAS Clinic Encounters – 37,621 (32,490)                        |
| • 19,923 (8,642) Radiation Oncology Treatments/Procedures | • Doses Dispensed – 1,074,867 (1,091,851)                        |
| • 152 (202) ERS Cases                                     | • Meals Served: 232,182 (213,751)                                |

Figures in ( ) denote last FY's values for comparative purposes



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## FY 2023 Financials

BALANCE SHEET (in \$000s)	September 30, 2023
Current Assets	\$ 68,435
Assets Limited As to Use	\$ 21,216
Property, Plant and Equipment	\$ 71,248
Deferred Outflows	\$ 128
Total Assets and Deferred Outflows	\$ 161,027
Current Liabilities	\$ 40,065
Long-Term Debt	\$ 25,449
Other Long-Term Liabilities	\$ 12,487
Deferred Inflows	\$ 1,994
Net Position	\$ 81,032
Total Liabilities, Deferred Inflows and Net Position	\$ 161,027



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## FY 2023 Financial (continued)

INCOME STATEMENT (IN \$000s)	
Net Patient Service Revenue	\$ 187,412
Other Revenue	\$ 2,725
Total Operating Revenue	\$ 190,137
Salaries and Benefits	\$ 84,101
Other Expenses	\$ 89,299
Total Operating Expenses	\$ 173,404
Operating Income	\$ 16,733
Interest Expense	\$ 1,083
Property Tax Revenue	
Other Non-operating Expense, net	
Total Non-Operating Revenue	\$ 794
Total Income	\$ 16,444
CASH EXPENDITURES (in \$000s)	
Salaries and Benefits	\$ 84,101
Physician Fees	\$ 10,216
Purchased Services	\$ 25,871
Supplies	\$ 26,961
Other	\$ 11,828



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## FY 2023 Key Statistics

	FY2023	BUDGET
DAILY CENSUS	89	87
BIRTHS	1,446	1,186
ADMISSIONS	5,533	4,784
SURGICAL CASES	8,899	9,360
ED VISITS	55,746	43,573



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## FY 2023 Comparative Key Financial Indicators

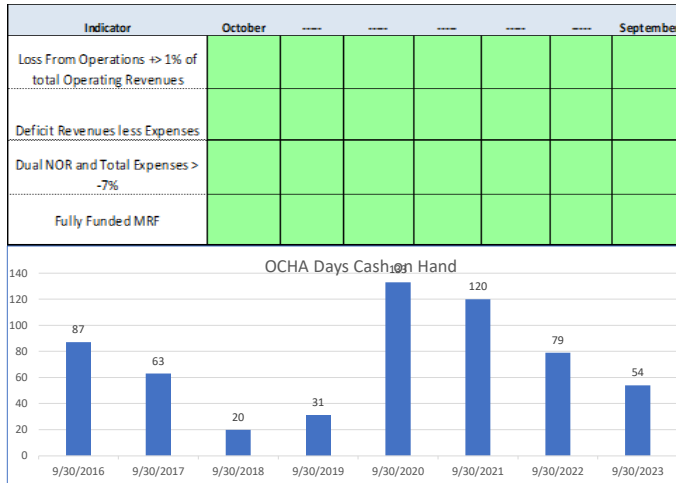
Indicator	FY 2021	FY 2022	FY 2023	BAA Moody's
Operating Margin	5.17%	3.34%	8.23%	-0.30%
Excess (Total) Margin	5.35%	3.05%	8.61%	2.70%
Cash Days	120	79	54	204
Net AR	42	52	60	47



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## High Visibility Indicators

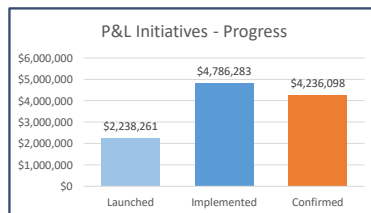


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## IMPACT Tracker FY 2023 (10-1-2022 through 9-30-2023)

Delivery Team	Baseline Target	Target	Progress	Status	Launched	Implemented	Confirmed
Workforce/HR	\$198,000	\$198,000	<div></div>	●	\$198,000	\$98,000	\$78,000
Revenue Cycle		\$928,875	<div></div>	●	\$928,875	\$3,810,197	\$3,810,805
Supply Chain		\$49,912	<div></div>	●	\$0	\$0	\$0
Pharmacy	\$0	\$0	<div></div>	◆	\$0	\$0	\$0
Physician Services	\$332,154	\$332,154	<div></div>	●	\$332,154	\$70,154	\$0
Clinical Operations	\$779,232	\$779,232	<div></div>	●	\$779,232	\$807,932	\$347,293
Clinical Documentation	\$0	\$0	<div></div>	◆	\$0	\$0	\$0
Market & Payer Strategy	\$0	\$0	<div></div>	●	\$0	\$0	\$0
<b>Overall</b>		<b>\$2,288,173</b>	<div></div>	●	<b>\$2,238,261</b>	<b>\$4,786,283</b>	<b>\$4,236,098</b>
					98%	209%	185%



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## FY 23 Organizational Goals Through June 30, 2023



Report Date	Entity
June 30, 2023	Onslow

### Onslow FY23 Organizational Goals **FINAL** June 30, 2023



Predicted Performance Legend

Annual Goal	Performance Metric	Threshold	Target	Maximum	FYTD Performance	Year-End Predicted Performance	Goal Information
<b>Elevate &amp; Embrace Culture</b>							
Enhance our culture to further engage our teammates and support their well-being	Participate in the Workforce Engagement Survey (WES)	70% participation	80% participation	90% participation	99%		
	Improve WES Engagement Score (key drivers)	1 of 4 key drivers	2 of 4 key drivers	3 of 4 key drivers	5		
Create an inclusive and equitable culture for the health and well-being of our teammates	Complete equity and inclusion leadership training and identify action steps	70% participation	80% participation	90% participation	90.0%		
<b>Integrate &amp; Excel Clinically</b>							
Pursue transformational recovery through operational excellence and strategic growth	Reduce ALOS top 5 diagnoses/procedures greater than the GMLLOS	5.52 days	5.41 days	5.29 days	5.52		
	Reduce ED LOS for admitted patients	291.9 min	285.9 min	273.9 min	160.5		
	Reduce third party provider expenses	2 impact trackers	3 impact trackers	4 impact trackers	5		
Improve the quality and accessibility of care that we provide	Quality Aggregate Score	40%	60%	80%	89%		
<b>Transform Patient Care &amp; Health</b>							
Improve the customer experience to achieve our patients' health and well-being needs	HCAHPS: Rate the Hospital	58.68	60.48	62.18	62.41		
	Press Ganey IP: Staff worked together to care for you	66.84	67.84	68.84	66.62		
	Press Ganey ED: Staff worked together to care for you	57.74	59.44	61.04	54.50		
Improve health outcomes within our communities by reducing health disparities and prioritizing value-based care	Measure variation in quality measure performance between demographic groups (Real)	2 of 5 milestones	3 of 5 milestones	5 of 5 milestones	4		
Expand our virtual care offerings and utilization of digital health tools	Increase registered users for MyOMH portal	24.19%	24.67%	25.14%	29.06%		
<b>Value Maximizer: Onslow</b>		<b>4</b>					

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Reporting Data Through: June 30, 2023



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### ONSLow QIOC Goals FY23

Select Entity: ONSLOW

Select Reporting Period: FY23 Goals



Aggregate Performance Score  
**85%**  
Hover for details

Category	Metric	Performance	Latest Month	Latest 3 Month	FY23 To Date	FY24 Threshold	FY24 Target	FY24 Maximum
Mortality	Adult Mortality Index (Observed/Expected), Vizient Community Model 2022		1.41 Jun	1.62	1.64	≤ 1.77	≤ 1.57	≤ 1.47
	CMS Sepsis Bundle Compliance		76.74% Jun	74.53%	66.25%	≥ 69.44%	≥ 70.12%	≥ 71.48%
Patient Harm	CMS Infection Rate		0.44 Jun	0.56	0.42	≤ 0.85	≤ 0.80	≤ 0.76
	Patient Falls with Injury Rate		0.39 Jun	0.63	0.47	≤ 0.64	≤ 0.61	≤ 0.57
Transitions	Readmissions - All Payer, All Cause, Adult (Vizient v11)		8.79% Jun	8.13%	8.64%	≤ 8.46%	≤ 8.28%	≤ 8.01%
Patient Experience*	HCAHPS: Rate the Hospital		61.54 Jun		61.54	≥ 58.68	≥ 60.48	≥ 62.18
	Press Ganey ED: Staff worked together to care for you		54.33 Jun		54.33	≥ 57.74	≥ 59.44	≥ 61.04
	Press Ganey IP: Staff worked together to care for you		65.91 Jun		65.91	≥ 66.84	≥ 67.84	≥ 68.84

Performance: Not Meeting (0%) Meets Threshold (50%) Meets Target (75%) Meets Maximum (100%)

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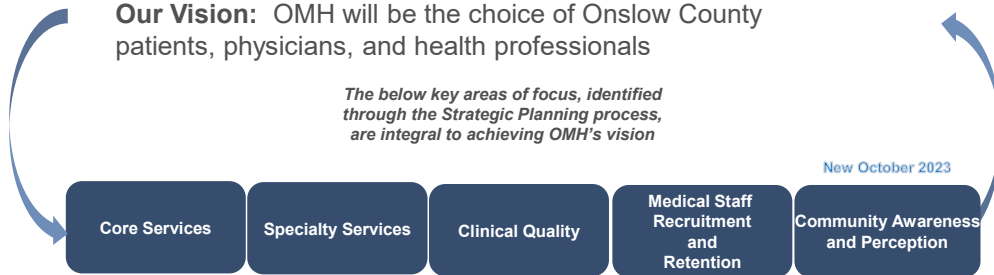
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## OMH Strategic Plan, FY22 to FY24

**Our Mission:** Provide excellent patient health services in a healing and family-centered environment

**Our Vision:** OMH will be the choice of Onslow County patients, physicians, and health professionals

*The below key areas of focus, identified through the Strategic Planning process, are integral to achieving OMH's vision*



Key areas of focus, OMH Strategic Plan, FY22 to FY24 **after the Strategic Plan Refresh, Completed in October 2023.**



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## FY 22 – FY 24 Strategic Plan Priorities (Updated)

### Organizational Priorities

- Core Services
- Specialty Services
- Medical Staff Recruitment and Retention
- Clinical Quality
- Community Awareness and Perception
  - Front Door and Community Access Points
  - Consumer Engagement/Satisfaction
  - Financial Position
  - Capital Investment and Facility Updates
  - Community Outreach and Engagement
  - Novel Partnerships



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## Strategy Map Update 2023

Key Focus Area	Status	Notes
Core Services	On Track	-Medical Office Building (MOB) Development --Hospital Transport Services*
Specialty Services	On Track	-Ambulatory Surgery Center (ASC) Development*
Quality	On Track	-Consistency -Emergency Department Emphasis*
Medical Staff Recruitment and Retention – Clinical Workforce	In Progress	-Prioritization -Clinical Workforce Recruitment and Retention*
Community Awareness & Perception	New for FY 2023	-Broader Community Partnerships* -Rebranding* -Facility Improvements*



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## Thank You!



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# Parks & Recreation Month

**Presenter: Mayor John Davis**

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## NEW BUSINESS/NON-CONSENT

### Advanced Life Support Enhancement – Update

At the May 14, 2024, regular meeting, direction was given to commence planning and seek approval to become an Advanced Life Support (ALS) provider with the Onslow County—Camp Lejeune EMS System. The development of an ALS system can be provided in various fashions. The system design model must be selected before submitting the final request to the Onslow County—Camp Lejeune EMS System Peer Review Committee for approval.

***Recommended Action:*** Approval to seek designation as an Advanced Life Support (Paramedic) First Responder program within the Onslow County – Camp Lejeune EMS System plan with a three-year phased implementation design.

**Presenter: Jacob Randall – Fire Chief**

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# Advanced Life Support Enhancement {Program Update}

Jacob Randall – Fire Chief

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## Purpose

To enhance the Town of Swansboro Fire Department's Emergency Medical Services (EMS) to the Paramedic level, providing for a higher quality of service and strengthening the overall response capabilities of the Onslow County—Camp Lejeune EMS system.

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# Program Objectives

Improve	Improve Patient Outcomes
Enhance	Enhance Provider Capabilities
Strengthen	Strengthen System Resource Availability & Response
Support	Support Equitable Access to Care
Amplify	Amplify Operational Efficiency

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# Needs Assessment



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## Paramedic – Critical Interventions

Skill	Emergency Medical Technician (EMT)	Advanced Emergency Medical Technician (AEMT)	Paramedic
12- Lead Interpretation	NO	NO	YES
Cardiac Pacing	NO	NO	YES
Cardioversion	NO	NO	YES
Chest Decompression	NO	Traumatic Cardiac Arrest Only	YES
Cricothyrotomy	NO	NO	YES
Manual Defibrillation	NO	Pulseless Arrest Only	YES
Drug Assisted Intubation	NO	NO	YES
Intubation/Advanced Airway	NO	YES	YES
Intraosseous (IO)	NO	YES	YES
Intravenous Access (IV)	NO	YES	YES

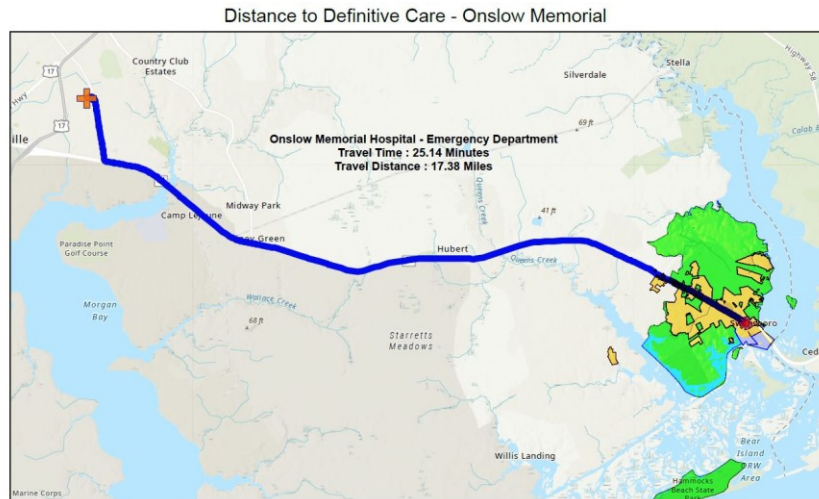
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## Onslow County Response Times

Average Response Time					
	2020	2021	2022	2023	2024 (January 1 - May 14)
County	9:16	10:01	10:33	10:33	10:02
Zone 5	10:41	12:13	14:43	13:14	11:28
Zone 9	8:54	9:33	10:22	9:38	9:15
Total Call Volume					
	2020	2021	2022	2023	2024 (January 1 - May 14)
County	20,388	23,650	29,552	33,658	12,458
Zone 5	2,279	2,753	3,453	4,095	1,408
Zone 9	1,996	2,456	3,047	3,396	1,247

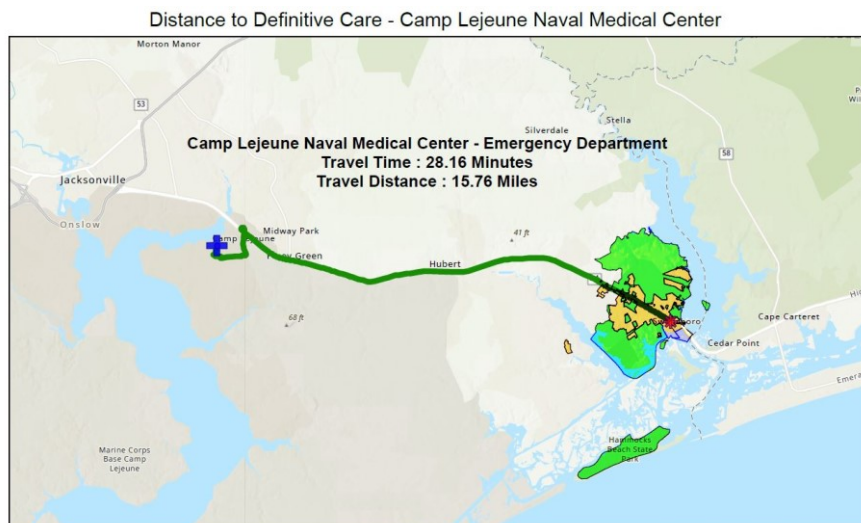
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## Distance to Definitive Care {Onslow Memorial}



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## Distance to Definitive Care {Camp Lejeune – Naval}



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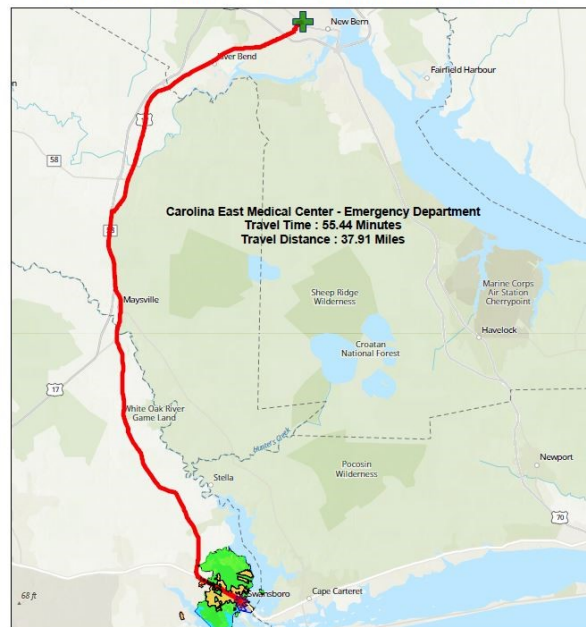
## Distance to Definitive Care {Carteret Healthcare}



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Distance to  
Definitive  
Care  
{Carolina  
East}

## Distance to Definitive Care - Carolina East Medical Center



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## System Resource Availability

Increasing  
Incident  
Volume

Overlapping  
Incidents

Distance of  
Travel for  
Resources

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## Plan of Action



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# Phased Implementation



FULL  
IMPLEMENTATION  
OVER THREE YEARS



REDUCES IMMEDIATE  
FINANCIAL IMPACTS –  
STAGED FINANCIAL  
PLANNING



GENERATES  
PLANNING CAPACITY  
TO ALTER OPERATIONS  
UTILIZING  
PERFORMANCE DATA –  
ORGANIZATION  
DEVELOPMENT



ALLOWS ABILITY TO  
SEEK ALTERNATIVE  
FUNDING FOR  
SUBSEQUENT YEARS



CREATES AN  
OPPORTUNITY TO  
BUILD CAPITAL AND  
NON-CAPITAL  
EQUIPMENT  
REPLACEMENT  
SCHEDULES

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# System Design Model Options

Plan A – Paramedic (Recommended)	Plan B – Firefighter/Paramedic	Plan C – Part-Time Providers
Provides Dedicated Provider per Shift on a Quick Response Vehicle - Consistency	Provides ALS Provider per Shift and Trained Fire Personnel	Staff Apparatus with Part-Time Personnel
Alleviates Fire Apparatus from Scene Dedication	Commits Fire Apparatus to the Scene of an EMS Incident – Awaiting Transport	Requires a Significant Increase in Part-Time Personnel
Provides Personnel to Respond with Secondary Apparatus Type for Fire Incidents (ISO)	Increases Certified Fire Personnel - Eliminates Paramedic Abilities when Performing Fire Suppression Activities	Inconsistent Personnel Daily Impacting Daily Operational Efficiency
Maximizes Operational Efficiency – Creating the Ability for Answering Overlapping Incidents		Impacts Program Quality & Management (Training, Report) Overall Consistency
Builds Foundation for Future EMS Division Growth (Transport – If Needed)		

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## Scope of Services



Advanced Life Support –  
Paramedic



Fire Incident Rehab



Mobile Integrated Health –  
Community Paramedic Initiatives

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## Program Efficiency

### Quick Response Vehicle Design

- Aid in “Service” Credit for ISO Rating
- Brush Truck Unit for Wildland Response
- Increase Equipment for Scene Operations - Response

### Personnel

- In-House Training Program – Increase “On-Duty” Personnel for ISO
- Provides Dedicated Personnel to Medical Operations on Incidents (Firefighter Rehab, Patient Care)

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# Operational Performance Metrics

## Agency Operations

- Unit Turnout Times
- Response Times
- First Arriving to Transfer of Patient Care
- Ability to Answer Overlapping Incidents – ALS vs BLS

## Provider Performance

- Interventions Performed
- 12-lead Interpretation Accuracy
- Notification Times {Strokes, STEMIs, and Trauma}

## Patient Outcomes

- Shorter Pre- & Post- Defibrillation Pauses
- Stroke Assessment/Triage
- Trauma Assessment/Triage
- Cardiac Arrest/Survival & Neurological Assessment

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# Next Steps



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## System Design Timeline

- **July 9, 2024** - Approval to Proceed – *Select System Model Design Desired*
- **July 15, 2024** – System Proposal Due – *Submit to Onslow County Emergency Services Director*
- **August 6, 2024** – Onslow County – Camp Lejeune EMS System Peer Review Committee (PRC) Presentation – *Subcommittee Providing Recommendation to Onslow County Board of Commissioners for Approval or Denial*
- **TBD** – Draft, Establish, or Revise Memorandum of Understanding or Inter-Local Agreement between the Town of Swansboro and Onslow County – *IF Approved at PRC*
- **TBD** – Onslow County Board of Commissioners Approval – *If Approved, ALS Services Can Begin*
- **January 4, 2025** – *Benchmark for Advanced Life Support Capable Response*

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## Questions

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# NEW BUSINESS/NON-CONSENT

## Future Agenda Items

Future agenda items are shared for visibility and comment. In addition, an opportunity is provided for the Board to introduce items of interest and subsequent direction for placement on future agendas.

***Action Needed:*** Discuss and provide any guidance.

**Presenter: Alissa Fender – Town Clerk**

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# PUBLIC COMMENT

Citizen opportunity to address the Board.

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## MANAGER'S COMMENTS

Jonathan Barlow

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## BOARD COMMENTS

Mayor John Davis  
Mayor Pro William Justice  
Commissioner Jeffrey Conaway  
Commissioner Douglas Eckendorf  
Commissioner Joseph Brown  
Commissioner Patrica Turner

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ADJOURN