ASCLS BOARD OF DIRECTORS ANNUAL MEETING
Sunday, July 30, 2017 - 8:30 a.m. – 12:00 p.m. Pacific Time

Call to Order
Roll Call
Minutes Committee
Standing Rules (1)

Minutes
Interim Board Meeting – March 19, 2017 (2)
Email Ballots (3)

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Board Reports
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Board Committees,
Policy and Procedures (Page 70) (8,9)

Elected/Appointed Committees, Forums
Membership (Page 89) (10)
Nominations (Page 97) (11)
Product Development (Page 104) (12)
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Task Forces/Liaisons
New Ideas (Page 182) (15)
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Region III
Region IV
Region VI
Region VII
Region VIII
Region IX
Region X
New Professionals New Members Forum
Awards
CLS Journal
E&R
Government Affairs Committee
Membership
PAC
Promotion of the Profession
Leadership Academy
The Joint Commission Laboratory PTAC
Scientific Assemblies

New Business
Open Forum
Adjournment (19)
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   d. Region 4
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   a. CCCLW
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7. Taskforces
   a. New Ideas
   b. Mentorship
   c. Root Cause
   d. Consumer Information Response Team
   e. Choosing Wisely
   f. SLMTA Taskforce
Activities of the President

- Attended Long Range Planning Day March 18, 2017
- Conducted Interim BOD meeting March 19, 2017
- Attended Legislative Symposium March 20-21, 2017
- Attended weekly calls with Jim Flanigan
- Assisted in review of Volunteer Module set-up with Jim Flanigan and Deb Rodahl
- Attended/presented KSCLS annual meeting March 29, 2017
- Attended/presented ASCLS-MO annual meeting April 6, 2017
- Attended/presented ASCLS-IL annual meeting April 19, 2017
- Attended 3P conference call meetings (4/7, 5/18, 6/13)
- Attended conference call with Melanie Giusti regarding set up for HOD May 25, 2017
- Submitted four (4) president’s columns to ASCLS Today editor
- Attended BOD update conference call 4/26, 5/25
- Attended call with Jim Flanigan and George Fritsma for the Choosing Wisely Task Force May 9, 2017
- Submitted ASCLS Board of Director award nominees to Awards Committee.
- Selected chairs for the elections and credentials committees.
- Selected master sergeant at arms for HOD.
- Selected HOD minutes committee members.
- Responded to inquiries from regional directors, state presidents, and committee leaders as necessary.

Items of Concern:
None

Request for Action:
None
Email Motions

**Motion #11 (3/27/17)**
Johnson moved that the ASCLS Board of Directors approve the formulation of a task force to determine the role of ASCLS experts for the Choosing Wisely campaign.

Ayes – 15  Nays – 0

**Motion #12 (3/27/17)**
Johnson moved that the ASCLS Board of Directors approve the appointment of JR Constance to the Judicial Committee to fill the recently vacated term. (Be it noted this appointment is only in effect until the 2017 ASCLS Annual Meeting).

Ayes – 15  Nays – 0

**Motion #13 (3/27/17)**
Johnson moved the ASCLS Board of Directors approve the appointment of JoAnne Owens as the DAC representative to the APRC. (Be it noted this is to fill an unexpected vacancy on this committee.)

Ayes – 15  Nays – 0

**Motion #14 (5/9/17)**
On behalf of the Nominations Committee, Snyderman moved that the ASCLS Board of Directors place Terese Abreu as the nominee for Director of Region IX. *Be it noted:* the Nominations Committee has voted and all are in agreement.

Ayes – 15  Nays – 0

**Motion #15 (5/15/17)**
On behalf of the Nominations Committee, Snyderman moved that the ASCLS Board of Directors place Joni Gilstrap as the nominee for the 1-year term on the Judicial Committee.

Ayes – 15  Nays – 0
Motion #16: (6/1/17)
Snyderman moved that the ASCLS Board of Directors approve removal of the Past President from the Promotion of the Profession Committee (PPC). (Be it noted: the committee has a board liaison. In addition, the role was added in the days when the Past President took a more active role in responding to issue and media alerts. With the advances in electronic communications this role is no longer necessary. This motion has the concurrence of the current PPC chair.)
Ayes – 15  Nays – 0

Motion #17 (6/19/17)
Rodahl moved that the ASCLS Board of Directors approve the appointments of the members listed below to the various ASCLS Committees.
  o Barbara Snyderman, Education & Research Fund Trustees, Industry Representative
  o Ashley Schlosser New Professional New Member Forum, Region VIII Representative
Ayes – 15  Nays – 0

Motion #18: (6/19/17)
Rodahl moved that the ASCLS Board of Directors approve the appointments of the members listed below as Chairs and Vice Chairs of the various ASCLS Committees.
  o Stacey Robinson, Abstract and Proposal Review Committee, Vice-Chair
  o Louann Lawrence, Education & Research Fund Trustees, Chair
  o Lisa Hochstein, Education & Research Fund Trustees, Vice-Chair
  o Roxanne Alter, Membership Committee, Chair
  o Lucia Wang, Membership Committee Vice-Chair Member Services
  o Leslie Martineau, Membership Committee, Vice-Chair Recruitment
  o Brenda Kochis, PACE, Chair
  o Michelle Moy, Promotion of the Profession, Chair
  o Alice Hawley, Promotion of the Profession, Vice-Chair
  o Susan Stalewski, Scientific Assembly, Coordinator
Ayes – 15  Nays – 0

Motion #19: (6/29/17)
Rodahl moved that the ASCLS Board of Directors approve the appointment of Abra Elkins as Vice-Chair for the P.A.C.E Committee.
Ayes – 15  Nays – 0
Motion #20: (6/29/17)
Rodahl moved that the ASCLS Board of Directors approve the appointments of the members to the Doctorate of Clinical Laboratory Science Committee and Body of Knowledge Committee including the Chairs and Vice-Chairs as listed below. Be it noted, these are new committees in ASCLS for which terms were staggered to allow for ongoing transitions from year to year.

<table>
<thead>
<tr>
<th>Body of Knowledge</th>
<th>Committee member</th>
<th>Appointments pending BOD approval of SOP</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>3 yr</td>
<td>Janice Conway-Klaassen</td>
</tr>
<tr>
<td></td>
<td>3 yr</td>
<td>Sue Stalewski</td>
</tr>
<tr>
<td></td>
<td>2 yr</td>
<td>Mary Beth Miele</td>
</tr>
<tr>
<td></td>
<td>2 yr</td>
<td>Drona Pandeya</td>
</tr>
<tr>
<td></td>
<td>1 yr</td>
<td>Catherine White</td>
</tr>
<tr>
<td>Chair</td>
<td></td>
<td>Janice Conway-Klaassen</td>
</tr>
<tr>
<td>Vice-Chair</td>
<td></td>
<td>Sue Stalewski</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>DCLS Committee</th>
<th>Appointments pending BOD approval of SOP</th>
</tr>
</thead>
<tbody>
<tr>
<td>Voting Committee member – CLS Educ</td>
<td>Elizabeth Leibach 2 yr</td>
</tr>
<tr>
<td>Voting Committee member – CLS Educ</td>
<td>Jose (Eddie Salazar) 1 yr</td>
</tr>
<tr>
<td>Voting Committee member – CLS Educ</td>
<td>Elaine Keohane 1 yr</td>
</tr>
<tr>
<td>Voting Committee member – CLS Educ</td>
<td>Vicki Freeman 2 yr</td>
</tr>
<tr>
<td>Voting Committee member – CLS Educ</td>
<td>Renee Hodgkins 3 yr</td>
</tr>
<tr>
<td>Voting Committee member – Mgr/Quality</td>
<td>Ed Peterson 2 yr</td>
</tr>
<tr>
<td>Voting Committee member - MLS/DCLS stu</td>
<td>Brandy Gunsolus 3 yr</td>
</tr>
<tr>
<td>Consulting: Quality Admin</td>
<td>Lindsey Davenport-Landry 1 yr</td>
</tr>
<tr>
<td>Consulting: Pathologists</td>
<td>Cathy Otto 3 yr</td>
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<tr>
<td>Consulting: Non-Path provider</td>
<td></td>
</tr>
<tr>
<td>Consulting: Non-Path provider</td>
<td></td>
</tr>
<tr>
<td>Chair</td>
<td>Renee Hodgkins</td>
</tr>
<tr>
<td>Vice-Chair</td>
<td>Brandy Gunsolus</td>
</tr>
</tbody>
</table>

Ayes – 15   Nays – 0
Motion #21: (6/29/17)
Rodahl moved that the ASCLS Board of Directors approve the appointments of New Professionals to Committees as listed below.

<table>
<thead>
<tr>
<th>Volunteer</th>
<th>Committee 1</th>
<th>Committee 2</th>
<th>Committee 3</th>
</tr>
</thead>
<tbody>
<tr>
<td>Marionette Cortez</td>
<td>Awards</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Adam Moya</td>
<td>Awards</td>
<td></td>
<td>By-laws</td>
</tr>
<tr>
<td>Alexandra Nussbaum</td>
<td>Government Affairs</td>
<td></td>
<td>Political Action Committee</td>
</tr>
<tr>
<td>Caroline Sedor</td>
<td>Government Affairs</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Heather Mayer</td>
<td>Government Affairs</td>
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<td></td>
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<tr>
<td>Haleigh Petty</td>
<td>Government Affairs</td>
<td>P.A.C.E.</td>
<td>Political Action Committee</td>
</tr>
<tr>
<td>Hailey Gauvreau</td>
<td>Government Affairs</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Abou Drammeh</td>
<td>Membership</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Navin Parajuli</td>
<td>Membership</td>
<td>Product Development</td>
<td>P.A.C.E.</td>
</tr>
<tr>
<td>Jennifer ONeill</td>
<td>Membership</td>
<td>Promotion of the Profession</td>
<td>P.A.C.E.</td>
</tr>
<tr>
<td>Lindsey Keill</td>
<td>Membership</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Laura Trescott</td>
<td>Leadership Development</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Nicole Buza</td>
<td>Leadership Development</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Rebecca Matthews</td>
<td>Patient Safety</td>
<td>P.A.C.E.</td>
<td></td>
</tr>
<tr>
<td>Marionette Cortez</td>
<td>Patient Safety</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Minh Kosfield</td>
<td>Product Development</td>
<td></td>
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</tr>
<tr>
<td>Tasia Hilton</td>
<td>Promotion of the Profession</td>
<td>By-laws</td>
<td>Product Development</td>
</tr>
<tr>
<td>Andrew Jones</td>
<td>Promotion of the Profession</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Holly Mitzel</td>
<td>Promotion of the Profession</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Debora Ardis</td>
<td>Promotion of the Profession</td>
<td>Political Action Committee</td>
<td></td>
</tr>
</tbody>
</table>

Ayes – 15    Nays – 0

Motion #22: (7/7/17)
Rodahl moves that the ASCLS Board of Directors approve the appointment of Cathy Otto as Chair and Lezlee Koch as Vice-Chair of the Patient Safety Committee.

Ayes – 15    Nays – 0

Motion #23: (7/7/17)
Rodahl moves that the ASCLS Board of Directors approve the following people as Special Advisor’s to the P.A.C.E Committee:

- Suzanne Butch
- Farogh Nazari
- Alese Furnald
- James March Mistler

Ayes – 15    Nays – 0
<table>
<thead>
<tr>
<th>Items of Concern:</th>
</tr>
</thead>
<tbody>
<tr>
<td>None</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Request for Action:</th>
</tr>
</thead>
<tbody>
<tr>
<td>I move that the ASCLS Board of Directors accept the email motions as read into the record.</td>
</tr>
</tbody>
</table>
### REPORTS TO:
Board of Directors

### REPORT OF:
President-Elect

### SUBMITTED FOR:
2017 Annual Meeting Board Report

### PREPARED BY:
Deb Rodahl, ASCLS President-Elect

### DATE:
June 27, 2017

## Activities of the President Elect
- Attended Finance Committee 3/17/17
- Attended Planning Day 3/18/17
- Attended Interim BOD meeting 3/19/17
- Participated in Legislative Symposium 3/20 – 3/21
- Participated in BOD call on 4/26/17
- Participated in BOD call on 5/25/17
- Attended monthly 3P conference call meetings
- Joined weekly President call in April
- Updated President-Elect Manual to capture new processes that have been implemented this year
- Planning for national meeting activities
  - Participated in process to establish some orientation sessions to be posted on ASCLS Web Site
  - President Elect Seminar
  - Committee Chair Seminar
  - President’s acceptance speech

## Items of Concern:
None

## Request for Action:
None
Systems:

- **Learning Management System:** Since launch in the fall of 2016, we have had 739 users of some element of the system. There are currently 49 courses that are live or are in the process of being re-authored from the old CACMLE LMS. In addition, ASCLS will likely host 13 live webinars during 2017, including the Grand Rounds in Microbiology series. Educators were one group that extensively used the old CACMLE system. We anticipate new features scheduled to rollout later this year will be helpful to serving that group of customers.

- **Member Management:** The Timberlake System continues to function well. Timberlake is evolving to allow for easy and seamless integration with best-in-class third party applications for broadcast email, virtual storefronts, and other services that the staff is looking forward to exploring. We anticipate that this will be a significant improvement to the system.

- **Connect.ASCLS.org:** Traffic to the ASCLS Connect site continues to grow and committees are utilizing the platform effectively. In addition to new tools we anticipate rolling out in the next few months around collaboration, sharing of documents and group editing of documents, the platform has a number of existing tools that we are just now beginning to understand. One of those tools can be put to use for onboarding new ASCLS members. One line of discussion at Planning Day in March was making sure our onboarding of new members was such that we increase our overall retention. We are working on a series of 6-7 automated and personalized emails that will be sent to each new member at weekly intervals when they join the Society.

- **Volunteer Opportunities Module:** The new module was utilized successfully during the volunteer appointment process for the next association year. Utilizing the system for regional and even state opportunities is planned for the coming year.

- **Communications:** *ASCLS Today’s* electronic version has launched as well as a new structure for storing *ASCLS Today* stories on the website. The newsletter now has a permanent home on the ASCLS website where individual articles or the entire edition can be shared more easily via email or social media. All submitted content will be published in electronic and printed formats as our backlog is published.

Based on our website data, social media platforms are supplying a growing percentage of traffic and interest in ASCLS programs. Along with broadcast emails,
the platforms allow for us to reach audiences we would otherwise miss, target relatively inexpensive advertising campaigns, and gather feedback from our audiences on programs themselves. In late June, when ASCLS passed 15,000 people liking our Facebook page, it was a milestone for growth. In just a few short years, the Facebook audience has grown by 50%.

- **Migration of Journal to New Platform:** The transition to the Highwire platform for *Clinical Laboratory Science* has begun with planning for the build-out of the new journal and abstract submission platforms and mapping out the timeline for transition. Launch is anticipated during Fall 2017.

**Strategy:**

- **Government Affairs:** It has been a challenging Spring and early Summer in Washington. The intentional disruption within agencies has commenced. This has created difficulties in trying to predict how key, regulatory issues will play out. There is growing pessimism that CMS will agree to delay implementation of the PAMA law despite the requests of the entire laboratory community. ASCLS and other laboratory groups recognize that the key challenge is the law itself, which limits any improvements that could be undertaken at the administrative level. ASCLS and others have raised concern with CMS for the last year that the applicable laboratory definition used by CMS is excluding significant portions of the market that are likely to include the highest private payor rates. CMS has essentially said, “that’s not a bug, that’s a feature.”

The laboratory community now waits to see what CMS decides. The agency claims that half of all independent labs and 95% physicians labs are excluded from reporting, but they estimate those physician laboratories and independent laboratories for which applicable information must be reported account for 92 percent of CLFS spending on physician office laboratories and more than 99 percent of CLFS spending on independent laboratories. The HHS OIG reported last September that labs required to report their data are projected to be just five percent of all labs, but cover 69 percent of Medicare payments (based on 2015 data).

We will continue to monitor and be engaged in conversations with the rest of the laboratory community, but we may have to make a legislative push in the fall, once CMS has published the proposed rates and the weighted medians drawn from the data.

- **Membership:** Overall, membership remained strong this year. Paradoxically, while the total number of individuals is down about 5% compared to last year (all of that loss in Professional II and Student categories), membership dues revenue will end the year up 2.3%.

With the Society’s current membership management system, we are able to properly enforce the ASCLS policy that allows for pro-ration of dues for newly joining members,
but charges those who were members the previous year the amount of their renewal and maintains their join date. Renewals are not pro-rated in the same way new members joining.

Pricing and packages for managers and educators were tweaked to generate more revenue and align value to cost. This has resulted in greater utilization.

Changes were also made to the incentive ASCLS provides to each person who passes the Board of Certification MLS or MLT exam. In the past, ASCLS provided a free membership incentive. This led to some dissatisfaction among those who were already members. As an alternative, ASCLS now provides a 50% off coupon that can be used to join or renew membership at the next renewal cycle. The number of New Professional members this year is almost exactly the same as last year.

- **Strengthening Constituent Groups:** The process of determining the winners of the membership awards this year provided some interesting data when comparing the winners to those constituent groups with less success. There were significant, and sometimes dramatic differences, between constituent groups. This is just one example of how strengths of the constituent organizations directly impact the strength of the national organization. One new initiative to address this concern is the Constituent Leader Institute.

  Arising from the board’s discussions at Planning Day in March about how to perform orientation more effectively, the Institute will be a hybrid online/live constituent leader education program that seeks to efficiently deliver critical, tactical information and provide a dynamic environment for networking and peer-to-peer learning.

  The live Presidents-Elect Orientation will be changed to the “Constituent Leader Symposium,” a live, peer-to-peer learning experience open to all current and future constituent society leaders. All constituent leaders will be invited to participate and also complete a series of online modules that focus on general administrative subjects and orientation to ASCLS structure and strategy as well as general principals and best practices on key subjects like meeting/education planning, membership recruitment, and marketing and communication. In addition to the presentations, references and other tools will be provided within the modules. Those references and other tools will also be stored in the ASCLS Connect Resource Libraries.

- **Annual Meeting/Education:** As we transfer the remaining courses hosted on the old CACMLE system to the ASCLS LMS, focus is changing to new, ASCLS-developed content. Interest in virtual learning is growing and allows ASCLS to reach a much broader audience than it can reach with live events alone. At this year’s annual meeting, we will be experimenting with two ways to extend the live experience to a virtual audience. We will attempt to broadcast the opening general session live on Facebook. We will also be recording of all our annual meeting presentations in sync
with the slides so they can be made available later, through the LMS, to the thousands of members and non-member laboratorians unable to attend the meeting. We are overcoming some technical/cost obstacles, but I’m fairly positive we will be able to pull it off this year.

- **Business Opportunities:** With the dissolution of Advance Publishing earlier this year, several new business opportunities have presented themselves. One of those is a need within industry to train laboratorians on technical issues. BD sponsored the first of what is hoped will be a series of webcasts. The webinar focusing on chromogenic media attracted nearly 500 registrants.

### Activities:

- **Staff retreat:** Staff extended their stay in March after the Planning Day/Legislative Conference for meetings Neosystems in McLean, Virginia. The meeting allowed us to quickly address the items identified at Planning Day, and is part of our effort to ensure we spend planning time face-to-face at least twice a year. The next staff retreat will occur following the AMSC/Executive Committee meeting in Chicago in September.

- **CDC:** In June, I represented ASCLS, along with other clinical laboratory and public health laboratory organizations in a Centers for Disease Control and Prevention’s (CDC) Division of Laboratory Systems (DLS) convened meeting to strengthen relationships and communications for laboratory emergency preparedness and response. At this strategic partnership meeting, participants initiated discussions on the importance of public-private partnerships among the laboratory community, the significance of just-in-time communication from CDC’s Laboratory Outreach Communication System (LOCS), the challenges of standardized electronic reporting of results, and the needs of the clinical laboratories for enhancing biosafety.

- **Meeting with other Lab Groups:** Significant amounts of time have been spent this Spring coordinating with other laboratory organizations both within formal partnerships (like the Board of Certification) and informally on areas of mutual interest like federal legislation and regulation.

### Items of Concern: None

### Request for Action: None
Staff Liaison to:
- Membership Committee, P.A.C.E.® Committee, New Ideas Factory Task Force, NPNMF, and Student Forum

Ongoing activities
- Coordinate Self Studies and P.A.C.E. applications
- Regularly attend conference calls for the above-named committees.
- Process membership roster requests
- Work with Kaitlin Prindle from Neosystems with membership related topics and information
- Work with Karrie Hovis to bring CE opportunities to ASCLS members which includes helping with the conversion of the CACMLE courses
- Revise web pages for the committees I am liaison to.

Membership Packages

Basic Package Info

<table>
<thead>
<tr>
<th>Year</th>
<th>Total</th>
<th>Educator</th>
<th>Manager</th>
<th>PF1</th>
<th>STU</th>
<th>Total</th>
<th>Package Non-renewals</th>
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<td>2015-16</td>
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<tr>
<td>2017-18</td>
<td>37*</td>
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<td>3</td>
<td>*</td>
<td>*</td>
<td>*</td>
<td>N/A</td>
</tr>
</tbody>
</table>

* Most packages have not been invoiced or invoices are pending. Payment received on 7 packages to date.

Package Free Meeting Registration Data

<table>
<thead>
<tr>
<th>Year</th>
<th>Total Free Registrations</th>
<th>Total Used</th>
<th>Used for CLEC</th>
<th>Used for AM</th>
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<tbody>
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<td>2016-17</td>
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<td>74</td>
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</tr>
<tr>
<td>2017-18</td>
<td></td>
<td></td>
<td></td>
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</tr>
</tbody>
</table>

Lab Manager's Packages

Membership Renewal 2017-18
- Email and Facebook campaigns began 5/18/17
- The first paper renewal mailer hit mailboxes at the end of June
- A second mailer will go out at the same time as Annual Meeting.

Other Membership Activities
- Working with the Membership Committee towards 2016-17 charges
Travel Tech survey was conducted, but only 1 valid response was received
- Working with the committee to develop a proposal for a new membership structure which will emphasize a value-based membership model.
  - Draft model submitted to BOD for comment and consideration
- Added new communities to connect.ascls.org that are more personal in nature to expand the community usage by our members.
- Will work with all ASCLS staff on developing a 2017-18 membership renewal strategy.

P.A.C.E.® related activities
- Reviewed Quarterly Activity Reports as received for each Quarter
- Worked on developing an online survey for live events that will give CE Organizer codes to the attendees at the end of the survey rather than announcing them at the end of each session. This was debuted at CLEC 2017 with success.
- Processed 2017 CLEC P.A.C.E.®
- We still have some outstanding 2017 invoices and I am working towards collecting on the remainder.
- Moved the self-study assigning process to the P.A.C.E. Committee community with great success.
- Upcoming activities:
  - Continue to work on P.A.C.E. manual updates

P.A.C.E.® providers (Providers are on calendar year):

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<tbody>
<tr>
<td>Annual providers</td>
<td>227</td>
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<tr>
<td>Single providers</td>
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<td>40</td>
<td>45</td>
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<tr>
<td>Total Providers</td>
<td>242</td>
<td>258</td>
<td>263</td>
<td>263</td>
<td>238</td>
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CE Organizer
- The overhaul for CE Organizer is complete.
  - Integrating our membership software system with CE Organizer properly has caused issues on the side of the end users due to duplicate accounts.
  - We are still working through minor bugs, but the rate we find bugs has slowed down considerably.
  - Added capability to upload non-ASCLS P.A.C.E. certificates by end users.
- We are working on adding non-ASCLS providers to CE Organizer.
  - Digital Hill (site developers) are having an issue getting the P.A.C.E. seal to be on the certificates

NPNMF and Students
- Worked with both forums on their scholarship applications. Each awarded Leg Day Scholarships and AM scholarships.
- The Lab Week Run was again very successful and we anticipate further growth next year.

See the specific committee reports for other specific committee updates.
Activities of the Professional Development and Project Management Department:

CACMLE Course Migration:
35 of 200 courses have been created in Path.
- 11 courses are available for purchase
- 5 courses are being updated by staff at Bio-Rad and unavailable for purchase; courses were sponsored by Bio-Rad
- 7 courses are under P.A.C.E.® Review
- 12 courses are under construction in Path

PDC Courses:
- Effective Data-Driven Presentations for the Laboratory Professional – under P.A.C.E.® Review; will be available in Path
- Lamellar Body Counts - under P.A.C.E.® Review; will be available on ASCLS CE
- Molecular Testing in Blood Bank – currently available on ASCLS CE

CEPI Courses for the new Medical Laboratory Educator’s Professional Development Institute (all under development in Path):
- Writing Instructional Objectives – Part 1: The Quick Start Guide
- How to Write Learning Objectives - Advanced
- How to Write Multiple Choice Exam Questions
- Writing and Using Rubrics
- The Affective Domain in Laboratory Education

ASCLS CE:
Sales have been steady on ASCLS CE, our collaborative CE website. Since August 2016, we have grossed almost $6500 in revenue. We have added 2 P.A.C.E.® providers as partners: Center for Phlebotomy Education and MedTech ExPress Continuing Education.

Entry Level Curriculum (ELC) Update:
Launched in the ASCLS online store January 2017, sales continue to be strong for this resource (almost $12,000 in revenue to date). Four roundtable sessions were offered at CLEC and via the post-CLEC roundtable series to discuss updates to appropriate section. Education session was also proposed for CLEC 2018 to discuss uses of the ELC.

Clinical Lab Investigations (CLI) - Case Studies for the Laboratory Professional:
We are continuing to add to our library. Three new cases have been added since July 2016. However, we need more submissions from all discipline areas. Author submission guidelines are available at www.ascls.org/CLI.

PPC Conversations Project:
- Launched the campaign “On the Road to Understanding.”
- The purpose of this campaign is to give laboratory professionals an opportunity to share stories about their impact on patient safety.
- Our goal is to receive 2080 submissions by July 30, 2018.

New Professional / New Member and Student Travel Grant Program:
Coordinated efforts between Beckman Coulter, Student Forum, New Professional and New Member Forum, Diversity Advocacy Council, selection committee, applicants and grant recipients; view this year’s recipients at www.ascls.org/AnnualMeeting.

ASCLS & APHL Webinars:
APHL announced plans to discontinue their webinar series, thus cancelling the webinar series held in conjunction with ASCLS.

Annual Meeting Abstract Review:
Coordinated the professional, graduate student and undergraduate student abstract review process. For undergraduate abstracts, we had 12 submissions with 9 being accepted for poster presentation. For the graduate student and professional abstracts, we had 29 submissions with 18 accepted for poster presentation and 5 accepted for oral presentation.

Member Renewal Thank You:
ASCLS members who joined or renewed their membership by September 1, 2016 were offered a “Member Thank You” gift of up to 6 free online quizzes to assist with their CE requirements. ASCLS CE materials provided by ASCLS were offered.
- Of 2850 eligible members, 87 members used the coupon code (MTY2016) for a 3% response rate (2016 – 0.5%, 2015 – 7.7%; 2014 – 5.9% response; 2013-5.4% response; 2012 – 4.5% response; 2011 – 4.5% response; 2010 – 3% response).
- This offer will be repeated in 2017-18 for PF1, PF2 & FYP members if renewed by 9/1/2017. Renewed members will be emailed with information in September 2017. Courses will be accessed via asclsce.org. Information is available at http://ascls.org/membership/benefits.

Certification Maintenance Membership:
ASCLS partners with MediaLab, Inc. to assist ASCLS members and nonmembers with their recertification CE requirements.
- When members renew, or join, they are able to select a Certification Maintenance 12 Hour (CM12) and get 12 hours of P.A.C.E.® approved online continuing education for only $45 for a one year subscription that includes designated discipline hours required for the BOC’s CMP; the fee is in addition to national and state dues. This special offer is available to ASCLS members only.
- An upgrade to a Certification Maintenance Unlimited (CMU) is also available to access unlimited hours of online courses with the ability to select courses for $85 plus national and state dues for a one-year subscription. Available to ASCLS members only.
- With the launch of asclsce.org, CE credits from the CMM and CMMP packages are transferred to CE Organizer and subsequently to the BOC.
- Both packages can also be purchased on the ASCLS CE website.
- For the 2016-17 year, 314 customers ordered, 197 CM12/CMM and 117 CMU/CMMP (2016 - 284 customers ordered, 187 CM12/CMM and 97 CMU/CMMP; 2015 – 249 members ordered, 173 CMM and 70 CMMP; 2014 - 269 members ordered, 179 CMM and 90 CMMP; 2013 – 409 members ordered, 263 CMM and 146 CMMP; 2012 – 452 members ordered; 297 CMM and 155 CMMP; 2011 - 327 members ordered; 222 CMM and 105 CMMP)
- The information about this offer is available at http://www.ascls.org/CMM. So far 106 have signed up for the 2017-18 year.

Clinical Laboratory Educators’ Conference (CLEC) 2018:
The 34th annual CLEC will take place February 22-24 in Houston, TX. Abstracts for posters or technology demonstrations are being accepted online at http://www.ascls.org/CLEC. The deadline for submission of abstracts is October 2, 2017.

Call for Proposals – 2018 Annual Meeting:
The deadline to submit a proposal submission for 2018 Annual Meeting is August 11, 2017. Visit www.ascls.org/annualmeeting for more information. The 2018 Annual Meeting will be held July 30 - August 2 in Chicago, IL.

Items of Concern: None

Request for Action: None
Activities of the Region Director

*Participated in Interim Board of Directors Meeting and Legislative Symposium
*Served as General Chairperson for the CNE Annual Convention, held from May 9-11, 2017
*Communicated (ongoing) with CT membership to facilitate nominations and elections
*Participated in Board of Director’s Check-in calls
*Communicated with ASCLS-VT members to begin merger with CNE
*Attended hearings at RI State House and testified before House and Senate Committees to Re-instate RI Professional License for Medical Laboratory Scientists. Wrote several letters to legislature in support.
*Held Region I Conference Call in April
*Conducted nominations for Region I “One in I “ Award

Items of Concern:

None
**Request for Action:**
None

### State Reports

<table>
<thead>
<tr>
<th>ASCLS - CNE</th>
<th>BY: Brandon Healy Waldron</th>
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<tbody>
<tr>
<td><strong>Leg Day</strong> - Members from ASCLS-CNE met with their representatives form both Massachusetts and Rhode Island and both states received positive words but also comments about the inaction that will plague this Congress.</td>
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<tr>
<td><strong>CLEC Boston was a great success!</strong></td>
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<td><strong>ASCLS-CNE Annual Meeting on May 9th, 10th, and 11th was well attended and the planning committee did a great job finding speakers and vendors that made the meeting enjoyable for all that attended.</strong></td>
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<td><strong>New Officers have been chosen and will begin their terms at the Annual Meeting in San Diego.</strong></td>
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<td><strong>Currently working to reintroduce licensure law in Rhode Island.</strong></td>
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**Items of Concern:**
None

**Request for Action:**
None

### ASCLS – NY

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<thead>
<tr>
<th><strong>BY: Tess Latuso</strong></th>
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<tr>
<td><strong>Developed online registration for the state spring seminar</strong></td>
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<td><strong>Participated as an organization for the second year in a row in a charity run/walk</strong></td>
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<td><strong>Called for revision of state C and B</strong></td>
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<td><strong>Revitalized Facebook page and utilized “boosts” for advertising of state seminar</strong></td>
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<tr>
<td><strong>Updated website as needed</strong></td>
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**Items of Concern:**
None
Preparing for the North East Laboratory Conference (NELC), held in October in Portland, Maine. The committees have elected to move to web-based host to organize sponsors, speakers, topics, and more.

Revising the ASCLS scholarship after repetitive low application volume. Intend to make the application process less intensive, and members would like to use the NELC as an opportunity to market the scholarship to students for 2018.

Discussion around the Annual Conference; Carrie Knapp will attend as the Maine representative. Plan to also use the NELC as an opportunity to market to the New Professional group, potential to fund New Professional trip to the annual meeting for 2018.

The board agreed to increase frequency of meetings via conference call every 4-8 weeks.
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<tr>
<th>REPORTS TO:</th>
<th>ASCLS Board of Directors</th>
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<tr>
<td>REPORT OF:</td>
<td>ASCLS Region II Director</td>
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<tr>
<td>SUBMITTED FOR:</td>
<td>ASCLS Annual Board Meeting</td>
</tr>
<tr>
<td>PREPARED BY:</td>
<td>Nadine Fydryszewski – Region II Director</td>
</tr>
<tr>
<td>DATE:</td>
<td>June 29, 2017</td>
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**ACTIVITIES OF THE REGION II DIRECTOR (March 1 – June 29):**

- Communicated regularly with the Region II Leadership Council and responded to ASCLS requests for information and/or electronic votes.
- Worked with Capital Area Reactivation Team and ASCLS to finalize reinstatement of their society charter.
- Communicated regularly with assigned new BOD member Holly Weinberg as her “Board Buddy” (conf call & email))
- March 2 - participated in Awards Committee meeting (conf call)
- March 9 - participated in Appointments Committee meeting (conf call)
- March 18 - participated in ASCLS BOD Planning Day
- March 19 – participated in ASCLS Interim BOD Meeting- Alexandria VA.
- March 20-21 – attended ASCLS Legislative Symposium
- March 24- participated in SMLTA/CDC Task Force meeting (conf call)
- March 28- moderated Region II Leadership Council Meeting ( conf call)
- March 30 – participated in APRC Training Session
- March 30 - participated in Awards Committee meeting (conf call)
- April 3 – attended ASCLS Webinar Training for using Zoom for online presentations
- April 7 – presented ELC-Micro Webinar via Zoom for those who did not attend CLEC
- April 11- participated in SMLTA/CDC Task Force meeting (conf call)
- April 12 – participated in Region II Leadership Academy Task Force meeting(conf call)
- April 20 – attended ASCLS-NJ Spring Seminar
- April 25 - moderated Region II Leadership Council Meeting (conf call)
- April 26- attended ASCLS-BOD Updated meeting (via Zoom)
- April 27 - participated in Awards Committee meeting (conf call)
- May 9 - participated in SMLTA/CDC Task Force meeting (conf call)
- May 10 – participated in Region II Finance Committee meeting
- May 25 - 6PM participated in Awards Committee meeting (conf call 6PM)
- May 25 - 8PM participated in ASCLS-BOD Update meeting (conf call)
- May 30 - participated in Region II Leadership Academy Task Force meeting(conf call)
- June 20 - moderated Region II Leadership Council Meeting (conf call)

**Region II Leadership Academy (LA) Task Force**

The Region II Leadership Academy Task Force members are Julie Bayer-Vile (Chair), Mary Ann McLane and Stephanie Noblit. The team worked diligently on curriculum development, identifying presenters, developing marketing materials, and the application/selection process. The goals of the LA Task Force and anticipated outcome is the preparation and development of members to serve in leadership roles in ASCLS at the state, regional and national level, as well
as enhancing leadership skills that can apply to their professional and personal aspirations. Applications will open this summer, with the first class beginning in September 2017. Moving forward, the LA Task Force will be added to the Region as a Region II committee. In June 2017, Catherine Otto assumed the Chair position with Julie, Mary Ann and Stephanie continuing as committee members. The Region II Leadership and members acknowledge and appreciate the efforts of the LA Task Force, and look forward to the first class beginning in Fall 2017.

REGION II CONSTITUENT STATE SOCIETY REPORTS

ASCLS-DE: Pres. Mary Ann McLane

Activities:
1. Participation in the monthly Region II conference calls
2. Sponsoring a raffle contest with the prize being $100 for renewing before 4 different dates. Winner will be announced at the first fall ASCLS-DE dinner meeting.
3. Board meetings held 2/11/17, 3/7/17, 6/19/17
4. Twelve (12) “from the ASCLS-DE President” notices sent out on the following:
   a. “Save the date” for dinner meeting schedules
   b. Con ed opportunities, webcasts
   c. Employment position alerts
   d. GAC alert about PAMA
   e. ASCLS committee service opportunities
   f. Supported Food Bank of Delaware’s “barbecue” at their new location in Newark on May 18. Non-perishable donations since February = 116 lbs.
   g. Plans for LabWeek2017 and ASCLS for supplies
   h. Solicited stories for the “Day In The Life” component of the LabCareers.com project.
6. Mary Ann McLane took 3 University of Delaware students to the 2017 Legislative Symposium
8. Governor’s signed proclamations for MLPW (better late than never!)
9. Held an informal run/walk for MLPW as a part of the “Virtual Run”, with 5 participating that we know of.
10. Seven ASCLS-DE members participated in a cholesterol/glucose screening at Bethel AME Church, testing 98 parishioners, including one gentleman with glucose over 500!
11. Mary Ann McLane participated in the University of Delaware Wellness Center’s healthfair screening for a local manufacturing company’s staff, testing 75 workers
12. Nominated Alexa Pierce-Matlack for an Annual Meeting Travel Grant and for the “Voices Under Forty” recognition
14. Submitted ASCLS-DE bylaws to the national committee as requested.
15. Have discontinued the ASCLS-DE website and will place more emphasis on our Facebook page.

Upcoming Activities
1. Monthly board meetings
2. Promoting the “Conversations Campaign” from the promotion of the profession
Committee
3. Plans for a formal walk (with sponsors and much more publicity) for MLPW 2018
4. Sending three (3) delegates to the annual meeting.
5. Investigating working with ASCLS-MD and KEYPOCC for continuing education opportunities.
6. Alexa Pierce-Matlack is still working on development of a Girl Scout badge for MLS

**ASCLS-PA: Pres. Jean Buchenhorst**

**Activities:**
- The **2017 Annual Spring Meeting and Exhibits** was held May 8, 2017 in Plymouth Meeting, PA - Large number of vendors, profitable meeting!
- Philadelphia Science Fair Booth successful—many visitors
- Student Review session – 60 attendees, very successful!
- ASCLS-PA Education Scientific Assembly meeting will be held at Reading Area Community College with a call in number provided
- Fall, winter and spring newsletters published, working on summer edition
- Awards – Three Key to the Future awards were given, five Keener Memorial Service Awards, one Corporate Recognition award and one Undergraduate Scholarship Award
- Elections held, all offices filled (Student representative pending)

**ASCLS-NJ: Pres. Kahul Patel**

**Activities:**
- Activities of the Constituent Society
- Monthly Board Meetings
- Participation in the monthly Region II conference calls
- Active on Facebook, connection ASCLS-NJ members and student members through social media promoting our profession including employment position alerts.
- Spring Seminar April 20th 2017.
- Pinned Rebecca Nemeh as incoming president and elected president elect from the floor (HOD Meeting) Michael de La Guardia.
- Provide P.A.C.E- approved continuing education events for lab professionals in New Jersey.
- Increase society members by 10%/ Each One Recruit One.
- Saturday, June 17th, 9:30am-1:30pm – Leadership Meeting Ridgefield Park NJ
- Tuesday June 20th speak at Newark Campus: School of health Profession: Rutgers to the new MLS class about ASCLS-NJ.

**ASCLS-VA: Pres. Natalie Case**

**Activities:**
- Annual state meeting was held in Charlottesville, VA on June 3, 2017 with a 28 attendees and 3 vendors.
- Fundraising efforts at the annual meeting helped raise $191.51
- We have received nominations for President-elect, treasurer, and secretary for 2018

**ASCLS-MD: Pres. Stacey Robinson**

**Goals for the year 2016-17**
1. Provide 3 PACE-approved continuing education events for professionals and students in Maryland.
2. Promote ASCLS membership packages by contacting state MLT/MLS programs and laboratories.
3. Communicate with ASCLS-MD membership through an e-newsletter that will be sent out a couple of weeks prior to each educational meeting.
4. Continue to use and improve upon the website.
5. Stabilize, and if possible, increase ASCLS-MD membership.
6. Increase active involvement among the membership including leadership positions.
7. Continue to collaborate with other organizations in the state, such as AMT, and also neighboring ASCLS constituent societies.

**Activities**

1. Our second CE event was held on Saturday, February 11th with ASCLS-DE at the University of Delaware. There were approximately 35 attendees which is a new record for one of our events. An ASCLS-MD Board meeting was held after the talks.
2. E-mail conversations have continued between MD board members and the President of KEYPOCC (Keystone Point of Care Coordinators) about the possibility of working together on a future event.
3. The MD Board has not had a formal meeting during this quarter.

**ASCLS-WV: Pres. Pam Meadows**

**Activities:**
- WVSCLS Board of Directors meeting via conference call held on April 11, 2017
- WVSCLS Bylaws were revised and submitted to national Bylaws Committee for approval.
- Student forum has been revived and procedure implemented for annual identification of student and new professional representative identification.
- Currently planning joint meeting with WVCLMA to be held in Charleston, WV on October 12-13, 2017
- BOD is currently discussing methods to increase membership and promote member involvement in state leadership.
- Election of 2017-2018 officers to conclude on 6/16. List of officers will be sent to regional director and nationals by 6/20.

**ASCLS-DC Capital Area: Pres. Carol Rentas**

1. ASCLS-DC website – we are finishing our website (domain www.ascls-dc.org) which will go live in June.
2. Membership – we are actively working on recruitment via email invitations through various local institutions.
3. Meetings
   - ASCLS-DC BOD meeting schedule: This group meets has been meeting every other week since January 2017.
   - Society meeting schedule: the first meeting of the full group will be planned for October 2017.

**Items of Concern:**

**DE:** Our members were very glad to get the first issue of ASCLS Today in March, but are still concerned since that was the only one received.

**NJ:** Membership increase and retention, Fundraising for ASCLS-NJ events and student
MD: Being a relatively small society with only a few active members, it is concerning that we have only received one issue of ASCLS Today this year. This makes us even less visible to our membership.

**Request for Action:**

**Region II:** The ASCLS Region II members move that the ASCLS Board of Directors communicate with the ASCLS general membership regarding the reasons for the lack of regular communication via *ASCLS-Today*, and as this newsletter is a member benefit, what are the reasons for not providing this membership benefit in 2016-2017.

**Region II:** The ASCLS Region II members move that the ASCLS Board of Directors along with Staff, develop and publish a Communication Plan for use going forward in communication with the various constituents: Board Members, Leadership, General Membership, and General Society as a whole.
Activities of the Region Director

- Participated in Board Conference Calls
- Reviewed minutes from assigned committees
- Attended Legislative Symposium
- Attended the BOD spring planning day
- Attended and presented at ASCLS-NC spring meeting
- Attended and presented at the ASCLS-MS/LA bi-state spring meeting
- Attended student bowl at Midlands Technical College and gave a short presentation to the students regarding the value of ASCLS membership
- Attended the ASCLS-SC board meeting regarding inactivity of the state. Provided guidance on state revitalization
- Attended and presented at ASCLS-TN spring meeting
- Finances remain strong in the region with income totaling $27,000.00 in all accounts.

Items of Concern:
1. Lack of leadership participation in South Carolina
2. Viability of South Carolina State Organization
3. Overall lack of succession planning in state societies

Request for Action:
None

State Reports

<table>
<thead>
<tr>
<th>ASCLS - Tennessee</th>
<th>BY: Hema D'souza</th>
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<tbody>
<tr>
<td>ASCLS-TN has been working hard on its membership and has reported an increase in membership from 118-147. They successfully organized and delivered a well-attended SP meeting May 2017 in Nashville, TN. They continue to renew commitment from industry leaders as supporters of the organization and are looking for ways to connect with the Memphis society.</td>
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<tr>
<td><strong>Items of Concern</strong></td>
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<tr>
<td>The Memphis society of Clinical Laboratory science (MSCLS) very active and hosts activities regularly for the members in that area. That needs to be evenly distributed across the Middle and East parts of TN which have no activities. This continues to be the area of concern.</td>
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<td>Request for Action:</td>
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<tr>
<th>ASCLS - Alabama</th>
<th>BY: Tera Webb</th>
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<tr>
<td>ASCLS-AL remains active communicating with their membership regularly and they hosted a successful triennial region III meeting in the fall which profited approx. $16,000.00.</td>
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<td><strong>Items of Concern:</strong></td>
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<tr>
<td>Membership; sustainability; succession planning</td>
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<td>Request for Action:</td>
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<tr>
<th>ASCLS - Georgia</th>
<th>BY: Crystal Bradley</th>
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<tr>
<td>ASCLS-GA hosted a successful meeting in April which profited $5000 and they held a silent auction raising $364 for Children's Healthcare of Atlanta Foundation.</td>
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<td><strong>Items of Concern:</strong></td>
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<tr>
<td>How to get people involved and attending meetings.</td>
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<td>Request for Action:</td>
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<tr>
<th>ASCLS – North Carolina</th>
<th>BY: Jesse Locklear</th>
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<tr>
<td>ASCLS-NC held their elections for leadership moving forward and have a full slate of leadership for the organization moving forward. They helped organize the CCC meeting in April in SC. The organization issues its second state newsletter (the filter paper) and submitted award nominations for student, NP, member of the year and keys to the future. The ASCLS-NC leadership has done an amazing job revitalizing the society.</td>
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<td><strong>Items of Concern:</strong></td>
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<td>Membership renewal for facility/educational groups changed to individual will impede student and employees joining our society due to new process.</td>
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<td>Request for Action:</td>
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<tr>
<th>ASCLS - Mississippi</th>
<th>BY: LaJuanda Portis</th>
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<tr>
<td>ASCLS-MS membership numbers remain strong at 188 (62 professionals, 13 FYP’s, and 113 students). ASCLS-MS recently elected a new slate of candidates for Mississippi with Jana Bagwell elected as the President-elect. They organized and delivered a successful spring meeting in April 2017 and have a summer board meeting scheduled for June 2017. 2 members (Rana Walley and Jana Bagwell) will be attending ASCLS Annual meeting in San Diego. The next spring meeting for the ASCLS MS/LA bi-state meeting is April 9-13, 2018 in Gulfport, MS at the Golden Nugget Casino and Hotel.</td>
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<tr>
<td><strong>Items of Concern:</strong></td>
<td>None</td>
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<td>Request for Action: None</td>
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<th>ASCLS - Florida</th>
<th>BY: Tripat Pal Kaur</th>
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<tr>
<td>ASCLS – South Carolina</td>
<td>BY: Fred Hornick</td>
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<td>No report provided</td>
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<th>ASCLS – Puerto Rico</th>
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### Activities of the Regional Director - Interim Board Meeting to June 2017

- Participated in March 18-19, 2017 ASCLS Interim Board Meeting, Washington, DC
- Participated in March 20-21, 2017 Legislative Symposium in Washington, DC
- Submitted Regional nominees for Omicron Sigma award.
- Communicated with State Presidents on timelines and how to submit nominations for national awards, i.e. Omicron Sigma, Lifetime Achievement and Key to Future Awards to ASCLS Awards committee.
- Submitted an article for ASCLS-MI Newsletter in commemoration of the 90th birthday of Martha Roulund, former Executive Secretary of the society.
- Attended ASCLS-IN state meeting, March 29030, 2017, Meeting held at Indiana University, first time in spring.
- Attended **ASCLS-MI** Annual Spring Convention April 19-21, 2017, Kalamazoo Radisson, Kalamazoo, MI
- Presented two Hematology lectures, *Nonmalignant Lymphocytic Disorders and Lymphocytes - You Can’t Always Believe What You See*, for ASCLS-MI spring meeting
- Attended ASCLS-MI Board meeting, April 19, 2017 and Membership meeting, April 20, 2017. Served as Parliamentarian for both meetings and provided ASCLS Update
- Attended the 2017 ASCLS-OH Collaborative Laboratory Conference in Columbus, OH, May 3-5, 2017, Columbus, OH
- Presented Update on Infectious mononucleosis, May 4, 2017 at **ASCLS-OH**
- Presented ASCLS Update at ASCLS-OH Board meeting and Membership meeting, Columbus, OH
- Participated in ASCLS Board Zoom meeting, May 25, 2017
- Conducted Region IV Council Meeting, May 10, 2017 with President Elect in attendance
- Attended ASCLS-MI Board meeting, June 17, 2017, at MSU
- Conducted Board Orientation ASCLS-MI, developed ASCLS Bylaw Jeopardy that was presented at Board meeting.
- Appointed Audit Committee for Region IV finances to report at August Region IV Caucus meeting

<table>
<thead>
<tr>
<th>REPORTS TO:</th>
<th>Board of Directors</th>
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</thead>
<tbody>
<tr>
<td>REPORT OF:</td>
<td>Director, Region IV</td>
</tr>
<tr>
<td>SUBMITTED FOR:</td>
<td>2017 Annual Meeting Board Report</td>
</tr>
<tr>
<td>PREPARED BY:</td>
<td>Roslyn McQueen, Ph.D., Region IV Director</td>
</tr>
<tr>
<td>DATE:</td>
<td>6-30-17</td>
</tr>
</tbody>
</table>
- Appointed Region IV Handbook update committee to report at August meeting
- Appointed chair for Region IV San Diego event
- Have mentored students and new professionals about the society and addressed questions and issues when presented.
- Will attend 2017 ASCLS Annual meeting in San Diego, CA, July 29 - August 3, 2017

**Committee Assignments:**
- Serving as Board liaison to 2016 PACE Committee
- Serving as Board liaison to DCLS. Participated in DCLS committee meetings
- Serving on Board liaison to Consumer Information
- Participating with Diversity Advocacy Forum

**Items of Concern:** None

**Request for Action:** None

## State Reports

<table>
<thead>
<tr>
<th>ASCLS - Michigan</th>
<th>BY: Kristina Martin</th>
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</table>

### Activities of the Constituent Society

#### Meetings/Social Events
- Annual State meeting in Kalamazoo, Michigan April 19-21, 2017
- Used free meeting app during spring meeting-considered successful and we plan to use it next year.
- Community Event-Fundraiser for Kalamazoo Habitat for Humanity
- Selection of Michigan delegates for San Diego

### GAC
- In Coordination with the Public Relations Committee visited state capital and met with representatives during NPLW along with obtaining proclamation from the Governor of Michigan for NPLW
- Delegation of 8 Members attended National Legislative Symposium and met with senators/representatives along with dropping off packets to districts where a member was not present.

### President Specific Activities
- Wrote articles for *Newslinks*
- Promoted events, awards and scholarships to email group and Facebook page
- Worked with webmaster to modify the ASCLS-Michigan webpage to create additional useful links of important information for members.
- Mentored ASCLS-Michigan President-Elect
- Pulled together ad hoc group to discuss general spring meeting operations and potential future enhancements.
- Presided over all BOD meetings
- Reviewed progress of strategic plan for ASCLS-Michigan with responsible parties

**Strategic Plan - [ASCLS-Michigan Strategic Plan](#)**

**Districts**
- Planning various social events for each district membership group (Brewery tours, Paint & Pour, visit to Detroit Zoo hospital, volunteering at a race)

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<tr>
<th>Items of Concern:</th>
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<tr>
<td>Request for Action:</td>
<td>None</td>
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<thead>
<tr>
<th><strong>ASCLS – OH</strong></th>
<th><strong>BY:</strong> Laura Hook-Woods, President</th>
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<tbody>
<tr>
<td><strong>Activities of the Committee or Affiliated Organizations</strong></td>
<td></td>
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<tr>
<td>- Successful spring meeting with CLMA and AACC with over 300 attendees and over 20 vendors. We had a fundraiser for the Cystic Fibrosis Foundation and raised $565.</td>
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<tr>
<td>- Held the spring board meeting and member business meeting at the conference. Elected a President-Elect, Secretary, Two Junior Board Directors, and One Senior Director. Lots of new faces will be on the BOD next year.</td>
<td></td>
</tr>
<tr>
<td>- Multiple members stepped forward expressing interest in becoming more involved on committees. I will contact the interested members after the National conference when the new board steps in. We will have a daylong workshop and will be working on new strategies to retain membership and promote the profession at the state level.</td>
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<tr>
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<tr>
<th><strong>KSCLS</strong></th>
<th><strong>BY:</strong> Jane Eubanks</th>
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<tbody>
<tr>
<td><strong>KSCLS Activity:</strong></td>
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<tr>
<td>- KSCLS held its spring board meeting on May 22, 2017 in Lexington, Ky. The spring board meeting consisted of routine reports, updates regarding the 2016 KSCLS annual meeting and a brief discussion regarding the 2017 annual meeting.</td>
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<tr>
<td>- The fall meeting was discussed regarding date, speakers, vendor contributions and location. It will be at IWU campus in October.</td>
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<tr>
<td>- Beth Warning was elected President of the KSCLS.</td>
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<tr>
<td>- Jane Eubanks was elected to a two-year term for secretary. The board members were selected.</td>
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</tbody>
</table>
The delegates to the Annual Meeting were selected: Linda Gorman, Phil Campbell, Kim Campbell, and Student Rep Mark Campbell.

Four Kentucky representatives attended Legislature Day in March.

We have received no invoice from Keith Communication for web services. We need to evaluate our website. Review of By-Laws.

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<tr>
<td>Request for Action:</td>
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<thead>
<tr>
<th>ASCLS - IN</th>
<th>BY: Nicholas Brehl</th>
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<tbody>
<tr>
<td>Activities of the Constituent Society</td>
<td></td>
</tr>
<tr>
<td>- ASCLS-IN Meeting 2017</td>
<td></td>
</tr>
<tr>
<td>a. Meeting a success with $5,678.26 in profit. In recent years we were only breaking even.</td>
<td></td>
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<tr>
<td>b. Will continue meeting at IUPUI Student Center</td>
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<tr>
<td>c. Record attendance at social event the night before</td>
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<tr>
<td>- ASCLS-IN Meeting 2018</td>
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<tr>
<td>- Tentative ASCLS-IN meeting set for 3/30/17</td>
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<tr>
<td>- Indiana’s Government Affairs chair, Darrell Harrington passed away. His position is carried on by Janet Naas.</td>
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<tr>
<td>- Long time treasurer Max Daniels stepped down, his position is being filled by Donna Swank Rudiger</td>
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<tr>
<td>- President Elect starting July 2018 is Daniella McCurdy</td>
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| Items of Concern: |
| Students who passed the BOC are no longer being allowed a free one year membership. We thought this initiative was great because it allows students who are excited about the profession to get involved in ASCLS early. It is an uphill battle to recruit them later. |

| Request for Action: | None |
Regional Director Activities since February, 2017

- Participated in Product Development Conference Calls
- Submitted a list of important items with supporting bullet points to IFBLS regarding the use of Medical Devices, for WHO World Congress in Geneva.
- Attended ASCLS-SD Spring meeting in April, Mitchell SD.
  - Presented a Regional/National Update to Membership
- Attended ASCLS-ND spring meeting in April, Grand Forks ND.
  - Presented a Regional/National Update to Membership
  - Presented closing Keynote: Professional Development, Networking and Success!
- Participated in two Update Optional Board Calls.
- Attended Interim Board Meeting
- Attended ASCLS Legislative Symposium
- **Region V Activities:**
  - Held Region V President’s Council meetings March, May.
  - Participated in Region V Leadership Academy meetings as needed.
  - Participated in Region V Spring Leadership Retreat, Perham MN
    - Presented Strategic Planning Module
  - Participated in Region V Symposium conference calls for 2017 meeting
  - Assist in the maintenance of the New Region V Website
  - Signed contract in MN for Region V Symposium 2018.
  - Great communication continues between membership committee, government affairs committee, leadership development committee in the Region.

Items of Concern:
None

Request for Action:
None

State Reports

**ASCLS - MN**

BY: Sue Iddings, President

- The ASCLS-MN Area Directors/committees provided a total of 7 educational sessions in 3 of the seven areas of our state over the last year. Notably, a very successful student night and Fall/Spring event in the Central area, and successful Metro student night and Metro Area events. The membership committee also put on a successful
student event in the metro area and an interview night for students at the University of Minn. in April.

- Board Members will again have a booth at the Minnesota Science Teachers symposium in November in St. Cloud, MN (fourth year for ASCLS-MN participation), talking with science teachers about career paths for students in the lab field.
- The ASCLS MN Bylaws were revised and updated to reflect the new five geographical areas and current wording for Membership. The Board and Membership overwhelmingly approved on May 4th, 2017.
- The Annual 2017 Spring Clinical Laboratory Collaborative was held in Duluth, MN. This collaboration of eight professional societies - with ASCLS-MN members very much involved in the planning - was successful, educational, and well attended. The event also included a charity fundraiser for the Damiano Center of Minnesota. The Damiano Center provides emergency services to those in need, in the upper NE-Duluth Area.
- The Silent Auction held at the collaborative meeting was also a huge success, with monies raised supporting the Elizabeth Panning Medical Laboratory Science Scholarship fund.
- The annual membership meeting was also held during the CLC with election of officers and delegates to the national meeting, numerous awards presented, Committee/Regional/National reports presented, and approval of the 2017-18 budget.
- ASCLS MN, with the help of Rick Panning, purchased a new Banner for our booth, so it can be used at any venue in the future, representing diverse members of our profession.
- The 2018 CLC Meeting will be held April 23-25, at the Earle Brown Center in Mpls., Minn.
- Three board meetings were held throughout the year - fall, winter and spring - as well as an initial strategic planning meeting late summer of 2016.
- The new ASCLS MN Website was introduced and well received & enjoyed. Jenna Pruitt is the Webmaster, and is receiving an Award at the National Convention. We also had an e-Laborate newsletter available in the Winter.
- Final preparations were made and contracts signed for fourth annual Region V leadership academy at the Region V Symposium - Fall 2017. Multiple MN members committed much time and effort in developing the program and volunteering to move the academy forward. Jenna Pruitt from Minnesota will be graduating from this year’s class.
- The ASCLS-MN Membership committee continued its great progress this year, holding numerous meetings and participation in many student and education events in the Metro area. The membership committee also held a membership calling drive for lapsed members. The mentorship program is also still in place, though more participation is desired.
- MN SFC and FYP board members were very active at the state, region and national levels and were nominated for national awards.
- A focus on leadership continues, including directorship for our 5 new areas within the state. We did struggle in some areas this year, but hope to fill holes in the Area Director positions moving forward in the next year with the change in Areas to the 5.
- ASCLS-MN had 7 members attend the Legislative Symposium in March, with great information presented to our representatives in Washington, DC. Take-aways’ were added to the Website so all members can see our ASCLS MN members at work in the legislation of our Health Care.
- Minnesota Licensure update: has been placed on hold, until the national election was finished, in 2016. We will review this next fall.
- Finances for ASCLS-MN continue to be positive.
- All of the forms and procedures were put in electronic format, so that they accessible to everyone at any time. All have been put on the new Website.

**Items of Concern:**
None

**Request for Action:**
None

### ASCLS - ND

**BY:** Sharon Reistad, President

- ASCLS-held their spring meeting on April 24-25, 2017. We had a good turnout. We also had the Bone Marrow program set up for people to be tested and put on the national donor program. It was a success.
- **Legislative Days:** We had 2 representatives go-Muhammad Riji-Student Rep and Brooke Solberg-Pres. Elect. They said that it was a good time and they learned a lot.
- **Region V Symposium:** ND is the chair for exhibitor/sponsor and registration/publication. Brooke Solberg, Sharon Reistad and Alice Hawley are the ND rep’s for the meeting.
- **Membership**
  - We will start working on lapsed members Aug 1 after the renewal date has passed.
  - We are trying to encourage members to renew
  - Zac Lunak will be are new membership chair for the 2017-2018 year.
- **Nominations:** We held our elections at the state meeting. New Roster was submitted to National in June, 2017
- **Student Rep**- Our 2016-2017 student rep has put his application in for Region V Leadership Academy
- **New Professional**-No report
- **Region V Leadership Academy** – ND new board member for 2017-2019 will be Tammy Windish
  - Muhammad Riji has put his application to attend.

**Items of Concern:**
None

**Request for Action:**
None

### ASCLS - SD

**BY:** Jeff Kistler, President

- Election of officers was held at ASCLS-SD two-day spring meeting.
- President-elect resigned due to work commitments.
  - BOD appointed past president, Stacie Lansink to serve in the position until the new BOD becomes active in August.
- Working with National Bylaws committee on the process to change voting from face-to-face to electronic.
- Working on SOP regarding electronic communications and moving from Google list serve to using the National ASCLS-SD Member community.
- ASCLS-SD has a delegation of 5 members attending the annual ASCLS/AACC Meeting in San Diego
- ASCLS-SD held the first two-day spring meeting in April and the meeting was successful; following transition from a previous fall meeting schedule.
  - Jennifer Keimig served as the spring meeting chair, and did a great job with coordinating speakers and membership to attend.
- Signed the CLMA agreement/contract for two years for the spring ASCLS/CLMA meeting
- ASCLS-SD is considering starting a South Dakota Legislative Days for the next year, in order to reach out to our South Dakota State Representatives.
- Student Scholarships were awarded at our Spring meeting this past April.

**Items of Concern:**
None

**Request for Action:**
None

### ASCLS - WI

<table>
<thead>
<tr>
<th>BY: Kelly Robinson, President</th>
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<tbody>
<tr>
<td>- Held a WI Board Meeting in February, 2017.</td>
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<td>- Participated in Region V President’s Calls.</td>
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<tr>
<td>- Held WI Annual Spring Meeting, April 2017.</td>
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<td>- Signed contract for WI 2018 Spring Meeting.</td>
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<td>- Attended Legislative Symposium as part of an 8-member delegation.</td>
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**Items of Concern:**
None

**Request for Action:**
None
Activities of the Region Director

- Voted on all email motions presented before the Board of Directors since the 2016 Interim Board of Directors Meeting.
- Attended the Finance Committee Meeting in Washington, DC on March 17, 2017.
- Attended Board of Director’s Planning Day and Interim Board of Director’s Meeting in Washington, DC on March 18-19, 2017.
- Participated on Appointments Committee Conference Calls on April 13th and May 18th
  - Contacted and verified committee members and eligibility for reappointment for assigned committees.
  - Submitted feedback on new volunteer opportunity management module in ASCLS Connect.
- Participated on Board of Director’s Conference Call on May 5, 2017
- Participated in Board Check In Calls on April 26, 2017; May 25, 2017
- Submitted Policy and Procedure Report with motion for all Standard Operating Procedure changes/items tasked by the Board of Directors as Chair of Policy and Procedure.
- Responded to State President, Council Members, and National Committee Chairs’ questions as needed.
- Fielded state society questions concerning the EventsXD App as many are preparing to use for their upcoming meetings.

Regional Activities:

- Attended the Kansas Society for Clinical Laboratory Science (KSCLS) Annual Meeting in Manhattan, KS on March 29th and 30th.
  - Presented session on “Our New Digital Footprint: ASCLS’s Online Presence”
- Attended the ASCLS-Iowa Annual Meeting in Coralville, IA on April 12-14, 2017.
  - Presented session on “Our New Digital Footprint: ASCLS’s Online Presence”
- Attended the ASCLS-IL Annual Meeting in Peoria, IL on April 19-20, 2017.
- Region VI Facebook Page and Twitter account including posting of relevant laboratory professional and advocacy items.
- Updated Region VI Logo to incorporate new ASCLS brand and created t-shirts for members through Teespring with new Region VI logo.

Items of Concern:
No Concerns

Request for Action:
No Requests for Action
### Activities of the Constituent Society

#### Spring Board (Leadership) Meeting
1. ASCLS-IL Board of Directors met on April 18th, 2017 during the ASCLS –IL Annual meeting which was held in East Peoria, IL.

#### ASCLS-IL Annual Meeting Planning
1. 2017 ASCLS-IL Annual Meeting was held April 18-20 in East Peoria, IL
   i. Meeting chair: Kate Bernhardt; Vice chair: Sheila Gibbons
   ii. Venue: NIU Conference Center in Naperville, IL April 18-20, 2017 (Tuesday-Thursday)
   iii. Save the Date will be sent out via email and will be posted on Facebook, Instagram, ASCLS-IL Newsletter and state society website

#### Membership Retention

   As of April 10, 2017 Membership:
   Collaborative (8), Emeritus (4), Emeritus 2 (5), First Year Professional (32), Honorary (1), Professional 1 (112), Professional 2 (47), Student (131): Grand Total (340)

   January 15, 2017 Membership:
   Collaborative (6), Emeritus (4), Emeritus 2 (5), First Year Professional (31), Honorary (1), Professional 1 (108), Professional 2 (45), Student (111): Grand Total (311)
   a. Chicago branch will plan events for membership retention
   b. Continue to send out editions of ASCLS-IL newsletter “Insights” to inform and entertain members.

#### Membership Recruitment
1. The overall total number of new members has increased by 29, compared to January 2017!
2. New Member Campaign:
   a. New Scholarship will be offered to recruit new professional and students
   b. Post membership packages and incentives on the state website, on state newsletter “ASCLS-IL Insights”, Facebook pages, and use Instagram to promote and recruit new members

#### Other Activities of the State
1. Chicago Branch hosted several social events and fundraising activities such as:
   a. Park Tavern -- CSCLS Meeting and Farewell party for Toula Castillo!
   b. Lab Week Run – Saturday April 29th, 2017 (Time TBD) – 5 members will meet up to walk or run 5K in our lab promoting gear!
   c. Lagunitas Social after Lab Week Run on April 29th, 2017
   d. CSCLS sponsored Continuing Education at Rush – Molecular Oncology Topic with Dr. Lela Buckingham in May 2017
   e. CSCLS purchased 100 coffee mugs and 100 grocery tote bags to sell during ASCL-IL meeting and during lab week. All proceeds go to CSCLS in hopes to be used for scholarships.
   f. Pampered Chef on-line fundraiser
2. ASCLS-IL Student Forum sold T-shirts as part of fundraising during the ASCLS-IL Annual Meeting in April
3. New Scholarships were approved at the BOD meeting on April 18, 2017. The new Scholarship are designed to recruit new professionals and students for future leadership
4. ASCLS –IL Insights Summer Newsletter was sent out (Spring issue) positions of the state society.
5. ASCLS-IL President will submit the names of state delegates for the House of Delegates at the National Meeting, which will be held August 3, 2017 in San Diego, CA.

**Items of Concern:**
Lack of volunteers to serve on the ASCLS-IL leadership positions

**Request for Action:**
No Requests for Action

### ASCLS - IA  |  BY: Lindsey Davenport – Landry, President

#### Activities of the Constituent Society
- Attended Legislative Symposium- Theresa Fruehling, Kim VonAhsen, Rebecca Dill-Devor, Bridget Aukes
- STEM Activities
  - Presented to Open Minds, Open Doors: Held at Coe College Presenters: Amy Frank, MT (ASCP); Theresa Fruehling, MA (Forensic Psychology), MLS (ASCP) CM and Kate Halter, MLT (ASCP) 8 th and 9 th grade girls- presentation were well received
  - UI Health Care STEM Education
  - Fall 2016 STEM Education Pathology Interest Day Held on October 24 th , 2016 Presenters: Theresa Fruehling, MA (Forensic Psychology), MLS (ASCP) CM and Kate Halter,MLT (ASCP)
  - Winter 2017: Girls Go STEM February 11 th , 2017 at 8-11:30 am 200 girls in 6 th -8 th grades (Partnering with Girl Scouts but open to any interested girls) Presenters: Becky Dill-Devor, MLS (ASCP) CM and Theresa Fruehling, MLS (ASCP) CM (Any other volunteers??)
  - Cedar Valley Science Symposium (CVSS)- Wartburg College held on January 21 st Presenters: Heidi Echternacht, MLS (ASCP) AAS; Amy Frank, MT (ASCP); Theresa Fruehling, MLS(ASCP) CM and Janet Whitney, MT (ASCP)
  - STEM event held in Washington, IA for students of all ages on November 29 th
- Attended Region VI meetings- Face to Face in DesMoines
- Audit of Treasury
- Spring Meeting Planning Est. Earnings of $10,000
- Nominations to National for Awards

#### Membership Numbers
- Collaborative 8
- Emeritus 7
- Professional 100
- First Year Professional 21
- Student 59
- Total 195
- Total- non student 136

**Items of Concern:**
No Concerns

**Request for Action:**
No Requests for Action
# KSCLS

**BY:** Carol Shearer, President

## Activities of the Constituent Society

### Board (Leadership) Meetings

1. August 20, 2016 Summer KSCLS leadership meeting
2. November 2, 2016 Fall KSCLS leadership teleconference
3. January 18, 2017 Winter KSCLS leadership teleconference

### Annual Meeting

1. March 30, 2017 2017 KSCLS Annual Meeting

### State Meeting

1. March 29 – 30, 2017 at Hilton Garden Inn, Manhattan, KS
2. Joint meeting with Wheatlands CLMA
3. 156 Attendees
4. 31 Sessions
5. 33 Exhibitors

### Legislative Symposium

2. KSCLS participants were Carol Lee Shearer and Linda Hickok

### Membership Retention

1. Current Members as of 5/31/2017 is up from 5/31/2016
   a. 126 current/93 for delegate count
   b. 30 students
   c. 9 new professionals
   d. At least 2 people from KSCLS Leadership Team welcome new members and try to contact lapsed members

### Items of Concern:

No Concerns

### Request for Action:

No Requests for Action

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# ASCLS - MO

**BY:** Stephanie Godfrey, President

## Activities of the Constituent Society

### Awards

#### Omicron Sigma

1. State Omicron awards have been submitted.
2. State Awardees: Sarah Eckelkamp, Candi Barker, Jordyn Huston, Sarah Schremser, Monica Stumpf, Sharon Duessel, Lucia Johnson, Amanda Reed
3. Regional Awardees: Stephanie Godfrey, Andrea Frasier, Rita Heuertz, John Koenig, Jaime Pendell
4. National Awardees: Ed Peterson, Tim Randolph

#### Key to the Future

Jaime Pendell and Sarah Schremser

#### Member of the Year

1. Mary Lou Vehige

### Other ASCLS National Awards

1. ASCLS New Professional of the Year Nominee: Monica Stumpf
2. 2016 State New Professional of the Year: Jordyn Huston
2017-2018 Elected State Leadership
1. President: Stephanie Godfrey
2. President-Elect: Danyel Anderson
3. Past President: John Koenig
4. Treasurer: Candi Barker
5. Secretary: Debbie Baudler
6. First Year Director: Jordyn Huston
7. Second Year Director: Uthayashanker Ezekiel
8. First Year Professional Director: Jaime Pendell
9. Student Director: Open

Board (Leadership) Meeting
1. Leadership Planning Meeting for the 2017-18 Leadership will be held in August.

Membership Retention
1. Current Members
   a. Honorary: 2
   b. Collaborative: 6
   c. Student: 45
   d. FYP: 5
   e. Emeritus 1: 3
   f. Emeritus 2: 3
   g. Professional 1: 64
   h. Professional 2: 14
   i. Total Membership: 142
   j. Total membership is slightly increased.
2. Lapsed Members
   a. As of June we had 50 lapsed members.

State Meeting
1. 2017 ASCLS-MO Annual Meeting and Exhibits was held April 6-8 at The Lodge of the Four Seasons at Lake of the Ozarks.
2. Planning for 2018 Patchwork of Knowledge Meeting in Overland Park, KS has begun. Dates: April 11-12, 2018

Other Activities of the State
1. Stephanie Godfrey is working on scheduling a planning Meeting for 2017-18 Leadership.
2. Stephanie Godfrey participated at Leg Day this year.
3. ASCLS-MO has a full delegation. President: Stephanie Godfrey, President-Elect: Rita Heuertz, Delegate: Uthayashanker Ezekiel, Delegate: Donna Duberg, NP Delegate: Marco Rossi, Student Delegate: Kayla Schmidt.
4. Officially changed Constituent Society name to ASCLS-MO
5. Planning structure for future leadership succession in state society.

Special Commendation: We wish to commend Jim Flanigan on a terrific first year of service with ASCLS and we look forward to working him for many more years. Thank you Jim for all that you do for ASCLS.

Items of Concern:
No Concerns

Request for Action:
No Requests for Action
Activities of the Constituent Society:

BY: Kevin McGuire, President

Board (Leadership) Meeting

1. Scheduled for July 9, 2017 - teleconference
   a. Will be recappping the Spring Meeting
   b. Open leadership positions for 2017-18 will be discussed
   c. Fall Educational Conference planning

Membership Retention

1. Current Members
   a. Current Members – 156

Membership Recruitment

1. New Member Campaign.
   a. President and student forum advisors gave presentations to incoming CLS and MLT Program students within the colleges of Nebraska
2. “Provide the Face” Activities
   a. Nebraska Science Festival – April 22, 2017 – Public science exposition
   b. Health Science Clubs across Nebraska

State Meeting

• 2017 Nebraska Spring Laboratory Meeting – April 25 -27, 2017 at Carol Joy Holling Conference and Retreat Center in Ashland, Nebraska
• CLMA Great Plains Chapter and ASCLS-NE participated.
• Very successful with awesome educational sessions.

Other Activities of the State

1. We have one member attending National Meeting – Roxanne Alter
2. Student Forum had a very successful year- great participation and fundraising – Husker Raffle
3. 2018 Spring Meeting: still being discussed

Items of Concern:

No Concerns

Request for Action:

No Requests for Action
REPORTS TO: Board of Directors
REPORT OF: Director, Region VII
SUBMITTED FOR: 2017 Annual Board Report
PREPARED BY: Claude Rector, Region VII Director
DATE: June 29, 2017

Activities of the Region Director
• Attended monthly Membership Committee conference calls
• Attended monthly Leadership Development Committee conference calls
• Attended ASCLS BOD Interim meeting Planning Day and Legislative Symposium
• Attended Texas ASCLS Spring Meeting and Business Meeting
• Attended Louisiana ASCLS Spring Meeting and Business Meeting
• Attended Arkansas ASCLS Spring Meeting and Business Meeting
• Participated in ASCLS BOD Conference Calls
• Voted on BOD motions as needed
• Communicated with Region VII representative on ASCLS committees
• Communicated with ASCLS President and President Elect as appropriate

Items of Concern:
• Lack of leadership participation in New Mexico
• Viability of New Mexico state organization
• Overall lack of succession planning in state societies

Request for Action:
None

State Reports
ASCLS - Arkansas BY: Stacy Walz

Activities of the Committee or Affiliated Organizations

State Board Meeting:
• April 14, 2017 at state meeting
• Thrilled to send 4 members from Arkansas to the Legislative Symposium
• Discussed elections for open board positions
• Delegation planned for 2017 Annual Meeting
Spring Meeting:
- 2017 ASCLS/CLMA-Arkansas Joint Educational Conference & Student Quiz Bowl, April 13-14, 2017- Baptist Health College- Little Rock, AR
- Twelve student quiz bowl teams participated – ASU Beebe MLT winners; UAMS MLS winners
Five CEUs offered; over 70 professionals and students attended

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<td>Request for Action:</td>
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**ASCLS - Louisiana**

BY: Michele Werner

Activities of the Constituent Society

Louisiana hosted the Annual LSCLS / ASCLS-MS Bi- State meeting in Baton Rouge, LA with 404 total attendees. Three days packed full of Student Bowl, Continuing Education and Socialization was enjoyed by all

The By-Law committee worked diligently on updating the By-Laws and SOP’s of the organization with completion possibly in 2017-2018.

LSCLS had one member that attended Leadership Academy.

Our membership has remained very steady with emphasis on retaining the students as FYP’s.

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<td>Request for Action:</td>
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**ASCLS – New Mexico**

BY:

No Report Provided

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<td>Request for Action:</td>
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ASCLS Oklahoma had a good year in 2016-2017. There were a few Board of Directors meetings throughout the year, one, face to face, and the rest via phone conference.

The society awarded MLS/MLT scholarships to Kitu Kamari and Dusenge Kamali for $500.00 and $300.00, respectively.

The society co-hosted the ASCLS and OKASSMT One Voice Joint Conference on April 21, 2017 at St. Francis Hospital in Tulsa, OK. There were 16 ASCLS members, 23 OKASSMT, 12 nonmembers, and 51 MLT/MLS students in attendance. Attendees were able to earn up to 6 C. E. credits. One Voice Joint meeting 2018 will be held in Oklahoma City and Mile Tompkin, the incoming president, will chair the committee.

During the House of Delegates meeting, a new First Year Professional was chosen: Nitu Kamari. Alison Rossdeutscher and Drona Pandeya were elected to the Board of Directors for 2 year terms. There were no nominees for the vice-president position, so it was left vacant till a volunteer could be found.

The future of ASCLS-OK was discussed during the HOD meeting. The members present still want to participate in the One Voice Joint meeting with OKASSMT, however, would like more networking time with fellow attendees and less C. E. opportunities. Miles took that under advisement for next year.

There is a new ASLCS-OK website that Evelyn Paxton created. It was very beneficial in advertising for the One Voice Joint meeting. Drona Pandeya will be taking over as webmaster.

Items of Concern:
Recruitment is still an issue and no one would volunteer for the membership chair. High yearly dues and lack of benefits were the main thoughts on why the lack of interest in ASLCS.

Request for Action:
None

ASCLS - Texas
BY: Rodney Rohde

Activities of the Constituent Society
- Membership efforts ongoing (Brandy Greenhill working hard with TACLS Board on issue; Dr. Greenhill will not renew her Membership committee role)
- President Rohde has written multiple articles regarding CLS Profession and conducted several interviews/presentations by radio and print for infectious diseases and CLS Profession
- Rohde, R.E. Invited Interview for Texas State “Professor to Professor Webcast Series - Promoting Healthcare Research.” [http://www.ada.txstate.edu/Videos.html](http://www.ada.txstate.edu/Videos.html) (scroll down) May 16, 2017
- Rohde, R.E. & Tim Gauthier. [Stewards Working To Save Antibiotics: Pharmacy & The Medical Laboratory](http://www.ada.txstate.edu/Videos.html) IC.tips April 27, 2017


March 29th – April 1st, 2017: TACLS Annual Meeting
1. Outstanding & Profitable meeting in Allen, Texas!
2. ~ 175 attendees with professionals and students. We also had 25 speakers.
3. 1 MLS scholarship awarded for $1000; No MLT applicants
4. Renewed Poster Competition with recognition; Student Bowl teams
5. Successful Awards ceremony & ASCLS Delegates chosen for San Diego
6. Business meeting: April 1
   - 20+ in attendance
   - “New Professional /Student Track” & Lab Olympics were a big success
     - Small budget approved to continue
     - Thanks to Jazmen Myers & Binh Pham for organization with others
   - TACLS Leadership Academy completed with three grads doing a TACLS presentation
   - Swore in two Board members
     - Kirk Newport & Dr. Gerald Redwine, as well as Duncan Samo incoming President
     - Going off Board – Dr. Lori Torres, Dr. Brandy Greenhill, and Past President Joanna Ellis (R. Rohde new Past President)
   - TACLS membership ~449 as of March 1st; Focus on renewals
   - Active PACE year
   - Focus on “Conference Organizing Committee” is working and R. Rohde emphasized ongoing efforts to continue helping host cities
     - TACLS 2018 will be in El Paso, Lori Torres, Chair
     - TACLS 2019?
   - Scheduled – Summer Study Session- August Saturday 19th AM and CLEC in PM; Fall Board Teleconference October Saturday 21st; Winter Board Session Corpus January 20th Del Mar
   - Legislative – working on no longer requiring licensure for audiologists and speech pathologists; need to watch what is happening on capitol level
   - UTMB – Dr. Ben Raimer identifies issues in his report blog; TACLS has no legislative plans for this session. Sunset review - Allied Health

Published multiple book chapters & articles related to profession > from January through May 18th, 2017


- **MLPW**
  - Rohde received Proclamation for MLPW from Governor Abbott’s office

- Rohde published multiple articles in local, state, national and international forums for MLPW recognition during April 2016 (**invited & mentored PA New Professionals Steph Noblit & Jazmen Myers for National Outbreak News Radio Podcast, with ASCLS President Dr. Suzanne Campbell**)

1. Rohde, R.E. & Tim Gauthier. Stewards Working To Save Antibiotics: Pharmacy & The Medical Laboratory IC.tips April 27, 2017


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**Items of Concern:**

- Lack of retention of student members as they move to professional status.
- Decline of overall membership numbers
- Lack of eligible and willing people to fill open positions leading to recycled officers

**Currently, we do not have a candidate for President Elect**

**Request for Action:**

None
Activities of the Region Director

- Participated in ASCLS Planning Day March 18, 2017
- Participated in ASCLS Board of Directors meeting March 19, 2017
- Attended Legislative Symposium March 20, 2017 and met with Montana legislators March 21, 2017
- Participated in ASCLS BOD conference call meetings, April 25 and May 25, 2017
- Wrote articles for Region VIII state newsletters
- Responded to requests for information for ASCLS
- Participated in Patient Safety Committee conference call meetings
- Participated in E&R Committee conference call meeting
- Held phone conversations with state presidents answering questions and concerns
- Identified Region VIII Representative to ASCLS NPNMF
- Identified Region VIII Representative to ASCLS Diversity Advocacy Council
- Completed Region VIII Volunteer spreadsheet build for trial regional volunteer opportunity application
- Participated in monthly IMSS planning committee meetings
- Mentoring IMSS Program Chair and Co-Chair
- Serving as Awards Chair for IMSS 2017
- Attended ASCLS-Idaho and ASCLS-Montana spring conferences
- Presented National and Regional updates at Idaho and Montana meetings; provided information and powerpoint presentation to Colorado and Wyoming Constituent Society Presidents
- Presented National and Region Omicron-Sigma awards at Idaho and Montana meetings; distributed certificates to Colorado, Wyoming, and Utah Constituent Society Presidents
- Presented Hematology Case Studies Session at Idaho conference
- Presented leadership session to Region VIII Leadership Academy Interns: June 17, 2017
- Participated in ASCLS-Idaho Mini Leadership Academy and BOD meeting, June 24, 2017 in Hagerman, Idaho

Items of Concern:
The continued lack of consistent distribution of the ASCLS Today newsletter; only one newsletter has been received since March, 2016. This is an important communication tool for ASCLS members, many of whom do not choose to use social media or have adequate internet access to use social media as a sole source of communication.

Request for Action:
• I move the ASCLS BOD evaluate the ongoing issues with dissemination of the *ASCLS Today* newsletter and develop a plan for reestablishing a consistent method of publication of the newsletter.
  
  o Be it noted: Even though the *ASCLS Today* newsletter is just one of many avenues of communication, it remains an important and expected benefit of membership in ASCLS. The lack of the regular and consistent newsletter distribution has created a large gap in communication to our members resulting in members questioning the value of their membership. The lack of the newsletter has also discouraged potential authors from submitting articles for publication.

### State Reports

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<th>ASCLS - CO</th>
<th>BY: Ian Wallace, President</th>
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#### Activities of the Constituent Society

- Participated in HOSA (Health Occupations Students of America) Leadership Conference in Denver Wednesday March 8th
  
  o Career Fair Participants and Science Fair Judges

- Sent three individuals to the ASCLS Legislative Symposium in Washington D.C.
  
  o Ian Wallace
  
  o William (Jon) Windsor
  
  o Rachel Dechant
    
    ▪ Met with the offices of both Senators from Colorado and with the offices of our respective Representatives in Congress, including a one on one with Representative Jared Polis
    
    ▪ Left “Leave Behinds” in the offices of all other Representatives throughout the state of Colorado

- Participated in the Lab Week Run throughout the state of Colorado

- The 2017 CLCC conference was held at the Ramada Plaza, Northglenn, CO, May 4-5, 2017
  
  o Bowlathon Fundraiser for Students and New Professionals Wednesday May 3rd, 2017 7-9pm
  
  o Registration: 291 attendees, at least half of the attendees are from institutional passes, and 37 vendors, 2 vendor trucks including 1 Beckman Coulter and 1 Bonfils Blood Donor Van. Over 30 Student Posters.
  
  o The Blood Donor Drive brought 11 donors to the Bonfils Van. Suggestion is to continue with the Blood Donor drive next year at CLCC and increase early advertisement and include onsite sign up at the beginning the CLCC event and throughout the entire event. The Van was onsite on Friday at the conference.
  
  o The Thursday evening Silent Auction and Social was a success. Monies were raised for Student and New Professional scholarships and travel grants, but not a large turnout. Increase advertisement in advance next year to registrants, institutions and vendors. Over $1,000 was cleared after payment of the appetizers to the hotel.
- 2 General Sessions, each 1.5 hrs in length. The Keynote presentation, Bias Impacts, was very controversial. Attendees either liked it or thought it was not appropriate for an MLS conference. The Friday General Session, Disruptive Belief: Memes, Mission, and Mythos of Sales, was very well received.

- 27 breakout sessions were 1 hr in length and offered in 2 days including a Student Forum offered by Aureus Medical Group. Brooke offered information about effective resumes, interview skills and how to become a travel MLS professional. A Career Options Panel offered information about various career paths available to MLS professionals. Both of the aforementioned sessions were offered on Friday, deemed Students’ Day since most students were available to attend that day. Total possible CEUs to be earned in 2 days was 12 credits, including a Student Poster quiz if an 80% or better score was attained. Educational sessions offered covered disciplines including Microbiology, Molecular, Hematology, Coag, Chemistry, Management, Phlebotomy, POCT, and Management.

- A Vendor Game of sorts was offered, but not explained well and in advance to the vendors. Attendees, who had a meaningful conversation with a vendor would be given a numbered ticket, and their name and phone # was placed on the companion ticket to be entered into a drawing each day for a FitBit. The feeling is that if this “game” is explained to the vendors in advance then more of the vendors would be willing to play and hand out the tickets to the attendees.

- Suggestion and possibility of an online Registration confirmation via EZ register with instructions and passcode to retrieve session handouts when available on the meeting website.

- Possibly have someone set up a meeting app for the CLCC 2018 using the recommended meeting app from ASCLS national office. Attendees and vendors could access the meeting evaluation form, the session handouts, the session evals, a general meeting at a glance.

- Cathy McNary to summarize meeting evals returned, some 43 evals returned. Evals were not handed out to the vendors. This was an accidental omission.

- CLCC 2018 is scheduled for April 5-6, at the Ramada Plaza Hotel and Conference Center, Northglenn, CO.

- ASCLS Colorado “Science of Suds” Tour to be held on June 10, 2017
  - 28 Participants
  - Tried new online PACE option for evaluations and CE credit

- Leadership Retreat/Budget Meeting/Delegate Meeting to be held July 8th 2017 in Lakewood, CO and Denver, CO.

**Items of Concern:**

- Some programs are not bringing in revenue and need to work on marketing.
  - Would appreciate ideas in marketing towards laboratory professionals. Several seminars have been attended by PA’s, MD’s, and even phlebotomists, but lacking participation from the laboratory community.
  - How can we get our members to assist in advertising events to help spread the word?

- Retaining members in the transition of students to new professionals

- Future fundraising endeavors
- Lack of communication from National level when it comes to what is going on in the organization.
  - Members becoming frustrated that the articles they've written have not been published.
  - Members questioning if they are still part of the organization since they are not receiving any correspondence

**Request for Action:**
- I move the ASCLS BOD re-evaluate their means of communication and decide on a more consistent platform to disseminate information to members around the country
- I move the ASCLS BOD evaluate the ongoing issues with dissemination of the *ASCLS Today* newsletter and develop a plan for reestablishing a consistent method of publication of the newsletter.
  - Be it noted: Members are frustrated that the articles they've written have not been published and are questioning if they are still part of the organization since they are not receiving any correspondence.

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<tr>
<th>ASCLS - ID</th>
<th>BY: Diane Stumpf, President</th>
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<tr>
<td><strong>Activities of the Constituent Society</strong></td>
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<td>• Held 2 productive Board Meetings in March and April. There is one more Board meeting scheduled for June 24th.</td>
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<td>• Published 2 informative newsletters in March and May.</td>
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<td>• Held a successful Legislative Symposium on March 25th. Representative Phylis King was in attendance and Debbie Shell presented. We had nine in attendance.</td>
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<td>• Enjoyed a successful convention, The Convention of Higher Learning, held April 20-22, 2017 on the Idaho Falls ISU campus. We had 23 exhibitors, 38 registrants, 42 students attending and 2 facility registrations. Videos from our Awards Banquet were featured on our Facebook page. We were able to sell T-shirts as well. Profits for our convention totaled $9740.</td>
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<td>• We held an official Business Meeting in conjunction with our Spring Convention. PAC donations totaled $330. The CMN raffle was incredibly successful thanks to the hard work of Chris DeAngelo. We raised $368 for this charity.</td>
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<td>• We were excited to have a full ballot with one nominee for each of our open positions (President-Elect, Secretary, Treasurer, and Editor). We were also very pleased to have 6 nominees for 2-year Board Member. Nominations were done through Ballot Bin. Results of the election are as follows: President-Elect, Chris Doran; Secretary, Mary Brown; Treasurer. Amy Huse; Editor, Jessica Lewis; 2-year Board Member, Kami McGann; N&amp;E chair, Sue Galindo; N&amp;E committee, Debbie Russell and Marj Montanus; Delegate to the National Convention, Mary Cobos.</td>
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<td>• Idaho currently has a membership of 171. 66 of these are student members whom we hope to retain as FYP.</td>
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<td>• We submitted the following individuals for awards and recognitions: Susan Morris, Lifetime Achievement; Kami McGann, Voices Under 40; Mary Cobos and Jessica Lewis, Key to the Future; Amy Larsen, Member of the Year; Debbie Russell, Mary Cobos, Amy Larsen, Melissa Dumoulin, Kami McGann, Chris Doran, Jeff Horton, and Jessica Lewis, Omicron Sigma; Chris Hunter, Anna Watts award. We also submitted</td>
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our newsletter and website for national awards.

- We will be holding our Mini-Leadership Academy on June 24, 2017 in Hagerman Idaho. Kami McGann will be presenting on the topic “Where have all the leaders gone?” Our Board Meeting will follow.
- The Idaho Delegation will consist of Diane Stumpf, Mechelle Reeve, Chris Doran, Debbie Shell and Mary Cobos. We look forward to representing our state at the National Meeting in San Diego July 31st-Aug 3rd.

**Items of Concern:**
None

**Request for Action:**
None

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**ASCLS - MT**

**BY:** Amy Steinmetz, President

**Activities of the Constituent Society**

- Held a Spring Board meeting on April 5th in Bozeman
  - Discussed IMSS chair appointments for 2018
  - Membership numbers for Montana are doing well in Region VIII
  - Reviewed changes to the SOP and position descriptions
- Held Annual General Business meeting on April 6th in Bozeman
  - Elected officers to serve the 2017-2018 year on the ASCLS Montana BOD
  - Selected ASCLS National Convention attendees
- Held the Annual spring meeting in Bozeman at the GranTree Inn April 6th-8th
  - The theme was “The Clinical Laboratory; Bringing the Pieces Together” and brought in an increased number of attendees and vendors.
  - Had a very successful Silent Auction with all proceeds going to the Children’s Miracle Network where we raised over $3500.
- A task force for the spring meeting process and budget was formed
  - Held 2 meetings where we discussed the positions for each meeting as well as general tips and guidelines
  - Goal is to be able to pass these on from year to year with templates and processes that can be duplicated and added to each year.
  - Started a Facebook Page

**Accomplishments**

- Very Successful Spring meeting

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**Items of Concern:**

- Having trouble getting people to stay committed to positions. It has been a difficult year this year with many people resigning from their positions. It always seems to be the same people that volunteer for everything and many are getting burnt out.

**Request for Action:**
None
ASCLS - UT  
BY: Omar Munoz, Interim President

Activities of the Constituent Society

Goals for 2017-2018

1. Actively recruit and retain members
2. Include a Newsletter and update the Utah Website
3. Fill positions on the Board and other leadership positions
4. Involve students in the Society

Activities
- Assisting Intermountain State Seminar program and PACE.
- Contacted past Presidents asking for assistance

Items of Concern:
Leadership recruitment
Member participation
Member recruitment

Request for Action:
None

ASCLS - WY  
BY: Jill Graff, President

Activities of the Constituent Society

2017 Goals:
- Increase membership and retention by contacting lapsed and potential new members
- Increase attendance at State and CO/WY state meetings
- Reach out to labs that are not as active in ASCLS

Activities of State Society:
- Labs around the state celebrated Lab Week, and prizes will be awarded for the top 3 labs who had the most original/creative ideas.
- CLCC (Spring meeting) in conjunction with ASCLS-CO. Colorado was gracious enough to host yet again.
- Two participants in the Leadership academy to graduate at the National Meeting. Trophies will be presented from the WY board to celebrate
- Four delegates selected to attend the Annual Meeting, and funds distributed.
- Spring business meeting held.
- Region VIII meeting attended by Jill Graff and Franciszka Wriborg.
- Susan Smith volunteered for the IMSS planning committee as program co-chair

Accomplishments:
- A student rep to the state board has been selected.

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- While retention of members remains high, transitioning those members into active roles is still a problem
- Recruiting of new members remains low
REPORTS TO: Board of Directors
REPORT OF: Director, Region IX
SUBMITTED FOR: 2017 Annual Meeting Board Report
PREPARED BY: Shannon Billings Region IX Director
DATE: July 13, 2017

Activities of the Region Director

- Serving as Board liaison on the PAC Board of Trustees for ASCLS
- Serving as Board liaison for the ASCLS Student Forum
- Participated in teleconferences for the Student Forum
- Participated in teleconferences for PAC Board of Trustees
- Responded to requests from ASCLS Board of Directors
- Attended National Legislative Symposium
- Corresponded regularly with Region IX Council
- Worked on Region IX Operations Manual
- Nominated members for Omicron Sigma award

Items of Concern:
I have not received a State Board Report from ASCLS-OR since Fall, nor has their state president responded to any requests regarding board reports. I am concerned about this lack of activity in Oregon. I know the state has been holding functions, and I have gotten responses to other requests, just not to board reports since our Fall Caucus.

Request for Action:

None

State Reports
ASCLS – WA BY: Shawna Martin
Sponsored PACE approved C.E. for Bloodworks Northwest transfusion symposium in Portland. Held successful PAC basket raffle. Goal for Summer: New welcome letter for new members. Planning on changing night of new professional meeting to be at a separate time from the Board/General/HOD meetings. Several board positions were open for election and advertised on the Website. NWMLS 2017 will be in Seattle in October, 2017. New budget was approved. Officers that were elected and voted in: President: Shawna Martin; President Elect: Leslie Nakagawa; Secretary: Terese Abreu; Treasurer: Open. The president will fill in until we can find another person. Alex Steiner accepted position of Spokane Representative. The ASCLSWA website has been updated. Received a volunteer application from a member, who has been recruited in the planning of NWMLS, and will be approached about applying for the Leadership Academy

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### CLSA

BY: Cassandra Brooks

Built RegOnline program for annual Conference. The state conference held in Fairbanks in early April was a success. Attended Region IX interim council meeting. Submitted award nominations. Working on settling some internal strife among CLSA, hopefully after the discussion at our spring board meeting things have been settled. Attended CLSA Spring Conference. CLSA SOPs have been greatly revised to address recent issues. CLSA By-Laws are under revision and will be submitted for approval by CLSA members at next state membership meeting.

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### ASCLS – OR

BY: Patty DeTurk

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Report to: ASCLS Board of Directors
Report of: Region X
Submitted for: 2017 Annual Meeting Board Report
Prepared by: Sally Pestana, Region X Director
Date: July 1, 2017

Activities of the Region Director:
- Responded to requests for information and electronic votes from ASCLS
- Attended ASCLS-HI March BOD meeting and May annual membership meeting.
- Attended ASCLS-AZ board tele-meeting.
- Attended the 2017 BOD Planning Day and Interim Meeting in Alexandria, VA.
- Represented ASCLS-HI during the 2017 Legislative Symposium.

CONCERNS: Single issue of ASCLS Today between March 2016 and June 2017.
Request for Action: None

State Reports

ASCLS-AND: Stephanie Souza-Morones, President

Activities:

Bylaws review to consider dissolving long inactive chapters, thereby making changes to our state financial organization structure to make additional funds available to support local activities.

BOD member Heather McLaughlin accepted into the 2017-2018 Leadership Academy.

Developing brewery tour CE event for Tucson area to be held September 2017.

Planning Halloween themed mixer/recruitment event for Phoenix area to be held October 2017.

Surveyed active members for interest level, time available, and professional development needs/wants in order to better match members with potential activities/projects and increase local involvement.

Tasked 3 BOD members involved in education to guide students to participate in #IAmASCLS campaign.

Sending 6 delegates to Annual Meeting in San Diego.

Concerns:

Lack of local events during past two years when focus was on supporting a larger Regional event has caused the loss of several members and severely affected local member attitudes towards the organization.

Additionally, lack of revenue from Regional or local events has strained BOD ability to support members at past levels.
In general, AZ membership is inactive and there has been no activity in NV since I joined as a student in 2006.

Running out of new ideas to motivate membership recruitment, retention, and involvement. Need guidance on how to recruit/activate membership in NV.

Request for Action:

Request guidance from National social media group on how to link platforms (Facebook, Twitter, Snapchat, and Instagram) to more effectively communicate/interact with membership.

**ASCLS-HI: Susan Naka, President**

**Activities:**

Legislative Symposium in Washington D.C. attended by Kristen Croom, ASCLS HI GAC, and Sally Pestana, Region X Director.

ASCLS Awards - 8 Nominees from the state level for Omicron Sigma awards and 2 nominees for Keys to Success were submitted. ASCLS HI website was nominated for ASCLS website award

Board mtg 3/15/17 at Kapiolani Community College.

Kokonut Wireless Newsletter – second newsletter for the 2016-2017 year was published in April by Rob Lahoe and posted on the ASCLS HI website. Cash prizes were offered for a ASCLS HI logo contest and participants in Lab Week Virtual Run and blood donation drive.

Tech Savvy 4/22/17. Event sponsored by the American Association of University Women for 6th-9th grade students to promote careers in science, technology, engineering, and math (STEM). Demonstrations of blood smears, urine dipstick, fecal occult blood, and intestinal parasites were viewed by 20 students in 2 sessions.

April-May 2017. Elections were held for President elect, Treasurer, and Director using survey monkey application.

Hawaii Clinical Laboratory Conference, jointly sponsored by ASCLS HI and CLMA Aloha Chapter was held 5/16-5/17/17 at the Honolulu Country Club. 36 PACE approved educational sessions were attended by 220 registrants. ASCLS HI members were eligible for a $25 rebate on their conference registration fee.

Annual Business Mtg 5/17/17. 2017-18 officers- President elect Susan Naka, Treasurer Jennifer Baba, and Director Claire Muranaka were announced. 2 delegates and 1 alternate delegate to the national 2017 ASCLS conference were elected. Four delegates and a New Professional Member will be attending.

Blood Bank Transfusion Symposium, 5/20/17. Program of PACE approved 4 contact hours co sponsored with Blood Bank of Hawaii.

Univ. of Hawaii School of Medicine Health Careers Opportunities Panel, 6/19/17. 2 ASCLS HI members discussed the lab’s role in an acute cardiac syndrome scenario for high school students.

**CONCERNS:** Decreasing membership especially with new professionals.

**Request for Action:** None
Activities:

The BOD held a meeting on February 20, 2017 via teleconference.

The society hosted the Region X spring meeting on March 17-18, 2017. The meeting was successful with vendor support, a positive financial outcome, positive evaluations by attendees and attendance that exceeded the previous year.

The BOD met after the last session of the Region X meeting on March 18, 2017.

CONCERNS: Member engagement.

Request for Action: None
Activities of the New Professionals and New Members Forum

- Held conference calls on 3/28, 4/28, and 6/1 with plans for final call in early July
- Region CCs encouraged state reps to help identify incoming 2017-2018 NPNM reps and mentor them into their roles. Region CCs were asked to share the below link to the 2017-2018 Google Doc roster with their Region Directors and State Presidents for smooth start in upcoming ASCLS year.
  [https://docs.google.com/spreadsheets/d/15eNNkW9ziFtV2E8CF9iQCequlQu_ANZSqdmoZv2XK8/edit#gid=1739816071](https://docs.google.com/spreadsheets/d/15eNNkW9ziFtV2E8CF9iQCequlQu_ANZSqdmoZv2XK8/edit#gid=1739816071)
- Highly successful Lab Week Run 2017 – sold out early with 1,000 race packets, offered group rates for students and professionals plus student discount, many prizes awarded this year for various contests, filled all company sponsorships, t-shirt sale was very popular, approximately $15,000 in profits. Ally Storla is working to develop SOPs for LWR and is looking into using a distributor for next year’s event.
- Provided two $1,500 NPNM travel scholarships to Annual Meeting through profits from LWR, planning to offer both NPNM and student scholarships for 2018 Leg. Symp.
- Continued weekly Facebook posts on topics including CE opportunities, career tips, member spotlights, and interesting books, videos, and articles
- NPNMF e-Newsletter – The Culture: issue 4 to be published early July
- ASCLS Today Articles: 4/1/17 – Kelcey Harper submitted article
- NPNMF Quick Guide Revision: Stephanie Godfrey, Jazmen Myers, and Karen Larson to complete by end of ASCLS year
- Had successful puzzle room and dinner event with SF during Legislative Symposium
- Promoted volunteer opportunities for 2017-18 ASCLS year – Jazmen Myers (NPNM Director) has contacted volunteers for more popular committees to
- Kelcey Harper (Vice Chair) is leading development of this year’s NPNM membership survey to establish goals and charges for next year’s forum
- Planning Annual Meeting events - orientation/business meetings and social events

Items of Concern: Many of this year’s state rep positions are still left vacant and a large number of current state reps are not responding to communication and action items sent by region CCs – I would like to encourage state presidents to facilitate mentorship of incoming NPNM state reps so they are more engaged and understand their role.

Request for Action: None
Activities of the Student Forum Chair and Officers since February 2017:

• Been in constant communication with the Vice Chair, Secretary, Board Liaison, and Regional Representatives
• Created a list of student representation for the regions and the states, only missing representative from one region (Region I).
• Held Conference Call #7 February 26, 2017
• Held Conference Call #8 March 24, 2017
• Held Conference Call #9 April 22, 2017
• Held Conference Call #10 May 28, 2017
• Held Conference Call #11 June 17, 2017 (No Show)
• Savannah McPherson submitted an article for ASCLS Today (January issue)
• Niki Buza submitted an article for ASCLS Today (April issue)
• Maria Rodriguez submitted an article for ASCLS Today (July issue)
• Participated in Board of Directors Conference Calls and E-mail motions
• Planned, executed, and finished the Jamberry Fundraiser. We raised $82.00 and all funds have been sent to the ASCLS Office
• Officers, Regional Representatives, and State Representatives post to the ASCLS Student Forum Facebook page on a weekly basis
• Discussed, wrote, and distributed ASCLS Student Forum E-newsletters in February and June to stay in contact, share information, and highlight student leaders and accomplishments.
• Continued creating Your ASCLS Lab Leak and sending it out to Program Directors nationwide. Monthly issues from January to June have been sent out.
• Discussed, planned, and currently finalizing Student Forum sessions and activities for the Annual Meeting
• Moved to sponsor one Legislative Symposium travel grant for $500. Grantee was Sam Pasco.
• Moved to sponsor 2 Regular Student Annual Meeting travel grants for $1000 each. Grantees are Haylee Erickson and Nassouh Mourabet.
• Announced and held Student Forum t-shirt competition. No entries were received. Savannah McPherson worked with a graphic designer to create a design. Currently planning to order a total of 140 T-shirts at a cost of about $900. T-shirts are to be sold at the annual meeting.
• Planned for 3rd annual Student Forum Mixer at Neighborhood in San Diego, California, on Monday, July 31st, at 8pm, following the Student and First Timer’s reception. Currently in correspondence with restaurant. Other options have been explored if Neighborhood does not work out.
REGION I

- No Activity

REGION II  
Christina Cox

- Attended ASCLS Region II Board Meetings
- Sent out the ASCLS Lab Leak for February, March, April, May, and June
- Attended Student Forum conference calls for February, April, and May
- Stayed in contact with Region II state student representatives
- Contributed to Student Forum Facebook page
  - Delaware: Kaitlyn Lalloway, No Response.
  - Maryland: No Representative
  - New Jersey: Katharine Nelson, No Response
  - Pennsylvania: Khadidja Derrouche, No Response
  - Virginia: Riley Dang, Attended VA-ASCLS annual meeting June 2nd in Charlottesville. Executed a Student Quiz Bowl at the meeting. Sent out information from Student Forums to student members in Virginia. Will attend 2017 Annual Meeting in San Diego.
  - West Virginia: Christina Cox, Attended Region II conference calls, forwarded ASCLS Lab Leak to Maryland and West Virginia Program Directors

Concerns: None
Requests for Action: None

REGION III  
Stephanie Walsh

- Kept in contact with student state representatives
- Sent out the ASCLS Lab Leak for February - June
  - Florida: Stephanie Walsh, participated in Jamberry fundraiser
  - North Carolina: Tammy Pfannkuch, Nothing to Report
  - Alabama: No Representative
  - Georgia: Christina McConnell-Hicks, Nothing to Report
  - Mississippi: Morgan Baker, Nothing to Report
  - South Carolina: No Representative
  - Puerto Rico: No Representative

Concerns: None
Requests for Action: None
REGION IV  Mattie Kropf

- Attend Michigan Spring Meeting in April as well as contributed to the planning of spring meeting and served as a moderator
- Attended board meeting for Michigan in June as their incoming New Professional New Member Representative
- Was appointed social media chair for the state of Michigan at board meeting
- Designed second student forum newsletter for submission in May
- Attended Region IV board conference call in May
  - Michigan: No Response, 2017-2018 Chair has been elected (Darby Naheedy)
  - Indiana: Ming Yang, ASCLS-Indiana had another board meeting, made agenda including items such as preparation for the state meeting next year and promotion of state licensure legislature.
  - Ohio: Stephanie Cooper, had a very successful Ohio Collaborative Laboratory Conference May 3rd-5th and now are wrapping up final plans for who will be attending the National Meeting.
  - Kentucky: No Representative, No response from president as of yet in regards to who the student representative is for their state

Concerns: None
Requests for Action: None

REGION V  Haylee Erickson

- Attended March 2017 Legislative Symposium
- Attended the ASCLS Region V board meeting via conference call in May
- Attended the ASCLS National Student Forum meeting via conference call in April/May
- Contacted student forum chairs for each of the states in the region on a regular basis – informed them of events occurring in the Student Forum at the national level, made sure they were aware of due dates for board reports
- Contributed to SF Facebook page
  - Wisconsin: Ali Nussbaum, Working on projects for a local Legislative day for the state. Attended Legislative Symposium in March.
  - Minnesota: Matthew Yang, Attended Legislative Symposium, plan to attend Annual Meeting. Held MLS college nights in several different towns to spread awareness of ASCLS and the profession.
  - South Dakota: Ashley Clarke, Elected new Student Forum chair, Lauren, who will be attending the Annual Meeting. Attended Legislative Symposium.
  - North Dakota: Muhammad Riji, Attended Legislative Symposium in March, held a promotion of the profession student night in Fargo.
Concerns: None
Requests for Action: None

REGION VI  Jaime Pendell

• Attended Student Forum Conference Calls
• Kept in contact with Region VI state presidents and state student representatives
  o Missouri: No Representative
  o Kansas: Wendy Wang, No Response
  o Iowa: No Representative
  o Nebraska: No Representative
  o Illinois: Reilly Steidle, Nothing to Report

Concerns: None
Requests for Action: None

REGION VII  Jade Ardoin

• Kept in contact with student state representatives
• Attended the ASCLS-Louisiana/Mississippi bi-state meeting
• Sold t-shirts for Student Forum at bi-state meeting; raised $400
• Awarded Student of the year for Louisiana
  o Louisiana: Andrew Lewis, Nothing to Report
  o Texas: Taylor Meyer, Nothing to Report
  o Arkansas: Hannah Carmer, Nothing to Report
  o New Mexico: No Representative
  o Oklahoma: Ravine Kiam, Nothing to Report

Concerns: None
Requests for Action: None

REGION VIII  Maria Rodriguez

• Attended ASCLS-Montana Spring meeting on April 6-8, 2017
• Assign new leadership board to take charge of the Montana State University-MLS Club for the following academic year.
• Sent Student Forum “Your ASCLS lab leak” to the programs directors in Wyoming and Utah for the month of April, May and June.
• Attended Legislative Symposium in March 2017
• Wrote an article for ASCLS Today
• Created Student Jeopardy for Annual Meeting
  
  
  o Colorado: Jon Windsor, Attended “The Science of Suds” CE/networking event 6/11/17, Recruited new student representative for 2017-2018. Sam Buck will be attending the ASCLS national meeting this year, Hosted a successful CLCC (state meeting), Blood drive at CLCC hosted 10 of 30 available donations. ASCLS has secured Bonfils as a now permanent donation service for ASCLS-CO events, Leadership/delegate meeting to be hosted 7/8/2017 to discuss budgetary concerns and induct new members into positions, New fundraising committee successfully raised $1,700 to be added to the ASCLS-CO 2017-2018 budget, CDC has gifted ASCLS-CO $2,000 to be used for scholarships and CE events for 2017-2018
  
  o Wyoming: No Representative
  o Utah: No Representative
  o Montana: Jessica Stellingwerf, Nothing to Report

Concerns: None
Requests for Action: None

REGION IX
Lauren Yell

• Kept in contact with student state representatives

  o Alaska: Jessica Kapinos, Participated in Lab Week Run, Traveled to ASCLS conference, Fairbanks virology lab tours, informed new cohort of MLS club students about various jobs and roles, informing them of new certificate possibilities at UAA.

  o Oregon: Lauren (Gotthardt) Sage, Attended the Oregon Spring Seminar and Board Meeting in Newport, OR, May 19th-20th. Will become the NP Chair for Oregon next year. New student representative will be Rachel Eberhard. Three Betsy Baptist scholarships were awarded. Spring issue of Newsletter, the Centrifuge, was published, contributed to this newsletter. Plan to have one final event for MLS students.

  o Washington: No Representative

Concerns: None
Requests for Action: None
REGION X  Leslie Landa

• California, Nevada, and Hawaii do not have student reps
• Sent out “Your ASCLS Lab Leak” to 24 schools in all four states and only 2 responded to send out to their students
• Setting up skype conferences to talk to students of universities and schools about entering the career
  o Arizona/Nevada: Leslie Landa, Nothing to Report
  o California: No Representative
  o Hawaii: No Representative

  Concerns: None
  Requests for Action: None

ASCLS Student Forum:

  Concerns: None

  Request for Action: None
REPORTS TO: Board of Directors
REPORT OF: Appointments Committee
SUBMITTED FOR: 2017 Annual Meeting Board Report
PREPARED BY: Deb Rodahl, ASCLS President-Elect
DATE: 6/27/17

Activities of the Committee or Affiliated Organizations

The Appointments Committee members are: Nadine Fydryszewski, Kim Von Ahsen, Jazmen Myers (ad hoc), Savannah Drake (ad hoc), Barbara Snyderman (ad hoc) and Deb Rodahl, chair.

The committee has met on a monthly basis to complete the following tasks:
- Promote volunteer recruitment for the newly approved DCLS and Body of Knowledge Committees
- Slate volunteers for DCLS and Body of Knowledge Committees
- Use the Volunteer module on the ASCLS Website to notify volunteers of their status as either selected for appointment or not selected.
- Continue to evaluate committee chair and vice-chair positions
- Evaluate options to appoint a Region IV Director following the House of Delegates, worked with Nominations committee to establish eligibility
- Updated Committee Rosters to send out to Committee chairs in advance of the national meeting
- Worked with FYP Director to appoint New Professionals to the committees
- Appointments were made for the 2 new committees; DCLS, and Body of Knowledge. Terms were staggered to allow for annual transitions.

Items of Concern: None

Request for Action: None
Activities of the Committee:

Previous Assignments of the Committee:

**Body of Knowledge/Entry Level Curriculum Committee**
The Policy and Procedures committee have been tasked to review the committee description and the membership for both the Body of Knowledge and the Entry Level Curriculum committees and the inclusion into ASCLS Standard Operating Procedures.

*Progress/Status: Completed*

**DCLS Oversight Committee**
The Board of Directors approved at the 2016 Annual Board of Directors Meeting a request for action by the DCLS Oversight Committee to restructure and reposition the committee as an independent, permanent committee reporting to the ASCLS Board of Directors beginning fiscal year 2017-2018. The Policy and Procedures committee have been tasked to work with the DCLS Oversight Committee during FY2016-2017 to draft appropriate policies and procedures for restructuring the DCLS Oversight Committee as an independent, free standing permanent committee to the Board of Directors.

*Progress/Status: Completed*

New Assignments of the Committee:

**PACE Committee**
The Policy and Procedure Committee have been tasked to include the approved motion by the Board of Directors at the Interim Meeting for the inclusion of six (6) special advisors.

*Progress/Status: See Request for Action*

**Mentorship Committee**
The Board of Directors approved at the 2017 Interim Board of Directors Meeting a request for action by the Mentorship Taskforce to approve the taskforce as permanent committee reporting to the ASCLS Board of Directors beginning fiscal year 2018-2019. The Policy and Procedures committee have been tasked to work with the Mentorship Taskforce to draft appropriate policies and procedures for inclusion in the Standard Operating Procedures as an independent, free standing permanent committee to the Board of Directors.

*Progress/Status: See Request for Action*

**Committee Members:** Kim Von Ahsen, Chair; Janelle Chiasera; Madalena Josephs and Jim Flanigan

**Items of Concern:**
No Concerns

**Request for Action:**
**Motion:** I move that the ASCLS Board of Directors approve the following changes to the Standard Operating Procedure (SOP)

**ARTICLE VII – COMMITTEES D. ADDITIONAL COMMITTEES**

11. P.A.C.E.® Committee
   a. Composition, Appointment Term and Leadership:
      1) Composition: The total committee membership is thirteen (13) members and six (6) special advisors.
      2) Appointment Term and Leadership:
         a) Committee Members: Three (3) year term; four to five (4-5) members appointed annually; may only serve for two (2) terms and may not serve again until they have been off the Committee for a minimum of one (1) year.
         b) Special Advisors: Two (2) year term; no term limit and serve as non-voting members.
         c) Chair and Vice-Chair: Appointed from the members of the committee by the President-Elect with Board approval; one (1) year term with the Chair limited to three (3) terms. The Chair must have served at least one (1) year as a committee member prior to appointment.
         d) One committee member will serve to coordinate FOCUS program in the CLS Journal to ensure P.A.C.E.® compliance.

**Motion:** I move that the ASCLS Board of Directors approve the following additions to the Standard Operating Procedure (SOP)

**ARTICLE VII- COMMITTEES D. ADDITIONAL COMMITTEES**

20. Mentorship
   The Mentorship Committee is an appointed committee of this society
   1) Composition, Appointment Term, and Leadership
      a) Composition: The Committee is comprised of eight (8) ASCLS members
         i) Four (4) members with more than 5 years’ experience in the profession and more than 5 years of ASCLS membership.
         ii) Three (3) new professionals (members who have been in the profession for less than 5 years) and/or new ASCLS members (less than 5 years’ membership, but not a new professional)
            (1) New professionals must qualify as a new professional at the time of appointment.
            (2) New ASCLS members must qualify as new members at the time of appointment.
         iii) One (1) ASCLS student member
      b) Appointment Term and Leadership
         i) Committee Members: Three (3) year term; may serve two (2) terms and may not serve again until they have been off the committee for a minimum of one (1) year.
         ii) New Professionals/New Members: Three (3) year term
         iii) Student Member: One (1) year term
         iv) Chair and Vice-Chair: Appointed from the members of the committee by the President-Elect with Board approval.
   2) Duties:
      a) Responsible for developing, and implementing the Mentorship program. This includes but is not limited to, promoting the program, recruiting participants, providing orientation to both mentors and mentees, and providing and monitoring the mentorship program content.
      b) Responsible for the development of mentorship resources for ASCLS members.
<table>
<thead>
<tr>
<th>REPORTS TO:</th>
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<tr>
<td>REPORT OF:</td>
<td>Long Range Planning Committee</td>
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<tr>
<td>SUBMITTED FOR:</td>
<td>2017 Annual Meeting Board Report</td>
</tr>
<tr>
<td>PREPARED BY:</td>
<td>Deb Rodahl, ASCLS President-Elect</td>
</tr>
<tr>
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<td>6/27/17</td>
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**Activities of the Committee or Affiliated Organizations**

**The Long-Range Planning Committee members are:** Shannon Billings, Janelle Chiasera, Barbara Snyderman (past-president), Sally Pestana (DAC Liaison) and Deb Rodahl, chair.

**Activities to date:**
Conducted Planning Day retreat on March 18, 2017. Agenda Included:
- Update on needs for ASCLS Journal, presented by Dr. Perry Scanlon
- Update on office activities and needs, presented by Jim Flanigan
- Review of professional society status – items from ASAE conference, presented by Deb Rodahl
- Afternoon Breakout sessions tackled
  - What is challenging us / What should we be doing that we aren’t
  - Review of Strategy Map for updates and set priorities for coming year
  - Review committee assignments in light of discussions from the day
- The committee took the notes from planning day and summarized for future reference. ASCLS office team reviewed notes during the retreat to provide feedback on items that could be prioritized for the year.
- Updated Committee Charges for 2017-18 based on input from planning day

**Items of Concern:**
None

**Request for Action:**
None
Activities of the Committee or Affiliated Organizations

The AMSC has been in constant email communication with the meetings management staff in order to finalize the program and events related to the Annual Meeting. A conference call was also held on June 1 to discuss updates to the preliminary program (which was mailed in April), meeting evaluation survey and next year’s session proposal survey.

Committee members have also written articles promoting the Annual Meeting for ASCLS Today.

Registration numbers are on track and are similar to last year’s numbers. The room block at the Omni Hotel sold out so the ASCLS office worked to secure additional rooms at a second hotel, Pendry San Diego.

The Host Society Representative has been hard at work, collaborating with local ASCLS members and students from UC San Diego, on fun things to do while in San Diego. The Host Society table will be at the Registration Desk area. Attendees will be able to find the following information and events at the table:
1. Brochures and sight-seeing information
2. Coupons and discounts from local businesses
3. Restaurant recommendations
4. Group activities

The deadline to submit ideas for the 2018 ASCLS Annual Meeting is August 11, 2017. The AMSC will be meeting September 14 – 16 in Chicago, IL to evaluate the 2017 Annual Meeting and begin planning the 2018 Annual Meeting.

Thank you to the entire AMSC committee, as well as the APRC and SA Chairs, for their assistance in making this a successful Annual Meeting yet again.

Items of Concern: None

Request for Action: None
## Activities of the Committee or Affiliated Organizations

### I. Regarding Charge #3

Provide a mandatory training session (most likely by conference call) for abstract reviewers detailing the abstract review process and tips for critiquing abstracts.

- Dr. Deborah Josko, Chair of the APRC conducted a training session for APRC members on March 30, 2017.
- Participants were given blind abstracts prior to the session to evaluate whether “good” or “bad” and to categorize whether qualitative or quantitative research, clinical case or management/education case.
- Quantitative vs. Qualitative abstracts were discussed in detail.
- At the end of the session, APRC members including new members had a better understanding of the difference between the two.
- This process was important to 1) standardize the abstract review process, 2) to evaluate research abstracts based on the appropriate category – either Qualitative or Quantitative Research. This ensures all members are on the same page when grading and evaluating abstracts.

### II. Abstracts submitted for poster and oral presentations for the national meeting in San Diego, California were distributed to APRC member by the Vice-Chair. The APRC reviewed twenty nine (29) abstracts for the 2017 Annual Meeting. A total of twenty-three (23) were accepted with eighteen (18) as poster presentations and five (5) as oral presentations. Sixteen (16) posters will be presented at the AM.

## Items of Concern:

None

## Request for Action:

None
**Activities of the Committee or Affiliated Organizations since Interim BOD Meeting**

- The Awards Committee met by conference call in March, April, May and June.
- Thanks to the help of many members, nominations were judged, winners were notified and asked to RSVP, non-winners were notified, and other awards calculated. The Awards Committee coordinated with the other Committees who provide awards and scholarships, and with the ASCLS Office.
- Arrangements were made for a memorable Awards Ceremony, with the Industry and Member awards combined. The Awards Ceremony will be held on Thursday, August 3 at 8 am in San Diego, and Scott Aikey will emcee.
- The following is the number of applications that were received this year, which are similar to previous years.
  - *Lifetime Achievement* – 5
  - *Student Forum Leadership* – 5
  - *New Professional Leadership* – 7
  - *Website* – 12
  - *Publications* – 7
  - *Theriot* – 2
  - *Scientific Research* – 4
  - *Scientific Assembly Bio-Rad Professional* - 5
  - *Constituent Member of the Year* - 21 members will be recognized
  - *Omicron Sigma* – 462 members will be honored
  - *Key to the Future* – 64 members will be honored

**Items of Concern:**
Using the [awards@ascls.org](mailto:awards@ascls.org) e-mail was problematic this year, as some nominations and RSVPs were not automatically forwarded. This led to some frustration from members. The Awards Committee will be meeting with the ASCLS Office during this annual meeting to begin the transformation of the Forms/Email submission process to an online submission process through a website. That will eliminate the problem.

**Request for Action:** None at this time
Activities of the Committee or Affiliated Organizations
- The Committee has met regularly (monthly) to construct tools for constituent state societies to use in their review of their bylaws.
- A request was sent out for updated bylaws from all constituent state societies with 19 responses being received. An analysis was done to determine how many states had relatively current bylaws.
- A committee member also assessed how many constituent state societies’ bylaws reflected the member category of new professional.
- The document that explains how to make changes to bylaws and submitting those changes to the national committee for review was approved as a part of the tools.
- A bylaws template document was reviewed and approved as a resource tool.
- A “helpful hints” document was created to coordinate with the bylaws template. The document was divided up with the committee members. Once all changes are received, the entire committee will finalize by the July 18 meeting prior to the ASCLS Annual Meeting.
- Our goal is to have all documents ready by the 2017 Annual Meeting for the incoming state presidents/leadership.
- Once the documents are ready, the committee intends to do a PowerPoint presentation of the critical components of bylaws generation and review for use at the state level.
- Thanks to all on the committee who have participated in the review of these tools, and their contribution to assisting ASCLS membership.

Items of Concern:
No Concerns

Request for Action:
No Requests for Action
Activities of the Committee or Affiliated Organizations

Clinical Laboratory Science Journal published its 4 quarterly issues from June 2016- June 2017. Over the last year the journal has received the following manuscripts: ~13 Clinical Practice manuscripts, ~12 manuscripts in research and reports, and 8 manuscripts in education. The 4 focus series were published on diabetes mellitus, Sodium imbalance, STIs, and Diversity in the clinical laboratory. Clinical Laboratory Science Journal must address its issues related to its pubmed listing. At last update from the executive vice-president contracts with a publisher and manuscript handling system were being drafted and worked out. There is no further information regarding the ability to implement a new manuscript handling system. Additionally it was expected that all manuscripts would be retroactively listed in Pubmed as part of these new agreements. Overall we would like to increase the quality of articles submitted, improve its visibility, impact factor, and stabilize its listing in Pubmed and other databases. This will not occur without these agreements in place. Furthermore it is impossible to do any forward planning without an expected timetable for implementation and transition especially with an all-volunteer staff that may have other work related obligations.

At CLEC 2017 the CLS editorial board laid out a new vision for the journal. We are currently unable to execute this vision at present because journal updates would be redundant and a big loss of effort if done prior to the transfer and update with a new website and/or new electronic manuscript handling system. All author guidelines, submission process, and other changes will have to be done after the new implementation. We are excited about the new possibilities and the support of the executive leadership in this transition. Our only request is that we have a regular update on a timetable for implementation.

Steps have been taken to update the organizational structure of the journal and to improve the number of volunteers involved with the journal. The structure of 4 editors and an EIC needs revision. In the short-term we have made the following implementations and changes for immediate impact.

The journal has completed the following initiatives

1. The journal presented a vision for the future of the Journal at CLEC 2017
2. The journal has established monthly editor conference calls with status reports on pending manuscript
3. The journal developed and implemented a modified review form which includes manuscript summaries and more constructive criticism rather than edits
4. Most manuscripts are having turn-around times of approximately 6 weeks or less
5. Teresa Nadder has been appointed as the new editor for clinical practice.
6. Connie Mahon has been appointed as the new editor for education.
7. Deb Josko has been appointed as the coordinator of consulting editors upon the completion of Mary Ann McLane's term.

The journal is working on the following initiatives:

1. Updating and modifying the list of reviewers for the journal. We now have an extensive list of potential reviewers based on recommendations of our scientific assemblies. Work on vetting and adding these reviewers are in progress.
2. The editors have agreed to present at the 2017 Annual meeting. We did not submit a proposal for this year's annual meeting prior to the change in the editor in chief. However there was a cancellation and we are presenting "Reviewing Manuscripts for Scientific Journals: A Guide for Authors and Reviewers of Clinical Laboratory Science Journal" to fill a cancelled session.

Items of Concern:
   1. Lack of a clear timetable for implementation of new website and manuscript handling system
   2. Pubmed listing must be updated as soon as possible and current timetable is unclear.
   3. Inability to make forward progress with the journal while waiting for changes to take effect.

Request for Action: None
Activities of the Chair:

- **August**
  - Communicated with DAC members to submit proposals to Annual Meeting Steering Committee for the 2017 ASCLS Annual Meeting and AMI.

- **September**
  - Call for Action: ASCLS Today Articles
    - Volunteers to write DAC Articles: Halcyon St. Hill, Jazmen Myers and Samantha Treutel

- **October**
  - Submitted the monthly communication/update to Suzanne Campbell
  - Call for Volunteers: DAC Regional Liaisons: Region II, IV, VIII, IX and Student Forum
  - Currently working with the DAC Scholarship Committee to develop the Diversity Advocacy Council Undergraduate Scholarship and the Diversity Advocacy Council Travel Scholarship

- **November**
  - Submitted the ASCLS DAC Fall Board Report
  - Forwarded the ASCLS BOD approved ASCLS Policy on Discriminatory Laws and Statutes

- **December**
  - Submitted the statement that encourages participants to promote diversity in their submitted videos to the ASCLS Membership Committee.

- **January**
  - Updated the following on the ASCLS DAC Community Page
    - DAC Leadership and Membership Roster
    - DAC Bylaws
    - DAC Strategic Planning
    - Other related documents: scholarships etc

- **February**
  - Submitted the ASCLS DAC Interim Board Report

- **March**
  - Submitted volunteers for Abstract and Proposal Committee Representative for the DAC
  - Call for Volunteers:
    - ASCLS Abstract and Proposal Committee DAC representatives
    - Panel of Judges for scholarships and travel grants
  - Correspondence with DAC Liaisons to communicate with the States and constituent societies regarding the:
    - DAC Undergraduate Scholarships
    - DAC Travel Grant
DAC members to judge the scholarship and travel grant
  • Updated the following on the ASCLS DAC Community Page
    ■ DAC Undergraduate Scholarship FINAL form
    ■ DAC Travel Grant FINAL form
  • Correspondence with New Ideas Factory and Cheryl Caskey
    ■ Identify under-represented communities within practice field
    ■ Identify barriers and disparities in ASCLS.

• April
  • Volunteer judge for the DAC Undergraduate Scholarship and DAC Travel Grant

Activities of the Council:
• August
  • ASCLS New Ideas Factory successfully launched a fundraising for the DAC Travel Grant at the ASCLS Annual Meeting and Clin Lab Expo in Philadelphia.
  • ASCLS DAC successfully raised a total of $500.33 and an anonymous donor will match 100% of our donations. I am very happy that the DAC accomplished our goal of $1,000.00.
  • Submitted 6 speaker/session proposals to Annual Meeting Steering Committee for the 2017 ASCLS Annual Meeting and AMI. (08/12/2016)

• September
  • Completion of the proposed ASCLS DAC Statement Paper regarding the North Carolina Legislation.
  • ASCLS Today Article submission: Diversity and Inclusiveness: “Tuning in” to its Value and Benefits by Halcyon St. Hill, Ed.D., M.S., MLS (ASCP)CM FASAHP

• November
  • ASCLS Policy on Discriminatory laws and Statutes: The American Society for Clinical Laboratory Science (ASCLS) is an inclusive, culturally diverse organization of laboratory professionals that acknowledges the differences and unique characteristics of each member. ASCLS is committed to an inclusive environment where all individuals are treated with dignity and respect. Recent legislation in North Carolina, Mississippi, and other states is contrary to embracing diversity and inclusion. ASCLS joins with other organizations, groups, and businesses that believe these laws go against our fundamental belief of equality and are bad for the states in which they have been enacted. ASCLS will look to schedule conferences and events in other, non-discriminatory states.

• February
  • DAC Student Scholarship
- Application Form in Progress
  - Drafted by James March Mistler, DAC Scholarship Chair
    - DAC Travel Grant
      - Application Form in Progress
      - Drafted by Kelcey Harper

- March
  - James March Mistler: Final distribution of the DAC Undergraduate Scholarship and DAC Travel Grant to all ASCLS
  - JoAnne Koch-Owens: appointed as the DAC Representative for ASCLS Abstract and Proposal Committee.

- April
  - ASCLS Today Article submission: The Road to Diversity by D. Wayne Wilson, B.S., MT(AMT)
  - Judges Panel created to judge the DAC Undergraduate Scholarship and DAC Travel Grant: James March Mistler, Kelcey Harper, Jonathan Gusilatar, Miles Tompkins, Josh Pullido, Ana Lucia Oliveira, Alice Hawley and Roslyn McQueen.
  - James March Mistler: facilitate and manage the selection of DAC Undergraduate Scholarship recipients

- June
  - James March Mistler: selection of DAC Undergraduate Scholarship recipients

Concerns: None

Request for Action or Discussion: None
<table>
<thead>
<tr>
<th>REPORTS TO:</th>
<th>ESA</th>
</tr>
</thead>
<tbody>
<tr>
<td>REPORT OF:</td>
<td>DCLS Oversight Committee, a Subcommittee of the ESA</td>
</tr>
<tr>
<td>SUBMITTED FOR:</td>
<td>2017 Annual Board Meeting Report</td>
</tr>
<tr>
<td>PREPARED BY:</td>
<td>Renee Hodgkins</td>
</tr>
<tr>
<td>DATE:</td>
<td>7/17/2017</td>
</tr>
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</table>

### Activities of the Committee or Affiliated Organizations

#### Summary of Activities since February 2017.

1. Conference call meetings were held on April 24, 2017 and June 26, 2017. An in-person meeting is scheduled for July 30, 2017 at the 2017 Annual Meeting.
2. The following projects are in progress to address our strategic plan for 2016-2019:
   a. Establish DCLS as an advanced career option for MLS
      i. Program development tools
      ii. Development of Body of knowledge document
      iii. Communication with NAACLS for DCLS program accreditation standards
      iv. Financial support mechanisms for DCLS students
      v. Development of the clinical skills and practice opportunities for DCLS residency/clinical experience
   b. Address professional issues related to DCLS practice
   c. Marketing the DCLS throughout healthcare industry and to the public
   d. Developing DCLS certification mechanisms
      i. Establish an independent doctoral-level board certification for the DCLS comparable to the certifications held by MDs, DOs, PharmDs, DNPs, etc. that is specific to the unique scope of practice of the DCLS.
      ii. Interaction with AABB for possible High Complexity Laboratory Director and Clinical Consultant certifications as potential certifications until a DCLS specific HHS approved certification can be developed.
      iii. Addressing reimbursement/payment and insurance issues
3. Committee will transition to reporting directly to the Board of Directors with the new committee composition in August 2017.

### Items of Concern:

None at this time

### Request for Action:

None at this time
Activities

- Reports received from Julie Bayer-Ville, Matthew Yang and Stephanie Rink from their being awarded I. Dean Spradling Travel Grants to the 2017 Legislative Symposium; reports forwarded to Sumner Spradling.

- Notified of a return of $924.16 from the 2015 Member Grant of Delfina Dominguez

- Clarified to the AMTF scholarship committee the amounts of E&R Funds to be awarded for undergrad and graduate scholarships (Southern $2000 MLS, Kanuth $1500 MLS, Rodak $1500 MLS, Dolbey $1500 MLS, Dolbey $1000 MLT, Dolbey $3000 graduate) = $10,500. Three recipients will be represented at the awards ceremony.

- Joseph J. Kleiner Award for best article in 2016 Clinical Laboratory Science = Caterina Miraglia and James Razer from University of Massachusetts Dartmouth for “Neurobrucellosis with Acquired Hemophagocytic Lymphohistiocytosis in a Two-Year-Old Bolivian Male”, with Honorable Mention = Perry Scanlan and Peter Hu for “2014-15 Clinical Laboratory Science Faculty Salary Survey”. Hoping to have both recipients represented at the awards ceremony.

- Letters to 32 CEOs were sent in May, requesting meetings with the appropriate staff members at the Expo. Bill Pierce will send additional requests when he gets the 2017 vendor list.

- Five $5000 Member Grant and two $3000 I. Dean Spradling Graduate Research Grant applications were received and reviewed by four Trustees. Recipients: Nilanjan Lodh from Marquette University “Point of Care Diagnosis for Schistosomiasis from Urine by LAMP” (Member) and Brian Deck from Michigan State University “The Viability Effects of Incorporating Opioid Peptide [D-Ala²,D-Leu⁵] Enkephalin into Peripherally Collected Hematopoietic Stem Cells” (Spradling).

- Decision not to provide a second $5000 Member Grant since funds could only cover one. We definitely need to seek more donations!

- Decision made to maintain one application deadline (May 1) for grants, including those who are revising past grants for resubmission.

- Notified 6/8/17 of AACC interest in the efforts of the E&R. Jim Flanigan is arranging a meeting in San Diego with Cyndee Holden (AVP Marketing Communications), Julie Altweis (SVP Sales) and Nancy Andes (SVP Marketing).
• Prepared award poster for **The Binding Site** for recognition of their donation for E&R Member Grants. Germaine Schwider, Quality Manager, will be at the awards ceremony.
• Sent Sumner Spradling condolences on news of his brother Scott’s death.
• Clarified the role of E&R in the Mendelson Award process
• Grant reports are due by **July 2017** from Tim Randolph (MO), Kristy Shanahan (IL), Feng Cao (MO), Nadine Lerret (IL), and by **July 2018** from Brian Deck (AZ) and Nilanjan Lodh (WI)
• Conference call 7/20/17 and FTF 7/31/17

**Items of Concern:** Having only one issue of *ASCLS Today*.

**Request for Action:** None
Activities of the Committee

- Conference call meetings April 17, May 15, and June 19, 2017
- Face-to-face meeting, Washington, D.C. March 19, 2017
- Annual Legislative Symposium March 19-21, 2017

Legislative and Regulatory updates:

- **American Health Care Act (AHCA)** The American Health Care Act (AHCA) legislation to repeal and replace the ACA passed the House, but is DOA in the Senate. There are 13 Senators working on a new plan. Sen. McConnell (R-KY) says they will vote on a Senate version of the bill before the August recess. It is expected that senators will vote along party lines. The proposed bill will likely be a combination of both the House and Senate bills. Reconciliation may be necessary. Senator Collins (R-ME) and Senator Cassidy (R-LA) are working on their own model – Plan B. If the Senate does not approve Plan A, they will move to the Collins and Cassidy Plan B, which may get some Democrat votes.

- **2017 Legislative Symposium** had 135 in attendance from 43 states. The foci were PAMA, workforce issues, and LDTs. The Symposium was successful in reaching more than half of the Senate offices. The main focus of the Symposium was PAMA, with HHS eventually delaying the deadline for submitting data for the marketplace cost evaluation by 60 days (until the end of May).

- **Workforce** – ASCLS approach at the Legislative Symposium was to ask for help getting a GAO study on our workforce status. We have some champions in both the Senate and the House. The VA especially needs help, as they are having difficulty recruiting. Currently, workforce legislation is on hold, as all eyes are on healthcare reform and tax reform. We will continue advocating for additional funding.

- **PAMA** – All in the laboratory community are now on board to seek a delay, in order to expand the definition and get more market data. Two vital issues: 1) the laboratory community is trying to get implementation delayed and 2) the applicable laboratory definition should use the CLIA number, rather the National Provider ID (NPI) to get hospital and physician office labs included.
Shortly after the Legislative Symposium, CMS announced a 60-day delay (to May 30) to report data due to significantly less data having been submitted by the time the delay was announced.

- **LDT/DAIA** – ASCLS responded to the FDA discussion paper published on LDTs in January. ASCLS agrees that LDTs require oversight, but there needs to be a balance between patient protection and innovation/new test development, using a risk-based approach. ASCLS also agrees with a phased-in approach, but does not agree with excluding reporting of problems during the first year. ASCLS agrees with the approach to allow laboratories that are members of a health system to validate a test in one facility for use in all system laboratories. Concerns include the mechanism of validation necessary for molecular tests, as most clinical laboratories do not have the resources to validate a test using a premarket approval (PMA) process. It is felt that the process that is used for approval in New York may be a good model, and will be considered for recommendation.

A new piece of legislation is being floated - the **Diagnostic Accuracy and Innovation Act (DAIA)**- with a focus on LDTs, by Rep. Diana DeGette (D-CO) and Rep. Larry Bucshon (R-IN). GAC concerns regarding DAIA include: 1) oppose combining manufacturer developed tests and LDTs; 2) oppose eliminating the 510K for manufacturers; 3) need distinction between a broadly-used test to market vs. an LDT for a single lab or a single health system; 4) regulations should be more stringent for manufacturers – their products have broader use with testing being performed by a broader range of personnel; 5) suggest using a more streamlined 510K-type process for LDTs; 6) not appropriate for CMS to administer LDTs, but should be administered by FDA; 7) the new FDA department proposed is not feasible; 8) proposed deadlines for FDA are not realistic; 9) do not agree with allowing the test developer to determine the risk level; 10) the draft refers to “unmet needs” – need more definition; 11) support the January 24, 2017 letter to FDA from the laboratory coalition and their concerns; 12) concern that FDA can delegate to 3rd parties, as CLIA deeming COLA, etc.; 13) modernization of CLIA is a separate matter; 14) it is unclear what the impact would be on waived, PPM, moderate and high complexity test levels; 15) support for the formation of an advisory panel to include laboratory professionals; and 16) the application for one LDT should include use for all laboratories in the health system. ASCLS has submitted these comments to the offices of the sponsoring Representatives.

- **CMS nursing degree equivalency/CLIA** —A letter was sent by ASCLS, ASCP, and the BOC to the Office of the Inspector General (OIG) for CMS regarding the nursing degree equivalency which allows nurses them to supervise high complexity laboratories and perform high complexity testing, asking for a reversal of this interpretation and asking when there would be a ruling. A response was received shortly after the Legislative Symposium, stating that the ruling would not be reversed, and that any change would have to go through a rule-making process.

Items of Concern:

- The current environment in Washington, D.C. is challenging. Members of Congress (and members of their staff) seem increasingly disconnected from the “real” world impact of complex issues that can effect clinical laboratories and laboratorians, including the workforce shortage, reimbursement for laboratory services, and regulation of laboratory testing. It is incumbent on everyone in the
laboratory community to redouble their efforts to communicate with Congress on key issues to ensure that the real world impacts can be known ahead of important decisions being made.

**Request for Action:** None
1. There were no activities requiring the committee’s attention during the period since the Interim Board Meeting.

2. The committee received and accepted the resignation of one committee member on the committee. President Suzanne Campbell appointed JR Constance to fill the vacated position until the House of Delegates can elect someone to the committee.

3. Nominations: Please be aware that three members will need to be elected to the committee during the Elections at the 2017 Annual Meeting

   a. One member for a 1-year term to fill Joni Gilstrap’s position (a one year appointment filled by President Campbell)
   b. One member for a 4-year term to fill Jim Griffith’s position (resignation). Temporary appointment of JR Constance by President Campbell
   c. One member for a 5-year term to fill Scott Aikey’s position whose term is ending

Request for Action: None

I would like to thank the entire committee listed below for their hard work this year!

Scott Aikey, Chair
Joni Gilstrap
Ginger Weeden
Cathy Otto
JR Constance
## Activities of the Committee or Affiliated Organizations

### ASCLS Membership Committee Activities:

- **ASCLS Membership Committee members** have met by conference call on the first Monday of each month beginning September 2016.
- Committee member attendance has been consistent at about 65%.
- **ASCLS Voices Under 40:** Several calls for nominations and reminders were sent to ASCLS members. Eight nominations were received by the deadline of May 1; nominees were rated by committee members. Notifications were sent to all nominees; letters sent to employers, honoree names submitted to Awards committee. Recognition will take place at the ASCLS Member Awards ceremony on August 3. The committee has reviewed the Voices process and recommended changes for the next year.
- Member Rewards promotion was removed this year.
- Early Renewal was changed this year. Early Renewal previously began March 1 but was moved to May 1.
- **ASCLS Group Membership Package information:** Group packages have increased with a consistent interest among educational programs and a building interest among laboratory groups. Manager’s packages were renamed as Laboratory Group Packages and no longer include free registration at a national meeting but will earn $50 for every 5 members above 10.
- Continued issuing monthly communications. These updates were posted on the Membership Committee page. Committee members were also charged with sending the communications directly to those they represent.
- **ROI information for membership:** each monthly update includes a bullet point detailing one member-only benefit. This year the focus was on patient safety. Holly Weinberg supplied 5 patient safety member only benefits. Other examples include networking opportunities, leadership academy offerings at state, regional and national levels, and CMP membership offerings.
- The New Ideas Factory requested to join Membership Committee as a subcommittee. Request was approved.
- Mattie Kropf, Lacey Campbell and Brandy Greenhill headed up the You Tube Video Contest again this year. The winning entries were submitted by Joanna Ellis, Texas State University, and Maria Rodriguez from Montana.
• Roxanne Alter chaired the Membership Restructure sub-Committee. The original purpose of this committee was to determine if a value-based model is suitable and feasible for ASCLS. The committee charges became more robust and ended with a recommended new membership model currently submitted to the Executive Board. See RFA and attachments.
• Brooke Solberg and Alice Hawley/Brandy Greenhill submitted an articles to ASCLS Today.

**Items of Concern:**

Need more active participation from committee members.

**Request for Action:**

I move that the ASCLS Board approve the attached membership dues structure (Attachment A) for implementation during FY2018 and refer to the Bylaws and Policies and Procedure Committees for any recommendations required within the Bylaws and SOPs to fully implement.

*Noted: A report of the Membership Restructuring Subcommittee is provided (Attachment B) for additional information. However, the board is voting to implement the structure in Attachment A.*
## Attachment A

### Proposed Membership Dues Structure

#### ASCLS Membership Types/Benefits

<table>
<thead>
<tr>
<th>Description</th>
<th>Developing Professional</th>
<th>Ascending Professionals</th>
<th>Professional</th>
<th>Platinum Professional</th>
<th>Community</th>
</tr>
</thead>
<tbody>
<tr>
<td>Membership in Scientific Assemblies of your choice</td>
<td>X</td>
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<td>Unlimited access to ALL Forums on the ASCLS Connect online community</td>
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<tr>
<td>Eligibility for continuous membership needed to qualify for Platinum membership status</td>
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<tr>
<td>Member discounts on all ASCLS products and events</td>
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<td>Special Platinum Pricing</td>
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<tr>
<td>Leadership opportunities to serve on national committees, taskforces, or delegate in the HOD</td>
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</table>
Membership Type Eligibility

- Developing Professionals (formerly Student members)
  - Eligibility: Enrollment full-time in undergraduate and graduate programs in or related to the clinical laboratory. The member can maintain this membership category for no more than 5 years.
- Ascending Professionals, replaces FYP
  - Eligibility: Members can maintain this category for 5 years. NOTE: this timeframe is to be used to coincide with the definition of a New Professional.
- Professional, combination of Professional I and II
  - Eligibility: Open to any member
- Platinum Professionals, replaces Emeritus I and II members (all Emeritus Members are grandfathered into Platinum Professional membership)
  - Eligibility: Membership in ASCLS for 25 years AND has reached the age of 67
- Community Membership, Non-Professional
  - Eligibility: Open to anyone

Create a premium membership category for individuals who wish to support ASCLS in a broader capacity and provide additional benefits to this group.

Sustaining Membership

- Cost: Additional $100
- Eligibility: All membership categories

Provide discounted pricing to those members who renew on time as well as a 2-year student membership.

<table>
<thead>
<tr>
<th>Membership Type</th>
<th>Developing Professional</th>
<th>Ascending Professionals</th>
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<td>Requires continuous membership</td>
<td>$72</td>
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Summary of Membership Restructure
Subcommittee for ASCLS Board of Directors

Subcommittee members:
- Roxanne Alter ralter@unmc.edu (Chair)
- Sharon Reistad sharon.reistad@med.und.edu
- Lauren Engel lauren.engel94@gmail.com
- Abou Drammeh aboudrammeh@gmail.com

Purpose
Determine if a value-based model is suitable and feasible for ASCLS

Charges
- Review other organizations membership models
- Review offerings such as CE, different professional levels
  - PF1 vs PF2- do we need two categories
  - Should journal be a standard offering to all memberships
  - Emeritus vs Retired Member category
- Using items in ROI, is there enough for division into a value-based model?
- Design/Recommend a value-based model if possible. If not, what are the obstacles?

Resources and Data Reviewed:
- Lapsed member survey from 2013-14 Leadership Academy
- 2015 and 2016 New Professionals and New Members Surveys
- 2016 Retired Professional Survey
- Engagement and Member Experience: http://associationsnow.com/2016/10/engagement-must-built-member-experience/
- SCCM Membership Value Survey
- Membership information for outside organizations, some within the lab profession, and some outside.
Summary of Findings

ASCLS needs to develop and define the tangible and intangible benefits of being an ASCLS member

Tangible Benefits

Discounts for target, Starbucks – We need a committee to search out companies for discounts. It would be great if we had companies that are important to our industry and that our members would value. These benefits need to be communicated, continually updated and meaningful.

Intangible Benefits (available to members only)

- Community groups within the ASCLS member community that key in on a person’s particular interests. Each community will need a Admin that will serve as a moderator for discussion. This will keep the discussion going and the community will be updated regularly; examples Rural, Career Starter, or Retired.
- Access to a database of what others are making to benchmark your current salaries, including data of salaries at the 90 percentile.
- Tools for effectively negotiating higher salaries with your boss.
- Case studies from the highest earners in the laboratory profession on how they did it.
- Learning opportunities on how to leverage workforce shortages to increase one's salary.
- Training to move up into management (if that's a choice someone wants to make)
- Special advance access to high paying job postings before release to the rest of the community. There are institutions who are desperate. They are willing to pay more, we can connect them with our members, thus driving our members’ salaries higher.

ASCLS should consider new membership categories and revise the current categories with the basis of the structure being that all members of ASCLS are professionals, but at different points in their careers. The following would be the recommended membership types. See Figure 1 for additional details.

- Developing Professionals, formerly Student members
  - Eligibility: Enrollment full-time in undergraduate and graduate programs in or related to the clinical laboratory. The member can maintain this membership category for no more than 5 years.
- Ascending Professionals, replaces FYP and offers an extended discount.
  - Eligibility: Members can maintain this category for 5 years. NOTE: this timeframe is to be used to coincide with the definition of a New Professional.
- Established Professionals, combination of Professional I and II
  - Eligibility: Open to any member
- Platinum Professionals, combination of Emeritus I and II members
  - Eligibility: Membership in ASCLS for 25 years AND has reached the age of 67
- Community Membership, Non-Professional
  - Eligibility: Open to anyone
# ASCLS Membership Models-Figure 1

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<tr>
<td>Career Starter</td>
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</table>
ASCLS should consider a premium membership category for individuals who wish to and are able to support ASCLS in a broader capacity

Sustaining Membership
- Cost: Additional $100
- Eligibility: All membership categories
- Possible benefits:
  - Early Bird pricing for events all the time.
  - Special reserved seating at ASCLS Events
  - Exclusive Sustaining Member online community
  - Special membership pin and meeting lanyards to show your unique commitment to sustaining the profession.
  - Participation in the 3P advisory council
  - Early access to the ASCLS hotel blocks at meetings.

ASCLS should consider offering a price break to those members who renew on time as well as a 2 year student membership. See Figure 2.

<table>
<thead>
<tr>
<th>Figure 2</th>
<th>Developing Professional</th>
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<th>Platinum Professional</th>
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<td>Renewal Cost</td>
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<td>$2 per month</td>
<td>$4 per month</td>
<td>$8 per month</td>
<td>$2 per month</td>
<td>$5 per month</td>
<td></td>
</tr>
<tr>
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Activities of the Committee or Affiliated Organizations

1. The committee members were assigned regions/positions to concentrate their efforts for recruitment of candidates. The members of the committee are Angela Darby, Kyle Riding, Rebecca Rogers, Linsdey Davenport-Landry, William Hunt and Barbara Snyderman (board liaison).

2. Article sent for ASCLS Today with term, eligibility and duties of the 2017 open positions.

3. The committee evaluated all potential candidates using a candidate evaluation checklist.

4. The 2017 ASCLS Candidates are: PE—Roslyn McQueen, Region II RD—Nadine Fydryszewski, Region IX RD—Terese Abreu, Region X RD—Kristin Croom, Judicial Committee (1 year)—Joni Gilstrap, Judicial Committee (4 year)—J.R. Constance, Judicial Committee (5 year)—Mary Ann McLane, Nominations Committee—Lisa Bakken and Stephanie Mihane

5. Candidate bios and photos were submitted to Cheryl Caskey for ASCLS Today

6. The Nominations Committee Chair notified the candidates of the presentation times and campaign regulations.

7. Members of the committee composed the PE Question. The question was sent to the PE candidate. The candidate is being asked to respond to “Both ASCLS and the profession of clinical laboratory science are changing at a rapid pace. With the increased use of social media and the number of more diverse, ready to lead individuals coming into the profession, it is vitally important that we embrace these changes and these individuals moving forward. What do you believe is the true direction of ASCLS as we move into the future, and how will this be communicated to the society?”
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<td><strong>Request for Action:</strong></td>
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</table>
Activities of the Committee

1. The committee has met via teleconference on the 2nd Tuesday of each month to address the committee charges and action plan.

2. Blog posts have been submitted to COLA’s LabTestingMatters website each month, with a Patient Safety focus; the last one was submitted in late May for this fiscal year.

3. Existing Patient Safety products have been reviewed and updated. A new brochure-style template has been created, and the updated products will be converted into brochures for posting to the ASCLS website.

4. Two new Patient Safety products have been developed and are under review. An additional two products that were previously unpublished have undergone review and will be available soon.

Items of Concern:
None

Request for Action:
None
Committee Activities:

- **Conference calls** were held in October, November, January, March and May with the final call scheduled for July prior to the 2017 national meeting. The March call was open to state trustees – several regions had good representation from their states.

- **Legislative Days** – four members of the PAC Board were present for this event. Our fundraising goal for this event was 10% of the annual $50,000 goal ($5000). Total donations for this event totaled $4271.00, which was the highest recorded amount collected at a Leg Days event, just short of the 10% goal.

- **ASCLS National Meeting July/Aug 2017**
  - Several PAC trustees will speak at the Student/New Professional orientation session on behalf of PAC.
  - A request for inclusion of PAC information has been submitted for the Incoming President’s orientation session.
  - Tables will be available for collection of PAC donations at ASCLS events.

- **Donations to date this fiscal year** were nearly 50% of our annual goal ($23,005.34) with the biggest fundraising event of the year still to come (ASCLS National Meeting).

- **Two new informational and educational tools** were developed this year and have been published on the PAC Advocacy section of the national website.
  - GAC/PAC Powerpoint and PDF
  - The ABC’s of Being a PAC Trustee

Committee charges and recent activity are noted below:

1. Develop and institute a sustaining, year long, fund-raising campaign for 2016-17.
   a. In progress
   b. Telemarketing is pending.

2. Host fundraising events at the ASCLS Legislative Symposium *(completed)* and Annual Meeting *(planned)*.

3. Solicit contributions at the Legislative Symposium and the ASCLS Annual Meeting *(see above).*
4. Develop a communication plan and schedule for constituent society and regional PAC contacts.
   a. Website – recent supplemental materials uploaded to PAC Advocacy section.
   b. Conference calls and/or face-to-face meetings – completed or anticipated.
   c. Social media – ASCLS Facebook page available for use as appropriate.

5. Assign members to write two articles for ASCLS Today (January and June issues) featuring PAC updates as well as legislative successes and/or challenges.
   a. January issue – completed by Stephanie Rink, Region IV PAC trustee.

6. Continue to work with the ASCLS legislative consultant to direct PAC donations.
   Several donation requests made by Patrick Cooney and approved to date.

   Request for Action: none

Concerns:

1. Several regional trustees have had minimal or no presence on the PAC Board this year. Information will be shared with the appropriate Regional Directors regarding this concern.

2. There is a disconnect between the PAC Board of Trustees Bylaws and the regional PAC Trustee position description, specifically related to the number of members allowed, length of terms, and appointment protocol time frame and approval by the BOD. I would respectfully request that these be studied and aligned for future appointments and PAC boards.
Activities of the Committee

Conference Call November 14, 2016

- **Provider Fee Schedule** - The committee approved the provider fee schedule for 2017.

- **On-line program evaluations** - The committee discussed using on-line evaluations as a method of obtaining more evaluations. The attendee would obtain a P.A.C.E. ® session code after submitting the evaluation. The pros and cons were discussed. It was noted that this process was used by CLMA to provide continuing education credits.

- **Virtual poster session** - Brenda received a request to provide CE credits for viewing a virtual poster session. The group had many questions about how the amount of time individuals spent viewing the posters could be measured in order to assign an appropriate amount of credit. The group did not approve this concept.

- **Color of 2017 P.A.C.E. ® Stickers** - After reviewing the colors from previous years, the group selected PMS color 17-1462 (Flame- a red orange)

Conference Call February 8, 2017

- **Training** - The meeting was held via Zoom to facilitate training on the new method of accessing the self-study programs for review.

- **Special Advisors** - In order to retain the expertise of term-limited committee members and to allow them to continue reviewing self-study courses, the use of special advisors to the committee has been discussed. The special advisor does not vote on policies but can provide opinions on policies and perform reviews. The committee supported this concept.
• Path LMS Website (www.pathlms.com/ascls) - Microbiology Grand Rounds by CACMLE, CLEC Posters/Technology Demonstrations Exam, and a body fluid analysis course are currently available at the Path LMS website. Some courses we review will also be available on this website, which is separate from ASCLS CE.

• **Manual revisions** – the committee discussed policy additions on commercial bias and what subject matter can be approved for CE credits. Revised policies will be distributed to the members for approval.

• **Submitted motion to Board** to allow for the addition of up to 6 special advisors that will serve as reviewers on the P.A.C.E. Committee. *Be it noted: Reviewers would serve 2 year terms and are not subject to term limits. They will not be considered voting members of the P.A.C.E. Committee.  The motion was approved.*

• **Scheduled Face to Face Meeting in San Diego**
  We are planning on using ZOOM to allow those committee members not attending the meeting to participate in our discussion.

• **Responded to requests**

• **Submitted reports**

**Future Activities:**
  • Schedule conference call, training and manual review

**Items of Concern:**
  • None

**Request for Action:**
  • None
## Activities of the Committee or Affiliated Organizations

I. Media Lab Courses produced, in the process of being produced, and marketed by ASCLS in the [www.asclsce.org](http://www.asclsce.org) online store, coordinated by the Director of Professional Development and Project Management are as follows:
   a. Lamellar Body Counts- Final Stages

II. CACMLE was acquired by ASCLS, PDC is supporting ASCLS in courses as follows:
   a. Possible Courses
      1. Mentoring- Toula Castillo
      2. Dealing with Workforce Negativity- TBD
      3. Presentation Skills, Including Presenting Data and Information- Ian Clift
      4. Professionalism- K. Lindsey Davenport-Landry
   b. Collaboration
      1. CEPI-ESA- Education on how to use the ELC
      2. Development of educational resources especially focused on new educators.

III. Ad-hoc Application committee:
   a. The chair of the sub-committee hopes to have a demonstration prior to the Annual Meeting, and be able answer questions and further demonstrate the application at the PDC face to face.

IV. Conference calls held Sept, Oct, Nov, Jan, Feb, Apr, & June.

### Items of Concern: None.

### Request for Action:

Move that the ASCLS Board approve utilization of a podcast format for possible courses produced by the Product Development Committee; at this point there are no direct costs associated with producing this product.
Activities of the Committee or Affiliated Organizations

1. The committee has launched the Critical Conversations campaign that we have been working on since September. “On the Road to Understanding” is a promotional campaign aimed at sharing the positive inter professional interactions that laboratorians are having so that others will be empowered to do the same. Details can be found on the website we have set up to collect the stories. [http://www.ascls.org/education-meetings/annual-meeting/share-your-story](http://www.ascls.org/education-meetings/annual-meeting/share-your-story). Our goal is to collect 2080 stories, between our annual meeting in San Diego and the next annual meeting in Chicago. 2080 is the number of miles from San Diego to Chicago following Route 66. We intend to mark the miles on a map that will be displayed on the front page of the ASCLS website.

2. We implemented a hashtag campaign for lab week. #ASCLSbetheface. We wanted to capture laboratorians volunteering in their own communities and being the face of the profession to the public. We monitored social media during April and posted some of the responses to the ASCLS home page.

3. The HOPE project in San Diego with collect monetary donations and school supplies for SAY San Diego. The HOPE booth will be located near the ASCLS Registration table at the Omni San Diego Hotel. Donation times are as follows: Sunday, July 30th 4:30 – 5:30 pm / Monday, July 31st 4 – 5:00 pm and Tuesday, August 1st 6:30 – 7:30 pm. At Noon on Thursday August 3rd a representative of SAY San Diego will be available to accept the donations and have photographs taken.

4. Monthly articles were solicited and submitted for the ASCLS Voice column in Advance. We found out in February that Advance would be closing. We re-imagined the online article as a blog post on the ASCLS website. The new home of the ASCLS Voice is now called The Bench Connection. We are continuing to solicit and submit articles on a monthly basis. This is still a project in process. The Advance article gave us an outlet to laboratorians other than ASCLS members and we are still looking for ways to get that information out there. We have been using the blog and having PPC members post the blog to their social media sites to extend the reach to different audiences. The new blog can be found here: [http://www.ascls.org/communication/ascls-connect-blog](http://www.ascls.org/communication/ascls-connect-blog)

5. Two articles were written for the ASCLS Voice newsletter.

6. We have been working to update the information for the ScienceCareers.com website. This is still a work in progress. We were given a format and information that was on the
old website with loose guidelines as to the new vision. This project will continue into the next year.

7. The results of the PPC fundraising contest were sent in to the awards committee along with photographs from activities.

**Items of Concern:**

1. We are concerned that the HOPE project seems to be losing steam. It seems like the number of donations have been dropping off in the last couple of years. Probably due to competition for the same resources (PAC donations, etc.). We are looking into other activities that could possibly replace the HOPE project in its current format.

2. The committee has launched a Critical Conversations campaign and would appreciate an opportunity to share some specifics with the board during the meeting.

**Request for Action:**

None
Activities of the Committee or Affiliated Organizations

- Committee Activities
  - Vice-chair Darby did a commendable job of handling the application process for the 2017-2018 Leadership Academy class. While the number of applicants were low this year (see items of concern), the Vice-Chair was highly organized in working with the committee to review applicants. Her hard work is much appreciated by the group – Thank you, Angela.
  - Committee activity beyond the review of applicants was minimal due to the chair’s time commitments prohibiting him from successfully organizing a review of the current curriculum and assessing academy outcomes. Anecdotal evidence and review of past participants’ accomplishments demonstrates the success of the academy but a more thoughtful outcomes analysis should be conducted to demonstrate the value to ASCLS and profession.

- 2016-2017 Leadership Academy Class (10th Class) Activities
  - The participants met face-to-face at the Legislative Symposium and learned a variety of leadership development topics while also working on their final project.
  - The group has had a number of conference calls and has been hard at work on their final project with minimal intervention required from the facilitator/committee chair.
  - The group will meet one last time in San Diego and present their final project during the meeting.

- 2017-2018 Leadership Academy Class
  - Three applicants were accepted into the academy for the coming year.
  - One applicant was denied due to inexperience with ASCLS. The applicant was encouraged to develop more “roots” and connections within the association to help him better understand how he can fit into it as a potential leader.

Items of Concern:

- Application numbers were substantially down this year (decrease of 50%) compared to previous years even with a deadline extension. The concern of applicant numbers was raised at the Interim Meeting and appropriately discussed but this year’s numbers are a legitimate issue that warrants further discussion by the Board.
For the board’s consideration, this decrease in applications may be due to a variety of factors, including:

- Questions relating to the future directions of the Academy curriculum and integration with state and regional academies.
- Successful state and regional leadership academies that borrow heavily from the national curriculum.
- Cost associated with traveling to national meetings becoming too burdensome over time.
- Ten years of graduates now being able to have a more ‘grass roots’ approach to mentorship in states and regions.
- Confusion regarding the roles and responsibilities between the Leadership Development and Leadership Academy Committees as it pertains to solicitation of applicants.

Regardless of the actual cause, two things are clear: 1) an increase in applications must be a goal for the upcoming year and 2) a redesign of the curriculum must be accomplished to allow for better integration between state, regional, and the national academies. However, given the current committee structure and time constraints, this has been challenging. The formation of an ad hoc advisory group that produces a report for consideration by this committee and, ultimately, the board would best accomplish these two goals (see request for action).

**Request for Action:**

I move that the ASCLS Board of Directors create an ad hoc advisory board within the leadership academy committee to accomplish the following charges:

1. Develop a new ASCLS Leadership Academy curriculum that integrates introductory leadership development theories introduced in state, regional, and the national academies with more advanced leadership concepts and projects.
2. Provide states and regions guidance on the curriculum elements that would provide the highest degree of impact at those levels of the association.
3. Design an “ASCLS Leadership Ladder” that outlines to new members on how to build their leadership skills within the new curriculum/structure.
4. Create an application process for the new curriculum along with materials that can be used to solicit applicants at all levels.

Be it noted, that the charges should be completed in a timeframe that allows the leadership academy committee to review and recommend the ad hoc advisory board’s findings to the ASCLS Board of Directors in time for the 2018 Annual Meeting.
### Activities of the Committee or Affiliated Organizations

- Creation of Scientific Assemblies Leaders Community within the ASCLS Member Community.
- Uploaded documents to the new SA Leadership Community and notified members of the new area.
- Shawna Martin stepped down as SA Vice-Coordinator. Sent out notification to SA chairs and co-chairs for ideas of possible candidates to fill the position. No responses received.
- Asked past ESA chair Susan Stalewski if she was interested in position. Notified Deb Rodahl, she communicated with Sue and it was decided between the two that Sue would be able to fill that position. Officially waiting for board approval at this time.
- Reviewed SA handbook updated with new organizational chart and new submission calendar for ASCLS Today. Posted to the SA Leadership Community.

### Items of Concern:

None

### Request for Action:

None

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### REPORTS TO: ASCLS Board of Directors

### REPORT OF: Chemistry/Urinalysis Scientific Assembly

### SUBMITTED FOR: Summer 2017 Scientific Assembly (Chemistry/Urinalysis) Report

### PREPARED BY: Masih Shokrani, Chemistry/Urinalysis SA Chair

### DATE: June 15, 2017

**Activities:**

- Creation of Scientific Assemblies Leaders Community within the ASCLS Member Community.
- Uploaded documents to the new SA Leadership Community and notified members of the new area.
- Shawna Martin stepped down as SA Vice-Coordinator. Sent out notification to SA chairs and co-chairs for ideas of possible candidates to fill the position. No responses received.
- Asked past ESA chair Susan Stalewski if she was interested in position. Notified Deb Rodahl, she communicated with Sue and it was decided between the two that Sue would be able to fill that position. Officially waiting for board approval at this time.
- Reviewed SA handbook updated with new organizational chart and new submission calendar for ASCLS Today. Posted to the SA Leadership Community.
The following speakers and topics were identified for the SPARK sessions that will be held at the ASCLS Annual Meeting in San Diego, CA:
  o “Pre-diabetes: An Epidemic Out of Proportion” by Masih Shokrani
  o “A Prospective Study of Patients Diagnosed with Sarcoidosis: Nutrition, Health Assessment, and Environmental Exposures.” by Gerald Redwine

Sent an abstract for poster presentation at the ASCLS Annual Meeting in San Diego; The abstract was accepted and I will present the poster on August 2; Topic of the Abstract is: “Assessment of Intake of Cinnamon Supplements on Hemoglobin A1c Levels in Pre-Diabetics”

Identified one nominee for Bio-Rad Award for Chemistry for the ASCLS Annual Meeting in San Diego

Will post new announcement/discussion for potential/prospective topics/speakers for 2018ASCLS Annual Meeting in Chicago, IL

Concerns: None
Requests for Action: None

REPORTS TO: Board of Directors
REPORT OF: Scientific Assemblies Microbiology/Public Health
SUBMITTED FOR: 2017 Summer Board Report
PREPARED BY: Lynda Britton, Microbiology/Public Health Chairman
DATE: June 15, 2017

Activities of the Committee or Affiliated Organizations

  • I have continued to contact new members with a welcome letter
  • I have attempted to find three topics and speakers for the SPARK sessions. I have reached out to the Member Community with little response. There will be at least one topic presented:” new age of bacteria resistant to all antimicrobials.”
  • I have posted relevant notices on the community page

Items of Concern: None
Request for Action: None

REPORTS TO: Board of Directors
REPORT OF: Scientific Assemblies - Feb 5 Scientific Assembly (QA/QC/Regulatory/Industry/Consultants)
SUBMITTED FOR: 2017 Summer Board Report
PREPARED BY: Rick Panning, SA chair and Jean Bauer, SA Vice Chair
DATE: June 29, 2017

Activities of the Committee or Affiliated Organizations

  • Nominated Bill Hunt for Bio-Rad award for Lab Administration. Bill will receive the award
• Asked by Linda Gorman to provide judges for the posters. Posted this in our community and received 5 responses which were forwarded to Linda.

• Lab Admin chosen as one of 5 SAs to provide a SPARK session (used to be lunch and learn. Posted a request for topics - we need 3. I have received the following suggestions. Topics have not yet been chosen.
  o PAMA data collection process and submission. Future concerns.
  o How to deal with a product recall after testing has already been performed (recent Lead recall by Magellan as an example)
  o How to integrate laboratories when there is a merger
  o C Diff Algorithm
  o A!C variants. Best instrument
  o How to keep blood on the shelf

• Other postings in community (13 postings, 4 with responses)
  o Proposals requested for 2017 meeting
  o Critical values for Troponin
  o ASCP Vacancy survey responses requested
  o References for clinical Lab Consultants
  o Requesting articles for Advance “ASCLS” Voice
  o Help MLS 10 years working out of country
  o PAMA overview
  o Changes in PAMA reporting
  o Suggestions for Electronic Document Control systems
  o Posting U of Michigan position

• Jean participated in mid-year SA conference call meeting
• Jean and Rick planning the Admin SA agenda for the annual meeting

**Items of Concern:**
Continued concern about the minimal use of the Communities for our scientific assembly. This past year there were only 13 postings and response only to 4 of them. Best success with the last two posting is in June. This should be an opportunity for the members to network and learn from and support each other.

**Request for Action:** None

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<td>REPORT OF:</td>
<td>Scientific Assemblies - Hematology/Hemostasis</td>
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<td>SUBMITTED FOR:</td>
<td>2017 Summer Board Report</td>
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<tr>
<td>PREPARED BY:</td>
<td>Kristin Landis-Piwowar</td>
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**Activities of the Committee or Affiliated Organizations**

1. Mediated correspondence with Renee Hodgkin and Cheryl Caskey for a heme article for ASCLS Today, June issue, but possibly the following issue.
2. Chair posted a discussion thread regarding the new spark sessions at the 2017 annual meeting (Kristin Landis-Piwowar and Dave McGlasson will be presenting).
3. Connected Karrie Hovis, Perry Scanlan, with Kin Cheng, ART (CSMLS - Canada), Founder and Administrator of a Hematology Interest Group on Facebook. Zoom conference call took place to discuss webinars relevant to ASCLS.
**Items of Concern:** None  
**Request for Action:** None

**REPORTS TO:** Board of Directors  
**REPORT OF:** Scientific Assemblies - Generalist  
**SUBMITTED FOR:** 2017 Summer Board Report  
**PREPARED BY:** Ally Storla  
**DATE:** 06/07/2017

**Activities of the Committee or Affiliated Organizations**

Laboratory Tours participation activity seems to have fizzled, the forum has received some response when requesting discussion topics for the upcoming annual meeting. I believe the forums have a lot of potential but the content used to encourage participation must be engaging which can be challenging.

**Items of Concern:** None  
**Request for Action:** None

**REPORTS TO:** Board of Directors  
**REPORT OF:** Scientific Assemblies – Education Assembly  
**SUBMITTED FOR:** 2017 Summer Board Report  
**PREPARED BY:** Darius Y. Wilson, ESA Chair  
**DATE:** 06/19/2017

**Activities of the Committee or Affiliated Organizations**

1. Face to face meeting at CLEC 2017 in Boston. Provided powerpoint presentation to give committee updates.
2. Attended CLEC wrap up session with ASCLS staff, CLEC chairs, and Dr. Josephat, ESA co-chair.
3. April 3, 2017-Phone conference with Karrie Hovis and other committee members to review CLEC 2017 Evaluation Summary.
4. Phone conference with Karrie Hovis, Floyd Josephat, and Darius Wilson to review co-chair responsibilities.
5. Collaborated with Karrie Hovis in May to obtain 2 volunteers to review and update the directory for online programs and participated in the phone conference: Volunteers: Anastasia Augustine MLT(ASCP)CM,SP-POC and Abou Drammeh
6. Phone conference with Karrie Hovis to review the member community usage on the ASCLS website.
7. Assisted Dr. Josephat, ESA Co-Chair to secure ASCLS member volunteers to review student case studies, research papers, and poster abstracts for the ASCLS meeting. Nine posters will be judged at the ASCLS meeting. (April 2017)
8. Vacant CEPI positions to be voted on at the ASCLS annual meeting.

**Items of Concern:**

Project for 2017 to update the CLEC Guidelines and Timeline.

**Request for Action:** None

| REPORTS TO: | Board of Directors |
| REPORT OF: | Scientific Assemblies - Committee on Educational Programs and Initiatives (CEPI), a sub-committee of the ESA |
| SUBMITTED FOR: | 2017 Annual Meeting Board Report |
| PREPARED BY: | Joan Polancic, Chair |
| DATE: | June 14, 2017 |

**Activities of the Committee or Affiliated Organizations**

**CEPI duties include:**

1) Monitor and assess the trends in levels of practice and education of practitioners at all levels.
2) Develop and deliver annual mentoring and professional development activities in conjunction with the Clinical Laboratory Educators’ Conference.
3) Assess current trends in educational programs and their effects on career choices in clinical laboratory science. This is to include the updating, development, and implementation of appropriate career recruitment materials and strategies for use with precollege and undergraduate students, as well as graduate students.

**Committee**

The CEPI met the following dates via teleconference:

- October 3, 2016
- November 8, 2016
- January 24, 2017
- April 11, 2017

Committee members include Mike Bishop, Cindy Handley, Kathy Hoag- Vice chair, Joan Polancic - Chair, Cathy Robinson, Becky See.

**Committee Activities** since the March 2017 BOD meeting:

**CLEC 2017 CEPI proposed session** - A panel of MLS and MLT educators presented stories of success to retain and recruit clinical sites as well as how to determine a return on investment (ROI) that may entice additional sites. A proposal for a session at CLEC 2018 was submitted entitled “Tips for Successful Grant Applications for Research in Education.”
**CEPI representative to Legislative Symposium in March** – Cindy Handley volunteered to attend the Legislative Symposium in March. She submitted several reports to the ESA Member Community to update on PAMA and other legislative issues.

**Simulated lab survey** – Karen Krisher, a faculty member at Wayne State University in Detroit developed a survey that was sent to NAACLS programs (from ASCLS) and the Simulated Lab listserv. She reported at CLEC about survey results and will submit a manuscript to Clinical Laboratory Science. She will continue to keep CEPI updated on this increasingly popular topic among MLT & MLS education programs.

**Development of the ASCLS Medical Laboratory Educator Professional Development Institute (MLEd-PDI)** – the ASCLS BOD approved development of this new endeavor at the March Board Meeting.

**Goals:**
1. Provide new educators information to assist with curriculum and course development and implementation.
2. Offer quality online modules on education topics.
3. Be a resource for new and seasoned educators alike.

**Target Audience:** Medical laboratory science educators, particularly with less than 5 years of experience as educators.

**Plans:** The CEPI has identified several needed topics and potential authors to launch the program with 4-5 online courses which will provide a foundation of educational principles needed for good instruction. PACE credit will be provided for successful completion.

The CEPI, with the assistance of the Product Development Committee (PDC), will take the lead with course development. We believe that once these modules are established, additional courses will be identified and offered to continue to provide timely, affordable, and useful continuing education to clinical lab educators. The Institute will continue to evolve and grow as needed to meet the needs of educators. It will supplement the successful Clinical Lab Educators’ Conference (CLEC). ASCLS staff will provide guidance on marketing and course registration fees as well as author honorarium fees.

**Items of Concern:** None

**Request for Action:** None

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<td>2017 Summer Board Report</td>
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<td>Wendy C. Lumm, Chair</td>
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**Activities of the Committee or Affiliated Organizations**

**Member Community** – We post regularly to the MDx Member Community. The Chair and Vice-Chair are students and have been posting less often. We hope interest
in molecular will not wane because Julie and I believe that there is a great future for molecular methods to increasingly be sought after in the clinical lab.

**ASCLS Today and ASCLS CLI**—Julie and I are both very enthusiastic about our careers and I hope to continue writing about molecular in the ASCLS newsletter and hope to keep doing molecular research post-graduation. Julie is now working on her doctorate and I am super excited that she will be our new Chair come August. We are both excited about San Diego and hope we will see new faces at our SA meeting.

**Items of Concern:**

Participation can always improve and increase. We have had a slight increase in participation on our member community site. We seem to get left out as molecular methods are sort of tucked away in each of the other specialties.

Drum up interest from MLS programs for students in the San Diego environs. Encourage instructors in MLS programs in the Southwest to encourage their students to go to the National meeting. I wouldn’t want to miss it!!!

**Request for Action:** None

**REPORTS TO:** Board of Directors  
**REPORT OF:** SA Immunohematology/Immunology  
**SUBMITTED FOR:** 2017 Summer Board Report  
**PREPARED BY:** Stacie Lansink  
**DATE:** 6/16/17

**Activities of the Committee or Affiliated Organizations**

Nothing to report

**Items of Concern:** None  
**Request for Action:** None

**Board Reports were not received from the following Scientific Assemblies:**

- Phlebotomy Assembly  
- Point of Care Assembly  
- Informatics Assembly  
- Case Studies
## Activities of the Committee or Affiliated Organizations since the Interim BOD meeting

- Conference calls were held in April and May.
- The Measuring Value initiative continues, although at a slow pace, with plans for a manuscript that will outline a framework tool to measure the value of laboratory services, followed by recruitment of laboratories to serve as pilot sites to validate the tool.
- The CCCLW coalition met for a face-to-face strategic planning meeting in Chicago on June 19, 2017. After discussion, it was determined that the CCCLW could have the most impact on the workforce shortage by prioritizing our combined efforts to students, education programs, and advocacy. The following Action Plan was developed:
  - Design a dynamic LabScienceCareers website to promote and attract potential students to pursue a lab science career
  - Enhance the CCCLW website with existing career promotion and recruitment materials identified by each member organization
  - Explore the possibility of a clearinghouse to match students and education programs, similar to the pharmacists
  - Develop a position paper on the revision of CMS standards and workforce legislation
- ASCLS members and Committees will be recruited to work on these Action Plan initiatives, including recruiting young professionals to work on the design team for the LabScienceCareers website.

## Items of Concern:
None at this time

## Request for Action:
I move that the ASCLS Board of Directors continue to support the efforts of the CCCLW through the sharing of ASCLS recruitment resources and tools that currently exist on the ASCLS website, and through support for Committee and ASCLS members in assisting with CCCLW action plan initiatives.

Be it noted, all the member organizations in CCCLW have been asked to reaffirm their commitment to participating as members. There are currently no financial obligations required for continuing participation.
## CCCLW Member Organizations

- AACC
- AGT
- AMT
- ASC
- ASCP
- ASHI
- ASM
- BOC
- CLMA
- NAACLS
- NSH
- Ortho
- VA
Initial Business

- Thank you to AMT for hosting this meeting!!

- What would you like to see as a result of today’s strategic planning exercise?

- Approval of April meeting minutes
CCCLW Finance Report

Jim Flanigan - ASCLS

- Start of Fiscal Year (August) balance $11,186
- 2016/17 Expenditures - $4295 spent
  - $21 Conference calls
  - $571 Chair travel to June meeting
  - $3703 April Measuring Value meeting

- Available funds for current projects $6,891
Update on Current Workforce Shortage Data
Vanessa Lewin

Surveys occur every 4 years so 2014 is most recent for Vacancy while 2015 most recent for Wage survey.

Surveys published in AJCP
• Question was posed as to whether every 4 years is too long given some of the rapid change in healthcare
• Is it possible to consider shorter “pulse surveys” that would provide more frequent checks to better reflect faster occurring changes in both wage and vacancy?

Vacancy
• 328K jobs currently
• 16% growth rate expected
• Vacancy rates vary by region ranging from 7.8 to 10.7%
• Rates are increased over last survey in 2012
  o Retirement rates significantly increased over 2012

Wage
• Increases observed in all but two job categories over prior survey
• Comments submitted by respondents included the following recurring themes:
  o Felt underpaid and underappreciated
  o Need for increase wages
  o Need for greater advocacy
Review of CCCLW Mission & Vision
Steve Zibrat

- Review of current CCCLW mission and vision

- Review of CCCLW origins in 2000 and updates in strategic initiatives in the early years, 2008 and again in 2014 that brought CCCLW focus on demonstrating the value of the laboratory and laboratorian on the healthcare process.

- Review of some recent initiatives by other organizations focusing on “value” including:
  - Advamed
  - COLA
  - Santa Fe 2.0
  - Australian initiatives
Review of Recent CCCLW Projects

Measuring Value – Paul Epner

- Review of some recent initiatives on laboratory value including:

- Provided an update on TMTV work to date including:
  - Realignment of domains around stakeholders
  - Assigning levels of key attributes to each domain
  - Output is expected to be 5-spoked spider change to match domains and provide guidance to users

- Mr. Epner indicated he may have access to a one-day per week volunteer to help him move the work of TMTV forward at a fast pace

- Mr. Flanigan indicated that ASCLS was working on a tool set to help laboratorians fix issues and share information regarding those issues at the grassroots level

- Question and recommendation to determine whether the survey outcome will be published and hope the literature search will also be published.
  - Julie Gayken is in need of one or more co-authors to help with creating manuscript on survey
    - Member organizations are encouraged to make recommendations on potential co-authors
Review of Recent CCCLW Projects
CCCLW Website – Kathy Cilia

- Training completed for Kathy Cilia, Jason Yuhas, and Chad Peterson to modify and update content

- Member organizations are asked to determine what links can be added to the “resource” page from either their own website and/or relevant recent articles
  - Recommendations should also come with 1-3 sentence explaining the resource link.

- Send materials for CCCLW website to kcilia@americanmedtech.org
Review of Recent CCCLW Projects
Lab Science Careers Website – Susie Zanto

- We need to create a design team of young professionals
  - Ask for volunteers from all organizations to join with the ASCLS young professional group to help steer creation of the site look and some of the content to attract and engage those who are <25 years old

Send materials for LSC website to laboratorysolutionz@gmail.com
Coalition

A group of people, groups, or countries who have joined together for a common purpose.

What can a coalition do better than separate organizations?
Be a conduit of ideas among coalition member organizations
Amplify good ideas to reach more people
Enrich ideas with many perspectives
Present a unified response to common concerns
Coalition

What is difficult for a coalition to do?

- No staff to support projects
- Funding dependent on member organization support
- No membership to work on projects
What problem are we trying to solve and why does it matter?

- Concerns of crisis over the past decade that hasn’t materialized
- Are we improving technologically at a rate to keep potential disaster of workforce shortage and quality at bay?
- What happens when we can’t keep ahead of the issues?
- Is it better to let it all “crash and burn” and then have the data and information to build what we have been advocating for many years?
Is CCCLW Effective?

How do we show that we are effective?

Annual report to our member organizations reviewing activities and accomplishments

Are we Coordinating or Doing?

- If coordinating, is that good enough for member organizations?
- Most seem to want more but don’t always indicate what.
- CCCLW strives to do what the organizations want but they don’t always articulate.
  - Vicious circle without guidance and support
  - CCCLW is what the member organizations make of it
Feedback from each of our Member Organizations

What should be our focus for the next 1-2 years?

- **BOC**
  - More education of what the profession actually includes and does
  - Focus on equivalency of pay to similar professions

- **ASM**
  - More highlighting to the differing routes to certification
  - Creation of an active program toolkit to present CLS as career options
  - More information on licensure and route to achieve it

- **ASHI**
  - Retaining and recruiting technologists
  - Paying techs fairly
  - Public awareness and PR of the profession
Feedback from each of our Member Organizations

What should be our focus for the next 1-2 years?

○ ASCLS
  ● Sufficient clinical sites to support programs
  ● Salaries and differences from other professions
  ● Root cause of the shortage
  ● Legislative support and funding of workforce development
  ● Universal application for clinical sites – clearinghouse concept
  ● Raise CLIA personnel standards

○ ASC
  ● Workforce recruitment
  ● Education support

○ ASCP
  ● Update workforce personnel standards
  ● Develop/implement scope of practice
  ● Advocacy
  ● Public awareness and PR
  ● Student recruitment
Feedback from each of our Member Organizations

What should be our focus for the next 1-2 years?

- **CLMA**
  - Provision of information and data on staffing issues
  - Maintain current information on websites
  - Need better data to support advocacy

- **AGT**
  - How do we stay relevant?
  - Should we focus instead on government advocacy?

- **AMT**
  - Advocacy

- **AACC**
  - Ask Sue Dawson.
Priority Constituency

- Where can we have the most impact on the workforce shortage?
  - Students
  - Education Programs
  - Advocacy
What does advocacy mean to people?

- What are we advocating and to whom are we advocating?
  - Who are the stakeholders?

- Is it at the local level to help staff be better recognized which in turn more appreciated and better compensated?

- Is it at the national level on value of the lab/laboratorian?

- We need to be more granular when we discuss advocacy since it may mean different things to different people.
Action Plan - Students

- Design LabScienceCareers website to promote to and attract potential students to pursue a lab science career.

- Each CCCLW organization representative will go back and solicit volunteers from their young professionals to serve on the LabScienceCareers design team.

  Jim Flanigan will ask for volunteers from the ASCLS New Professionals and New Member forum.
Action Plan - Students

By August 18 - All CCCLW organization representatives will identify existing career promotion and recruitment materials that can be placed onto either the CCCLW website for those who want to give a presentation for community or school groups, or for the LabScienceCareers website that can be easily found and accessed by potential students and send to Kathy & Susie.
Action Plan – Education Programs

- The ASCP Board of Certification will report the findings of their survey of program directors regarding current program applicants/vacancies and availability of clinical sites for their students.
Action Plan – Education Programs

- Explore the possibility of establishing a Matching process between potential students and education programs similar to the program available for pharmacists.

Jim Flanigan will request that the ASCLS Education Scientific Assembly take on this project.
Jim Flanigan will create some bullet points to share with the CCCLW member organizations about the proposed workforce legislation.
Action Plan - Advocacy

- Jim Flanigan will work with the ASCLS Government Affairs team to develop a position paper on CMS standards and workforce legislation
To: ASCLS 2017 Annual Meeting Board of Directors

From: Scott Aikey, Susan Beck, Kathy Hansen, Linda Smith

Date: June 21, 2017

Re: Report of the ASCLS Representative to the ASCP Board of Certification

Since the report to the Interim Board of Directors meeting in March, the ASCP Board of Certification (BOC) held its Spring meeting on April 28-29 in Miami, FL.

Reports were presented by the sponsoring societies (ASCLS, ASCP, and AGT), participating societies (AABB, AAPA, ACM, ASC, CLMA, and NSH) and collaborating societies (AACC and ASH). In addition to the exam committee and standing committee reports, the BOG also heard reports from CAAHEP, NAACLS, and CCCLW.

Examination Updates

- The Medical Laboratory Assistant, MLA(ASCP) was offered for the first time on July 1, 2016. As of June 2017, there were 127 applicants, 88 examinees with 52 individuals had become certified.
- A Qualification in Apheresis was available starting on January 1, 2016. As of June 2017, there were 77 applicants with 53 individuals earning the QIA credential.
- The BOC worked with ISAC (International Society for the Advancement of Cytometry) and ICCS (International Clinical Cytometry Society) to develop a new certification in Cytometry. This will be available on October 1, 2017.
- Exam committees have been reviewing the results of the most recent practice analyses to ensure the relevancy of all exams. After practice analyses, the exam committees will revise content outlines and review all items in the test bank. Once this review is complete, the BOC will publish the new content outlines and provide information on any major changes identified by the exam committees.

Management Updates

- In 2016 there were
  - 17,401 certification applications (7% increase over 2015).
  - 3,604 international certification applications (46% increase over 2015).
  - 24,461 CMP participants (13% increase over 2015).
- The required participation rate was 76% in 2016
- International participation for mandatory CMP was 68%. In 2016
- The BOC worked with the Tennessee Licensure board to provide information regarding the differences between ASCPi and ASCP BOC certifications. TN Licensure is now ratified for MLS, MLT and MB international certifications.

The BOC Website
The ASCP has been working on a major revision of its website and the BOC pages are included in that overall site. The process is taking longer than expected and the Board of Governors approved an IT staff position dedicated to working on the BOC portion of the website. The BOC task force is ready to review web pages once they are available. A key concern of the task force is the separation of BOC content and professional membership content.
ASCPi
At the Strategic Planning meeting, the Executive Committee devoted a great deal of time to a discussion of the relationship between the ASCP and ASCPi BOC credentials. Currently the same examinations are given to international and US candidates. The main differences in the two credentials are in the eligibility routes. As some holders of ASCPi credentials immigrate to the US, there has been interest in converting the ASCPi credential to an ASCP credential. The Board of Governors approved a process that would allow holders of valid and current ASCPi credentials who meet a U.S. eligibility route to convert to the corresponding ASCP credential. The specifics of how to qualify for the conversion are being finalized and will be published as soon as they are available.

Governance:
- Dana Duzan, MLS(ASCP)CM was elected to a three year term as an ASCLS representative the ASCP Board of Certification Board of Governors. She will begin her term in the fall of 2017 and is a replacement for Kathy Hansen. Kathy Hansen will remain on the Board of Governors for one more year as the Past Chair,
- The Executive Committee for 2017-2018 is:
  - Immediate Past Chair: Kathleen Hansen, MLS(ASCP)CM
  - Chair: Susan M. Harrington, PhD, D(ABMM),MLS(ASCP)CM
  - Secretary: Scott E. Aikey, MLS(ASCP)CMDLMCM
  - Financial Officer: Sui Zee, MD, FASCP
  - Member-at-Large: Laura Bilodeau, MD, FASCP
  - ASCLS Representative: Linda A. Smith, PhD, MLS(ASCP)CMBBCM
  - AGT Representative: Helen Bixenman, MBA/HCM, CHC, CG(ASCP)CMDLMCM
  - Participating Society Member: Patty Eschliman, MHA, MLS(ASCP)CMDLMCM

New ASCLS representatives to the BOC.
Scott Aikey and Susan Beck will complete their third terms as ASCLS representatives to the BOC in September, 2018. The ASCLS BOD will need to identify replacements early in 2018. The current BOC representatives are happy to provide input into that replacement candidate if desired.

Note that the Examination Committees are always looking for potential new members. If any ASCLS members would like to volunteer or have suggestions, they should contact one of the ASCLS Representatives to the BOC, Diana Boras (BOC Test Development), or forward names to the BOC Executive Office. Serving on an examination committee is a great way for ASCLS members to provide their expertise on certification examinations. It also helps identify future Board of Governors representatives.
About the Health Professions Network (HPN):

The HPN represents 80 member associations and works to promote collaboration and serve the interests of allied health professionals from 200 different health professions as well as educators, regulators, accrediting agencies, and government agencies. Since its founding in 1995, HPN has worked to advance and explore current issues relevant to health professions.

I represented ASCLS at the HPN Board of Directors monthly Conference Call Meetings. I continue to serve as HPN’s Treasurer and Finance Chair.

The HPN continues to work with national stakeholders in the series of Summits being held. The theme of this last Summit was “Advocacy in Healthcare” which was held April 4-8, 2017, in Dubuque, IA. (Please see attached for summary and links.)

Additionally, the HPN is hosting the upcoming “Association Summit,” being held in Chicago, IL, July 26-27, 2017. The next $20Mil idea could come from this Summit. Conversations at a 2010 summit hosted by the Health Professions Network resulted in the organization of the Health Professions Pathways Consortium (H2P), a collaborative initiative which was awarded a $19.6Mil grant. (Please see attached brochure.)

The HPN continues to work with national stakeholders on disseminating the DOL’s “Fundamentals of Health Care Competency Model” across the U.S. (Please see attached White Paper.)

Additional HPN notes:

The HPN continues working to implement a two-pronged consumer awareness campaign: One, to create awareness of the health professions and the career opportunities in these fields; two, to address the more fundamental issues (lack of clinical sites, shortage of faculty, inadequate program funding, issues with credentialing and licensure). The economic downturn, for the short term, has obviated the need for the first goal—awareness of the health professions is already there—so now we must face the second challenge.
The HPN will continue to further develop its relationships with HRSA, DOL, DOE, etc., to potentially complement national missions and initiatives.

The HPN is working to strengthen the organization, communicate membership benefits to a larger audience, recruit and engage new members and organizations, develop revenue-generating activities, and enhance relationships with other key health care organizations, to ensure a two-way dialogue between HPN and member organizations. Other goals include:

- Increase public awareness of the health professions
- Recruit students into health care fields
- Serve as an informational resource for policy makers re: health workforce
- Undertake a multifaceted communications plan and PR campaign (making use of Web 2.0 and social media networking)

**HPN Meeting schedule for 2017**

Summer Association Summit – July 26-27, 2017  
Chicago, IL

Fall – September 5-8, 2017  
Alexandria, VA

**Request for Action:** None

**Rationale:** N/A
WHITE PAPER
How Competencies Can Heal Health Care.
What can competencies do...

🏡 for employers? (3)

👨‍⚕️ for all health care stakeholders? (4)

👩‍⚕️ for the patient & society? (5)

How would competencies create...

밝이 opportunity & diversity? (6)

🔍 actionable data? (7)

💬 better-fit students & employees? (8)

⏪ job security... (9)

.parseLong(10) AND organizational flexibility? (10)

How could competencies help with...

📍 geographic issues & rural health? (11)

👩‍⚕️ new provider types & rapid change? (12)

So what’s the...

⌂ bottom line? (12)

🛠 plan? (13)

👋 role you can play? (14)

About the Health Professions Network

The Health Professions Network is a collaborative group representing the leading allied health professions. Organizational members include professional associations, educators, accreditors, and credentialing and licensing agencies in health care. The group works collaboratively on issues relevant to health care delivery and workforce development in the United States.
At the Health Professions Network’s Spring meeting in Grand Rapids, we learned first-hand how a competency model can improve and shorten hiring processes, reduce first-year turnover, increase hiring standards and diversity simultaneously, and result in an annual savings for a single, regional employer of over $2 million.¹

A well-crafted competency model allows employers to not only predict how well an individual might perform in the role he/she is entering, but how well an employee might fit into the organization, and how quickly they might rise through the ranks.²

Limiting our understanding of competencies to the employer-provider level, we understand how valuable they can be as a predictive tool—they can provide employers a wealth of information at entry against which they can benchmark success and make more accurate decisions in the short and long-term.

Better decisions and better-fit, better-qualified talent results in better quality care at lower costs.

Competencies introduce efficiency into systems that are notoriously difficult to optimize in all industries. This optimization is crucial at a time when health care is changing rapidly, and talent pipeline issues are at the forefront of discussions about the cost and quality of care.

² Ibid.

Benefits for a single, regional employer

1. Improve and shorten hiring process.
2. Reduce first year turnover.
3. Increase hiring standards and diversity.
4. Result in an annual savings over $2 Million.
The fact that competencies can optimize cost and quality of care at the employer-provider level make them attractive to policy makers at face value. But the benefits of competencies for all stakeholders in health care and the health care talent pipeline make defining an accurate, predictive set an essential step in ongoing health care reform.

The same questions that employers ask—how can we allocate resources more efficiently with regards to talent? How can we select the talent that will give us the most return on our investment?—are crucial to every stakeholder in the pipeline.

Credentialing bodies are studying competencies, for example, to better define, describe, and measure the value their respective credentials offer individuals and employers.3,4

Ensuring the performance-predictive value of their credentials might mean selecting-out candidates that are perfectly competent in terms of technical skills or knowledge but simply incompetent in patient care or not a good match for the work.5

Educators, too, are exploring competencies in order to provide more valuable education that better prepares their students for working in the real world—practice and job analysis drive education.6

Educators have a long-term stake in the continuing success of their students. Not only do educators want to ensure that their students have the skills and knowledge necessary for the work, they also want to ensure that their students are well-suited for working in the industry. Facing realities of capacity and selective admission, educators need to ensure that their programs consist of well-suited students from the outset, so their own resources are not wasted on those who might be good students, but not cut out for patient care.

Foundational competencies make these things possible.

Society at large has a massive stake in this pipeline, from the perspective of a patient, or from the point of view of an individual who wants to work in health care.

The patient needs to know that their care providers, at any level of qualification, have the same basic competencies required to provide quality care and communicate their needs effectively. Competencies would provide this foundational quality assurance.

Competencies would also provide a common language to explain the qualifications of certain providers and new provider types, assuring patients that when they are attended to by a certain professional, they have a particular skill set that can provide them the appropriate care they need. A competency-based approach could be more easily recognizable and transferrable.7

The patient also needs to know that there will not be shortages in qualified talent as they age and find themselves in need of more care. The information that predictive competencies can provide employers similarly gives the entire system, policy makers, individuals, and educators better insight into the supply side of talent.

From the point of view of a student or individual in the workforce looking into health care, competencies are crucial for equal opportunity, according to a 2015 report released by the U.S. Department of Education Office of Career, Technical, and Adult Education.8

“College- and career-readiness standards that define what adult students need to know in order to be prepared for the rigors of postsecondary training, employment, and citizenship are crucial in providing all students at all levels the opportunities to acquire the necessary skills to pursue their long-term career aspirations and goals.”9

Clearly defined competencies, again, would create better information for the workforce which would improve opportunity for everyone.

As mentioned previously, competencies can improve diversity in the workforce at an organizational or employer level. Competencies could also improve diversity throughout the entire health care workforce by establishing clear expectations at every level and eliminating biases.

This diversity will be essential to the provision of quality care in the future. Competencies would create the stable information necessary for biases to be eliminated systemically.

9 Ibid.
Foundational competencies allow for the collection of more actionable data at all levels of the pipeline. They can optimize education and credentialing and improve information given to prospective workers and employers.

As it stands, predictive workforce models work primarily with expected demand statistics. This can lead to contradictory or inaccurate expectations of how supply might measure up, making the proper allocation of resources difficult and leading either to dangerous shortages or oversupply.

How many high school graduates have the basic competencies for work in health care, for example? Or what degree of competency do particular curricula elements add? What competencies are difficult to change through education or training?

These questions would provide valuable data points for predictive models, but they can only be answered with a foundational competency model in which all stakeholders are invested.

Competencies would also provide everyone better information about what health professions entail, perhaps discouraging those not fit for the work but encouraging others by disseminating knowledge and recognition of all health professions and the pathways into them.

Competencies could not only optimize allocations of resources but also expand the resources available to the pipeline.

Individuals looking to work in the health care industry do not want their own resources to be wasted, whether that be money or time spent on education or credentials, if the expenditure is not going to result in a job, job security, or job satisfaction.

In terms of job security or satisfaction, talent does not want to be stranded by unpredictable demand fluctuations, reorganizations of labor, or false expectations of what the work entails.

Educators and credentialing bodies are closest to this concern of the individual, but it makes a significant difference for employers as well—first-year turnover is a costly problem.

Imagine someone who has been educated and newly credentialed for work as an EKG technician. They have and are perfectly comfortable with the necessary technical skills and knowledge to do the job, and they are hired for their excellent grades and test scores.

But a few weeks into the job, the individual realizes they just cannot stand being around sweaty patients when conducting stress tests. Many people might react with incredulity to this situation—how is that even possible? Didn’t you read the job description?

It does happen—perhaps because the individual just didn’t think about it, or perhaps because the whole time they were preparing for a reasonable, rewarding career in health care, it was never explained to them what that career might actually look like.

It is not entirely uncommon, either—another one of those health care horror stories we hear over lunch with our members. One person related a story of a new employee who said, “I didn’t know we’d have to deal with dirty people.”

These individuals have wasted a great deal of their own time and resources to get to where they are, only to find that it is the last place they want to be. All the stakeholders in the system they’ve risen through have also wasted a great deal of their own time and resources that could have gone to a better-fit candidate.

Let’s restrict the capacity of the educational program to that one student, as an illustration. The EKG technician that has been qualified through the program is not fit to offer quality patient care, but the employer-provider has no other candidates for the position—they have to choose between keeping the stress test capacity and sacrificing the quality of patient care during those tests, or eliminating the capacity of that technician.

The patient, and everyone, loses a great deal.
Let’s consider a similar example, without the finality of someone who might simply not be fit for health care in general.

Let’s return to a newly credentialed EKG technician. They find a job and enjoy it, but suddenly EKGs are no longer in demand, or a new process, more efficient than stress testing but requiring a completely different skill set and knowledge base, makes them obsolete.

Again, they’ve been left in the lurch with student loans and a great deal of wasted investment. The employer takes their own losses, sinking the costs of recruiting for a position they no longer need. If the technician wants to continue in health care, they might have to go back to school for another two years to sit for another, different credential.

This example might be a bit more approachable for everyone working in health care—job security of this sort is a huge issue with rapid changes in reimbursement, technology, and techniques all contributing to a health care labor market that is anything but stable or efficient.

“Job security of this sort is a huge issue with rapid changes in reimbursement, technology and techniques all contributing to a health care labor market that is anything but stable or efficient.”
Why does the massive investment in this talent have to be wasted? They’ve already proven themselves to be capable, competent workers in the health care industry, shouldn’t there be a way for them to transition laterally between jobs? A way to move to another position in which they’ve demonstrated themselves foundationally capable while being fast-tracked educationally towards a credential in another specialty?

The potential for lateral movement inserts more job stability and organizational flexibility into the health care system. It is truly a win-win-win for all stakeholders.

Employers would be more flexible, and they could reduce turnover and recruitment costs by providing opportunities for both lateral and vertical professional development. Workers would enjoy more job security by having a foundational qualification or by being able to demonstrate foundational competencies in patient care, and perhaps be fast-tracked educationally to different credentials.

Society and its policymakers would benefit from this flexibility and efficiency by seeing more rapid improvement in cost and quality of care. Educators, too, might save resources and provide more benefit to their students by offering curricula that do not require starting over at Anatomy 101. They might also have more students from a pool of individuals who are more inclined to return to such a fast-tracked program.

The ability for talent to move laterally would also require a standardization of taxonomy that competencies could provide. What does an EKG credential really mean? Shouldn’t it mean more than the legal qualification to assist in or monitor certain procedures? Shouldn’t it describe a set of competencies that employers could use to judge potential fit for other positions?

Competencies Create Organizational Flexibility and Job Security

more rapid improvement in cost & quality of care.
In other industries, applicants might apply to an organization and be denied the job they applied for but offered another, similar position. Perhaps they value the exact location or organization, so they might accept the other position.

For an EKG technician, applying to a particular hospital with a single opening for that position, this is not currently possible.

Individuals are often geographically sticky—they might have applied for a job at a particular hospital, because they wanted to work at that exact hospital. Even with health systems getting larger, another position as an EKG technician at a hospital several hours away might not be as attractive as a different or even lesser position at the hospital where he/she applied.

Perhaps his/her spouse moved to a particular place with a lucrative career, and the candidate wants to stay close to where their spouse works. If there is not an available EKG position, the health care system might lose that qualified candidate entirely.

There is a tremendous amount of deadweight loss in the system due to this kind of inefficiency.

What about an EKG technician who would prefer to work in a rural area? The systems and capacity in rural health might not have any positions for EKG technicians. But wouldn’t the competencies required to be an EKG technician have some value in a rural health system struggling to find providers?

As we know, it can be extremely difficult for rural health systems to attract and retain necessary provider types.11

We also know that the required skill sets of health care professionals are rapidly changing. With widespread system redesign towards a population health framework, almost every system is creating new provider types independently.\textsuperscript{12}

How are we going to help patients know who these workers are and what they do? Are the workers going to be able to transfer their job experience with one system to another?

Competencies could standardize the language we use to describe health care professionals and their qualifications for both patients and employer-providers and improve recognition of all professionals, including these new provider types.


Eliminating deadweight loss, systemic biases, informational deficits, and inefficiencies—competencies would lay the framework for a truly efficient labor market, which would return massive dividends for health care while improving quality.
Health Professions Network has been working in a collaborative capacity to connect educators, professional and credentialing associations, and other stakeholders in creating these competencies.

The DoE report mentioned earlier outlined strategies for positive change in workforce development, including “a ‘backbone’ coordination organization [that] keeps lines of communication open, builds relationships and trust among the partners, and takes the lead in coordinating everyone’s joint and complementary efforts.”

For health care, Health Professions Network is that backbone organization.

In January, 2015, Health Professions Network convened a roundtable of representatives and executives from HPN, NN2, H2P, ASET, CAAHEP, Schools of Allied Health Professions, Health Sciences Consortium, College of Health Sciences, Coalition for Allied Health Leadership, HOSA, Health Force Minnesota, AAMA, AMT, and Trinity Health.

The group discussed foundational competencies for quality care and work that has already been done in outlining competencies, settling on an action plan to cross-walk relevant competency models that already existed, namely the Department of Labor Allied Health Competency Model, which HPN and NN2 helped to create, as well as the Health Science Consortium National Health Care Standards.

Sondra Flemming, VP of Community & Economic Development, and Lacheeta McPherson, Executive Dean of Health Occupations & Legal Studies, both at El Centro College in Dallas, Texas, graciously took the lead on this project and presented their work at the HPN Spring Meeting in Grand Rapids in April, 2015. The result was, as expected, a more complete competency model—though they identified gaps in the upper tiers of both models, closer to specific professions.

Flemming and McPherson explained that the upper tiers of the models did not actually contain foundational competencies but rather tasks. HPN decided to convene a committee, again, to fill the gaps and to translate the tasks of the cross-walked model’s upper tier into competencies.

With this work done, HPN opened conversation with the Department of Labor to update the previous model developed in 2011 - the Health Professions Competency Model on careeronestop.org.

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So, what can you do to promote these competencies? Use them.

The standardization of language represented by the new competency model will facilitate collaboration, whether it’s an issue like the articulation of credits between colleges, or working with employers and professionals to shape clear and accurate career guidance resources.

The competencies themselves are only a tool you can use to make things happen - such as improving recruitment efforts as an employer, professional association, or educator; creating better data-driven assessments or surveys; optimizing your credentials or educational offerings; or any of the things we’ve discussed in these pages.

Buy-in isn’t simply an endorsement - it’s a commitment to using the competencies in a meaningful way. The more these competencies are used, measured, and discussed, the better they can evolve and make a real difference in health care.

Self-assess using competencies, use competencies to collaborate with other organizations, use competencies to advocate on behalf of particular professionals - just use them! And please, let us know when you do.

hpnonline.org/competencies
We're keeping costs low and energy high with a short & sweet schedule letting you fly in the morning of July 26 and fly out the afternoon of July 27.

**SCHEDULE**

**JULY 26**
1PM - 5PM
Meeting (break served)

6:30PM - 8:30PM
Dinner w/ group (Dutch treat)

**JULY 27**
8AM – 1:30PM
Meeting (breakfast & lunch served)

These sessions will be rapid fire brainstorms on the issues that matter to you and affect your organization, so you'll be flying back the night of the 27th with plenty to think about.

**DETAILS, COST**

**Registration**

Registration costs $125 for one representative from your association, and $90 for each additional registrant from your organization.

*Registration costs include* break July 26, breakfast & lunch July 27, and all materials provided before, during and after the meeting.

*Attendees will be responsible for their own room & travel costs*, as well as the Dutch dinner July 26.

**Hotel**

**Four Points by Sheraton Chicago O’Hare Airport**
10249 W Irving Park Road - Schiller Park, IL 60176

Room Rate: $109 S/D

Call 846.671.6000 before July 12 to make reservations, indicate you are with the Health Professions Network.

*Hotel offers a FREE 24-hour shuttle to Chicago O’Hare.*
Conversations at a 2010 summit hosted by the Health Professions Network resulted in the organization of the Health Professions Pathways Consortium (H2P), a collaborative initiative which was awarded a $19.6 million grant.

The grant was one of the largest ever awarded by the Department of Labor through a discretionary grant from the Trade Adjustment Assistance Community College and Career Training program with the aim of better preparing the target population of trade-displaced and lower-skilled workers, and other beneficiaries for high-wage, high-skill employment.

That investment was quickly put to work promoting opportunity and diversity in healthcare around the U.S.

**Could come from our summit.**

Be there for the next $20 million dollar idea, which could come from our Chicago summit, July 26-27.

It’s going to be a rapid fire brainstorming session tackling all the issues facing professional associations in healthcare—the big trends affecting how we do business and how we can adapt.

I can’t guarantee a $20M ROI, but you might just bring back your association’s next $2,000 or $20,000 idea and put it straight to work.

**Why you need to be there.**

This truly is a unique opportunity to get together with your colleagues and learn—in a meaningful way—what’s working, what’s not, what might work for you.

We don’t learn from lectures—we learn by talking and doing with likeminded peers monitoring the same issues and tackling the same problems.

It’s also a unique opportunity to find common ground—**how can associations in non-physician professions work together on issues affecting all of us?**

What could we do, together, in the advocacy space? In dealing with regulatory reform? In dealing with the elimination of licensing barriers, or the consolidation of licensing boards?

I think we’ll find out in Chicago.

**It’s also a limited opportunity.** Honestly—and I think you can see where we’re coming from—we just don’t have the resources to hold a summit every year.

So we’re asking you to join us this time, this year—because we don’t know if the next opportunity might be too late.

I know we’re only two months out, but we’ve been working hard to identify the talking points that matter—and we think we’ve found a time that should work around your busy conference schedules.

We’ve gotten a number of confirmations already—from our members and contacts at other healthcare professional associations with whom we’ve been discussing these issues, already. We’re all excited to hit the ground running.

Don’t wait on this—we want you to be there.

Here’s SOME what we’ll be tackling—

- Membership as a product
- Apathy—inside & out
- Limitations to volunteerism—driven by workplace?
- Work-Life balance of new professionals
- Regulatory reform
- Elimination of barriers
- Licensing board consolidation
- Advocacy on a federal level
- Generational diffs. / Millennials
- Organizations’ willingness to experiment

**Register online at hpnonline.org or with the form below**

Name:
Organization:
Your Title:
Phone:
Email:
Billing Address:

Do you or any attending colleagues have any dietary restrictions?:

Registration costs $125 for one representative from your association, and $90 for each additional registrant from your organization.

First Representative $125
Additional Representative + $90 ea.

Name: Name:
Title: Title:
Email: Email:
(+$90) (+$90)
Name: Name:
Title: Title:
Email: Email:
(+$90) (+$90)

**Pay by Credit Card (Mastercard, Visa, Amex)**

CC#:
Exp. Date:
Billing Zip:
Signature:

**or Enclose a Check, or circle:** BILL ME

Mail to: CHICAGO - Health Professions Network
PO Box 2007, Midlothian, VA 23113
A Macro View of MACRA – Kathy Cilia

Kathy Cilia kicked things off with an excellent summary and discussion of new regulations coming into affect in health care—MACRA and MIPS, programs that tie medicare payments to quality metrics—and provided the timeline for implementation. The following are free-form notes, though not an accurate transcript, of her presentation.

Medical Assistants were involved with the meaningful use regulations which were the previous version of MACRA. If you have to work with EHRs, medical assistants who enter most of the data have to be credentialed - we had a flood of new applicants. That went away when MACRA came into play.

MACRA identifies quality measures & data that physicians should report to CMS on an annual basis - CMS scores this data and that score determines their medicare payment.

Each year, congress had to pay a “temporary Doc fix,” so that physician payment wouldn’t be cut. That would’ve been a 21 percent cut in Physician payment through medicare. MACRA repeals the SGR formula so there's a permanent Doc fix...

MIPS = merit-based incentive program - most clinicians will be subject to MIPS, at least initially. 76-86% of physicians. In January 2017, all eligible had to start collecting data. It's actually a budget-neutral program... Year 3+, MIPS may include other groups - which starts getting into allied health territory, potentially.

There are two charges from one service at a hospital - an institutional charge and a professional service charge. MIPS affects that professional service charge.

Performance categories - quality, advancing care information (meaningful use), clinical practice improvement activities, resource use (cost - based on claims they submit to medicare) →MIPS composite performance score. They are planning on changing how much these are weighted in the composite score over time.

CMS is going to have a lot of very valuable data - not sure what they're going to do with it - I'm sure they might get to determining best practices at some point.

Are physicians incentivized to do anything for 2017? No - only exceptional performers. 500 million dollars divided among 500 thousand physicians nationally. This is an extra pool of money, 500 million dollars for the ones who are exceptional performers. I'm not hearing a whole lot of backlash from the medical community—maybe because it's better than it was.

Do patients hear about poor performance? There will be implications in terms of physician rankings. Part of this is trying to train the public to be informed health care consumers.

www.qpp.cms.gov is very user-friendly.
Healthcare Reform and Iowa’s State Innovation Model Test Grant – Robert Schlueter

Robert Schlueter continued the conversation surrounding MACRA and MIPS while delving into the State of Iowa’s health care reform initiative. He explained that the MIPS program couldn’t be transformative because it focused on granular quality measures, while the State of Iowa’s initiative looked at the problem more globally with a state-wide health risk assessment, targeting issues like homelessness, food security and economic stability and tasking health providers to build relationships with other groups to help tackle those issues. The following are free-form notes, though not an accurate transcript, of his presentation.

The Affordable Care Act brought this country to a general level of agreement - however we're going to talk about it, healthcare is a right - because we don't have the stomach to let people die in the streets. Prior to the ACA, there was a lot of debate on that topic. That debate sort of went away… What it attempted to do was get a handle on the cost curve that was moving out of control. If you put everyone under coverage, that's great, but if you don't fix the other side, you are pushing more money at a system that's broken.

The first thing the doctor is going to say, if you say they're under-performing, is that the measures are wrong. One of the limitations of the MIPS program is the focus on granular quality measures. It's not going to be transformative - are these systems going to start looking at themselves more broadly. They're very clinically focused. Alternative payment models try to stretch that broadly.

We're trying to reach the scale where physicians aren't trying to reach 20 different versions of quality. Making it more simple, more comprehensive - and focus on the huge opportunity in front of us in terms of the inefficiencies in the system.

Social determinants of health... mass incarceration... these are problems that are solvable. Until we look at these problems in a global way, we're not going to get as far as we could... Working from the community towards the delivery system is not as effective as working from the delivery system out into the community... there's a lack of tolerance for failure, but it's a learning process.

MIPS is looking at the smallest part of the quality opportunity - and frankly, where a lot of the juice has been squeezed. Where there's the most opportunity is in these larger problems - if there's a homeless patient, you have to address homelessness…. getting to a state-wide health risk assessment, we can start to put targets out that speak to food security and economic stability. And delivery systems can't get to those problems on their own, they have to build relationships with groups they haven't had before. We haven't even talked about behavioral health - talk about a huge opportunity.

Bottom-line is - broadening the definition of healthcare to one that is more about health. We're not going to get there by the end of the SIM grant, in four years, but one thing we've done is establish a round table... We've spent all of our resources building muscle in specialty care - but that's missing the whole picture on some of the things we can do to live our lives better.
Navigating the Road Ahead in Washington – John Colbert

John Colbert switched tacks and provided his expert opinion on the road ahead on Capitol Hill in terms of a Republican-controlled government—rolling back of regulations, reduced spending, tax cuts, repeal and replacement of the Affordable Care Act, etc. The following are free-form notes, though not an accurate transcript, of his presentation.

What does our crystal ball look like moving forward? Very few house republicans have served with a republican president before… also, we’ve seen this difficulty getting started with other outsider administrations. They’re learning how congress works and how to operate. A year from now, what this administration looks like and how they utilize congress will be different.

In 2018, republicans want a “filibuster proof” majority - there’s a real chance, democrats are defending in areas that trump won… in a traditional era, we’d be looking at a long-term republican majority through 2020 - a four year window to make major policy changes. If Trump's approval rating continues to fall, republicans have to think whether they’re with the president or against him.

Priorities - roll-back regulations from Obama administration. Reducing spending on domestic side, personal and corporate tax cuts, repealing and replacing Obamacare, infrastructure investment. Moving from an opposition to a governing party comes with growing pains…

What we did learn - on the house side - there are still competing factions. The freedom caucus set the tone with 35-40 members and a republican majority of only a dozen, you need the bulk of the freedom caucus on board with any proposal, but that's a difficult sell for the moderate republicans. Freedom caucus is emboldened… Speaker Ryan will have to deal with them moving forward… trying to re-engage with the FC to get them on board with healthcare change. More state flexibility, allowing states to eliminate essential benefits, community ratings, etc.

Filibuster-proof majority is required for all legislation… There are potential bipartisan fixes for the ACA, but that’s a tough road. All of these options are difficult in the current environment.

We're going to see an omnibus appropriation, most likely - a continuing resolution CRomnibus.

It may be a yearlong fight for survival of many programs.

State authorization -

NCSARA
http://nc-sara.org/

A way both republicans and democrats can get on board with the problems of institutions, but also allowing states to choose whether they want to get involved, etc.
Health advocacy is a strategy for health promotion – that's what it's all about, whether it's before they get sick, or if they have a particular condition, etc. Health advocacy is hard enough at an individual level...

Looking at what goals would be - empowerment is a particular goal, you're trying to help the individual make the decision, you want to be egalitarian, allow them to be equal on that decision-making plane. But you do have knowledge they don't have - you are an expert as well.

You should be a colleague of the community as a public health worker - you're not there to fix, you're there to help and support, look at what's going on from the community's perspective. You can't fix a community without their involvement, and that's not what we should be doing - we should be empowering communities to do what they want to do. Not being intimidated by politics - that's hard.

To be an advocate for a community, you have to bring them something - bring them your time and expertise. You have to be willing and able to do higher level structural advocacy - to bring the stories to the decision makers, they want stories. Raise the profile of health promoting organizations. Serve as a conduit or channel for mediating and negotiating...

You have to define population health - is it public health, or how the service delivery is defined. It was terminology I was perfectly comfortable with in public health, but I need to know more about in healthcare.

Group in Iowa looking for a better transition from associates level nurse to bachelors degree nurse. Convenient, cost-effective, and then making sure that makes a difference. More bachelors degree nurses → fewer errors, fewer deaths.

BETTER DATA COLLECTION... More than ever, we're in peoples' homes. And not many people - other than health professionals - are allowed in peoples' homes.

All of our professional organizations have a base in DC or the surrounding area, they're on the hill as often as they can be... We have a very active student nurse base that takes resolutions to the state conventions, etc. If you look at the whole picture of public health, etc. a nurse in every school.

Collaborating with nurses & allied health. Having a nurse and an allied health practitioner in the room would be more effective than just one nurse - that would strengthen the message. If we all share these values - if we are teaching these values at grassroots or competency levels, we should be working together. But it's hard to teach values - if they're coming with a different perspective.
Advocacy in a Shifting Political Landscape – Catherine Simmons

Catherine Simmons continued the discussion of health advocacy from the point of view of a large provider organization—explaining that there are so many potential avenues, it is difficult to decide in which areas a large organization should focus its attention. She also argued that providers would know more than insurance companies or medicare as to how funds should be allocated in the health care system. The following are free-form notes, though not an accurate transcript, of her presentation.

Because we're such a large organization, sometimes it's hard to figure out what we should advocate for first. I've been going around our systems, talking to managers of various reasons - and they are afraid of what's happening in terms of medicaid and the ACA. We've gone back to calling it Obamacare, because people didn't understand that what was coming down in the form of the ACA is what they are trying to change now.

How do you fix budget issues? You either increase revenues or decrease costs. We have a new administration wanting to do a lot with revenue - but those are not immediate fixes, so in the meantime - we've got the cut side. They're either going to reduce coverage, or the reimbursement rate. From an advocacy perspective and from the perspective of our management, how can we be creative with those two buckets. Instead of just a fee schedule, let's create some flexibility in terms of how providers can use those fees, etc. - as providers, we believe we know more than insurance companies or medicare as to where those funds should be.

We have to pay advocacy attention to the regulators - they have a lot of discretion. We spend a lot of time talking about the elected officials, but these are the un-elected folks. Being out there and willing to share your information - it works. Sign up for agency requests for information.

Intro to Federal Advocacy – Rebecca Preddie

Kicking off the HPN Talks portion of the session schedule, Rebecca Preddie discussed what federal advocacy looked like for her smaller organization—the American Music Therapy Association. Her insights touched on mobilizing membership with calls to action and providing members with wins like documented letters of clarification from agencies which members can use to advocate for themselves at State and local levels. The following are free-form notes, though not an accurate transcript, of her presentation.

Advocacy is an individualized and specialized process, and it's different for every organization. As a smaller organization, this is what our federal strategy looks like. Lobbying is allowed for non-profits within certain parameters. We're limited in the amount of direct lobbying we can do, or we jeopardize our non-profit status. Grassroots lobbying is a way to get our members to do the work - equipping them with the tools to communicate, etc. We refer to these as a “Call to Action” and we want our members to be a part of the process - that's something you see more of nowadays.

We have four areas we focus on - healthcare, education, military/veteran, and state licensure & recognition. Documentation from agencies like letters of clarification are huge for members - they can use them as tools to advocate for themselves at the State level, etc. Collective voice is very powerful on capitol hill, raise awareness about issues important to each group.
Negotiation Skills – Peggy McElgunn

Peggy McElgunn continued the HPN Talks with a discussion of negotiation skills, which are a critical competency when advocating. Her walk-through touched on the importance of preparation, behavioral tips to successful negotiation, and tying a negotiation to values or raising the concepts of viewpoint of a negotiation in order to find consensus. The following are free-form notes, though not an accurate transcript, of her presentation.

There's no substitute for preparation - do your research. And research is really easy these days - it pays to look at what the other parties are doing, and why. It's worth the time it takes before you enter a negotiation. If you understand what they want, you can frame your negotiation/spin it like you're giving it to them. The more information you have, the more power you have.

This is behavioral - but, always communicate positively. I can't change a person, but I can change myself - and their response to me can change, so you might be able to change the situation. Change how you act, or change who they are negotiating with.

Behavior is everything in a negotiation - people don't like conflict. Negotiation is hard because conflict is built-in, but it doesn't have to be a conflict. You've heard of the criticism sandwich - but it only works if it's specific and it's authentic.

Values can bring the other side to an integrated place. If you raise the concepts or viewpoint of a negotiation, you'll find consensus. Elevate the discussion to a place of consensus, then go back to the details of the negotiation.

Working Together: the CARE Bill – Kerry Weinberg

Kerry Weinberg continued the discussion with a valuable perspective on an advocacy effort that ended in failure—an attempt to bring multiple groups to the table to support a piece of legislation which ultimately failed to reach consensus and was not passed. Her presentation described the process of bringing groups together, the process of getting a bill passed in Washington, and a perspective on why their effort failed. The following are free-form notes, though not an accurate transcript, of her presentation.

The consumer-patient radiation and health safety act was enacted in 1981, but there was a compromise and no penalty for noncompliance—enforcement was removed from the bill. In 2000, the Consumer Assurance of Radiologic Excellence bill was introduced to amend and enforce the 1981 act and specify the certification and education requirements for individuals performing medical imaging examinations and who plan and delivery radiation therapy.

The Alliance for Quality Medical Imaging and Radiation Therapy was organized as a coalition of 22 organizations supporting the need for federal educational and credentialing standards for these professionals. Having imaging and medical therapy organizations working together opens the door for future endeavors... but the CARE bill was never passed.

Radiologists and cardiology groups really don't get along. Cardiology groups didn't join the organization, and that was one of the problems. We had to negotiate amongst ourselves, what were our core values. Some groups didn't want to compromise, and they left the table.
CAAHEP Advocacy – Cameron Harris

Cameron Harris rounded out the day with a discussion of advocacy efforts undertaken by the Commission on Accreditation for Allied Health Education Programs—explaining that, as a 501(c)(3), their advocacy efforts walk a fine line and are focused on educating various groups & decision makers as opposed to lobbying. The following are free-form notes, though not an accurate transcript, of his presentation.

CAAHEP is tasked with enhancing and promoting dialogue related to the accreditation of allied health education programs and taking a leadership role in coordinating a collective approach to resolving problems in allied health professions, in addition to promoting the study of critical issues in allied health education and accreditation... But 501(c)(3) organizations may not qualify for that status if the organization contacts or urges the public to contact legislative bodies for the purpose of proposing, supporting or opposing particular legislation—we have to walk a fine line in advocacy, leaning towards education and away from lobbying.

CAAHEP has a diverse constituency of sponsoring organizations, committees, educational institutions, recent graduates and public members and a wide scope of allied health professions. All health stakeholders are beneficiaries of CAAHEP advocacy. Our advocacy often takes the form of collaboration with advocacy affiliates, i.e. drafting letters to support the Association of Specialized and Professional Accreditors and other partner efforts. We also participate in partner conferences to discuss issues surrounding accreditation—ultimately, we lend our voice on legislative issues as much as we can within the constraints for the IRS regulation.
Deaton, Randa and Couts, Teresa – The Power of Collaboration to Drive Health and Healthcare Improvements

Learn how the Kentuckiana Health Collaborative is bringing all regional health care stakeholders—from the Ford Motor Company paying for their employees health care benefits to the hospitals providing the care—together to tackle the big issue: COST. This collaborative group works to correct inefficiencies, build consensus, reduce costs, and improve data & outcomes.

Stawser, Michael G. – A Professional Imperative: Leading and Managing Functional Interprofessional Teams

Professor Michael G. Strawser, PhD brings the academic to the practical in discussing effective leadership and teams, especially when it comes to the next generation: millennials. Strawser delves into specifics of how to communicate and lead when millennials make up the workforce and answers bigger questions like: are the demands that millennials have in the workforce all that abnormal?

Hatting, Tammy – Revolutionizing Healthcare through Telemedicine

Avera eCare comes back to HPN to discuss their latest developments and give you an inside glimpse into the wave of the future—especially in rural health. Tammy Hatting, eCare’s Innovation Manager, explains how they’re not just urgent care anymore—the sky is the limit for telemedicine, and from a workforce perspective, professionals are excited to join the team. Of course, there’s new competencies involved.

Panel Discussion (Skalko, Ralston, O’Daniel): Collaborating Your Workforce

Another regional collaborative group, the Health Careers Collaborative of Greater Louisville brings together community leaders—especially from local colleges and hospitals—to develop impactful workforce initiatives. From an H2P grant to english-as-a-second-language initiatives, they’ve worked hard to improve pathways into health professions locally.
AND MORE:

Roberts, John – Arrowsmith Revisited

PLUS, HPN TALKS:

Brand, Marcia – Integrating Oral Health into the Patient-Centered Medical Home: Tools and Resources

Cilia, Kathy – (Education + Certification + Practice)

Burchell, Nanci – Health Literate Communication

LONG-FORM NOTES

SEPTEMBER 22 BUSINESS MEETING

Updates from members—what's going on in your profession/association?

Hospitals are cutting staff, reducing hours, reimbursements going down, getting tight financially. The money is going away. Forcing us to look at changes in how we operate hospitals. Switching from fee-for-service to pay-for-performance has created a lot of unknowns. For an association, having a lobbyist and government affairs activities is critical. Education is another piece.

Hospitals want just-in-time outcomes from colleges; they are asking: can you develop and two-year degree and can we have the graduates next year? Colleges need the hospitals to look a little bit further in the future to give us the time to develop a program appropriately.

CAAHEP—As roles are changing and evolving, CAAHEP is seeing more new professions coming into their family.

ARDMS—People are taking bits and pieces of ultrasound; they're not hiring full-time people any more, they are very specific per-diem jobs... seeing changes, our students are graduating and not getting involved, they are trying to piece together jobs. Nurse practitioners are now doing OB scanning... Re: HPN, how do we get people to understand that you need to be here, you need all these different perspectives?

HOSA—One of our issues is growth. We have to be in the know as well, so I can keep on top of what's going on in all of your professions. Students are looking to go into health care because it's there, because money is available... but with changes in way things are paid, they might not want to do that any more. We need to think of ways to keep them involved in health care. HOSA is a “hook” to health care. We can keep students aware of the latest & greatest opportunities.
NN2RC—there are efforts to elevate entry level in respiratory care to baccalaureate, but nn2rc's mission is to preserve the associate's degree option as a pathway.

We're looking at equivalencies between professions. Accreditation is under assault in congress. We have to realize, we're going to approach these huge gaps in availability of personnel.

AMT—we're dealing with the changing landscape of health care in general, everyone is trying to figure out what's going on and trying to figure out how to help our members navigate this changing landscape they are working in. One particular topic: MACRA

ACVP—Membership has changed tremendously from older, active, very involved to younger, needing information. We've gone to a regional meeting format that's been outrageously successful. At HPN, it's about how we can work together, there's strength in that. What are the tangibles of that. What can we give back to our members. Trends. Work environments changing. Same work, new ways. Keeping track of demographics—not a lot do—tracking that information, how careers are evolving, where professionals go if they leave their roles...

AMA—one of the main concerns we feel is the fact there's no true standardization of education for medical assistants. They are hired off the street, they might go to non-accredited programs, and even among accredited programs, there's a huge variability... certain essential aspects of what a Medical Assistant should know are not being taught to the level they should be... so, bc there's such a wide variety, they can be seen as unreliable, unknowledgeable, or highly reliable, highly knowledgeable... Medical assistants could be the answer to some of these pathways... Many don't use psychometrics and don't look at whether the exams test what the professionals need to know in the field.

EL CENTRO—We used to have more limitations on talking to high school students and offering dual credits, but that went away. We could start in 9th grade, the state wanted to see high school kids graduate from high school with some sort of certificate or degree. We offer dual credit using our allied health core curriculum. High schools are demanding to have this partnership. We're in 18 different high schools... requiring us to look for more faculty which is tough to do in health care education. We have a shortage of faculty in most areas.

High school academy model... getting a majority of high school credits as dual credits... when they graduate from high school they will have associate's degrees. We pay high school equivalent of adjunct faculty rate to teach those classes, it goes to the school system... we have to show it's equivalent to what's happening at the college. Library services, counseling services, huge demand for us.

Because of the number of students we're talking about—it's become a win-win for the college. But it's put a lot of strain on the college. We are hiring folks that do nothing but dual credit. …There are a finite number of seats, restrained by faculty availability and clinical sites...

It's our job as a comm coll to address social initiatives... Getting the unemployed into health care. Consulting, entry-level... getting our health care students jobs, esp. ones that wouldn't have opportunities without a pathway.

NN2/NorthernVACommColl— membership grew recently, but we would like to see more people. At Northern Virginia Comm Coll, we are seeing a decrease in money, decrease in State funding... higher costs... there just isn't money for NN2... $70 of professional development per faculty, it's just not enough. We've had a terrible time getting clinical sites for our nursing programs, because Bach degree
people get first preference. Changes in financial aid—how people are interpreting rules. Job roles are changing, affecting grads ability to get full-time jobs, lots are only hiring part-time, but our grads need benefits...mandated that we have open and free resources, etc. as possible, that's more and more difficult in health care. People shouldn't have to give their labor away for free, but it's top-down... People like to talk about the differences between States in NN2—enjoy getting together with people in other States.

SNM—techs are authorized users, we're just designees, we exist under their tutelage. Nuclear med physicians are becoming dinosaurs, so unless they are also radiologists, they can't find jobs. That's impacting our profession. I'm realizing I would not be able to go back into clinical as a professional, I wouldn't have the skills, and there's no programs available to give me the skills... not good educational models to get existing workers up to par who are staying in jobs when they should be retiring because of the economy. Millennials want online educational resources, asap, on-demand, as quickly as possible, local, etc. As a profession, we're not being given the roles as administrators, etc—they're always going to choose the nurse.

VA Medical system petitioned congress to allow Nurse Practitioners to act as physicians in hospitals. Order, do and read studies, etc. That's highly impacting our profession if they allow that. It will open up a whole new can of worms and a door that no one wants opened at this point.

NCHSE—we're seeing changes in the industry, in post-secondary and secondary, and education doesn't always move quickly. It's a big challenge to make an impact and stay ahead of all the changes. Industry is saying “we need this and we need it now.” So we want to collaborate and see how we can work together to fix that and share resources.

Breakout discussion—what do professional associations need? What does HPN need to do to get back to our roots? How do we as an association find out what those needs are?

GROUP ONE—Mentoring successors. Student & first-year professional membership on the board. Managing resources, virtual meetings, virtual office. Reducing costs. We've had 7-9 professional organizations come together at one regional meeting so that vendors can go to a one-stop shop, one place every year and they get everybody. Collaboration to do things with less resources.

Advocacy. There's policy made whether we're there or not—we need to be there and have a voice. HPN could do that. We talked about bringing these ideas to a summit.

GROUP TWO—It's about shared experience and understanding... There are opportunities for collaboration and having a unified voice when needed for federal advocacy. Plus, leadership professional development.

We talked about how to communicate—not by email or even a nice piece of mail, but by personal contact with a specific list of talking points, so that everyone is making the same case. It could culminate in an invitation to an event like a summit.

We could also give out HPN materials at other venues, so everybody takes HPN brochures to all the meetings they are attending... take HPN with you so everybody's aware that HPN exists—that's key.

GROUP THREE—Together we can do more, particularly within Allied Health (for lack of a better term). Professional associations are having a crisis in membership retention, budgets go down and have
to prioritize. HPN has to become a higher priority to keep that expenditure line. We have to explain to new members why HPN is important, and get that information into their newsletters and journals. It's important that they know what's going on in the government realm and the professional association realm. We have to get this information to filter down from the top to the professional levels, so that when officers changes, new officers are already aware of HPN and why it's valuable.

HPN can be a forum to share best practices and talk about latest technologies, generational issues, licensure, reimbursement, etc. Plus information like how to do your association's website, that would be invaluable for organizations to know how to better draw in new members.

For HPN to be important, it has to provide something that others alone can't provide.

We should do a focus group or summit. Develop a plan the board can consider and move forward with.

Follow-up question—How do we get the Don Balasas and Virginia Pappas's back to these events. They've supported by sending right-hand people, but what would it take to re-engage them if that's possible?

Why not invite them to give a talk... HPN is the place where they could find their successor or learn how to prepare a successor, and see what the landscape is across all the professional associations. That's a communication piece we haven't used at all. And we need to pick up the phone and ask!

We could ask them to mentor new groups... we could bring back core founding members to discuss where we started, where we are now, and where we're going in the future...

Members want a consistent person here at HPN. It's great to have consistency, but it's great to have new blood and new ideas, as well.

SEPTEMBER 23 SESSIONS

The power of collaboration to drive health and health care improvements—Teresa Couts, EdD, and Randa Deaton, MA—

SLIDES: https://hpnonline.org/downloads/?ms_file=ms_3567.pdf

Collaboration starts with the question: what's the problem? Total health expenditures as percentage of GDP growing faster than other countries. Also, percentage of that paid by private sector is larger than other countries. COST is a big problem.

We've worked in HR with Ford Motor Company which has a vested interest in community health care initiatives. For Ford, the cost of health care was outpacing the cost of steel! All three big auto makers had these initiatives and they are big on health care reform.

Collaboration requires an investment. When people put their money in, they are more likely to participate and collaborate with you.

Coming from industry, speed and productivity is critically important... but that's when people work for you. Convening volunteers, it's hard to lead a group when you're not in charge.
In health care, for all the money we spend, do we get the outcomes? No. It'd be a different conversation if we were getting great outcomes and wanted to cut costs.

We're not working at the care level, we're working with processes and inefficiencies. We're not the health care experts, we convene those experts. When you build consensus to standards of care or measurement, then you get people on board.

We've seen improvements in most of the measures we're tracking—a lot of chronic care measures.

In response to a question—no, we're not focusing on end of life.

We've got to get better data & more meaningful measures. Don't we care about patient satisfaction? Etc.

How do we move to value-based care?

Transparency—we believe in giving consumers unbiased information. We collectively agreed to report our data without a grant at: [www.gohealthshare.com](http://www.gohealthshare.com) We even collaborated on branding of this website—I think sometimes you can over-collaborate. That was a painful 9-month process that was supposed to take 3 months.

It's about community learning & dialogue—we ask people to come to the table with their agenda, so none of it is hidden. The pharmaceutical industry, for example, we had that perspective that they had ulterior motives, but we needed them at the table. So we try to let people come to the table with their agenda. You have to be honest to have an open dialogue. The system is what it is, so how do we come up with win-wins? Not making organizations villains is our goal.

Is anybody (any stakeholder) happy? We can't have a system with burnt-out providers. And benefit literacy. Why does everybody go to the ER for pink eye, maybe we should talk about that. With the affordable care act, the plans aren't very happy. We know the employers aren't happy. So we all need to come together and figure out how we can transform care.

We have to bring costs and outcomes together. No one wants to lower costs at the expense of outcomes—that's everyone's biggest fear.

MACRA—doctors are going to be measured and reimbursed on quality, cost, meaningful use (electronic records), and clinical practice improvement activities—MIPS... these metrics are here. This is going to have more impact than ACA. ACA was to access what MACRA is to value-based care.

Around the country, regional collaboratives are basically set up the same way. They are multi-stakeholders, but they need to have purchasers like Ford. NRHI.

When everybody hears examples that are working, it's helpful—and the challenges that are there.
Lines of communication can save us a lot of money, stop some lawsuits, etc. in addition to improving patient education. Understanding the importance of people—navigating relationships within health care and within your organizations.

Interprofessional collaboration—teams are important for outcomes. And we also know that those who participate in teams have increased job satisfaction, etc. When we know what everyone else around the table does, it helps us out. We are a part of something that makes sense. There's a clarity.

Your institution will not be able to do what individuals can do... the institution cannot replicate the individual, the leader, the follower. But even individualistic professions realize that team-based initiatives are more productive. The individual cannot function at a higher level than the team, generally. Creating effective teams... we talk about culture, values, goals several times per year. Are new initiatives aligned with these values and goals, etc.

Sometimes it's best to not collaborate—sometimes it's best to not bring everyone to the table. We try to pinpoint the key stakeholders, representative voices. You have to train yourself to be an astute observer of people. You have to know your people well enough so you can tick the boxes for everyone.

Millenials—they crave recognition, it doesn't have to be public. They think nobody pays attention. Give them a say in decisions that impact them. Execute pay, profit sharing, and promotion fairly. They crave concise two-way communication. The more succinct and clear and concise we can be, that's just good communication. I would argue that maybe we're not as efficient as we can be. They also want to know that they are heard. Millenials are a ridiculously innovative generation, but sometimes they have been discouraged from innovating.

A millenial might think, if I'm at my job checking email all day, then I can do that from home... but if their job is just checking email all day, then you have to think, how can we change what we're doing big picture. We've become way too reliant on that particular tool.

Millenials are willing to take less pay to stay in the city—they want things to come to them. Ultimately, they want the same thing that every employee wants: schedule control, meaningful work relationships, choice of projects and learning opportunities. The demands that they have are not abnormal. They might be a little unrealistic. And I don't think these are limited to millenials. I think they are reflective of what we all want.

They will criticize their leaders to the death. They will constantly disagree with what you're doing.

What can you do? I don't lecture in my classes for more than 10 minutes... they want to be coached. They want it practical, applicable and relevant. A professional development opportunity that lasted 8 hours but could've been four, they'll complain. They'll talk about you. Maybe to your face.

They want clear deadlines and boundaries. They want to know when an assignment is due. Measures and metrics—how will you know, and how will you let them know they're doing a good job?
Intentional transparency. Transparency by itself isn't always good, but where you can share it's appropriate to share.

Millenials change careers every five years, not just jobs.

Focus your business on people. Are we focused on the individual. Does your organization understand that's your primary focus.

Key takeaways—interprofessional, interdisciplinary workplace. Emphasize organizational culture. Sometimes that's driven by the followers and moves upward. What's the feel, what's the vibe. Are you burdened by arriving and liberated when you step out the door? Or do you feel cared for, do you feel like you're a part of something.

Revolutionizing healthcare through telemedicine—Tammy Hatting—

SLIDES: https://hpnonline.org/downloads/?ms_file=ms_3569.pdf

What's changed since the last time you were at eCare—in two short years, we've gone from 8 to 13 states... long-term care is moving towards intervening right away and putting end of life plans together when they enter the nursing home. Most of all of our telemedicine providers also work the bedside... we launched our direct-to-consumer platform through a phone app... the sky is the limit, it's not just urgent care any more...

patient aren't compliant, how can we make them more compliant and engaged? Make it easier for them to talk with you. When you see the patient in their own environment, that tells you a lot about maybe the social issues, etc. We've had a weight management program... diabetes, coordination teams following up... you need to have a lot of touch-bases for that.

And team-based care, a pharmacist in the hub can supervise nurse mixing solutions, etc. Pushing a button and having collaborative help—we don't take over, we calmly go over options, etc. They do camera checks every day and build relationships. It's comfortable working together.

From a hiring perspective, people want to do telemedicine, because they are getting those exciting cases. They get the adrenaline and can help from behind a camera—for a younger generation—

Telemedicine is the future, the need is there—getting the CBO to realize, this isn't going to raise cost, it's going to save money.

Just about every specialist in the Avera system does telemedicine. New eSchoolNurse program—a school nurse in our hub that can reach out to schools that don't have one.

This is a great way to support smaller hospitals. It's the triple aim, but it's also rural workforce stability. We're hearing more and more, if eEmergency weren't at a site, they wouldn't practice there. In rural facilities, you might be the only doctor, you don't have the doctors lounge collaboration. It's hard to get technology in rural facilities, they might not have the fast broadband connections you need. Rural residents are more likely to suffer from chronic conditions... It's really hard to be a rural physician. Difficulties recruiting. Many burnout factors.
Maybe virtual visits will become even more popular through provider shortages. Only 30 percent of physicians practice primary care... Hard for them to take time off. Fewer opportunities for continuing education, also because of the time-off factor. But you can do CME through telemedicine which helps rural sites. And telemedicine does help raise the skill set when you have someone coaching you along. The more they have those interactions the more likely they are to be able to handle it the next time they see it. There's also challenges to maintaining professional boundaries in small communities.

Avera eCare helps prevent that burnout... really helps to support the community. It's a real-time access to a network of peers, specialty consults, nursing support... we can do their paper work so they have time to be with the patients.

Most of our equipment... we might have to sunset at some point but currently it's reliable... just kindof a dinosaur. The key is—it has to work every time they hit the button.

We never have a problem filling a nursing position in the hub. American Medical Association encourages training in telemedicine for medical students and residents. I do think this will be the wave of the future.

Key competencies—what we have seen in our hub. When we tour physician recruits, they need to know a little bit about the software, it's a higher level of customer service. Doctors didn't want to talk about their computers, etc. but in the hub you do have to do a bit of technical support and know a bit about IT and have customer service skills. Bedside manner, webcam manners.

Clinical skills have to be on point but it's different. It's like practicing with your hands in your pockets. Coaching rather than practicing directly. All of our eCare customers have access to free education that we push out through the equipment. We can train a lot of sites at once. They get CMEs and CNEs.

Standardized installations, we have that down to a science. We will be providing telemed services to great plains native american reservations in 5 states... behavioral health, emergency, etc. It's going to be a big challenge, but that's where our mission comes in. We are a catholic health system.

Our focus is rural, because we think there's a huge impact, but of course this could be urban as well.

Challenge with ambulatory care is political, with all the different stakeholders.

We're going to add behavioral health assessment to emergency services... but we also want to build up psychiatry specialty to get those follow-up appointments as quickly as possible.

**Arrowsmith Revisited—Dr. John Roberts—**

**SLIDES: [https://hpnonline.org/downloads/?ms_file=ms_3571.pdf](https://hpnonline.org/downloads/?ms_file=ms_3571.pdf)**

Martin Arrowsmith doesn't exist any more.

Now, the only book you need is your phone. My students are on their phones for the right reasons, they cross check me. They catch me out when I'm out of date. Education in medicine is very expensive. Now you have to go through four years of college before you go to medical school. 4-6 years behind their peers in terms of living and $200,000 of educational debt at graduation. And residency training, they only get 50-60,000 for 3-8 years of residency. Many struggle to make it, particularly in large
metropolitan areas (cost of living).

Changes in undergraduate medical education in Medical School—required engagement in the community in the first year, interacting with patients. Changes in Graduate Medical Education—same accreditation system for GME across osteopathic and allopathic, etc.

What's the difference? DO patient skills were much better. Students on both sides saw the value of collaboration. MD has embraced technology so much that we've moved away from the basic skillsets of being a physician at the bedside. That's my view and I think it's shared by many.

Maybe number of hours for interns is not the right metric. Moving to skills-based, core competencies. Maybe somebody has the skills to graduate in two years, why do they have to stay three just because that's what we require?

Independent private practices are disappearing because of the cost of electronic health systems... 60% of physicians are employed by a hospital of health system which is raising ethical questions—who is your doctor, the system? Who are they responsible for, you or their employer?

The biggest problem is, we do not know what that future should look like. Now, the doctor doesn't have to, can't do it all. It will require teams working collaboratively.

**HPN TALKS—Integrating Oral Health into the Patient-Centered Medical Home: Tools and Resources—Marcia Brand**

**SLIDES: [https://hpnonline.org/downloads/?ms_file=ms_3573.pdf](https://hpnonline.org/downloads/?ms_file=ms_3573.pdf)**

There's a big impact of oral health on social well-being. People can't get jobs... The answer isn't more dentists—lots of folks can't afford to see them, we need an interprofessional approach. Why is it this way? The doctor looks right past your teeth at your throat but insurance doesn't cover it.

The patient is stuck in the middle between dentist and doctor, bringing information back and forth, how do we fix that. Pediatrician gives a lollipop to a girl on the way out and the girl asks, why doesn't the pediatrician care about my teeth? Big challenge is how we pay for it.

There are some early adopters of oral health, we've made significant changes in some professions, and we have some great champions and big wins. My opportunity to brag on this organization is that you included oral health in your fundamental competencies. Thank you for that.

Smiles for Life is a discipline agnostic curriculum. We need resources to integrate oral health into primary care teams. How do you change the standard of care? How do we get over the impression that this is an unnecessary extra—when we don't have time to do what we have to do already.

Well, you can bill for flouride therapy. The person who “rooms” the patient can do a lot with oral health. How do we pay for it and measure it.

We needed a more contemporary document than the 2000 surgeon general’s report on oral health... HHS finally published a new plan for oral health last Spring. Funding interprofessional approaches to integration. Finally federal support for that.
I want to get a big system, then they'll all tumble, right? Maybe not that easy to do.

Are dentists nervous? No, it's not affecting their scope of practice, but dental hygienists who see the assessment and education role as theirs are threatened, but they are at the table. What about a larger role for hygienists in larger practices? Well, yes, but we've been trying to make the argument that you can do this without additional resources, but... it's a field that's evolving. I think we're past the tipping point and it's going to happen.

**HPN TALKS—{Education + Certification + Practice}²—Kathy Cilia—**

SLIDES: [https://hpnonline.org/downloads/?ms_file=ms_3574.pdf](https://hpnonline.org/downloads/?ms_file=ms_3574.pdf)

Competencies as they relate to certification exam development. How exams are written so we can assess those competencies? How do we develop knowledgeable and competent professionals?

With certification exams, it's hard to get to the practical level... some include a practical component, but a lot don't. It all comes down to—can you do your job properly.

Collaborating between educators, certification, and employers. Between education and practice there are advisory boards, between certification and practice there are Subject Matter Experts and task analysis, and between certification and education there are exam reviews.

Advisory Boards—it's a collaborative model, we as a certification body has been asked to sit on those advisory boards as well.

Expert committees—composed of real working practitioners and educators... psychometricians help subject matter experts take the data and write the questions and make expert decisions....

Task analysis—performed every 3-5 years, survey to employers that utilize the certification you're trying to test and ask questions about what tasks are still performed and what are no longer performed. Take questions out and add new ones, rank questions and assign weight to more important ones, etc. Results draft test specifications. That's how certification and employers work together.

Exam Review—what's covered by your exam, we want to make sure our students are successful. We give them % of exams in terms of competency areas, so they can be sure the curriculum covers what's going to be included.

There is an iterative feedback loop and it's amazing how much collaboration goes on between these three areas.

COMMENTS FROM ROOM… it can kindof work without collaboration, because you can find what you need on the website, etc. … collaboration is good to a point, you want feedback, but you don't want them all in bed together, because otherwise you get problems like in respiratory care right now... continuing education can't be provided by credentialing body, too much conflict of interest... regulatory vs. professional. You can't protect the public and promote the profession at the same time...

we are a professional association and credentialing body... it's a different set of people that write the questions, they have nothing to do with the association side... etc. there's a firewall. otherwise it wouldn't work.
Sometimes we forget our actions do speak much louder than our words. Know your audience! Cultural sensitivities, etc. We try to cram so much information onto one slide, it doesn't work.

We ask the wrong questions. Do you have any questions? Do you understand? The answer is going to be NO and YES, but 90 percent of the time they do have questions and they don't understand.

We don't dumb down the language, it's making it quicker and easier to understand... we don't want people to think we are dumbing it down...

Teach back—puts the onus back on the provider, that the provider hadn't done a good enough job of explaining, not that the patient was too stupid to understand. Make sure you're telling it a different way. That way you clear up miscommunication.

Do you have any questions? And do you understand? Should be taken out of your vocabulary. What questions do you have for me? Puts the onus on the patient—they will have questions... you can ask them to write down their questions when they have them for the next time they see you as a provider.

A document called “Simply Put” — communicate in an inverted pyramid. What they need to know at the beginning, what's nice to know towards the end. Cultural sensitivities—certain gestures are rude in other cultures, etc... in some cultures it's rude to look someone in the eye, but usually it's recommended.

Panel—Collaborating your workforce, Carolyn O'Daniel, Tom Skalko, Christian Ralston

We were in flux getting the right people at the table, but once we had a strong core we could develop a draft agreement... we thought we might want to formalize down the road to bring in more resources. Initially, the college was the leader, we created the forum from which community leaders could develop a vision for the community.

Employee engagement and turnover is better than best in class... aligning opportunities... talking about how medical assisting is our front-line and there's great opportunity for stackable credentials, that might be our next work here in Louisville.

Coaching model was brought forth through the H2P grant. We've learned from our partners and implement that at Norton Healthcare. Data is really what drives decision-making. That's what's allowed this collaborative to be so successful. It allows us to be proactive and work together to meet needs. It's not foolproof, but it gets us away from hunches and assumptions.

The workforce investment board wasn't connected to anything and spending money in a silo, none of us were working or talking with each other.

Getting immigrant degrees recognized in the US, a huge opportunity for us to look at pulling in all populations and making sure we represent the community that we serve... ESL initiatives, they've gotta have the language to sit for the exams.
Activities of the Committee or Affiliated Organizations

I. There have not been meetings of PTAC in the second half of the year.

II. Correspondence from The Joint Commission Professional and Advisory Committee for Laboratory Accreditation on May 31, 2017 states:

“As you know from discussions at meetings of the Standards and Survey Procedures Committee last year, The Joint Commission Board of Commissioners has been engaged in a comprehensive review of its governance structure and processes through the application of governance best practices that allow for the most meaningful engagement with key stakeholders. This resulted in the transition of the development, review, and approval of accreditation standards (as well as other key areas including accreditation and performance measurement) from activities conducted by Joint Commission Board committees to management functions with Board oversight.

Also as part of that review, advisory groups that were previously overseen directly by the Board, including the PTACs, now report to management.

In light of the decision of the Board to change this advisory reporting structure, Joint Commission leadership is charged in 2017 with developing a plan for how the PTAC advisory processes will function under this new structure. We expect that this process will result in different outcomes for different accreditation programs, based on the advisory needs in each area.

While Joint Commission management thoughtfully develops a new engagement process, it is necessary to place official PTAC calls on hold at this time. To allow for focus on this important transition, PTAC membership renewals, scheduled for 2017, will also be put on hold until further notice. Current representatives, alternates, and liaisons will remain in place at this time. Direct all questions about membership issues to myself at the contact information provided below.

We will continue to keep you informed as this plan develops. Thank you for your continued relationship with The Joint Commission.”

Items of Concern:

Unsure how the PTACs will be changing and developing. Will continue to correspond with The Joint Commission and ASCLS BOD as changes are made.
Request for Action:
Activities of the Committee or Affiliated Organizations

Actions:

- The Task Force has tried to meet on a regular basis but has found their hands tied by schedules for its members that span the time frames of the continental US.

- We discussed the wins and losses from the previous year and made the following decisions:
  - Continue the development of a document that discusses all the committee's and opportunities that are available to an ASCLS member – using the volunteer sight has helped to define that task.
  - Continue to reach out to ASCLS members for participation and interaction with the ASCLS Facebook page through the “Monday Moment with a Member” spotlight.
  - Chair has reached out to ASCLS leadership several times.
  - Response from ASCLS leadership has been very limited.
  - States that have been represented recently include MN, SD, MD, CO.
  - Several states have requested info but there has been no return or completion of the process.
  - This is a wonderful way to highlight laboratorians with diverse backgrounds, skills and abilities - as well as bring acknowledgement for laboratorians, state and region ASCLS societies and a way to share ASCLS with laboratory peers in a non-threatening and easy way.
  - ***Would love to see Region Directors take this back to their Regions and make this a priority***

- Continue to pursue new options to allow current members and other laboratorians who not yet members to see themselves within the “face” of ASCLS through pictures, articles, interactions, etc.
• #JoinMe campaign – using video snippets of various ASCLS members just looking into the camera and stating “Join Me” - or “Join Me, I am a student (or educator, or Chemist, or Generalist, or intern, etc) and I am ASCLS.”
  • Allowing people to see that they are joining others like them and not just an organization
  • A way to make this a relationship and not just an professional entity
  • A way to allow others to see the “people” of ASCLS, the WHO along with the what

• We were also asked by the ASCLS Leadership to determine how this thought process of continually looking for new ideas, options and methods to increase diversity could exist within the committee structure of ASCLS
  ° The New Idea Factory taskforce committee had a long discussion about where we might fit within the committee structure
  ° Options included Diversity Advocacy Council, Leadership, PPC and Membership
  ° Although there are definite links with all the above, the final decision was to approach the Membership Committee and begin a discussion as we felt that to increase diversity it will/would require an increase in a diverse membership
  ° Andrea was a great asset in this as she is a member of both entities
  ° Discussions were held with the Membership Committee during their December meeting and a vote was taken and passed that we would be an entity under their umbrella
    • Said taskforce would be self standing but report to the Membership committee (as well as continue to communicate meeting minutes to the DAC)
    • Membership committee would also be willing to assist the taskforce in needs that they might have and vice-versa
    • Taskforce would contribute a member to the membership committee meetings to ensure that communication would continue to flow both ways
    • An example of this was the discussion of the #JoinMe campaign. The Membership Committee chair knows of someone who does video compilation and layout who is willing to assist us with this campaign
      • this ability to coordinate efforts will allow us to do some examples to present to the BOD to determine if we should go forward with the project
      • Hope to have something by mid to late April

• Other thoughts going forward
  ° Social events for the 2017 Annual Meeting – another “pub crawl”??
  ° Possibility of a photo booth at the 2017 Annual Meeting
  ° Possibility of using the “Moment's with a Member” photos to display at the Annual Meeting
  ° Dependent on the #JoinMe campaign – using it as advertising not only as a video on Facebook, but as advertising on the website, print media and other possible options
  ° Discussions by several New Idea Factory members were going to be held at CLEC about the possibilities of ASCLS chapters on university campuses – following the examples that we were able to find from both the nursing and pharmacy areas in
which the presence of their professional organizations on their campuses is expected and thus, continued membership in their professional organization is also expected to continue post graduation

- A great tie in to the “educational” membership option
- Would require a buy-in from the educational institution, educators and state ASCLS leaders/members

- The New Idea Factory Taskforce appreciates the BOD continued support of our efforts and would covet any ideas that you might have as well.

**Items of Concern:**

**Request for Action:**
I move that the ASCLS Board of Director’s assign the charges of the New Ideas Taskforce to the Membership Committee.

**Discussion:**
At present we have a liaison to the committee from the taskforce. But, going forward the goals of the New Idea Factory Taskforce could be included within the Membership Committee charges from the BOD and thus, utilize the thought process, creativity, and skill sets of the Membership Committee members – possibly even allowing for several of the Membership Committee members to place their focus on this specific charge. With the evolution of members on the Membership Committee this would also allow for new thoughts, ideas, insight and the continuation of a process to reach out in new ways to fulfill our goal of reaching out and encouraging the diversity of laboratorians to also be reflected in our organization, its membership and leadership.
## Activities of the Committee or Affiliated Organizations

- Continuing to run and monitor the mentorship program
- Created the policy for the mentorship committee

## Items of Concern:

## Request for Action:
To: ASCLS Board of Directors

Re: Root Cause Task Force Annual Meeting Board of Directors Report 2017

Prepared by: Rick Panning, Task Force Chair

Date: July 22, 2017

Task Force Membership:
Rick Panning, Chair
Maddie Josephs, Board Liaison
Kathy Doig
Kristina Martin
Linda Smith
Mary Ann McLane
Ian Wallace
Carol Rentas

Charge: To determine the cause of the "lack of leadership - either in experience or volunteers - that leads to vacancies or recycling of individuals". There is not an expectation for resolution at this time.

Meetings (teleconference) for April-July 2017):
- October 16, 2016
- November 7, 2016
- November 14, 2016
- November 28, 2016
- December 12, 2016
- January 16, 2016
- February 6, 2017
- February 20, 2017
- March 13, 2017
- July 10, 2017
- Communication via email

Activities:
1. During the first meeting in October the following was discussed.
   a. Introduced the A3 documents that the task force is being requested to use to document its work.
   b. Rick shared a summary he prepared from the state board reports at the annual meeting. This summary laid the foundation for a description of the problem we are trying to solve. In that report, 8 of 10 regions had state reports documenting concerns related to lack of leadership. Many of the regions documented lack of assigned state resources for the student forum and a number of states documented lack of resources for the New Professional New Member forum. While this was a snapshot, Rick, Mary Ann and Linda (as past-presidents) shared that this issue has been documented since the early years of the 2000s.
   c. It was determined that a survey of all states needed to be performed to provide us with a “state of the union”.
   d. Planning a meeting schedule for the period through the end of February 2017.
2. Survey development:
   • Decided to survey leadership in each constituent society to gain quantitative and qualitative data related to the current challenges in gaining involvement and identifying leadership.
   • Used the ASCLS-Michigan Leadership survey from 2016 as a reference for our survey development.
   • Decided to use Qualtrics as our survey tool. Felt to be a better tool in terms of data analysis. Kristina Martin, University of Michigan has access to Qualtrics and designed the online survey.
   • Kristina Martin and Kathy Doig drafted survey questions. Entire group through teleconferences and email communication edited and fine-tuned the survey questions.
   • Qualtrics survey tested by task force members.

3. Survey administration
   • The task force decided to send the survey link with an introductory email to each constituent society President and president-elect and ask them to forward it to their board/leadership team.
     (email and final survey attached – Attachment C and D)
   • Survey to be emailed on January 18, 2017 and to remain open for 2 weeks. Reminder email to be sent out on January 25.
   • At this stage encountered many barriers to distribution of the survey and extended the survey deadline to February 13. (summary of issues attached)
   • Complete survey results available (attached)
   • Received results from 34 of 47 constituent societies.
   • For the qualitative questions, the comments were coded and summarized to raise common themes and to help prioritize the issues.

4. Shared ASCLS Board of Directors feedback with task force.
   • Regional directors were not aware of the survey and want to be copied and informed going forward. While there was not formal communication with the entire board as the survey was distributed, as we followed up on states not responding, we did work closely with a number of Regional Directors.
   • Invite Jim Flanigan to future calls of the task force.
   • Provide a report to the BOD at the annual meeting, as to which states responded and in what numbers (Attachment A.).

5. Should we attempt to resurvey the states from which we received no responses. After much debate among the task force members about whether to resurvey or not and if so, how to do it, it was decided that we will not resurvey and that we would finalize the survey report for the annual meeting.

6. Next steps:
   • Complete BOD report for annual meeting and HOD report. BOD meets Sunday, July 30 from 8:30-noon. The following task force members will be at the board meeting: Rick, Maddie, Linda, Mary Ann, Ian and Carol.
   • Issues update on Monday, July 31. Rick will provide update between 11:00-11:15 am.
   • What should be shared with state leadership and Regional Directors? Each state will receive their raw data if they participated and Regional directors will receive the complete report.
   • Goal: Complete report and recommendations by the Fall 2017 BOD meeting.
   • Prepare executive summary of quantitative results (Attachment E)
   • Prepare a report which includes: problems identified, suggestions to address and action plans. (Attachment F)
   • As part of recommendations, develop strategies that will better engage students and new professionals.
     o Engage those willing to serve
Define what leadership requires
- Mentors
- Leadership development and leadership academy
- Job descriptions

- Provide states with the following
  - Raw data (Kristina will pull from Qualtrics)
  - Overall data and reports

- Brainstorm suggestions, actions and recommendations to address problems identified.

7. For Fall board meeting
- Task for will meet 2x per month in August, September and October 2017.
- Develop recommendations to address problems identified

Attached documents:
- Survey response by state (Attachment A)
- Survey Demographics (Attachment B)
- Barriers to leadership communication encountered in the survey process (Attachment C)
- Communication email to constituent society presidents and president-elects (Attachment D)
- Survey email and link to survey (Attachment E)
- Survey (Attachment F)
- Executive summary of quantitative results (Attachment G)
- Problems identified (Attachment H)
- Common Themes (Attachment I) with Word Cloud

Request for Action: I move that the ASCLS Board of Directors make “Revitalization of Constituent Society Organizations” a strategic goal over the next 5 years.
Attachment A: Response by state/constituent society

Q2 - To which constituent Society of ASCLS do you belong currently?

<table>
<thead>
<tr>
<th>#</th>
<th>Constituent Society</th>
<th>% respondents</th>
<th># of respondents</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Alabama</td>
<td>0.54%</td>
<td>1</td>
</tr>
<tr>
<td>2</td>
<td>Alaska</td>
<td>0.00%</td>
<td>0</td>
</tr>
<tr>
<td>3</td>
<td>Arizona/Nevada</td>
<td>1.61%</td>
<td>3</td>
</tr>
<tr>
<td>4</td>
<td>Arkansas</td>
<td>0.54%</td>
<td>1</td>
</tr>
<tr>
<td>5</td>
<td>California</td>
<td>0.00%</td>
<td>0</td>
</tr>
<tr>
<td>28</td>
<td>Central New England</td>
<td>1.08%</td>
<td>2</td>
</tr>
<tr>
<td>6</td>
<td>Colorado</td>
<td>8.06%</td>
<td>15</td>
</tr>
<tr>
<td>7</td>
<td>Connecticut</td>
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<td>0</td>
</tr>
<tr>
<td>8</td>
<td>Delaware</td>
<td>3.23%</td>
<td>6</td>
</tr>
<tr>
<td>9</td>
<td>Florida</td>
<td>0.54%</td>
<td>1</td>
</tr>
<tr>
<td>10</td>
<td>Georgia</td>
<td>0.54%</td>
<td>1</td>
</tr>
<tr>
<td>11</td>
<td>Hawaii</td>
<td>2.15%</td>
<td>4</td>
</tr>
<tr>
<td>12</td>
<td>Idaho</td>
<td>4.84%</td>
<td>9</td>
</tr>
<tr>
<td>13</td>
<td>Illinois</td>
<td>8.60%</td>
<td>16</td>
</tr>
<tr>
<td>14</td>
<td>Indiana</td>
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<td>9</td>
</tr>
<tr>
<td>15</td>
<td>Iowa</td>
<td>0.54%</td>
<td>1</td>
</tr>
<tr>
<td>16</td>
<td>Kansas</td>
<td>5.38%</td>
<td>10</td>
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<tr>
<td>17</td>
<td>Kentucky</td>
<td>0.00%</td>
<td>0</td>
</tr>
<tr>
<td>18</td>
<td>Louisiana</td>
<td>4.84%</td>
<td>9</td>
</tr>
<tr>
<td>19</td>
<td>Maine</td>
<td>2.69%</td>
<td>5</td>
</tr>
<tr>
<td>20</td>
<td>Maryland</td>
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<td>22</td>
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<td>Minnesota</td>
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<tr>
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<td>Mississippi</td>
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</tr>
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<td>25</td>
<td>Missouri</td>
<td>3.23%</td>
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<tr>
<td>26</td>
<td>Montana</td>
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</tr>
<tr>
<td>27</td>
<td>Nebraska</td>
<td>0.00%</td>
<td>0</td>
</tr>
<tr>
<td>30</td>
<td>New Jersey</td>
<td>1.61%</td>
<td>3</td>
</tr>
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<td>31</td>
<td>New Mexico</td>
<td>0.00%</td>
<td>0</td>
</tr>
<tr>
<td>32</td>
<td>New York</td>
<td>4.84%</td>
<td>9</td>
</tr>
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<td>33</td>
<td>North Carolina</td>
<td>3.76%</td>
<td>7</td>
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<td>34</td>
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<td>3.23%</td>
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<td>35</td>
<td>Ohio</td>
<td>3.76%</td>
<td>7</td>
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<td>36</td>
<td>Oklahoma</td>
<td>2.15%</td>
<td>4</td>
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<td>0</td>
</tr>
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<td>38</td>
<td>Pennsylvania</td>
<td>0.00%</td>
<td>0</td>
</tr>
<tr>
<td>40</td>
<td>South Carolina</td>
<td>0.00%</td>
<td>0</td>
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<td>41</td>
<td>South Dakota</td>
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<td>---</td>
<td>--------------</td>
<td>------------</td>
<td>-------</td>
</tr>
<tr>
<td>42</td>
<td>Tennessee</td>
<td>6.45%</td>
<td>12</td>
</tr>
<tr>
<td>43</td>
<td>Texas</td>
<td>0.54%</td>
<td>1</td>
</tr>
<tr>
<td>44</td>
<td>Utah</td>
<td>0.00%</td>
<td>0</td>
</tr>
<tr>
<td>45</td>
<td>Vermont</td>
<td>0.00%</td>
<td>0</td>
</tr>
<tr>
<td>46</td>
<td>Virginia</td>
<td>2.15%</td>
<td>4</td>
</tr>
<tr>
<td>47</td>
<td>Washington</td>
<td>0.00%</td>
<td>0</td>
</tr>
<tr>
<td>48</td>
<td>West Virginia</td>
<td>0.00%</td>
<td>0</td>
</tr>
<tr>
<td>49</td>
<td>Wisconsin</td>
<td>0.54%</td>
<td>1</td>
</tr>
<tr>
<td>50</td>
<td>Wyoming</td>
<td>1.61%</td>
<td>3</td>
</tr>
<tr>
<td></td>
<td><strong>Total</strong></td>
<td><strong>100%</strong></td>
<td><strong>186</strong></td>
</tr>
</tbody>
</table>
Attachment B: Survey Demographics

1. Total individual survey responses = 197 (mean = 4.2 per constituent society)

2. Of 47 constituent societies (3 inactive) we received responses from 34 states (70% response rate)
   - Range of responses from each constituent society: 0-19
   - Mean number of responses from each constituent society: 4.2

3. Demographics of individual respondents – current constituent society role.

<table>
<thead>
<tr>
<th>Answer</th>
<th>%</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Officer [President, President-elect, Past-president, Secretary, Treasurer]</td>
<td>34.41%</td>
<td>64</td>
</tr>
<tr>
<td>Elected Board Member (not an officer)</td>
<td>22.58%</td>
<td>42</td>
</tr>
<tr>
<td>Appointed Committee Chair; What committee?</td>
<td>29.57%</td>
<td>55</td>
</tr>
<tr>
<td>None; no current position held</td>
<td>13.44%</td>
<td>25</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>100%</strong></td>
<td><strong>186</strong></td>
</tr>
</tbody>
</table>

4. Demographics of individual respondents – past constituent society roles

<table>
<thead>
<tr>
<th>Answer</th>
<th>%</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Officer [President, President-elect, Past-president, Secretary, Treasurer] or multiple of these</td>
<td>54.14%</td>
<td>98</td>
</tr>
<tr>
<td>Elected Board Member (once or more than once)</td>
<td>54.70%</td>
<td>99</td>
</tr>
<tr>
<td>Appointed Committee Chairperson for one or more committees</td>
<td>55.25%</td>
<td>100</td>
</tr>
<tr>
<td>None; this is my first year in leadership</td>
<td>14.92%</td>
<td>27</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>100%</strong></td>
<td><strong>181</strong></td>
</tr>
</tbody>
</table>

5. Self-evaluation of constituent society health
   - 40.32% view themselves as Robust or keeping fit
   - 54.30% view themselves as in “declining health”, “in intensive care” or “on life support
   - 5.38% don’t know

<table>
<thead>
<tr>
<th>Answer</th>
<th>%</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Robust and ready to run a marathon</td>
<td>4.84%</td>
<td>9</td>
</tr>
<tr>
<td>Keeping fit</td>
<td>35.48%</td>
<td>66</td>
</tr>
<tr>
<td><strong>Couch potato in declining health</strong></td>
<td><strong>27.56%</strong></td>
<td><strong>52</strong></td>
</tr>
<tr>
<td><strong>In need of intensive care but surviving</strong></td>
<td><strong>20.43%</strong></td>
<td><strong>38</strong></td>
</tr>
<tr>
<td><strong>On life support</strong></td>
<td><strong>5.51%</strong></td>
<td><strong>11</strong></td>
</tr>
<tr>
<td>I don’t know</td>
<td>5.38%</td>
<td>10</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>100%</strong></td>
<td><strong>186</strong></td>
</tr>
</tbody>
</table>
Attachment C
Barriers encountered in communicating with Constituent Society Leadership

1. Not all constituent societies have submitted leadership rosters to the national office.

2. Leadership roster information incorrect or not complete.

3. Constituent society websites are not up-to-date and/or leadership rosters on the state websites are not up-to-date.

4. ASLCS website listing (with constituent society links) of Regions and states is not correct.

5. A number of the email addresses provided for constituent society leaders resulted in bounce backs for the e-mail that was sent by the national office. This was especially true with university email addresses.

6. Lack of initial response, after the original two-week timeframe, result in 29 (of 47) constituent societies with “no response”.
Attachment D: Leadership Survey

Communication email to constituent society presidents and president-elects

SUBJECT: TIME SENSITIVE – For immediate distribution to constituent society leadership

Dear ASCLS Constituent Society Presidents:

Below is a memo we are asking you to forward to your current ASCLS constituent society leadership including elected board members and appointed committee chairs. Our goal is to get a broad set of responses. Please distribute immediately.

Dear ASCLS Constituent Society Leaders:

The ASCLS Board of Directors has received recurrent reports from constituent society leaders about lack of interest among members to participate on the leadership team at the constituent society level. A task force has been formed to conduct a root cause analysis and make recommendations to the ASCLS Board regarding this concern. To help us understand the issue more specifically and to assess its extent, you are asked to answer this survey. We expect it to take from 10-20 minutes, depending on how much you want to tell us in the open-ended questions. Your responses will not be individually identifiable, though we may want to quote you anonymously in the final report. Also, each constituent society president will receive a summary of the responses from his/her society to help with understanding constituent society-specific issues.

Here is the link to the survey:

https://umichumhs.ut1.qualtrics.com/SE/?SID=SV_41RbEooVpAcRM5T
Q1 - I have read the definitions used in this survey.
   Yes, I really did.

Q2 - To which constituent Society of ASCLS do you belong currently?
Q3 - What is your current position within your ASCLS constituent society?
   Officer (President, President-elect, Past-president, Secretary, Treasurer)
   Elected Board Member (not an officer)
   Appointed Committee Chair; What committee?
   None; no current position held

Q4 - What other positions have you held in the past with this or another constituent society? (mark all that apply)
   Officer (President, President-elect, Past-president, Secretary, Treasurer) or multiple of these
   Elected Board Member (once or more than once)
   Appointed Committee Chairperson for one or more committees
   None; this is my first year in leadership

Q5 - How would you describe the health of your constituent society overall?
   Robust and ready to run a marathon
   Keeping fit
   Couch potato in declining health
   In need of intensive care but surviving
   On life support
   I don’t know

Q6 - Why did you select that answer in the question 5? (open-ended comment)

Q7 - The Task Force has access to data on membership for your constituent society, which is one measure of the society’s health. Here, tell us more about other aspects of society health including conferences, social activities and the finances of your constituent society’s health. Which of the following describes your constituent society overall? Select all that apply.
   Only a few ACTIVE members
   Many ACTIVE members
Does not offer an annual conference

Good attendance at conferences

Poor attendance at conferences

Offers CE events other than an annual conference

Offers social events other than those at the annual conference

Financially shaky

Financial stable

Financially strong

Other

I don’t know

Q8 - How large is the leadership of your constituent society? Be sure to include elected/voting board members and annually appointed committee chairs. Include the chairs of conference planning subcommittees (e.g. Hospitality, Registration, Exhibits, etc.). Don’t worry about exact numbers – get close.

12 or fewer

13-18

19-25

26-35

More than 35

Q9 - One of the things we have learned is that constituent societies use words and phrases differently when talking about “the Board.” We would like to understand this better. In your constituent society, which of the following are included IN THE BY-LAWS as members of the Board of Directors? Mark all that apply.

Elected officers (e.g. President, Treasurer, Secretary)

Elected board members (i.e. typically voting members)

Standing committee chairs specified in the by-laws

Committee chairs appointed by the President but not necessarily specified in the by-laws

Others; Explain

I don’t know
Q10 - In your constituent society, when you refer to “the Board” in conversation (not necessarily the by-laws definition), who is included? Mark all that apply.

- Elected officers (e.g. President, Treasurer, Secretary)
- Elected board members (i.e. typically voting members)
- Standing committee chairs specified in the by-laws
- Committee chairs appointed by the President but not necessarily specified in the by-laws
- Others; Explain

Q11 - How would you describe the pool of individuals to serve as leaders in your constituent society? Willing means just that – if asked to serve now, they would say yes. Available means that work, family, and other obligations do not prevent them serving now. Necessary skills means both knowledge of the society and generic leadership skills. Mark all that apply.

- Ample supply of individuals who are willing
- Ample supply of individuals who are available
- Ample supply of individuals with necessary skills
- Not enough people who are willing
- Not enough people who are available
- Not enough people who possess the necessary skills
- I don’t know

Q12 - What services are hired by your society or shared with another group, thus reducing the load on volunteers? Mark all that apply.

- Conference planning and management
- Accounting/tax filing
- Executive secretary (maintains society records, facilitates communications, etc.)
- Executive director
- Web services
- Investment management
- Other

Q13 – For each of the following indicate if your society does this regularly, sometimes or to some degree, never or virtually never does this, or “I don’t know”.

- Provides training on how to perform one’s FIRST appointed/elected position responsibilities
Provides training on how to perform appointed/elected position responsibilities even if it isn’t one’s first leadership role

Provides job descriptions for position responsibilities

Accepts nominations/appointment of inexperienced but willing members into critical leadership positions (e.g. officers)

Provides a formal mentor on society position responsibilities

Provides generic leadership training (e.g. communications, delegation, etc.) to leaders

Has committee chairs doing everything themselves without forming a committee

Keeps an up-to-date leadership roster on its website

Holds leaders accountable to be sure their responsibilities are completed

Changed by-laws or BOD structure to try to accommodate the lack of leadership volunteers (e.g. allowed more terms or longer terms of office; decreased number of board members)

Fills its slate of officers and other elected positions each year without recycling leaders

Expects non-voting appointed committee chairpersons or other non-voting leaders to attend Board meetings

Appoints new members/new professionals into entry-level and non-critical committee chair positions

Recognizes my contributions with public appreciation/certificate

Recycles leadership because new people do not seek leadership positions

Provides some financial support to at least some leaders to attend state/regional conferences

Provides means for Board members and general membership to attend board meetings remotely (e.g. phone conference, video conference)

Asks/expects/allows committee chairs to share their responsibilities by inviting people to join the committees

Provides some financial support to delegates to the national House of Delegates

Helps leaders understand how the constituent society relates to the national level of ASCLS

Provides on the web or in a manual/handbook, information like the bylaws and operating procedures of the organization

Insures that experienced members are elected/appointed into critical leadership positions (e.g. president-elect, treasurer, conference chair)

Intentionally practices job rotation

Recognizes Keys to the Future annually

Has experienced committee members or co-chairs move into committee chair positions

Invites members who are not in leadership to attend board meetings

Financially supports promising leaders to participate in the national Leadership Academy

Has members who are not in leadership in attendance at board meetings

Financially supports promising leaders to participate in state or regional Leadership Academy, if one is available

Has a succession plan for the society president

Sponsors a state leadership academy
Has a succession plan for the officers of the society other than the president
Has a succession plan for filling all elected positions
Has a formal mentoring program/process for board members
Participates in a regional leadership academy
Recognizes mentorship with an award
Has an active Student Forum or Student Forum chairperson each year
Has an active New Professional member each year
Has an active New Professionals GROUP that socializes together
Has an active New Professionals GROUP that takes on an annual project for the Society
Nominates members for the national Leadership Academy
Provides opportunities to socialize with other members apart from the major conference(s)
Actively communicates the needs of our organization to our members
Promotes our Society and membership to laboratory professionals outside ASCLS
Plans ways to welcome new members to the Society
Formally welcomes new leaders at board meetings or other events

Q14 - What do you think are the 1 or 2 major reasons that members don’t step up to enter leadership positions? (Open-ended comments)

Q15 - What suggestions do you have about correcting those things? (Open-ended comments)

Q16 - What do you think are the 1 or 2 major reasons experienced leaders don’t continue to serve in advancing positions of responsibility within constituent societies? (Open-ended comments)

Q17 - What suggestions do you have about correcting those things?

Q18 - Is there anything else that you would like to tell us about what helps members step into leadership within ASCLS constituent societies?

Q19 - Is there anything else that you would like to tell us about what hinders members from stepping into leadership within ASCLS constituent societies?
Attachment F: Preliminary Results – Common Themes

Major reasons that members do not step up into leadership positions
- Lack of available time / time commitment / competing time commitments
- Infringes on personal time and work time - family, school, short staffed at work.
- Fear, lack in information.
- Burnout
- People do not see the value in volunteering, viewed as waste of time, lack of incentives ("Why do you do this, you are a fool"). Lack of buy-in to what ASCLS does for them. Perception that ASCLS is not addressing real day-to-day issues.
- Cost - time off, travel, meetings. Lack of employer support.
- Not mentored or trained
- Lack of support and training
- Society politics – cliques, inefficient systems, resistance to change

How to correct things.
- Mentoring
- Clearer expectations/roles
- Communication/awareness
- Invite members, non-members, new professionals to be involved
- Boost membership campaigns

Current best practices
- Availability of support and training or assigned mentors to boost confidence and provide guidance
- One-on one invitation
- Better communication from leaders relative to society work and accomplishments
**Attachment G: Executive summary of the Leadership Root Cause Task Force Survey – Quantitative data**

**Identifying healthier societies vs unhealthy.**
Using the results to question 5 in which respondents were asked the health status of their state (robust, fit, couch potato, etc), societies were identified as "healthier" if more than 54% of the respondents rated the state as "fit" or "robust". Only 7 societies met this criterion. Of the 7, three states had only a single response. They were retained among the healthier societies if the response to question 3 indicated that they are currently an officer of the society and we are trusting that they can accurately reflect the practices of that society. So, 6 societies are considered among the healthier societies. **They are: CO, DE, MI, IA, NY, and WI.**

**Society Health Factors:**
Conclusions: Although respondents were asked in open-ended format to discuss the factors that contributed to their assessment of the health of their society, these quantitative questions were posed to insure responses on these specific aspects of society health. As might be expected, healthier societies are far more likely to report that they have many active members than do the unhealthier societies; though it is still under 50% of the respondents from those societies providing that assessment. The overwhelming majority (90%) of respondents from unhealthier societies report having only a few active members. Some of these are in less populated states (e.g. WY, MT). Among the healthier societies, all report good attendance at their conferences. (Delaware is excepted from this conclusion due to confusing data. Two of 6 respondents answer the question about conferences - one said it isn't held at all.) Good conferences were reported by respondents from most of the unhealthier societies, but about a quarter of the respondents reported their perception that attendance is poor. Counting the societies with >50% of the respondents answering in the affirmative, it appears that 5 out of 6 of the healthier societies offer CE other than their annual conference and 3 of the 6 have non-conference social activities. About 10 of the unhealthier societies offer non-conference CE and only 3 provide non-conference social activities. The healthier societies are generally considered by the respondents to be financially stable (3 societies) or strong (3 societies). (Single respondents from IA and WI consider their societies strong). Most (70%) of the respondents from unhealthier societies consider their finances to be stable with 19 of 26 societies rated stable by 50% or more of their respondents. Seven of the unhealthier societies had at least one respondent who feels their finances are shaky and 5 of those were rated as shaky by 50% or more of the society's respondents.

**Volunteers:**
Conclusions: Stronger societies generally believe that the supply of able volunteers for leadership positions is adequate or perhaps ample. CO is the smallest of these societies and they believe that there are not enough able volunteers. Generally speaking, the stronger societies believe that willingness and availability of potential leaders are the greater impediments than ability to serve. The same pattern is evident among the unhealthier societies but the strength of opinion is far greater. Unhealthier societies perceive lack of willingness to serve as the greatest impediment, with nearly unanimous agreement (average = 90%). Lack of availability among volunteers is rated second most highly and well above the healthier societies. Unhealthier societies see lack of necessary skills as a significant impediment, which is in contrast to the healthier societies.

**Load Sharing:**
Conclusions: The most frequently cited shared/hired task for both healthier and unhealthier societies is conference planning and management. There were some comments that though the task is shared with other societies, the responding ASCLS society typically accepted more of the responsibility and work. Two of the healthier societies and one of the unhealthier societies hire conference planning/management. Accounting and tax filing services are hired at about the same rate for healthier and unhealthier societies. Unhealthier societies hire web services more frequently than the healthier societies, however, the definition of web services was not specified so the nature of the services (e.g. hosting, design, updating) is not clear.

**Best Practices:**
Conclusions: There are 9 favorable practices (blue -3,8,9, 19, 20, 28,30, 36, 42) that healthier societies use more often than unhealthier societies, but even among the healthier societies, these practices may not be routine or consistent (scores are less than 2.5). They are:
| Provides job descriptions for position responsibilities |
| Keeps an up-to-date leadership roster on its website |
| Holds leaders accountable to be sure their responsibilities are completed |
| Appoints new members/new professionals into entry-level and non-critical committee chair positions |
| Recognizes my contributions with public appreciation/certificate |
| Financially supports promising leaders to participate in the national Leadership Academy |
| Financially supports promising leaders to participate in state or regional Leadership Academy, if one is available |
| Participates in a regional leadership academy |
| Nominates members for the national Leadership Academy |

The unfavorable practices in the survey (yellow - 4, 7, 10, 22) are practiced with about the same frequency between healthier and unhealthy societies.

| Accepts nominations/appointment of inexperienced but willing members into critical leadership positions (e.g. officers) |
| Has committee chairs doing everything themselves without forming a committee |
| Changed by-laws or BOD structure to try to accommodate the lack of leadership volunteers (e.g. allowed more terms or longer terms of office; decreased number of board members) |
| Recycles leadership because new people do not seek leadership positions |

In particular, the practice of bringing inexperienced but willing individuals into critical leadership positions is a frequent practice for both. In all instances of favorable or best practices, healthier societies incorporate those practices more frequently, though not necessarily routinely. Only two of the practices are used by unhealthier societies more frequently than by healthier societies and they are unfavorable practices (gray - 10,22).
Attachment H  Data summary from open ended questions.  7/21/17
I have ranked the top 5 responses to each question. Note that there are 2 questions that did not have parallel responses but when you look at the question it is obvious why. I have provided a list of member suggestions for each topic area. I have also supplied at the end some other common suggestions that did not directly fit into one of the question areas.

<table>
<thead>
<tr>
<th>Rank</th>
<th>Q. 14 Reasons members DO NOT STEP UP to leadership positions</th>
<th>Rank</th>
<th>Q. 16 Reasons experienced leaders DO NOT CONTINUE in advancing positions or responsibility</th>
<th>Members’ suggestions to ‘fix’ these issues</th>
<th>IS this something ASCLS can do? IS it for state societies?</th>
</tr>
</thead>
<tbody>
<tr>
<td>#1</td>
<td>Time commitment required</td>
<td>#2</td>
<td>Competing time commitments</td>
<td>Move into 21st century technology so people do not have to go to all meetings Clearer guidelines on time expected Job descriptions Transparent communication</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Lack of time due to family/work obligations</td>
<td></td>
<td>Length of commitment</td>
<td></td>
<td></td>
</tr>
<tr>
<td>#2</td>
<td>Do not know how / not shown how</td>
<td>#3</td>
<td>Lack of support / mentorship</td>
<td>Assign mentors to boost confidence Provide guidance Systematic training modules Knowledge about how organization ‘works’ and opportunities that exist Guidelines for each position Job descriptions Clear expectations for role Who to contact/how to do it Communication</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Not qualified</td>
<td></td>
<td>No skills training</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Fear of failure</td>
<td></td>
<td>No knowledge of position</td>
<td></td>
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</tr>
<tr>
<td></td>
<td>Lack information / support</td>
<td></td>
<td>Lack of communication</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Not mentored / trained</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Lack job description</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>#3</td>
<td>Do not see value of volunteering</td>
<td></td>
<td>No parallel responses / comments</td>
<td>Communication about real issues that ASCLS addresses Engaged , enthusiastic leaders needed</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Lack of “buy-in-to” what ASCLS does</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>#4</td>
<td>“Society politics”</td>
<td>#4</td>
<td>“Society politics”</td>
<td>Recruit NPs/ students/millennials One-on-one invitations ‘Open the doors’ for new people</td>
<td></td>
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<tr>
<td></td>
<td>Hard to break in</td>
<td></td>
<td>Cliquies</td>
<td></td>
<td></td>
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<tr>
<td></td>
<td>Not asked</td>
<td></td>
<td>Old guard pick those they know</td>
<td></td>
<td></td>
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<tr>
<td></td>
<td>Same people over long time</td>
<td></td>
<td>Generation gap</td>
<td></td>
<td></td>
</tr>
<tr>
<td>“Cronyism”</td>
<td>Cost (travel, time-off)</td>
<td>No parallel responses / comments</td>
<td>Provide information on financial support for meetings Provide financial support</td>
<td></td>
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<td>--------------------------------------------------------------------------------</td>
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<tr>
<td>#5</td>
<td>Lack of employer support</td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>No parallel responses / comments</td>
<td>Burnout</td>
<td>Recycle fatigue Multiple hats in organization is too much Too many responsibilities</td>
<td>Recruit leaders More leaders with smaller roles Succession planning Leadership development</td>
<td></td>
<td></td>
</tr>
<tr>
<td>No parallel responses / comments</td>
<td>#1</td>
<td>Frustration with volunteers Lack of dependability of volunteers Same volunteers No volunteers</td>
<td>No related comments</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Based on my review of all the open-ended responses………………………………....

- **Time commitments**
  - Change our ‘way of doing business’ to streamline
  - Stop tapping the same people
  - Increase use of technology for communication / doing business
  - Shared positions or make positions more realistic in terms of scope and time commitment
  - Encourage committees as opposed to individual roles

- **Mentorship – formal & informal**
  - Serve as role model
  - Accept or adapt. Do not dismiss new ideas
  - Provide knowledge of how organization works and roles available
  - Reduce ‘the fuss’
  - Help people see their value to organization
  - Provide a support network so they are not ‘afraid’

- **Training & support for positions**
  - Give clear expectations
  - Let me know what the job requires
  - Develop systematic modules
  - Do not just give documents and say ‘read’
  - Provide formal orientation.
  - Involve them in long term plans
• Personal contact a & invitation to be involved
  o Find something the person is interested in and give a related project
  o Welcome new people and respond to their questions/requests promptly
  o Seek out new people
  o ‘stay with’ the new member – assign a mentor or “buddy”
  o Ease them into leadership
  o Show that BOD is not a ‘closed’ group

• Communication
  o Show appreciation to members
  o Recognize service to organization
  o Better and more frequent communication from leadership on society’s work/accomplishments
  o Enthusiasm for the organization
  o Make sure leaders are engaged
  o Show benefits & value of belonging

Attachment I
## Activities of the Committee or Affiliated Organizations

**Current Status:** We are holding steady at the 75-question limit with no willingness to increase that number. While we picked up a few volunteers at the meeting, we are experiencing a number of resignations, sadly some due to ill health.

The first Rutgers DCLS student has completed the first part of her work with the CI. The second half will begin shortly. There were less kinks than we thought.

We are increasing the interactions with patient groups such as Patient Power.info and creating podcasts for LTO.

**Strengths:** I know that this is repetitive every report cycle but I cannot say enough about the unbelievable generosity of the teams who just do whatever is necessary to help each other out and keep answering these questions day after day.

If you know of anyone who would be interested in joining, please let me know or have them fill out the form on the ASCLS Connect Volunteer opportunities section.

## Items of Concern:

None

## Request for Action:

None
### Activities of the Task Force: See attached summary of June 15, 2017 meeting.

#### Choosing Wisely Task Force recommendations
- Do not order rapid multiplex molecular assays for microbial infections unless the assays will impact patient management decisions.
- Do not order daily procalcitonin for antimicrobial management of patients with invasive infections (sepsis or pneumonia). Order procalcitonin every second or third day in accordance with microbiology laboratory protocol.
- Avoid testing for a Clostridium difficile infection in the absence of diarrhea.
- Don't routinely use plasma to normalize the prothrombin time with international normalized ratio (PT/INR) in patients with no bleeding symptoms.
- **Augment an existing recommendation**, “Avoid routine preoperative testing for low risk surgeries without a clinical indication” by listing overused preoperative screens such as type and screen, PT, PTT, CBC, UA.
- **Augment an existing recommendation**, “Don't routinely use blood products to reverse warfarin” by adding a recommendation for four-factor prothrombin complex concentrate (Kcentra), which is FDA-approved for warfarin reversal in bleeding.

#### Choosing Wisely Task Force grant proposal recommendation
We propose a grant to develop choosing wisely recommendations as a unit in entry-level or advanced medical laboratory science and pathology education.

#### Items of Concern: Choosing Wisely® is an international initiative developed in 2012 and managed by Consumers’ Reports and the American Board of Internal Medicine Foundation, with grant funding from the Robert Wood Johnson Foundation. ASCLS is an influential organization promoting Clinical Laboratory Science and composed of experts who may join the Choosing Wisely effort as an effective opportunity for sharing authoritative data-driven outcomes. There is no charge to become a partner.

#### Request for Action:
I move that the ASCLS Board of Directors approve partnering with the Choosing Wisely campaign as outlined in the attached meeting notes.
George Fritsma called the meeting to order at 4 PM CDT and reviewed the history and purpose of the Choosing Wisely program.

Proposed ASCLS Choosing Wisely Items

- Do not order rapid multiplex molecular assays for microbial infections unless the assays will impact patient management decisions.
  - Proposed by Linsey Donner, who is associated with her facility’s infectious disease microbial stewardship program. Multiplex molecular assays cost in excess of $1000. In a small institutional study less than 20% of inpatients yielded positive results. A high proportion of positives was *Clostridium difficile* in which another more cost effective algorithm should have been used. In addition, positives results may not lead to changes in clinical management. Her institution has initiated stop rules and protocol outlines for inpatient gastrointestinal and meningitis panels, and for gastrointestinal panels on patients subsequent to three-day or longer inpatient stays. Ordering physician reviews indications with the microbiology laboratory director.

- Do not order daily procalcitonin for antimicrobial management of patients with invasive infections (sepsis or pneumonia). Order procalcitonin every second or third day in accordance with microbiology laboratory protocol.
  - Proposed by Linsey Donner. Procalcitonin data more closely reflect active sepsis than CRP data, daily orders provide no added information. Linsey also mentioned measuring lactate levels in sepsis, confirmed by Muneeza Esani.

- Avoid testing for a *Clostridium difficile* infection in the absence of diarrhea.
  - Josephine Ebomoyi confirms this item that was provided by the Infectious Disease Society of North America, affirms overdiagnosis and unnecessary treatment.
  - In related discussion, Josephine recommends LIS prompts to medical laboratory scientists who are performing microbiological assays to ensure complete and accurate procedures.

- Avoid routine preoperative testing for low risk surgeries without a clinical indication.
  - Brianna Miller recommends augmenting this ASCP item by listing typical overused preoperative screens such as type and screen, prothrombin time, partial thromboplastin time, complete blood count, and urinalysis.

- Don’t routinely use blood products to reverse warfarin.
- **Brianna Miller** proposed to augment this AABB item with a positive recommendation for four-factor prothrombin complex concentrate (Kcentra), which is FDA-approved for warfarin reversal in bleeding.
- Don’t routinely use plasma to normalize the prothrombin time with international normalized ratio (PT/INR) in patients with no bleeding symptoms.
- **George Fritsma** added this item subsequent to the meeting, based upon Bryan AW, Staley EM, Kennell T, Feldman AZ, Williams LA, Pham HP. Plasma transfusion demystified: a review of the key factors influencing the response to plasma transfusion. Lab Medicine 2017; 48: 108–12.

**Proposed Champion Grant Application**

**George Fritsma** proposes a grant to develop choosing wisely recommendations as a unit in entry-level or advanced medical laboratory science and pathology education.

**Proposal for ASCLS to Partner with Choosing Wisely**

The task force recommends the ASCLS Board of Directors to partner with the Choosing Wisely effort. This is an excellent opportunity to promote the medical laboratory science, profession, we are the experts with access to data and we need to share our knowledge as a part of the Choosing Wisely team.

- Next meeting: August 10, 4–5 PM CDT
- Adjourned 4:45

*Summary by George Fritsma 6-17-17*
**Activities of the Committee or Affiliated Organizations**

**Date:** March 24, 2017

**Attendees:** James Strother, Nick Steder, Florence Morris-Turcotte, Nadine Fydrysiewski

At the first meeting of the SLMTA taskforce, introductions were made and the task force asked Nadine how she and Anna Murphy thought a ASCLS collaboration might help SLMTAsn around the world with their laboratory related questions. It was a great introduction to the work that the CDC is doing, but we decided that we should include Anna Murphy on a call to get a better feel of what SLMTA really could get out of ASCLS getting involved with their program.

**Date:** April 11, 2017

**Attendees:** James Strother, Nick Steder, Florence Morris-Turcotte, Nadine Fydrysiewski, James Flanigan, and Anna Murphy

The 1-hour phone conference began with Anna Murphy describing her vision of this endeavor, creating a defined communicative pathway for SLMTAs to connect with laboratory expertise provided by ASCLS consultants. When James Strother asked about the number of consultants needed or their job qualifications, Anna Murphy was only able to speculate on the number. Besides only noting the qualification of ASCLS membership (i.e. persons certified or engaged in the practice and/or education process of clinical laboratory science), Anna Murphy was unable to provide specifics.

Turning to delivery models, James Flanigan explained 2 types which ASCLS is currently operating.

- **Consumer Response Team** – approximately 50 ASCLS consultants provide laboratory information to questions submitted from patients, physicians, nurses, and lawyers. This delivery requires use of a form to support the Q&A format and produces no on-going conversation.

Members of the Consumer Response Team Description - responsible for ensuring responses to questions regarding laboratory tests as posted on the LabTestsOnLine website. Typically, ASCLS members have had at least 3-5 years’ experience in the clinical laboratory so that they have a comfort with questions from preparation for specimen collection through to explanation of test results (excerpt taken from ASCLS’s website).
Communities – where the conversation is many to many and on-going. ASCLS includes a library area with each discussion community. The team then discussed the 3 elements required to turn this project into a reality. ASCLS consultants – the WHO element that incorporates availability and qualifications. Web-based connectivity – the WHAT element that physically connects the SLMTAn with the ASCLS consultant.

The SLMTA community interest – the NEED element that will drive the scope of this project, including the number of ASCLS consultants to engage. At this time, the need component has not been sufficiently explored.

Because the NEED is the least understood element, Anna Murphy proposed to work with Katy Yao to query the SLMTA family. [The first call between Anna and Katy will be on Friday, April 21st, after Katy returns from Africa.]

Considering the query will take some time, the next phone conference could be held the week of May 8th, if Katy Yao is able to join us. James Strother noted that the www.SLMTA.org website is not accessible and has not been for several weeks. Anna Murphy attempted to connect with the site, but was unable to do so during the phone conference.

Date: April 21, 2017
Attendees: Katy Yao and Anna Murphy
Topics of Discussion:
1. SLMTA Website
   - James Strother noted the SLMTA website was inaccessible.
   - Katy Yao explained that the SLMTA.org website should resume in the next few days based on the current agreement with website’s administrator. The worst-case scenario is one where it may be down as long as August 2017 when a new funding mechanism source becomes available to maintain and sustain the platform.
2. Funding
   - Besides volunteer collaboration, there is no funding for this endeavor from CDC. At this point in time, this task must be a low-resource expenditure. and if possible, utilize or build-up existing resources.
   - Anna Murphy reviewed the Lab Test Online site as a possible existing resource. It was noted that ASCLS plays a collaborative role with the site’s owner, AACC, that may or may not be able to utilize this existing platform for the SLMTA project.
3. Determining the NEED element from the SLMTA community
   - Anna Murphy reviewed the ASCLS’ Consumer Response Team’s background information as a resource to assist with how need was initially determined.
   - A questionnaire to announce and market the project can be forwarded to the SLMTA family by Katy Yao. However, the broadcast should not only include an introduction to the project, but also include the website information to access Ask the Expert site. Therefore, the pathway for a pilot should be defined prior to the broadcast.
   - The idea to use a specific topic per month with an accompanying brief presentation on that topic was seen as an excellent tool to raise interest in the project.
   - Suggested topics include
     - How to perform a comparison of equipment study
     - Establishing a (POC) Point-of-Care testing system
     - How laboratories utilize and achieve compliance with traceability
     - How to determine staffing needs for advocacy purposes
   - Katy Yao expressed concerns over how to ensure the responses remain relevant for low-resource countries and how to incorporate laboratory expertise from these countries during the ensuing discussions.
4. Scheduling the next SLMTA task force call while Katy Yao is in-country.
   ● Katy Yao will depart for Africa on May 13th.

Date: May 9, 2017
Attendees: James Strother, Nick Steder, Florence Morris-Turcotte, Nadine Fydryszewski, Jeannie Isabel, James Flanigan, and Anna Murphy and Katy Yao
This call began with Anna going over the “Process Map for Ask the Experts” that she has developed and is attached. The following seem to be the primary objectives of a SLMTA/ASCLS collaboration:
   ● To define a web-based process where laboratorians, from predominantly SLMTA laboratories, can ask questions and receive guidance from the laboratory community.
   ● The Q&A format will target the how-to component through the exchange of ideas and concrete examples.
   ● Propose a pilot study of 1-year duration which uses a brief presentation format on a selected laboratory topic (3-4/year) to stimulate interest and engagement with the process.
   ● Suggested How-to Topics:
     ○ Comparison of equipment
     ○ Traceability
     ○ Number of personnel needed, using workload, for advocacy purposes
     ○ Point-of-care

The meeting concluded with the acknowledgment that the SLMTA task force had enough information on the potential project to begin work on a proposal to be presented to the ASCLS board of directors. The next step will be to have an exclusive task force only meeting to discuss the construction of the proposal of an ASCLS SLMTA collaboration as either a branch of an already existing committee or as an independent entity.

Date: June 9, 2017
Attendees: James Strother, Nick Steder, Jeanne Isabel
This meeting of the SLMTA Task force convened in an attempt to illuminate the next steps in going forward. It was agreed that, yes, a SLMTA collaboration would be feasible, and that, yes, it should be an entity on its own within the ASCLS.
Next, it was determined that although the task of mentorship for SLMTAns is similar to the Consumer Response Team, the scope will be far different, justifying the need for a separate entity. However, the Consumer Response Team should be modeled in the creation of the SLMTA collaboration. This led to the decision to contact Susan Leclair, a founding member of the Consumer Response Team, to gain insight into how the group was formed.
Last, we addressed the ambiguity of where such a “Ask The Experts” application would be appropriate and decided to contact Anna Murphy of the SLMTA group on whether the SLMTA website would be available to utilize for this purpose. There was a concern that since the SLMTA website had been up and down over the past few months, that the resources might not be in place to add the necessary applications to the website.

Date: June 16, 2017
Attendees: James Strother, Nick Steder, Jeanne Isabel, Florence Morris-Turcotte
After gaining insight on the creation of the Consumer Response Team, and confirmation of the possibility of utilizing the SLMTA website for our “Ask The Experts” efforts, the task force met again on completing a proposal to the ASCLS BOD. According to Katy Yao, the SLMTA website is now in the hands of an Atlanta agency with the help of Emory University.
Items of Concern:

None

Request for Action:

I move that the ASCLS Board to approve setting up a "consultant forum" to answer questions from laboratory professionals seeking accreditation/recognition internationally, a one year pilot of which is outlined in the report attachment.

*Be it noted:* The task force feels that a space on the ASCLS website could be used to recruit ASCLS members with interest and expertise to answer questions from international members of SLMTA. In addition, presentations on hot topics concerning the SLMTA members may be developed in the future. With ASCLS support, the task force seeks to model the format of the consumer response team to prepare an "ask the consultant" on the SLMTA website. A suggested one year test pilot is described in the attached process map provided by Anna Murphy of SLMTA. The task force will meet with the SLMTA webmasters to find out how the "Ask the Experts" section of the SLMTA website can be set up. An application for interested volunteers and screening of credentials of our “Experts” will need to be developed. The task force suggests a projected "go live" with this project within 6 months. There are still many concerns in going forward that the task force must consider with ASCLS approval of recruiting volunteers. Many of the logistical issues cannot be predicted until we actually get started with the project, such as: number of questions, type of questions, time needed to answer questions, and whether recruitment will be successful. The task force would also like clarification of its role going forward. Designation of a liaison between ASCLS and SLMTA in a permanent role is recommended.
Process Map for Ask the Experts

Purpose: To define a web-based process where laboratorians, from predominantly SLMTA laboratories, can ask questions and receive guidance from the laboratory community. The Q&A format will target the how-to component through the exchange of ideas and concrete examples.

Propose a pilot study of 1-year duration which uses a brief presentation format on a selected laboratory topic (3-4/year) to stimulate interest and engagement with the process.

Suggested How-to Topics
- Comparison of equipment
- Traceability
- Number of personnel needed, using workload, for advocacy purposes
- Point-of-care
<table>
<thead>
<tr>
<th>Step</th>
<th>What happens</th>
<th>Who is responsible</th>
<th>What is needed</th>
<th>Pitfalls</th>
</tr>
</thead>
<tbody>
<tr>
<td>Topic presentation is available.</td>
<td>The presentation is selected, assigned, developed, reviewed and approved Relevant SLIPTA checklist items and the analogous CAP requirements are included.</td>
<td></td>
<td>5-10 minute presentation in electronic form</td>
<td>No presentation is created&lt;br&gt;No presentation is available on-time.</td>
</tr>
<tr>
<td>Topic is shared with ASCLS members.</td>
<td>The presentation is reviewed (in the correct Scientific Assembly?) by ASCLS members. Their responses should serve as a way to flesh-out the topic at the practical level.&lt;br&gt;2-3 accompanying, guiding questions are included to solicit relevant How-to information such as:&lt;br&gt;1) How do you utilize the topic information for quality improvement? Please provide an example.&lt;br&gt;2) How do you fulfill your requirements for this topic?&lt;br&gt;3) What evidence (records) do you provide for audits?</td>
<td>Introducing the pilot to ASCLS members</td>
<td></td>
<td>No interest&lt;br&gt;Do not understand purpose and importance&lt;br&gt;Concerns about confidentiality prohibits sharing</td>
</tr>
<tr>
<td>Information is shared in response to guiding questions</td>
<td>ASCLS members provide expertise and guidance using the questions as a beginning framework. Any documents to share are uploaded into an electronic library.</td>
<td>Library&lt;br&gt;Risk statement about library contents</td>
<td></td>
<td>ASCLS members do not realize they can upload documents to share in the library.&lt;br&gt;Reluctance to share approved documents or concerns in how the information will be used&lt;br&gt;Information shared is not relevant to SLMTAns.</td>
</tr>
<tr>
<td>CDC email is broadcasted.</td>
<td>An email is sent which will:&lt;br&gt;● Introduce the pilot&lt;br&gt;● Query the interest/need with a provided survey&lt;br&gt;● Provide directions on how to access the presentation and submit questions</td>
<td>Dr Katy Yao</td>
<td>Create survey&lt;br&gt;Compile survey responses&lt;br&gt;Data list comprised of SLMTAns</td>
<td></td>
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<tr>
<td>Topic presentation and responses to guiding questions are accessed.</td>
<td>Using the instructions from the email or site, the SLMTAns review the presentation. Earlier questions and responses are also available for reading in a discussion board/threaded response mechanism</td>
<td>Unable to access presentation SLMTAns download library times and adopt them without adapting them for their site.</td>
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<tr>
<td>Questions are generated.</td>
<td>SLMTAns submit a form to begin the email conversation. The form is reviewed and then posted, if found acceptable. Any other information is collected and utilized.</td>
<td>Form  - Question on topic  - Question in a different area  - Future topic suggestion  - Feedback  Unable to turn a form into an on-going conversation; has to remain a single data exchange  Question is misdirected to the wrong expert or Scientific Assembly (SA)  Questions that can be easily answered enter a response process that may be more complex than is needed</td>
<td></td>
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</tr>
<tr>
<td>Responses are provided</td>
<td>ASCLS consultants provide responses to the forms submitted and follow-up questions that may be generated.</td>
<td>Unable to forward question to document owner for response or clarification  Forwarded questions to wrong SA or person  Responses are not in alignment with CDC or WHO information (e.g. viral load monitoring).</td>
<td></td>
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</tr>
<tr>
<td>Topic is closed.</td>
<td>Once a new topic is introduced, the current topic is closed unless a submitted form revisits the topic.</td>
<td>Maintenance of Discussion Board and Library</td>
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