ASCLS BOARD OF DIRECTORS ANNUAL MEETING AGENDA
Sunday June 23, 2019, 8:30 a.m. – 12:00 p.m. Eastern

Call to Order
Roll Call                     Debbie Shell
Minutes Committee            Jean Bauer and Nadine Fydryszewski
Standing Rules (1)           Debbie Shell

Minutes
   Email Ballots (Page 7) (2)
   Interim Board Meeting (Page 10) (3)

Executive Vice President's Report (Page 20)        Jim Flanigan

Board Reports             Request for Action
   Region II (Page 27) (5)                Nadine Fydryszewski
   Ascending Professionals Forum (Page 61) (6)  Kelsey Harper

Board Committees           Request for Action
   Finance (Page 77) (7,8,9) – Attachments Distributed Separately Debbie Shell

Elected/Appointed Committees, Forums Requests for Action
   Diversity Advocacy Council (Page 86) (10)                  Janelle Chiasera
   Mentorship Committee (Page 97) (11)                      Kristen Croom
   Body of Knowledge Committee (Page 113) (12)               Nadine Fydryszewski
   CCCLW (Page 116) (13)                                  Deb Rodahl
   Consumer Information Response Team (Page 173) (14, 15, 16) Nadine Fydryszewski
   Choosing Wisely (Page 175) (17)                        Holly Weinberg
   Constituent Society Taskforce (Page 179) (18)            Cindy Johnson (for Roslyn McQueen)

Concerns
   Region III                     Janelle Chiasera
   Region IV                     Beth Warning
   Region V                      Jean Bauer
   Region VI                     Kim Von Ahsen
   Region VII                    Claude Rector
   Region VIII                   Holly Weinberg
   Region IX                     Therese Abreu
   Developing Professionals Forum Chrystal Lane
   Bylaws                       Holly Weinberg
   Clinical Laboratory Science   Kristen Croom
   DAC                          Janelle Chiasera
   Marketing/Communications      Kim Von Ahsen
   Membership                   Therese Abreu
   Mentorship                   Kristen Croom
   Nominations                  Deb Rodahl
   Patient Safety               Therese Abreu
   Leadership Academy           Nadine Fydryszewski
   Scientific Assemblies        Debbie Shell
   Body of Knowledge            Nadine Fydryszewski

New Business
DCLS Certification RFP (Page 181) (19) Cindy Johnson
Nominations

Open Forum                    Roslyn McQueen

Adjournment (20)
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STANDING RULES FOR
THE ASCLS BOARD OF DIRECTORS

1. Where applicable, the rules of the House of Delegates will apply.

2. Guests may request recognition from the Chair to speak to a motion under
discussion. If a board member and a guest request recognition at the same
time, the board member will be recognized first.

3. Any request for action in a committee report must be referred to the Board.

4. The Board will act upon committee reports in one of the following manners:
   a. recommend adoption
   b. recommend rejection
   c. refer to the House without Board action

5. Any recommendation which originates within the Board and is subject to
   House review will be acted upon in the following manner:
   a. recommend adoption and initiate motion
   b. refer to the House without Board action

6. To "commend" is to single out for praise in the performance of duty or function,
   and should be used to denote special activity worthy of note. Individuals may
   be recognized on an individual basis or may be singled out as one within a
group.

7. The President can ask specific board members to speak on behalf of the Board
   on items referred to the House of Delegates in order to bring the views of the
   Board to the assembly. Likewise specific members of the Board can be asked
   to speak on behalf of a Board action during the House meetings.

8. Members voting in a minority must indicate to the secretary when they wish
   their vote to be recorded in the minutes.

9. There should be minimum use of the process of decision by consensus.

10. An executive session may be held at any time during a meeting at the call of
    any member of the Board.

11. Mail or email ballots may be utilized whenever it is deemed advisable.

12. Telephone ballots using the roll call tabulation may be utilized whenever it is
    deemed advisable.

13. Alcoholic beverages in any form are not permitted at a meeting of the Board.
14. All requests for action which are approved by the Board which require a commitment of society resources will be subject to allocation of those resources before implementation.
Activities of the President:

- Participated in weekly conference calls with Jim Flanigan, EVP
- Conducted monthly calls with President-Elect, Cindy Johnson and Past President Deb Rodahl: 2-26-19, 4-30-19
- Conducted ASCLS Interim Board of Directors Fall Meeting, 3-17-19
- Participated in ASCLS Planning Day, March 15-16, 2019
- Attended Legislative Symposium, March 18-19, 2019, Washington, DC
- Participated in Annual Meeting Steering Committee conference call: 4-1-19
- Participated in Constituent Society Task Force meetings:
- Held Board Check In Calls: 2-28-19, 4-29-19, 5-22-19
- Participated in Choose Wisely Task Force meeting, 5-23-19
- Participated in Open Forum discussion as needed
- Received YWCA Women of Excellence in Healthcare Award, 3-20-19
- Attended ASCLS-MI Annual State meeting, presented Hematology of Elderly Lecture, 4-12-19
- Attended, Association of Research Professionals (ACRP), annual meeting Nashville TN, 4-13-15, 2019
- Attended ASCLS-IA Annual State meeting, Cedar Rapids, IA. Presented two Hematology lectures, and ASCLS Update, 4-15-16, 2019
- Attended Great Lakes Regional Annual meeting, Detroit, MI 4-18-21, 2019, conducted workshop.
- Participated in Flint Area Medical Research Forum, served as judge of oral presentation, 5-10-19
- Attended Finance Committee meeting, 5-22-19
- Appointed House Affairs Committees for the 2019 House of Delegates, Charlotte, NC.
  - Speaker of the House: Kathy Doig
  - Parliamentarian, Karen Griffin
  - Credentials Chair, Charlie Francen
  - Elections Chair, Hassan Aziz
- Master Sargent at Arms: Bill Hunt
  - Minutes Committee Chair: Halcyon St.
- Submitted motions for Board and Mendelson Awards
- Reviewed and approved Position Descriptions prepared by Cindy Johnson, Deb Rodahl.
- Developed Presidents reports, remarks and presentations for annual meeting
- Submitted reminder email to Committee Chairs, Task Force about Board Report due date, Annual and House of Delegates Reports
- Addressed issues submitted by Committee Chairs, Task Force, or Board of Director, responded to communication as requested.

**Items of Concern:**
None

**Request for Action:**
None
REPORTS TO: ASCLS Board of Directors  
REPORT OF: Email Motions  
SUBMITTED FOR: 2019 ASCLS Annual Meeting Board Meeting  
PREPARED BY: Debbie Shell, ASCLS Secretary/Treasurer  
DATE: June 10, 2019

Email Motions

Email Motion #26:
Johnson moves the ASCLS Board of Directors approve the appointment of Stephanie Davies, Region IX Representative, to the Political Action Committee.

Ayes – 16 Nay - 0

Email Motion #27:
McQueen moves that the ASCLS Board of Directors approve the submission of the following names to serve as the ASCLS Representatives to NAACLS: Mike Black and Susie Zanto. **Be it noted:** NAACLS requests two nominees, but will elect only one to serve as ASCLS representative.

Ayes – 16 Nay - 0

Email Motion #28:
McQueen moves that the ASCLS Board of Directors approve the appointment of Katie Franz PACE Chair for the remainder of the 2018-2019 term. **Be it noted:** Abra Elkins has been unavailable and unresponsive and Katie has had to assume her duties throughout this year.

Ayes – 16 Nay - 0

Email Motion #29:
Johnson moves that the ASCLS Board of Directors approve the list of appointments for 2019-2020 to the various ASCLS Committees:

<table>
<thead>
<tr>
<th>Committee</th>
<th>Region</th>
<th>Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>Awards</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ascending Professional Committee member</td>
<td></td>
<td>Christal Lane</td>
</tr>
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<td></td>
<td></td>
<td></td>
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<tr>
<td>Bylaws</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ascending Professional Committee member</td>
<td></td>
<td>Amanda Sanchez</td>
</tr>
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<td></td>
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<tr>
<td>Doctorate in Clinical Laboratory Science</td>
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<tr>
<td>Reappointment Committee member</td>
<td></td>
<td>Elizabeth Leibach</td>
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<td></td>
<td></td>
<td></td>
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<tr>
<td>Leadership Development Committee</td>
<td></td>
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<tr>
<td>New appointment</td>
<td>Region III</td>
<td>Eric Stanford</td>
</tr>
<tr>
<td>New appointment</td>
<td>Region III</td>
<td>Jie “Jenny” Gao</td>
</tr>
<tr>
<td>Ascending Professional Regional Communication Coordinator</td>
<td>Region III</td>
<td>Christal Lane</td>
</tr>
<tr>
<td>New appointment</td>
<td>Region VI</td>
<td>Danielle Gentry</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>PACE</td>
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</tbody>
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Email Motion #30:
Johnson moves that the ASCLS Board of Directors approve the appointment of Kelcey Harper to the Mentorship Committee. **Be it noted:** Kelcey Harper will replace Ally Storla who was approved to be on the committee at the recent Interim Board of Directors meeting but will not be able to serve on this committee.

Ayes – 16      Nay – 0

Email Motion #31:
Johnson moves that the ASCLS Board of Directors approve the appointment of Brandy Gunsolus as Vice-Chair to the Patient Safety Committee. **Be it noted:** Brandy Gunsolus will replace Anne Gaffney who was approved to be the Vice-Chair at the recent Interim Board of Directors meeting but decided not to serve in this role. Anne Gaffney will continue to be a member on the committee.

Ayes – 16      Nay - 0

Email Motion #32:
Johnson moves that the ASCLS Board of Directors approve the appointment of Jessica Lawless, Ascending Professional, to the Mentorship Committee. **Be it noted:** Jessica Lawless will replace Christine McLaughlin who has resigned from the Committee.

Ayes – 16      Nay - 0

Email Motion #33:
Johnson moves that the ASCLS Board of Directors approve the list of Chairs and Vice-Chairs for 2019-2020 to the various ASCLS Committees:

<table>
<thead>
<tr>
<th>Mentorship Committee</th>
</tr>
</thead>
<tbody>
<tr>
<td>Vice-Chair</td>
</tr>
<tr>
<td>Kelcey Harper</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>PACE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Chair</td>
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<tr>
<td>Julie Bayer-Vile</td>
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</tbody>
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<tr>
<th>Clinical Laboratory Educator’s Conference (CLEC) Steering Committee</th>
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</thead>
<tbody>
<tr>
<td>Chair</td>
</tr>
<tr>
<td>Dana Bostic</td>
</tr>
<tr>
<td>Vice-Chair</td>
</tr>
<tr>
<td>Hassan Aziz</td>
</tr>
</tbody>
</table>

Ayes – 16      Nay – 0

Email Motion #34:
Johnson moves on behalf of the Long Range Planning that the Board of Directors approve the 2019-2020 ASCLS Strategic Map document (see attachment). **Be it noted:** the Long Range Planning Committee has received recommendations from the Board of Directors on the new ASCLS Strategic Map.
Ayes – 16   Nay - 0

**Email Motion #35:**
Johnson moves on behalf of the Long Range Planning that the Board of Directors approve the revised Position Descriptions document (see attachment). **Be it noted:** the Long Range Planning Committee has received recommendations for revisions from the Board of Directors.

Ayes – 16   Nay - 0

**Items of Concern:**   None

**Request for Action:** I move that the ASCLS Board of Directors accept the email motions as read into the record.
President McQueen called the meeting to order at 8:00 AM EDT, March 17, 2019. The Secretary took a roll call.

**Present:**

Roslyn McQueen, President
Cindy Johnson, President-Elect
Deb Rodahl, Past President
Debbie Shell, Secretary/Treasurer
Maddie Josephs, Region I
Nadine Fydryszewski, Region II
Janelle Chiasera, Region III
Beth Warning, Region IV
Jean Bauer, Region V
Kim Von Ahsen, Region VI
Claude Rector, Region VII
Holly Weinberg, Region VIII
Terese Abreu, Region IX
Kristen Croom, Region X
Kelcey Harper, Ascending Professional Director
Christal Lane, Developing Professional Director
Jim Flanigan, Executive Vice President
Melanie Giusti, Professional Development & Project Management Director
Andrea Hickey, Membership & P.A.C.E.® Director
Julia O'Donnell, Marketing & Communications Director

The Minutes Committee for this meeting consisted of Beth Warning and Terese Abreu.

**Motion #1:** Shell moved that the ASCLS Board of Directors adopt the Standing Rules for the ASCLS Board of Directors.

Seconded by Rodahl Motion Carried

The following email motions were read into the record:

**Email Motion #10 (10/11/2018):** Johnson moves that the ASCLS Board of Directors approve the appointment of Mike Lieberman to the Membership Committee. **Be it noted** that Mike Lieberman will replace Sheri Gon who resigned from the committee.

**Email Motion #11 (1/11/2018):** Johnson moves that the ASCLS Board of Directors approve the appointment of Karen Griffin to the Bylaws Committee. **Be it noted** that Karen Griffin will replace Maria Aguirre who resigned from the committee.

**Email Motion #12 (10/11/2018):** Johnson moves that the ASCLS Board of Directors approve the appointment of Brooke Witaker to the Patient Safety Committee. **Be it noted** that Brooke Witaker will replace Mary Lou Turgeon who resigned from the committee.
Email Motion #13 (10/11/2018): Johnson moves that the ASCLS Board of Directors approve the appointment of Ashlee Ketchum to the Leadership Development. **Be it noted** that Ashlee Ketchum will replace Buffy Kelley who resigned from the committee.

Email Motion #14 (10/11/2018): Johnson moves that the ASCLS Board of Directors approve the appointment of Developing Professional Samantha George to the Marketing and Communications Committee.

Email Motion #15 (10/23/2018): The ASCLS Patient Safety Committee moves that the Board of Directors:
- Approve ASCLS application to become an organizational member of the Coalition to Improve Diagnosis and that required Coalition participation actions be charged to the ASCLS Patient Safety Committee;
- Annually appoint a member of the Patient Safety Committee to serve as the ASCLS Coalition representative;
- Adopt the Coalition Shared Principles document; and, 
- Reimburse reasonable travel expenses up to $2,000 annually for the ASCLS representative’s Coalition event attendance

**Be it noted** The PSC Request for Action document and additional information on the Coalition to Improve Diagnosis and membership is included in this report.

Email Motion #16 (12/2/18): On behalf of the ASCLS Policies and Procedures Committee, Weinberg moves that the ASCLS Board of Directors approve amending Article V, Section C, item 2.b of the Standard Operating Procedure (SOP) to change the date for closing membership files to determine delegate numbers from May 31 to April 30:

**Current text:**

Article V – House of Delegates

C. Delegates

2. Delegation Size.

   a. The size of a constituent society delegation is to be based on the number of professional and emeritus members as so provided in the Bylaws of the Society.

   b. The Executive Office will, on the **31st of May** each year (or at a time established by the Board of Directors), close the official membership files and shall record the number of professional and emeritus members in each constituent society as of that day.

**Proposed text:**

   b. The Executive Office will, on the **30th of April** each year (or at a time established by the Board of Directors), close the official membership files and shall record the number of professional and emeritus members in each constituent society as of that day.

**Be it noted:** Because the Annual Meeting has moved one month earlier, an earlier cutoff date is necessary for determining delegates to the HOD.

Email Motion #17 (12/10/18): Johnson moves that the ASCLS Board of Directors approve the appointment of Shannon Jongeward to the Patient Safety Committee. **Be it noted:** Shannon will replace Kami McGann who resigned from the Committee.

Email Motion #18 (12/12/18): McQueen moves that the following members be approved to serve on the Constituent Society Task Force: Linda Goossen, Chair; Rick Panning, Vice Chair; Mary Ann McLane, Miles Tompkin, and Suzanne Campbell

Email Motion #19 (12/12/18): On behalf of the Executive Committee, McQueen moves the approval of the charges for the Constituent Society Task Force. See attached document.

Email Motion #20 (12/14/18): Johnson moves that the ASCLS BOD approve the appointment of Jess Sheffield as the Ascending Professionals Forum communication coordinator for Region VI. **Be it noted:** Jess Sheffield will replace Stephanie Godfry who no longer meets the Ascending Professional requirements.

Email Motion #21 (1/1/2019): Johnson moves that the ASCLS Board of Directors approve the appointment of Sydney Kor as the Region V Developing Professional representative.

Email Motion #22 (1/1/2019): Johnson moves that the ASCLS Board of Directors approve the appointment of Esther Iheme as the Region V Ascending Professional representative.
Email Motion #23 (1/1/2019): Johnson moves that the ASCLS Board of Directors approve the appointment of Ali Nussbaum as the Region V PAC Trustee.

Email Motion #24 (1/17/2019): McQueen moves that the ASCLS Board of Directors approve the reappointment of Linda Smith as the ASCLS representative to the ASCP BOC Board of Governors. Be it noted: Linda Smith is serving her second term.

Email Motion #25 (1/17/2019): McQueen moves that ASCLS Board of Directors approve Alice Hawley as the Chair of the Promotion of the Professions Committee, and Michelle Moy as Vice Chair. Be it noted: Michelle Moy resigned due to work commitments, but will serve as Vice Chair.

Motion #2: Shell moved that the ASCLS Board of Directors approve the email motions as read into the record.

Seconded by Chiasera  Motion Carried

Motion #3: Shell moved that the ASCLS Board of Directors accept the minutes of the Fall Meeting Board meeting dated 11/2/18. Warning requested that the lower case b in her name be corrected.

Seconded by Chiasera  Motion carried by consensus

Executive Vice President's Report:

Jim Flanigan, Executive Vice President, presented an overview of the EVP report distributed to the Board of Directors.

Requests for Action

Board Reports:

Motion #4: Fydryszewski moves that the ASCLS Board of Directors have the new CLEC Steering Committee investigate and recommend to the board if there should be a change in the time of year when the CLEC Meeting is held to late October- early November.

Motion was tabled until after discussion and motion regarding forming a CLEC Steering Committee. Motion was re-opened for discussion after the CLEC Steering Committee motion was passed. Discussion included concern about a possible cash flow issue for ASCLS and polling recent attendees regarding the move.

Seconded by Von Ahsen  Motion Carried

Motion #5: Harper moves that the ASCLS BOD approve the Ascending Professionals Forum Guidelines for Governance as they appear attached and refer to the BOD Policy and Procedures Committee for the corresponding SOP revisions.

Seconded by Josephs  Motion referred back to APF for further discussion on Past Chair automatically becoming Ascending Professional member of the ASCLS Board of Directors, changing the term limit to two years, and eligibility for office (national meeting attendees only). Deadline is May 30.

Motion #6: Harper moves that the motion be referred back to the Ascending Professionals Forum.

Seconded by Weinberg  Motion Carried

Board Committees:

Motion #7: Johnson moves that the ASCLS Board of Directors approve the appointments of the members listed in the attached document to the various ASCLS Committees.

Seconded by Josephs  Motion Carried

Motion #8: Johnson moves that the ASCLS Board of Directors approve the appointments of the members listed in the attached document as Chairs and Vice Chairs of the various ASCLS Committees.

Seconded by Fydryszewski  Motion Carried
**Motion #9:** Johnson moves that the ASCLS Board of Directors approve the appointments of the members listed in the attached document as ASCLS representatives to the various organizations.

Seconded by Rodahl  Motion Carried

**Motion #10:** Johnson moves that the ASCLS Board of Directors approve the appointment of Erin Frasher, Region IX Representative, to the Membership Committee. Be it noted: Erin will replace Holly Silver who resigned from the Committee.

Seconded by Harper  Motion Carried

**Motion #11:** On behalf of the ASCLS Policies and Procedures Committee, Weinberg moves that the ASCLS Board of Directors approve amending Article XIII, Section B, item 1.a.1 of the Standard Operating Procedures (SOP) to provide an adequate time frame for identifying a new Editor in Chief or to reaffirm continuing appointment of the current Editor in Chief (see attachment A)

Seconded by Warning  Motion Carried

**Motion #12:** On behalf of the ASCLS Policies and Procedures Committee, Weinberg moves that the ASCLS Board of Directors approve amending Article III, Section D, item 2 of the Standard Operating Procedure (SOP) to provide clarity and meet with current practice regarding membership dues processing for constituent societies (see attachment A)

Seconded by Von Ahsen  Motion Carried

**Elected/Appointed Committees, Councils:**

**Clinical Laboratory Science Journal:**

**Motion #13:** Editor in Chief of Clinical Laboratory Science Journal Scanlan moves to establish a monthly meeting between Jim Flanigan (EVP) and Perry Scanlan (EIC) until issues are caught up and progress of the pubmed application is complete. Additional quarterly meetings will be conducted to coincide with the close of the quarterly issues of CLS journal.

Seconded by Weinberg  Motion Carried

**DCLS Oversight Committee:**

**Motion #14:** The DCLS Oversight Committee moves that the ASCLS Board of Directors develop and host a DCLS Futures Conference in the Fall 2020. **Be it Noted:** A break-even budget will be developed and included in the FY2021 budget process for approval by the board in March 2020.

Seconded by Croom  Motion amended and carried

**Motion #15:** Rodahl moves that the ASCLS Board of Directors develop and host a DCLS Futures Conference at a date to be determined.

Seconded by Abreu  Motion Carried

**Membership Committee:**

**Motion #16:** The Membership Committee moves that the ASCLS Board of Directors approve the trial of a new multi-year membership add on category for the professional membership category.

Seconded by Weinberg  Motion Carried

**Nominations:**

**Motion #17:** The Nominations Committee moves that the ASCLS Board of Directors approve a change to the SOP’s in regard to the qualifications of members to run for a Regional Director position on the Board. Current SOP state that “Regional Director Candidates must have attended at least two regional council meetings in the last five years and must have been a Delegate to the National Meeting 3 of the last 5 years.” The Proposed language modification: “Regional
Director Candidates must have attended at least two regional council meetings in the last five years and must have attended the ASCLS Annual meeting at least 3 of the last 5 years and have attended as a delegate at least once in the last 5 years.” Rationale for reducing the Delegate requirement includes: • Declining society memberships reduces the number of delegates a state can send, thereby limiting opportunities • Many states are spreading the opportunities to be a delegate across their membership base as a way to encourage newer member involvement and engagement

Seconded by Weinberg Motion carried

**Motion #18:** The Nominations Committee moves that ASCLS Board of Directors approve the slate of candidates for the 2019 ASCLS Elections: President Elect- Maddie Josephs; Secretary-Treasurer- Kyle Riding; Region I Director- Lisa Hochstein; Region VII Director- Claude Rector; Region VIII Director- Stephanie Mihane; Judicial Committee (1 position)- Holly Weinberg & Suzanne Campbell; Nominations Committee (1 position)- Josh Pulido & Deb Rodahl

Seconded by Von Ahsen Motion Carried

**Choosing Wisely Task Force:**

**Motion #19:** The Choosing Wisely Task Force moves that the ASCLS BOD approve the following recommendation for submission to the American Board of Internal Medicine:

**Routine Type and Screen** Professors Miller and Fritsma developed: “Avoid routine blood typing and screening for low risk surgeries without a clinical indication.” Prof. Bostic presented the recommendation to the Immunology/Immunohematology Scientific Assembly. Although the members of the SA, chaired by Stacie Lansink, voted approval and offered no updates, the recommendation was tabled temporarily for Professor Miller’s review. Prof. Miller provided updates subsequent to our January 10, 2019 task force meeting and the recommendation now ready for BOD review and approval.

Seconded by Johnson Motion Carried

**Constituent Society Task Force:**

**Motion #20:** Goossen moves that the ASCLS Board of Directors approve the Constituent Society Task force KPI assessment tool. The tool should be converted to a Survey Monkey survey and distributed to all constituent society Presidents and corresponding Regional Directors.

Seconded by Chiasera Motion Carried

**Concerns:**

**Region II, Maryland:** Succession planning for the state society.

**Region III, North Carolina:**

Concern in the changes made to ASCLS Annual Meeting and the pricing overall. As a whole, it was heavily implied that the meetings from here on out would be a lower cost to benefit the average member, thus helping boost attendance and give more reasons for lab professionals to join ASCLS. With projected prices at $500 for registration, plus another $1000 for a week of stay, the prices are extremely high for the area. Many North Carolinians will not attend as the price does not match the area, especially taking the break off from AACC into account. I understand that registration prices have slightly lowered, and that hotel fees have come down from $230 a night to $200, but that does not save the professional community anything. It seems like a shame that the ASCLS Annual Meeting has finally moved to North Carolina, but that will really be attending are those that get reimbursement from NCSCLS or professional schools. We would love to have more members attend, but it does not look financially feasible to the average laboratory professional in NC due to pricing.

Request that Region III Director evaluate recent changes made to the ASCLS Annual Meeting and the pricing structure for registration. The 2019 meeting is to be held in North Carolina this year, but delegates will be required to pay a proposed minimum of $495 for registration for the Professional Membership registration on top of hotel expenses which are set at $199/night plus taxes and fees. It is likely that most of the NC delegation (the active members on the board) will need to pay hotel expenses for the duration of the meeting since they do not live near Charlotte. This would be a 4-5 night stay estimated at $900- $1125, plus daily parking of $23.50/day. This meeting will still cost a delegate approximately $1500 at a minimum to attend, even in their home state.
The NCSCLS budget does not support a delegate by covering all meeting costs. They get limited support depending upon position. The President and President-elect will still need to pay at least $500 out of pocket and other delegates at least $1000. If meeting costs remain this high in future years, we will not have any interest from individuals to serve as delegates.

Talk around town is disappointment in projected cost to attend ASCLS conference in June. The price is not affordable for most people. Many thought splitting from AACC was to lower cost. Local lab staff cannot take leave for the whole week, but would like to attend for a day. Will there be a daily rate? NC has a lower cost of living than many places, so unless the actual price is significantly lowered, most NC Lab techs will not be able to attend. Suggestion is for each “hosting” state to have a reduced rate, single day pass to encourage and boost attendance and ASCLS membership for the locals.

Region III, Tennessee:
- Tennessee legislators are currently working on two bills (one in the House and the companion in the Senate) that would amend the need for personnel licensure for those working in private labs. HB0328 and SB0318 were both introduced on January 30th, 2019. These bills are advocating to amend the Tennessee Annotated Code Section 69-28-104 to exempt medical laboratory personnel employed by privately owned laboratories. Both bills have passed on first consideration (they must pass three times to be finalized and sent to the governor for approval) and as of February 4th SB0318 has passed on second consideration and will be referred to the Health and Welfare committee. These bills are going through their respective chambers very quickly. We have reached out to the Senators and Representatives on the committee and been able to correct some misinformation about the TN Licensure.
- We have encouraged our members to start a discourse with their Senators and Representatives about this issue.

Region IV:
Release of national meeting information (hotel pricing, conference pricing) early in the fiscal year to allow for appropriate budgeting. In terms of student attendance, budgeting is important and the earlier the information is released, the better the budgeting and attempts at funding.

Region IV, Indiana:
- We are having trouble retaining student members.
- A large portion of our active members are getting older and we often have to recycle members.
- Many of our active members no longer work in the laboratory so we are missing the input of people that actually work on the bench.

Region V, Minnesota:
- Issue with establishing automatic membership renewal using current system. Escalated to Region V Board of Directors meeting on 2/12/2019.
- Opportunity for multi-year membership
- Ability for members to participate in a state-level sustaining membership

Region V, Wisconsin:
- Contacting and retaining our lapsed members in all levels, but with a focus on ascending professionals.
- Being able to bring about more involvement opportunities to interested members (through expanding committees and getting more SA and member community involvement).
- Succession planning for state committee chairs
- Future financial sustainability

Region VI, Illinois:
Unfilled leadership positions on the election ballot. There are very few new professionals willing to take on leadership roles and many seasoned individuals are also not willing to take on a second term as a last resort

Region VI, Missouri:
We are lacking in society leadership. We currently have several vacancies on the Board, including President Elect.

Region VII, Oklahoma:
- Would like to see an ASCLS “preferred” vendor list or to at least use a collective bargaining to gain discounts or improved service. This could be a useful tool for constituent societies
• Many of the ASCLS position papers are well over a decade old. Would like to see updated/revised position papers as to promote the current relevance of ASCLS positions. i.e. Laboratory Personnel Licensure was approved in 2006 but current legislation is pending in several states.

Region VII, New Mexico:
Inactive status

Region VIII, Colorado:
Continuing problems with membership retention and recruitment

Region VIII, Idaho:
Several current BOD and committee members have needed to scale back participation due to personal reasons.

Region VIII, Montana:
It was hard to find members interested in open positions. No positions are contested.

Region VIII, Utah:
• Leadership recruitment
• Member participation
• Member recruitment

Region IX, Washington:
• Lack of interest for leadership positions for state society
• Identifying delegates for National meeting

Region X, California:
Our current treasury account is tied to a Ramona Fox’s name and social security information. Since the account is gaining interest in the bank she will have to claim our state funds as her account and pay capital gains taxes on ASCLS funds. Since she is also the Treasurer for the region we are having the same issue regionally. My Question is, are any other states experiencing this same issue? If not how have they resolved this issue and who are they banking with?

Ascending Professionals Forum, Region VIII, Wyoming:
Retaining members is still continuing to be an issue. Most of our students we gain are moving out of state and we have a number of ASCLS members retiring this year and they do not want to continue membership.

Ascending Professionals Forum, Region VIII, Colorado:
No response back from state society about items of concern/requests for action from my delegate report regarding the annual meeting.

Developing Professionals Forum
Lack of participation is an issue: we need a Regional Representative from every Region and the new Forum Secretary to participate.

Clinical Laboratory Science:
• APEX has not yet completed any actual issues for the 2018 calendar year. Some authors need PDF versions of their article in publishable form. Our publish-ahead-of-print in a PDF of the word document is not sufficient for most universities or tenure committees. Authors need to examine the proofs and I cannot determine any areas we lack in the publications themselves until a draft is made. Progress is being made now that other issues are beginning to resolve. A time table for expected completion would be very helpful.
• Address remaining issues with Pubmed to be relisted This is a significant issue as we will not be getting the number of manuscripts we need if this is not corrected. This will remain a concern until we are relisted in pubmed. As of now it is expected that our application will be submitted the week of Feb 18, 2019.

Diversity Advocacy Council:
There should be questions on demographics (race, culture, LGBTQIA+, ethnicity, religion, education, etc.) on surveys and/or membership applications to identify the diversity of ASCLS.

DCLS Oversight Committee:
• Active involvement of some committee members continues to be a struggle even after changing the meeting times.
• Discussion of the credential for the DCLS certification. Should the degree and the credential be the same?

Marketing and Communications Committee:
Current Status of the Journal’s PubMed Indexing. We understand that the EVP is working diligently on this process but would like more details since this is an important marketing and communication tool for our association.

Mentorship Committee:
Meeting attendance is very poor. Committee was surveyed in August 2018 to determine the best time block for meetings. Committee is being surveyed again now to see if a better time can be identified. Poor attenders are also non-responsive to emails. Attendance: Tim 7/7, Stephanie Noblit 7/7, Khadidja Derrouche 4/7, Sue Iddings 4/6 (started Sept.), Heather McLaughlin 3/7, James Gardner 2/7, Christine McLaughlin 2/7, Donna Duberg 1/7 (Allicia Gunderman 2/3 started Dec.).

Patient Safety Committee:
• Developing Professional committee members have not been assigned to the PSC: We are aware of how massive the appointment process must be for the President-Elect, the Appointment Committee and the Board of Directors and wonder if our current standard process can be enhanced utilizing standard process and deadlines for State Society Leaders and Regional Directors to obtain DP and AP volunteers for committees prior to the beginning of the appointment process.
• Committee Leadership Roster Publication (utilizing electronic production process)
This concern was also listed in the PSC Fall report; no follow up information was received following the Board meeting.
• The PSC recognizes the importance of utilizing an electronic production process for ASCLS Committee Leadership Rosters to provide essential real-time committee contact information to our members and leadership. It is noted and was previously discussed with Roslyn McQueen and Jim Flanigan that specific core information be available to committees to assist with their required functionality.
  • The following core information needed by a committee and is currently not available in our electronic rosters includes: member class (PF, DP, AP, EM); appointment term or term expiration; for committees with consecutive terms definition, it would also be helpful to know how many terms the member has served.

Leadership Academy Committee:
• We are concerned about meeting our deadlines for this upcoming class. Revisions to the curriculum are extensive and will require outside help. We did not receive the Task Force report until late October 2018, so we have only been working on updates since November 2018. We do feel we are on track to implement some changes to the curriculum, but want the board to understand there will be a growing phase to the curriculum.
• With the overhaul to the curriculum, the committee views the updates that need to be made as a phased process. We will continually evaluate if certain topics are working and if additional topics need to be added. A new and elevated Leadership Academy will take some time to develop.

Scientific Assemblies:
Lack of participation/response for some SAs

Coordinating Council for the Clinical Laboratory Workforce:
After the work that went into the revitalized Laboratory Science Careers website, the design team is concerned that ASCLS (and the other organizations in CCCLW) are not doing enough to promote the site. Do you have suggestions and ideas for how we can accomplish this?

Consumer Information Response Team:
The issues with the software have continued to increase in number and variety.
1. We have multiple repeat submissions daily which means that each team member is forced to remember every reply they have sent in order not to answer more than once. Since folks do their replies in more than one session, this is very tedious.
2. We have junk mail. Since 1999, there has been little to no junk mail – perhaps one a month. Once the new software went into place, we have many every day. We receive multiple copies of multiple “ads” claiming miracle cures or suggestions to purchase every day.

3. Now we receive multiple copies of submissions from different days – which means that unless a responder looks up every question from the previous day or two, they will be answering a question that has already been dealt with.

4. We receive submissions that are filled with gibberish – again taking time and patience to open, recognize and move on.

5. While it is impossible to state categorically, we now receive many incomplete submissions which in number greatly exceed the number of mistakes made by a legitimate questioner. We have had enough of those in the past to recognize an increase.

6. There is no way to remove any of these irregular submissions from the database so any statistics are rendered useless.

As a result, several members have commented about their willingness to continue under these circumstances and I have wondered if it were not the better part of prudence to stop this service until and unless we can be reasonably sure of actually doing what we wish to do. While I understand that people are working at this and have been working on this since October, it has been going on since the fall with minimal improvement. Just blocking an address seems to not be sufficient.

New Business:

Motion #21: Johnson moves that the Board of Directors approve the replacement of existing CLEC policy with the CLEC Steering Committee (Structure included) and refer to the Appointments Committee for implementation.

Seconded by Chiasera  Motion amended and carried

Motion #22: Rodahl moves that the terms Current Host Committee Chair, Immediate Past Host Committee Chair and the next CLEC Host Committee Chair be replaced with “Liaison” instead of “Chair”.

Seconded by Fydryszewski  Motion Carried

Motion #23: Johnson moves that the Board of Directors approve the allocation of net proceeds from CLEC beginning in 2020 as 10% to the local host committee and 10% to the Education Scientific Assembly

Seconded by Weinberg  Motion Carried

Open Forum:

Roslyn McQueen, ASCLS President, provided an opportunity for questions and comments.

Motion #24: Rodahl moved that the ASCLS Board of Directors adjourn at 12:44 EDT.

Seconded by Chiasera  Motion approved by consensus

Debbie Shell, Secretary / Treasurer

Beth Warning, Minutes Committee  Terese Abreu, Minutes Committee
# Activities of the President Elect

- Attended the ASCLS Finance Committee meeting on March 15, 2019
- Planned and executed program for Planning Day held on March 16, 2019
- Attended the ASCLS Interim Board of Directors meeting on March 17, 2019
- Participated in the Legislative Symposium on March 18-19, 2019
- Held Appointments Committee meetings on: 4/2/19 and 4/23/19
  - Completed the appointments for Committees, Committee Chairs and Vice Chairs, including the new established Clinical Laboratory Educator’s Conference (CLEC) Steering Committee
- Held Long Range Planning Committee meetings on: 4/18/19 and 5/28/19
  - Committee is updating ASCLS Position/Job Descriptions
  - Committee is finalizing the 2019-2020 Strategic Map
- Participated in the Annual Meeting Steering Committee Conference call on: 4/1/19
- Participated in monthly ASCLS past-president, president, and president-elect (3P) calls
- Participated in the BOD check-in call on 4/29/19 and 5/22/19
- Joined weekly teleconference with EVP and President starting in April 2019
- Attended ASCLS-MN Spring Membership Meeting, provided an ASCLS Update
- Planning for ASCLS Annual Meeting activities:
  - Updated committee leadership orientation sessions to be posted on the ASCLS website
  - Planned the Leadership Symposium
  - President’s acceptance speech

# Items of Concern
None

# Request for Action
None
Systems:

- **Cvent**: Registration for the joint ASCLS-AGT Annual meeting is utilizing Cvent for the registration process. This was implemented to allow for multiple registration pathways based on individual society membership (ASCLS or AGT). The system has also been employed to accept poster and oral abstracts and complete judging by the APRC. The integrated system also links together the program online with a full featured event app that has launched. The system allows a registrant to make a personalized program online and have it automatically updated on his or her app. The system is also being used for attendee capture by our industry partners.

- **Higher Logic Marketing**: ASCLS continues to fully implement the Higher Logic Marketing Automation platform (which you may hear us refer to as Informz) for outbound and responsive marketing. The system is integrated with our Higher Logic Community we call Connect. The system allows us to target messaging to members and non-member laboratory professionals in very precise ways, utilizing data streams from our membership management system, social media sites, and email open and click data.

- **New Career Center**: The new ASCLS Career Center on the Boxwood system, part of the National Health Care Network, and is working well. Recent changes to tax law, including reinterpretations of rules from the IRS resulted in our auditors reclassifying income from this activity to unrelated business income. This year, ASCLS will be unrelated business income tax (UBIT) of approximately $10,000 on income of approx. $40,000 from career center activities.

- **Connect.ASCLS.org Mobile App**: The new app for our Connect Community has launched to the memberships and is getting excellent initial reviews. We will continue to promote it’s use throughout the rest of the year.

- **Clinical Laboratory Science Publishing Platform**: The inclusion of our CLS journal content in a number of scientific indexes (Google Scholar and DOI) has driven a significant spike in traffic to the CLS HighWire site. We have applied for re-indexing in PubMed and expect that review to take place sometime in June. The final element is the compositing of articles the currently appear on the site under publish ahead of print. Post annual meeting, I will have the time to focus on resolving this issue.
Strategy:

- **FY2018 Tax Returns and Audit**: We are currently in the process of filing our FY2018 federal and state tax returns (see Finance Committee Report). Previously we had filed electronically, but the need to pay unrelated business income tax (UBIT) forced us to use a different route that caused a delay in having returns for the board’s approval. The FY2018 audit otherwise has gone well. There are no issues to report. The full draft audit is included in the Finance Committee report.

- **FY2019 Financial Performance**: Through the first nine month of the fiscal year shows a deficit for the year. A worst-case scenario projection for the year end is -$142,388 from operations. This does not include any income from investments. The bottom line is expected to improve relative to the projection through the end of the year. Detailed projections by line item are included in the Finance Committee’s recommended budget.

  The most significant negative variances are in our virtual learning (Publication and Webinars and Online CE -$96,670) where we did not see the level of new options come to fruition, Annual Meeting (-$65,000) where registration revenue was lower than anticipated, and Membership (-$39,000). Positive variances include ASCLS Today (+$26,500) where printing and mailing efficiencies were found and CLS Journal (+22,000) where actual costs for services were lower than anticipated.

- **Government Affairs**: With a primary focus on workforce, ASCLS has been working on draft legislation to address shortages in the laboratory in the context of the larger population of allied health professionals. We have one potential, primary sponsor in the House (Rep. Cicillini D-RI), and have been in discussion with potential sponsors in the Senate.

  ASCLS continues to engage with the CDC and other laboratory organization on its laboratory workforce think tank. The group is currently prioritizing and developing a research plan around quantifying the workforce shortage, and measuring perceived appreciation/value of the profession, job readiness and retention, employer considerations, certification and licensure, job satisfaction, and professional development.

  CLIAC’s April meeting was focused largely on the laboratory workforce. We are expecting more than 30 recommendations to the Secretary of Health and Human Services to be release in July.

  ASCLS continues to be part of the Diagnostic Regulatory Reform Coalition, which is working with the House sponsors of a new bill called VALID. The GAC’s review of the first draft bill was generally favorable, but some of the industry-focused organization in the coalition had significant misgivings.
PAMA continues on our radar, but we believe there will be little movement on this during the current Congress.

- **Constituent Society Leader Development:** This spring, ASCLS began its first virtual book club on Simon Sinek’s Start with Why. The book club was offered to ASCLS Leaders, which include constituent society leaders and ASCLS committee members. We are currently collecting feedback from participants. It has been suggested that we expand the opportunity to participate beyond just the ASCLS Leaders community. Future options as well as potential books will be discussed after the annual meeting.

With the new Annual Meeting schedule, we have an open time on Thursday morning before the House of Delegates. We are using that time for AM@theAM, a 90 minute educational program for delegates and leaders to get together to learn, refresh and recharge that is based on Start with Why.

- **Annual Meeting:** The performance of the Joint Annual Meeting will be much improved from last year. Pre-registration for the meeting reached 551 as of this writing, which compares to the previous three-year pre-registration average of 488. This 13% increase has driven registration revenue higher, though not has high as hoped. We anticipate registration revenue will increase by $12,000, but we budgeted for an increase of $70,000.

The budget originally projected 650 registrants (not total attendance) at $350 per person. Revenue per registrant is currently running at $336 per attendee. Industry revenue will exceed the budget of $100,000 modestly. With the addition of expanded commission from a larger hotel block, we anticipate top line revenue for the annual meeting will grow by approximately $83,000 (35%) compared to 2018. Even with an expanded number of attendees, we believe we will be able to reduce our total expenses compared to 2018 by $8,000. This results in an approximately $90,000 improvement in the Annual Meeting’s bottom line.

With more than 40 companies and organizations participating as partners, total attendance is expected to meet or exceed 650.

- **CLEC 2020:** The new CLEC Steering Committee has formed and has begun work reviewing the program for next year’s CLEC at the Hilton Buena Vista in Orlando, Florida. We have expanded the typical room block in anticipation of an attendance spike. The number of program proposals more than doubled for 2020 compared to 2019. The steering committee has appointed a subcommittee of volunteers to help with the reviews.

- **Membership Recruitment and Retention:** The significant increases in some membership categories with relative losses in the Professional category, as expected, have continued.
Overall membership dues revenue and total members has lagged FY2018 performance throughout the year through the conclusion of the membership year, which concluded at the end of April. Any member joining in May, June or July has their membership automatically advanced to a 2020 renewal date.

Overall membership is down 17% since 2016, but membership dues revenue is down just 4.4%. This suggest that the “lost” members were likely paying very low or no dues because of loopholes that the board has since closed. Note that membership is down just 2% since last year even with major changes to membership classes and pricing, and membership dues revenue will end the year down just 1.2%.

The overall membership numbers as of April 30 compared to previous years follows:

<table>
<thead>
<tr>
<th>Month</th>
<th>Ascend</th>
<th>Comm</th>
<th>Develop</th>
<th>Emer1</th>
<th>Emer2</th>
<th>Honor</th>
<th>Profess</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>17-Apr</td>
<td>904</td>
<td>253</td>
<td>2,748</td>
<td>110</td>
<td>118</td>
<td>20</td>
<td>4,160</td>
<td>8,313</td>
</tr>
<tr>
<td>18-Apr</td>
<td>409</td>
<td>225</td>
<td>2,432</td>
<td>99</td>
<td>137</td>
<td>17</td>
<td>4,001</td>
<td>7,320</td>
</tr>
<tr>
<td>19-Apr</td>
<td>666</td>
<td>136</td>
<td>2,419</td>
<td>100</td>
<td>234</td>
<td>17</td>
<td>3,597</td>
<td>7,169</td>
</tr>
</tbody>
</table>

**Activities:**
- **ASAE:** Julia, Melanie, Andrea, and I will be attending the American Society of Association Executives (ASAE) Annual Meeting in Columbus, Ohio in August. This meeting provides the staff with a broader perspective on current association best practices, gives us a chance for excellent peer networking, and leaves us with a reservoir of ideas we can implement with ASCLS. I have been appointed to a second term on the ASAE Healthcare Community Committee.
- **State Meetings:** This spring, I attended ASCLS constituent society meetings in Illinois, Wisconsin and Alaska. These meetings are invaluable opportunities to listen to the concerns of our grass roots members.

**Items of Concern:**
None

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

*Participated in Board of Director’s Check-in calls
*Communicated with State Constituent Society Presidents
*Attended Interim Board Meeting
*On ASCLS Finance Committee (attended meeting in March, participated in conference calls)
*Attended Legislative Symposium
*Served on Long Range Planning Committee
*Article for ASCLS Today
*Served as chair for the ASCLS- CNE Annual Convention, held from May 7-9, 2019
*Communicated (ongoing) with CT membership to facilitate nominations and elections
*Board Liaison to DCLS Oversight Committee (communicated with Chair of committee, participated in conference calls)
*Nominated members for Omicron Sigma
*Board Liaison to Promotion of the Profession Committee
*Attending ASCLS-NY Spring Meeting and Annual Business Meeting (June 14, 2019 in Syracuse, NY
*Attended CNE Board of Director’s Meeting
*Attended multiple hearings at RI State House, representing ASCLS and ASCLS-CNE and testified before House and Senate Committees to Re-instate RI Professional License for Medical Laboratory Scientists. Wrote several letters to legislature in support.
*Holding Region I Spring Conference Call in May
*Conducting nominations for Region I “1 in I “Award
*Forming committee for Region I Fall Seminar (November 2019)
*Communicating with constituent state leaders regarding ASCLS Annual Meeting in Charlotte

Items of Concern:

None

Request for Action:

None
### State Reports

<table>
<thead>
<tr>
<th>ASCLS - CNE</th>
<th>BY: James March Mistler</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Activities of the Constituent Society</strong></td>
<td></td>
</tr>
<tr>
<td>• Unable to hold CNE board meetings due to lack of attendance by board (no quorums met).</td>
<td></td>
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<tr>
<td>• CNE Annual Convention held in May.</td>
<td></td>
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<tr>
<td>• Bylaws/sops on hold until new board takes over.</td>
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</tr>
<tr>
<td><strong>Items of Concern:</strong></td>
<td></td>
</tr>
<tr>
<td>None</td>
<td></td>
</tr>
<tr>
<td><strong>Request for Action:</strong></td>
<td></td>
</tr>
<tr>
<td>None</td>
<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>ASCLS – NY</th>
<th>BY: Carol Golyski</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Activities of the Constituent Society</strong></td>
<td></td>
</tr>
<tr>
<td>• Published Winter and Spring issues of Bench Notes, the ASCLS-NY state newsletter, with plans to publish a summer issue</td>
<td></td>
</tr>
<tr>
<td>• Continue to Utilize Facebook and Instagram along with e-mails to promote society activities and acknowledge member accomplishments</td>
<td></td>
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<tr>
<td>• Monthly e-mail messages sent to all members by ASCLS-NY President</td>
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<tr>
<td>• Continued to acknowledge new members with an ASCLS-NY logo lapel pin and welcome letter</td>
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<tr>
<td>• Held an Interim Board Meeting conference call April 10, 2019 with the focus on revising the constituent society Constitution and By-Laws</td>
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<tr>
<td>• Sponsored a team for a fundraising 5k run/walk held May 19 to benefit the Quinn Madeline Fund which raises awareness of Neiman Pick type A disease</td>
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<tr>
<td>• Submitted award nominations to ASCLS for Lifetime Achievement, New Professional Leadership, Keys to the Future Constituent Society Member of the Year Recognition and Omicron Sigma Honor Roll</td>
<td></td>
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<tr>
<td>• Will hold a scholarship raffle fundraiser at the Spring Seminar with proceeds going to the Ann Paula Zero Graduate Scholarship</td>
<td></td>
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<tr>
<td>• The Spring Board Meeting will be held June 13, 2019 at Upstate Medical University in Syracuse, NY</td>
<td></td>
</tr>
<tr>
<td>• The Spring Seminar will be held June 14, 2019 at Upstate Medical University</td>
<td></td>
</tr>
<tr>
<td>• The Annual Business Meeting was held at the conclusion of the Spring Seminar on June 14 which will include election of officers</td>
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</tbody>
</table>
- Offering three scholarships (1 at the baccalaureate level, 1 at the associate degree level and 1 at the graduate level)
- Will recognize ASCLS-NY members at the Spring Seminar with the following awards: Sara Marie Cicarelli Member of the Year, Mary B Cooper Service Award Valerie Kehrwieder Outstanding Student Award
- ASCLS-NY will donate an item for the Education and Research (E&R) silent auction to be held at the Annual Meeting
- ASCLS-NY will have representation at the ASCLS House of Delegates at the Annual Meeting

**Items of Concern:**
None

**Request for Action:**
None

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**ASCLS – ME** | **BY:** Carrie Knapp

**Activities of the Constituent Society**

- Held State Elections for: President, President Elect, Secretary, (2) Board Members
- Discussed how to honor a State member who passed unexpectedly either with a student scholarship or one-time award in that member’s name. Member was passionate about microbiology.

**Items of Concern:**
None

**Request for Action:**
None
**Region II Director Report**

- Communicated regularly with the Region II Leadership Council
- Responded to ASCLS requests for information and/or electronic votes.
- Confirmed several appointments of 2019-2020 Region II Committee Representatives

Feb. 28: ASCLS BOD Update Teleconference
March 3: ASCLS Leadership Academy Teleconference- BOD Liaison
March 16: ASCLS Planning Day
March 17: ASCLS Interim Board Meeting
March 26: Region II Leadership Meeting- Teleconference
April 9-11: ASCLS-MI- Annual Conference – Invited speaker
April 28: ASCLS Leadership Academy Teleconference- BOD Liaison
April 28: ASCLS BOD Update Teleconference
May 5: ASCLS-PA Board Meeting
May 6: ASCLS-PA Annual Spring Meeting – invited speaker
May 15: Region II Leadership Meeting -Teleconference

**CONSTITUENT STATE SOCIETY REPORTS**

**DELAWARE: Pres- Alexa Pierce-Matlack**

I. **Goals for the year 2019-20**
   1. Provide P.A.C.E.-approved Con. Ed. events for lab professionals in tri-state area
   2. Create and/or participate in “Provide the Face” opportunities and publicize these
   3. Increase society membership by 10%
   4. Communicate with members (and non-members) through ASCLS-DE listserv, and Facebook at least once every week
   5. Increase involvement and activities for southern DE
   6. Increase student and young members
   7. Increase Board member numbers and bring in new leadership

II. **Activities**
   1. Participation in the monthly Region II conference calls
   2. Lab Week Dinner event: April 24: Michelle Bell, “Endemic Mycoses”
      Annual Joint event with the Histotechnology Society of Delaware; hosted a food drive and collected 92 pounds of food for the Food Bank of Delaware
   3. “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. Updates about ASCLS-DE upcoming meetings
d. Food Drive announcement
e. Working on the By-Laws
f. Membership renewal contest

Upcoming Activities
1. Communicating with those who are on the lapsed list.
2. Updating the Bylaws
3. Board meetings
4. Annual Meeting 2019
5. Getting ASCLS-DE name the same on all accounts (bank, IRS, non-profit status)

VIRGINIA: Pres-Jenica Harrison
Activities of the Constituent Society
- The annual state meeting was held in Norfolk, VA at Old Dominion University on 19 Apr 2019 with approximately 64 attendees, 6 P.A.C.E hours, and 3 vendors. This meeting also included a “Career Ladder” panel discussion. Many attendees verbally reported how much they enjoyed this year’s meeting. As President of ASCLS-VA, I agree that this year’s meeting had extraordinary intra-meeting continuity/synergy.
- ASCLSV-VA reinitiated a quarterly online newsletter in Fall 2018.

PENNSYLVANIA: Pres- Sharon Strauss
- Plans are progressing for our 2019 ASCLS-PA/PASSAMT Spring meeting to be held May 5 & 6 at the Red Lion Hotel in Harrisburg PA. The Board Meeting and Annual Business meeting will be held on the 5th with a full day of educational sessions and vendor tables on the 6th. Twenty PACE credits are being offered.
- Sent a welcome e-mail to those new members who were identified by our Membership Chair, Marianne Downes.
- ByLaws revisions will be presented at the Annual Business Meeting by Mary Gourley, our ByLaws Chair for a vote by members present.
- Four applicants were received for our Undergraduate Scholarship and are in the process of selection by our Board of Directors.
- An edition of our Spring newsletter was published and mailed in April.
- Nominations for members for numerous state and national awards were made along with nominations for the newsletter and website awards.
- The ASCLS-PA website was given a major facelift and this year for the first time we were able to offer on-line registration and payment for our state meeting.
- A Paint & Sip fundraiser is being planned by our Ascending Professional to be held on May 25th.

WEST VIRGINIA: Pres- Pam Meadows
- Currently recruiting speakers and planning for 2019 Annual WVSCLS/WVCLMA Joint/Meeting Conference to be held on October 10-11th.
- For lab week, the student forum held a fundraiser for Lily’s Place, a facility offering medical care to infants suffering from Neonatal Abstinence Syndrome in Huntington, WV.
Monetary donations and numerous supplies such as diapers, sensory toys, bottles, etc. were collected for the charity.

- WV BOD Conference Call was held on March 11, 2019. Discussion included identification of potential delegates for national meeting and call for quotes on a professionally designed state website.
- State bylaws to be reviewed and revised in upcoming year.

CAPITAL AREA-DC: Pres – Carol Rentas
Over the last six months, the Capital Area Society (ASCLS-DC) has been focusing on membership recruitment, has finalized and launched its new website (www.ascls-dc.org), and is planning our Fall meeting for Oct 2019.

- President: Carol Rentas (carentas@gwu.edu)
- President Elect: Marcia Firmani (firmanim@gwu.edu)
- Treasurer: Cliff Cymrot (cliffcymrot@gwu.edu)
- Secretary: Nurcan Basar (nurcan@gwu.edu)
- Directors at Large: Yousif Barzani (yousifbarzani@gwu.edu); Sachi DeSilva (desils@gwu.edu), Marguerite Neita (mneita@howard.edu)
- Society Advisor: Leon Headley (leonhead8@gmail.com)

NEW JERSEY: Pres. John Frederick
- Participation in monthly Region II conference calls
- Hosted the ASCLS-NJ Spring Seminar April 11th 2019 with 16 speakers and 33 vendors.
- Provided P.A.C.E- approved continuing education events for lab professionals in New Jersey
- Elected leaders for the upcoming year.
- Increased society membership via Each One Recruit One with 232 members as of April 10th

MARYLAND: Pres- Stacey Robinson
- No Report submitted.

Items of Concern: NONE

Request for Action: From Region II Leadership
Region II Leadership Council moves that the ASCLS Board of Directors reinstate formally scheduling committee meetings at the annual meeting and listing the committee meeting schedule in the final program.

Rationale:
- The annual meeting is the only venue in which committees can meet-face-to-face in a live setting. Though teleconferencing is available for committee use throughout the year, the face-to-face meeting at national provides an opportunity to plan strategies to
accomplish the goals charged to the committee by the BOD. A live face-to-face meeting has a different dynamic than meetings that occur during the year via alternative communication modes.

- Committee meetings held at national are open to all attendees and provides an opportunity to engage members to observe the goals and workings of a committee and can encourage interest that would promote members not engaged in national committee work to volunteer to serve on a national committee.

- Scheduling the committee meetings to be held at the national, and listing in the program demonstrates to everyone (ASCLS member, meeting partner attendees, industry partners, etc.) the scope of work that is being accomplished by ASCLS members volunteering their time and talent to support the advancement profession and organization.
**Activities of the Region Director**

- Participated in or read the minutes of assigned committees
- Attended Board check-in calls
- Attended long range planning committee meetings
- Attended ASCLS-LA/MS bi-state meeting
- Answered questions from State Presidents

**Items of Concern:**
None

**Request for Action:**
None

### State Reports

<table>
<thead>
<tr>
<th>ASCLS - AL</th>
<th>BY: Brianna Miller, President</th>
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<tbody>
<tr>
<td>ASCLS Alabama and ASCLS and AMT Georgia held a joint meeting in March 2019. Approximately 130 people attended.</td>
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**Items of Concern:**
 Retaining student members as new professionals

**Request for Action:**
None

<table>
<thead>
<tr>
<th>ASCLS - FL</th>
<th>BY: Jenny Paige-Ford, President</th>
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<tbody>
<tr>
<td>- Planning 2019 Triennial Meeting in Pensacola FL</td>
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<tr>
<td>- Finalizing Program and Speakers</td>
<td></td>
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<tr>
<td>- Planning Menu</td>
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<tr>
<td>- Coordinating with Sponsors and Vendors</td>
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<tr>
<td>- Booked Abbott Alinity Automation RV for conference</td>
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<tr>
<td>- Finalizing Social Event at Margaritaville Hotel at Pensacola Beach</td>
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</tbody>
</table>
- Elected Local Representation to the CLEC Organizational Board
  - Tripat Kaur
  - Michael Bishop
- Hosted Successful Spring Symposium in Orlando, FL at UCF
  - Kudos to Kyle Riding for heading the organizational committee for this meeting
  - Elected New President, President Elect and Treasurer for 2019-2020 Fiscal Year.
  - Welcomed a new District V Director in John Bandera.
  - Updated and Approved Bylaws and Handbook for the new year.
- Selected Delegates for Annual ASCLS Meeting and organized representation for the State of Florida

Items of Concern:
None

Request for Action:
None

<table>
<thead>
<tr>
<th>ASCLS - GA</th>
<th>BY: Ally Storla, President</th>
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<tr>
<td>Annual Meeting held March 9, 2019 at the WellStar Development Center as a Joint Meeting with the ASCLS Alabama State Society and the Georgia AMT State Society. The event was well attended with over 130 attendees.</td>
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Items of Concern:
Lack of interest/candidates for President Elect Elect and many other open vacancies, poor attendance to conference calls

Request for Action:
None

<table>
<thead>
<tr>
<th>ASCLS - MS</th>
<th>BY: Rana Walley, President</th>
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<tr>
<td>Rana Walley, current president, attended the Legislative Symposium in Washington, D.C. March 17-19.</td>
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</table>

LA/MS-ASCLS joint annual meeting was April 8-11 in West Monroe, LA. MS-ASCLS elected a new president, president-elect, BOD committee members, and nominations committee members. Jana Bagwell will president and Renee Wilkins will president-elect for 2019-2021.

USM will host the fall 2019 student forum.

Goals for 2020

Planning for the 2020 Bi-state Annual Meeting has begun. The 2020 LA/MS-ASCLS joint meeting will be held at the Hilton in Ridgeland, MS, April 6-9, 2020.
ASCLS – NC

BY: Sophia Chen, President

Activities of the Constituent Society since Feb 2019
- Held election for 2019-2020 open leadership and officer positions
  - President-Elect: Lisa Cremeans
  - Board seats: Jim Fuller, Christi Henthorn
  - Finance Committee At-Large: Laine Stewart
  - Ascending Professional Representative: Caroline Henderson
- 2019 Business Meeting was held on the same day as the NCSS 2019
  - Voted and accepted the Treasurer’s Report and Budget
- Held a one day joint scientific meeting with North Carolina State Society for American Medical Technologists, called the North Carolina Spring Symposium 2019, on Friday, April 5th, at Wake Tech Community College in Raleigh, NC.
  - Very successful!
    - Total of 135 attendees, not including speakers
    - Able to bring in approx $2.1K for NCSCLS
    - Opening Keynote: Dr. Brandy Gunsolus
    - Closing Keynote: Dr. Peter Gilligan
- Scholarship announcements were sent out to all NC MLS and MLT programs.
- Selected delegates for the upcoming National Meeting in Charlotte
  - President: Sophia Chandrasekar
  - President-Elect: Dr. William Anong
  - Ascending Professional Delegate: Kelsey Reschly
  - Delegates: Nattasha Counta and Glynnece Campbell-Hopper
  - Delegate Alternate: Lisa Cremeans
- Marketing Committee:
  - Discussed that the table at the National Meeting will be used to advertise/promote NCSCLS, as well as have a sample of items. Does not need to be fully manned at all times, and that word of mouth will be sufficient to sell coloring books

Planned Activities
- Lab Colors 2 to be published sometime in June
- Board meeting June 8th, location tbd
  - Will have the swearing in of new officers and prepare for the switchover on July 1st.
- Summer Filter Paper to be posted in the next week
  - will include: update from NCSS 2019, scholarship announcement, celebrate anniversary years for members, include a piece on working in an LIS from home, etc.

Items of Concern:
Awards Committee: The online forms that might be used to nominate multiple people, like the Omicron award, are not very user friendly. We had to nominate one person at a time, the form opened in a new window each time, and we had to repeatedly add the same information about the person completing the nomination to each form. That particular form would be better as a multi-nominee form.
Also, the amount of supporting documentation they are asking for with some of these awards seems extensive. The harder they make it and the longer the time it takes to nominate people, the fewer nominations they will get.

Request for Action:
None

ASCLS – SC
BY: VACANT

Items of Concern:

Request for Action:

ASCLS – TN
BY: Perry Scanlan, President

Activities:
- Hosted the 2019 TALC (ASCLS-TN annual meeting) for April 12-13, 2019 at Vanderbilt University in Nashville, TN.
- Hosted our annual ASCLS-TN Board of Directors meeting on April 11, 2019.
- Hosted our annual ASCLS-TN business meeting with ASCLS membership on April 12, 2019.
- Assisted with the audit of the treasurer's books.
- Assisted with the ASCLS-TN bylaws update.
- Assisted with gathering and writing material for the ASCLS-TN newsletters.
- Attended the Region III Triennial meeting conference call on April 10, 2019.

Goals:
- Audit the Treasurer Books
  - Completed
- Bylaws/SOP Update to be consistent with National
  - In progress – Updated by committee and ready to be distributed to members via email for approval.
- Revitalize Membership Communication Newsletter
  - Our first newsletter was sent on February 21, 2019.
  - The second newsletter will be sent in mid-May with a TALC summary and information about the upcoming national meeting.
- ASCLS-TN Website Redesign
  - Complete

Accomplishments/On-Going Activities:
• We plan on having a Zoom conference call to train those that are interested in the website maintenance in mid-May.
• We will be hosting our first online elections for our membership towards the end of May.
• We are sending our updated bylaws out to the membership for review and approval. These emails will go out by the end of this week.
• I am still working with the bank to get the fees removed from the ASCLS-TN Checking account. We are considering changing banks or dropping the savings account if we cannot get this accomplished.
• We are finishing up the updates for the Treasurer Handbook to pass on to our first-time treasurer when she takes over the accounts in August.

We are in discussions about the idea of having a one-day Leadership Development Online Program.

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<th>ASCLS – PR</th>
<th>BY: VACANT</th>
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REPORTS TO:  Board of Directors
REPORT OF:  Director, Region IV
SUBMITTED FOR:  2019 Annual Meeting Board Report
PREPARED BY:  Beth Warning, Region IV Director
DATE:  5/14/19

Activities of the Region Director
Reported by Beth Warning

- Attended the finance committee meeting, March 15th, 2019
- Attended ASCLS Planning Day, March 16th, 2019
- Attended the ASCLS Interim Board Meeting, March 17th, 2019
- Attended the ASCLS Legislative Symposium March 18th-19th, 2019
- Participated in ASCLS Check in call April 29th, 2019
- Participated in the following committees
  - ASCLS Policy and Procedures committee (email)
  - GAC (3/17 (face to face), 4/22)
  - PDC (3/25, 5/7)
- Submitted article for ASCLS Today January 2019
- Participant in ASCLS Leadership Book Club
- Emailed ASCLS Leaders overview and notes from the Interim Board Meeting
- Responded to email voting as requested by ASCLS Secretary/Treasurer
- Worked with members of ASCLS-IN on issues in identifying board members for the coming year
- Worked with Tom Belko, OH and members of the ASCLS OH board on issues with the OH Constituent Society
- Discussed archiving RIV printed material with Suzanne Butch, MI
- Attended the ASCLS MI Spring Meeting, East Lansing, April 11th
  - Presented two sessions
- Attended the ASCLS-OH Clinical Laboratory Collaborative Meeting, Columbus, April 12th
  - Presented two sessions

Items of Concern:

Request for Action:
ASCLS – Indiana  
BY: Danielle McCurdy

Activities of the Constituent Society
- ASCLS-IN Meeting 2019
  a. Meeting commenced Thursday 3/28/2019 in Hine Hall at IUPUI in Indianapolis, Indiana. Total loss of over $2,300 for the annual meeting. 46 attendees (24 students / 22 professionals) & 11 vendors
  b. Networking event/job fair commenced the night before the annual meeting at Indiana City Brewery.
- By Laws committee still working to update our state bylaws.
  a. Remove / combine / or update positions / committees in our bylaws to help with filling seats of important committees.
  b. Ensure our state bylaws coincide with nationals bylaws.
- Working on having ASCLS-IN be a larger presence in Indiana.
  a. We have been making more frequent updates about events showcasing some of the activities of ASCLS, ASCLS-IN, and local CLS Students and sharing these as posts on our Facebook page and website.
  b. ASCLS-IN website completely updated by Norma Erickson to give members and other professionals easier access to event information and updates on the society.
  c. Created poll to see about changing date/time of board meetings. Responses were inconclusive. No trending days or times.
- Our Treasurer is moving away and is in the process of being replaced with Nick Brehl.
- Meeting in May for strategic planning to try to address numerous upcoming vacancies on board and our plans for future ASCLS-IN state meetings.

Awarded our CICBF Scholarship and ASCLS-IN Scholarship. We had a total of three applicants.

Items of Concern:
- We have a significant number of vacancies on the board for next year and no one to fill them; including President Elect and Secretary.
- We are having trouble retaining student members.
- Hard to find willing volunteers to take over important board positions, recycling of members.
- Many of our active members no longer work in the laboratory so we are missing the input of people that actually work on the bench.

Request for Action:

Kentucky Society of Clinical Laboratory Science  
BY: Stacy Gabbard

- Ismail El-Amouri, Chair of the KSCLS Spring Meeting Planning Committee held conference calls on 11/15, 2/1, and 4/4 to ensure a successful Spring Meeting.
The KSCLS Spring Meeting was held on Friday, April 12th at Indiana Wesleyan University in Lexington and the theme was “KSCLS and You: Partners in Excellence”. There were approximately 95 attendees with the majority being MLT and MLS students. Attendees could earn up to 5 P.A.C.E. approved continuing education hours in the 5 areas required by the ASCP Board of Certification.

The spring board and business meeting was held at the conclusion of the Spring Meeting on April 12th. The meeting consisted of approving the 2019-2020 budget, elections and installation of new board members, presentation of state awards, routine reports, and selection of delegates.

Items of Concern:

Request for Action:

ASCLS - Michigan  
BY: Jerry Singleterry

Activities of the Constituent Society
State Meeting in East Lansing, MI April 10-12. Lindsy Hengesbach, 2019 ASCLS-MI Annual Conference General Chair, Past President

- 371 registrants
- 21 exhibits
- Changes to format:
  - BOD meeting early Wed morning
  - Celebration of the Profession/Awards Thursday.
  - Friday job fair
- Community Outreach this year: MSU Music Program

Delegates: 5 this year to national meeting

Becky Potter, Nominations Chair
- Nominations/Elections Report 208 voters, 20.9% return
- Results of Election:
  - President Elect: John Ko
  - Secretary: Ric Benson
  - New member: Nicole L
  - District 1: Becky Potter, Michelle Russell, Mariane Wolfe
  - District 2: Sandy Cook, Sarah Pelton, Amber Sims
  - District 3: Sarah Beatty, Caitlyn Crone, Alicia Kuza

Gov Affairs: Meighan Sharp.

Suzanne Butch, Bylaws:
- Word changes to Bylaws.
- Electronic ballot will be emailed to all eligible voters after the spring meeting.
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**ASCLS - Ohio**  | **BY: Tom Belko**

- BOD meeting April, 2019
- Members meeting April, 2019
- State Collaborative Lab Conference held with CLMA, AABB, AACC with over 40 educational sessions and over 300 laboratorians attending April, 2019
- Mass e-mail in March 2019 to obtain new volunteers with over 30 inquiries.
- Ongoing reorganizing of committees
- Set up of Twitter account
- Moved web page account to GoDaddy.com with new volunteer working on website
- Awarded Scholarship of $1000.00 to an ASCLS student

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Region V Director Report

- Responded to requests for information and electronic votes

Feb. 28: Participated in ASCLS Check-in Meeting via Conference Call
Mar. 1    Submitted nomination for Christie Massen as Region V LDC chair
Mar. 12:  Participated in Book Club via Zoom
Mar. 16:  Participated in ASCLS Planning Day – Washington DC
Mar. 17:  Participated in ASCLS Board Meeting – Washington DC
Mar. 17:  Attended GAC Meeting – Washington DC
Mar. 18:  Attended Legislative Symposium - Washington DC
Mar. 19:  Meeting with MN Senators and Congressman - Washington DC
Mar. 20  Leadership Development Committee Meeting (Board liason) via Zoom
Mar. 28:  Patient Safety Benchmarking WG via Zoom
Mar. 22:  Submitted Omicron Sigma nominations
Apr.  8:  Sent list of Omicron Sigma National and Region V nominees to state presidents
Apr.  9:  Participated in Book Club via Zoom
Apr. 11:  Presented a Regional/National Update to membership and continuing education session on Lab Technical Consulting at SD State Meeting via Zoom (weather prevented from getting to Rapid City)
Apr. 16:  Presented a Regional/National Update to membership and continuing education session on Lab Technical Consulting at ND State Meeting via Zoom (weather prevented from getting to Minot)
Apr. 18:  Leadership Development Committee Meeting (Board liason) via Zoom
Apr. 23:  Attended WI State Meeting Student Bowl
Apr. 24:  Presented Omicron Sigma awards at WI State Meeting Awards Ceremony
Apr. 25:  Presented a Regional/National Update to membership at WI State Meeting Business Meeting
Apr. 26:  Attended MN State Meeting
Apr. 27:  Attended Region V Leadership Academy Retreat – presented session on Conducting Successful Meetings
Apr. 29:  Participated in ASCLS Check-in Meeting via Conference Call
May  2:  Patient Safety Meeting work with committee member via Zoom

Region V Leadership Academy
April 26-28: Retreat - 4 sessions:
- Team Building
- Conducting Successful Meetings
- Success Through Strategic Planning

Each student reported on the leadership book they read
Students worked on group project
ACTIVITIES

Membership:
- Organized membership booth at the upcoming CLC in April 2019

Finance:
- Third meeting scheduled 4/22/2019
- Presented Minnesota sustaining member fundraising campaign at annual membership meeting to raise additional funds for ASCLS Minnesota

Bylaw Updates
- Bylaw updates that mirrored national bylaws were approved at membership meeting

Nominations for State and National Positions
- All BOD positions were filled along with delegates to nationals

Scientific Assemblies:
- Looking to fill Informatics and POL areas

Region V:
- Found four (4) ASCLS Minnesota volunteers to assist in the Region V Fall 2019 conference in Fargo, ND for vendor sponsorships

CLC Annual Meeting 2019
- Participated in monthly planning sessions for ASCLS MN annual meeting – St Cloud, MN

Strategic plan: expand and grow each area of focus
- Member retention committee – increase membership, automatic renewals
- Mentoring committee – succession planning to plan for and support our future leaders of ASCLS MN.
- Finance committee – increase overall financial revenues
- Bylaw committee – update to incorporate SOPs and national category changes
- Communication committee – create a plan so touchpoints are going out to members weekly/biweekly

Strategic action items: (timelines and assignments in progress)
1. Fill all state level SA positions to give increased member involvement opportunities.
2. Identify committee needs for leadership. Seek vice chair and committee members. Establish formal succession protocols.
3. Look into revenue generating opportunities to be able to support and sustain more member activities (fundraising opportunities and ideas for our state meeting).
4. Review and revise SOP to reflect new bylaws changes.
5. Create communications outlining participant expectations for annual meeting, legislative symposium, state and region committees

Establish communication committee to mirror that of national - includes web, mail, electronic and social media communication
### ASCLS - ND
**President:** Zac Lunak

**ACTIVITIES**

- Second conference call/meeting of ASCLS-ND Board on January 11th, 2019.
  - Sam Peterson, nominations chair, held online election for 2019-20 open board positions: President-elect, board member at-large, nominations chair, and new professional.
  - Linda Ray and Leah Runyan and attended Legislative Symposium. They met with all 3 legislative assistants from all 3 members in congress from ND.
  - Leah Runyan met with students at UND to discuss ASCLS.
  - 6 awards, sponsored by ASCLS-ND, were given to high school students competing in the ND State Science Fair.
  - The state meeting was held in Minot, ND April 15th-17th.
  - The spring board meeting was held in Minot, April 15th, 2019.
  - The Business Meeting, where all ASCLS-ND members are invited, was held April 16, 2019. New board members, scholarships and awards were announced.
  - 6 scholarships, sponsored by ASCLS-ND, were awarded to senior students in their clinical rotation.
  - Planning for 2019 Region V meeting in Fargo, ND has begun (Alice Hawley-chair)
  - The Spring Newsletter (*The Connection*), organized by Sharon Reistad, will be sent out the week of 4/29 recapping state meeting.

### ASCLS - SD
**President:** Melissa Saxlund

**ACTIVITIES**

- Legislative Days participation
- Science Fairs
- ASCLS-CLMA Spring Collaborative Conference, including election of next year’s officers
- Student Scholarship Applications

### ASCLS - WI
**President:** Nicole Buza

**ACTIVITIES**

**ASCLS**

- Selected delegates for the Annual Meeting. 4 designated Board members (including 1 student) and 4 professional members.

**Membership**

- Numbers are slightly down compared to last year.

**Region V**

- WI is supporting two staff for Region V Leadership Academy – Lori Pimentl and Melissa Kasper, as well as one student – Ben Kaetternhenry.

**ASCLS WI State Convention 2019**

- Participated in ASCLS WI annual meeting – Appleton, WI, April 24-25. Hosts were Fox Valley branch society. ASCLS-WI BOD booth was a success. Successful awards ceremony, business meeting and overall event.
Strategic plan

- ASCLS-WI BOD met on 4/25/19 for our end-of-year meeting.
- ASCLS-WI BOD will continue to revise our SOP with our coming bylaws changes.
- Discussed concerns about financial future and sustainability. Created a Sustainability Task Force to review our spending and earning practices, research what other organizations are doing and compile best practices to employ.
  - We have a lot of members who have volunteered to assist.
- Identifying committee vice chairs and members (vs. chair only), planning for committee leadership succession – increasing member involvement opportunities for interested and committed parties; putting in place sustainable succession plans.
  - New Communication Committee Chair has been established – Kathryn Golab

Strategic action items: (timelines and assignments in progress)

1. Identify committee needs for leadership. Seek vice chair and committee members. Establish formal succession protocols – ongoing/some completed
2. Fill all state level SA positions to give increased member involvement opportunities – ongoing
3. Look into revenue generating opportunities to be able to support and sustain more member activities (fundraising opportunities and ideas for our state meeting) – Sustainability Taskforce to address this (start anticipated May 2019)
4. Plan submission for each national level award - completed
5. Continue to identify needs and issues affecting branch societies, develop plan for branch society operation and support – in progress
6. Create communications outlining participant expectations for annual meeting, legislative symposium, state and region committees and academies (time, cost, responsibility to ASCLS-WI) – in progress/some complete
7. Review and revise SOP to reflect new bylaws changes – in progress pending bylaws changes
8. Establish communication committee to mirror that of national (once this is established) - plan to include web, mail, electronic and social media communication with members – in progress/some complete

Items of Concern:

Wisconsin
- Contacting and retaining our lapsed members in all levels, but with a focus on ascending professionals.
- Being able to bring about more involvement opportunities to interested members (through expanding committees and getting more SA and member community involvement).
- Succession planning for state committee chairs
- Future financial sustainability

Request for Action:
- None at this time
Activities of the Region Director

- Participated on Awards Committee Conference Calls on March 5
- Participated on Marketing and Communication Conference Call on April 10, April 22
- Attended 2019 Interim Board of Director’s Meeting, Planning Day and Legislative Symposium in Washington, DC March 16 - 19
- Participated on ASCLS Board of Director’s Check In Calls on April 29, 2019
- Hosting Region VI Summer Council Meeting via Zoom on May 23, 2019
- Participated on Appointments Committee Conference Calls on April 2 and April 23. Solicited feedback on committee member eligible for re-appointment to Awards, Bylaws, DCLS, Marketing and Communication, Leadership Academy and Product Development. Confirmed interest to service of those eligible for re-appointment.
- Attended the following state meeting in April: ASCLS-IA and ASCLS-IL. Unable to attend KSCLS, ASCLS-NE, and ASCLS-MO meetings this year.
- Voted on all email motions presented before the Board of Directors since the House of Delegates.
- Provided roster of national committee liaisons and Developing Professional Forum members for Region VI to appropriate national contact.
- Maintained Region VI Facebook Page and Twitter account including posting of relevant laboratory professional and advocacy items.
- Responded to State President, Council Members, and National Committee Chairs’ questions as Needed

2018-2019 Accomplishments

- Updated the Region VI Policy and Operational Manual and was approved by the Council in the fall of 2018 with the updated Membership Categories. Plan another update for 2019 with terms of Council Secretary and Treasurer.
- Implemented My Committee for the states of Illinois and Iowa. Hope to see the remaining states in Region VI to adopt the online agenda and minutes application.

Items of Concern:
No Concerns

Request for Action:
No Requests for Action

State Reports

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<tr>
<th>State Reports</th>
<th>ASCLS - IL</th>
<th>BY: Toula Castillo, President</th>
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<tbody>
<tr>
<td></td>
<td>Successful Annual Meeting with over 100 registrants, 22 vendors/exhibitors, and many social events that drew many attendees.</td>
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<td>Board of Directors with a quorum where we finalized and approved the annual budget, discussed a succession plan with board positions, appointed the Executive Secretary, and approved request for delegates for the annual meeting.</td>
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House of Delegates in which the membership approved the proposed budget, approved Gilma Roncancio-Weemer as our Executive Secretary, and approved soliciting delegates for the Annual Meeting.

Submitted nominees to ASCLS for Publications, Website, Developing Professional of the Year, Member of the Year, Keys to the Future, Omicron Sigma.

Submitted nominees for ASCLS-IL Developing Professional of the Year, Member of the Year, Educator of the Year, Keys to the Future, Omicron Sigma, and President's Awards.

Increased presence of the ASCLS-IL Facebook, Twitter and Instagram pages through #SpotlightSaturday posts, #LabWeek activities.

President's personal #LabWeek post was shared, commented, and reacted to over 38,000 times.

Sent out Spring Edition of ASCLS-IL Insights Newsletter to the membership.

Updated membership list with new members.

Awarded 1 travel scholarship through the Ellen McGill Scholarship to Diana DeAvila to attend the Legislative Symposium. As part of the scholarship stipulations, Diana wrote about her experience in the Spring edition of the newsletter.

Awarded 1 travel scholarship through the Future Leaders Scholarship to Celia Figueroa to attend the Annual meeting in Peoria. As part of the stipulations of the Future Leaders, Celia will be a member of the Membership committee.

Awarded 1 travel scholarship through the Future Leaders Scholarship to Daniel Sharp who will also be presenting his honors capstone project in Charlotte, to attend the ASCLS-AGT Meeting in Charlotte, NC. As part of the stipulations of the Future Leaders, Daniel will be a member of the Government Affairs committee.

Submitted 1 nomination for Alpha Mu Tau to Dr. Nicholas Moore, which was accepted for membership. He will be inducted in Charlotte.

Started making arrangements for Rho Sigma Dinner.

Items of Concern:
- Lack of enthusiasm and apathy among the board members.

Request for Action:
No Requests for Action

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ASCLS - IA

Activities of the Constituent Society
- Held Annual CoLABoration with CLMA Iowa on April 16 & 17 at the Kirkwood in Cedar Rapids
- Presented four (4) $500 student scholarships at our state meeting
- Delegates to the National meeting in North Carolina
  - President: Sarah Taylor
  - President-Elect: Bridget Greiner
  - At Large Delegates: Sheila Dunn and Lindsey Davenport-Landry

Items of Concern:
No Concerns

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

**BY:** Cheryl Lippert, President

**Activities of the Constituent Society**
- Legislative days in Washington DC had 3 attendees from KSCLS. They made a session joint presentation at the annual joint CLMA/KSCLS meeting in Wichita, KS.
- The annual CLMA/KSCLS meeting in Wichita, KS was successful and well attended by members, non-members and vendors.
- The annual business meeting was conducted. Important information was the bylaws changes/updates and the society name change to ASCLS-KS. We are still working on the new logo.

**Items of Concern:**
No Concerns

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

### ASCLS - MO

**BY:** Danyel Anderson, President

**Activities of the Constituent Society**
1. We just wrapped up our Spring 2019 meeting at The Lodge of the Four Seasons, which was held at Lake of the Ozarks on April 25-27.
   a. We believe we made a small profit from the meeting; however, attendance was minimal.
   b. Discussion was held regarding the movement of the annual meetings to always rotate through KC and STL, rather than trying to hold a meeting where attendance is typically poor.
2. The ASCLS-MO Board of Directors discussed revising their bylaws and creating SOPs to be current with the national bylaws. A subcommittee was been to make the necessary changes.
3. We also set in place a mentorship for the PACE coordinator, as our current coordinator expressed an interest in stepping out of her role.
4. We elected delegates for National. Delegates are as follows:
   a. President: Steph Godfrey
   b. Pres-Elect: John Koenig
   c. Delegate at Large: Tim Randolph
   d. Delegate at Large: Candi
   e. Student delegate: Awa Diop
   f. FYP delegate: Erica Martin
   g. Alternate delegate: Renee
5. We are working to get a newsletter out soon.
6. We are planning a face to face meeting in the summer to continuing to work on previously listed activities.

**Items of Concern:**
- The board asked about the lack of a Regional face to face meeting, as some of the regional dues paid by Missouri were to cover the cost of this meeting. They asked if states would be refunded this money.

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

### ASCLS - NE

**BY:** Roxanne Alter, President

**Activities of the Constituent Society**
- Our work this year was to rebuild ASCLS-NE.
- We worked on budget and finance and repair of our checking accounts. Our new treasurer has taken this task to communicate to our constituents the state of ASCLS-NE financial stability.
- Working also to rebuild membership and active membership willing to participate in leadership roles in the state.
- Several old members who previously held positions have been working to help recruit new members.
- Beginning the process of amending the bylaws for new membership categories.

**Items of Concern:**
Recycling of leadership roles

**Request for Action:**
No Requests for Action
Activities of the Region Director

- Attended Choosing Wisely Task Force conference calls
- Attended Appointments Committee conference calls
- Attended Education and Research Fund 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
- Submitted an article for ASCLS Today

Items of Concern: New Mexico Society Inactive Status

Request for Action: None

State Reports

ASCLS - Arkansas

BY: Julie Pittman, President

Activities of the Constituent Society

January 18, 2019
- Teleconference state board meeting

  - Final discussions and plans for the state spring meeting included quiz bowl, fundraiser, speakers and social event where discussed.
  - Treasurer’s report
  - Membership and recruitment-possibility of monthly activities

March 18-19, 2019
- Legislative symposium
- 3 of our state members were in attendance

April 15, 2019
-Governor Asa Hutchinson proclamation of Medical Laboratory Professionals week in Arkansas

April 5, 2019
-Joint educational conference with CLMA in which attendees earned 5 hours of P.A.C.E. continuing education. Hosted a job fair for student attendees. We had 6 employers present for job fair. Hosted the student quiz bowl which consisted of 5 MLS teams and 5 MLT teams.

-Face to face state board meeting:
  - Election nominations for Vice-president and board member
  - Discussion on membership and recruitment
  - 2019 national meeting delegation was discussed

Items of Concern: None

Request for Action: None

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<thead>
<tr>
<th>ASCLS - Louisiana</th>
<th>BY: Karen Williams, President</th>
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<tr>
<td>Activities of the Constituent Society</td>
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- LSCLS was well represented at the 2019 Legislative Symposium in Washington, DC. Six members, including two student members and our Ascending Professional chair attended. We were able to meet with representatives from both senate offices and three representative’s offices. We left copies of the leave behinds at another.
- Spring Board meeting was held April 8 in Monroe, LA.
- LSCLS hosted the annual bi-state meeting which was held in conjunction with ASCLS-MS in Monroe, Louisiana in April. Attendance was good. Vendors gave positive feedback, and the job fair was well attended. There were fewer teams for the student bowl competition this year; however it was still very competitive. Overall, the meeting was a huge success.
- During the meeting student members were asked what would entice them to renew their membership after graduation. As a result, Area VII Rep. Claude Rector and Dr. Rodney Rhode spoke to the students during the voting session of the student forum meeting. Hopefully, this will result in more student members returning as ascending professional members.
- The 2021 LSCLS/ASCLS-MS Annual meeting will be held in New Orleans, and it will be a Tristate Meeting, to include Texas. Planning is underway.
### Items of Concern: None

### Request for Action: None

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<tr>
<th><strong>ASCLS – New Mexico</strong></th>
<th><strong>BY:</strong></th>
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<tr>
<td>No Report Submitted—Inactive Status</td>
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<th><strong>Items of Concern:</strong></th>
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<td>Request for Action: None</td>
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<tr>
<th><strong>ASCLS - Oklahoma</strong></th>
<th><strong>BY: Miles Tompkins, President</strong></th>
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<tr>
<td><strong>Activities of the Constituent Society</strong></td>
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<tr>
<td>- Spring meeting held 4/12/2019 at the Learning Resource Center on Rose State College campus in Midwest City, OK</td>
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<td>- In process of establishing a central database of current and lapsed members to facilitate future communication</td>
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<td>- Exploring options for a new website host once our contract is up in October, 2019.</td>
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<td>- Added Vendor and Sponsorship possibilities to online registration for ASCLS-OK events</td>
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- **Items of Concern**: Would like to see an ASCLS “preferred” vendor list or to at least use a collective bargaining to gain discounts or improved service. This could be a useful tool for constituent societies. Examples include: Website hosting, printing needs, fundraising materials, business cards. This can also be helpful for new or struggling constituent societies to have a resource of where to go/start instead of spending lots of time on research or “trial and error.” If successful, it could be expanded to the full membership as added benefits for current ASCLS members.

| **Request for Action:** None |
Activities of the Constituent Society

May, 10-13, 2019
TACLS Convention, Omni Hotel, Corpus Christi, Texas
Meeting included:
- 23 Breakout Sessions, including speaker topics which included:
  - Chemistry
  - Blood Bank
  - Urinalysis
  - Hospital Administration
  - International Laboratory Operations
  - Microbiology
- 9 Exhibitors
- Student Form Meeting
- Poster Presentations and Judging
- 2 Keynote Speakers
- Student Bowl Competition. 11 Teams competed, single elimination
- 2 Business meetings
  - 1st Meeting to Elect Delegates
  - 2nd Meeting – Regular agenda,
    - Board Reports
    - Update from Region VII Director, Claude Rector
    - Reports from Committees

Items of Concern: None

Request for Action: None
REPORTS TO: ASCLS Board of Directors  
REPORT OF: Director, Region VIII  
SUBMITTED FOR: 2019 Summer Board Meeting  
PREPARED BY: Holly Weinberg, Region VIII Director  
DATE: May 24, 2019

**Activities of the Region Director**
- Presenting May leadership session to Region VIII Leadership Academy Interns
- Participated in Board of Director’s Planning Day and Interim Board of Director’s Meeting in Alexandria, VA on March 16-17, 2019
- Attended the Legislative Symposium in Washington, DC on March 18-19, 2019
- Serving as IMSS 2019 Program Co-Chair
- Wrote articles for Region VIII state newsletters
- Wrote May regional newsletter
- Responded to requests for information for ASCLS
- Participated in Choosing Wisely Task force conference call meetings
- Participated in BOD check in call April and May
- Participated in monthly IMSS planning committee meetings
- Held phone conversations with state presidents answering questions and concerns
- Made arrangements for Region VIII Summer Council meeting in conjunction with ASCLS National meeting in Charlotte
- Identified regional Omicron-Sigma nominees
- Shared ASCLS award information with Region VIII CS Presidents
- Presented regional and national updates and awards at all state conferences in Region VIII in April and May

**Regional Activities:**
- IMSS planning meetings have been held monthly for the conference on Oct 10-12, 2019 at the Snow King Resort.
- The Summer Region VIII Council meeting will be held on June 22, 2019 in Charlotte.

**Items of Concern:**
None

**Request for Action:**
None

**ASCLS – CO**  
BY: Barbara Brown, ASCLS-CO President

**Activities of the Constituent Society**
- The ASCLS-CO Scholarship committee received 8 applications and awarded 3 $1000.00 scholarships to MLS student members.
The Leadership Succession Committee was formed in response to the difficulty encountered by the Nomination Committee to find suitable candidates for office. The committee consisted of Barbara Brown, Cathy McNary, Ian Wallace, Stephanie Mihane, Tracy Matthews and Bill Pierce. A list of potential leaders was compiled and an invitation to an informal gathering was sent to them. July 28, 2019 was selected as the date and Top Golf in Denver was reserved for a social/meal event with a panel discussion on leadership topics.

2 representatives, Stephanie Mihane and JR Constance attended the Interim Board meeting and Legislative Days.

The Clinical Laboratory Collaborative Conference, the annual Spring meeting of ASCLS-CO and ASCLS-WY was held on 2-3 May in Denver.

Our Bylaws revisions were sent to the ASCLS Bylaws committee for approval which was received. The revised Bylaws were voted on and adopted by the membership at the General Assembly meeting on 2 May 2019. The new Bylaws are on the ASCLS-CO website.

ASCLS-CO will once again have a full delegation to the ASCLS meeting in Charlotte, NC in June.

Stephane Mihane is running for Director, Region VIII

Items of Concern:
- Refer to Concerns at end of report

Request for Action:
- None

ASCLS-ID

BY: Chris Doran, ASCLS-ID President

Activities of the Constituent Society: Time frame February 2019 through present
- Submitted nominations for Nominations and Elections Committee’s call for 2019-2020 open positions.
- Prepared and submitted Message from the President for ID Focus Spring Newsletter.
- Attended Legislative Symposium in Twin Falls 3/23/19. Held face-to-face BOD meeting in same day.
- Submitted award nominations for Omicron Sigma and Key to the Future 3/30/19.
- Obtained official Idaho ‘Office of the Governor Proclamation’ for Medical Laboratory Professionals Week for April 21- April 27, 2019.
- Attended ASCLS-ID Spring Convention 4/11 through 4/13 in Boise.
- Held successful membership renewal drive during Spring Convention and met goal.
- Held Annual ASCLS-ID Business luncheon 4/13/19 in conjunction with April BOD meeting.
- Convention wrap-up meeting scheduled for May 9, 2019
- ASCLS-ID Leadership Academy scheduled for July 20, 2019 in Twin Falls, ID

Items of Concern:
### ASCLS-MT
**BY:** Tori Rensink, ASCLS-MT President

#### Activities of the Constituent Society
- Updated state roster to submit to nationals
- Filled all elected positions.
- Chose delegates for national meeting. 5 will be attending
- Held a state BOD meeting 04/03/19 and general business meeting 04/04/19.
- Membership renewals are going well. Membership is currently at 120
- Have a congratulations letter written up to go out to all the students that recently graduated. Urge to renew to Ascending Professionals
- Will hold another BOD meeting in June before the national meeting.
- Gave out 16 Omicron Sigma awards and 1 Key to the Future award at state meeting.
- Bylaws were submitted a second time to the National bylaws committee with the corrections and suggestions given. We haven’t had notification on the status of our second draft.

#### Items of Concern:
- Refer to Concerns at end of report

#### Request for Action:
- None at this time

### ASCLS-UT
**BY:** Omar Muñoz, ASCLS-UT Int. President

#### Activities of the Constituent Society
- Held recruiting activity during “Science Fair” at the University of Utah
- Updated and renew website domain.
- Assisting Intermountain State Seminar, general chair.
- Had a short Spring meeting on March 21, 2019
  - Several activities for students
  - Only the University Hospital participated
  - Intermountain Healthcare and ARUP Laboratories came and talk about recruiting
  - Several recruiting activities taking place summer of 2019

#### Items of Concern:
- Refer to Concerns at end of report

#### Request for Action:
- None

### ASCLS-WY
**BY:** Jill Graff, ASCLS-WY President

#### Activities of the Constituent Society
- Franki Herdt and Fran Wriborg went to Casper College and spoke to MLS students about the advantages of ASCLS
• We are waiting for Lab Week submissions to award prizes for the most original/interesting Lab Week activities

• Hosted CLCC with ASCLS-CO in Denver CO, May 2&3

• Held State meeting May 2, 2019 in Denver CO:
  o Election of board members: Franki Herdt to President, Leslie Richendifer to President-Elect, Barbara Harvey to Sec/Treasurer; still pending a decision on Board Member at Large.

• Member of the Year: Franki Herdt

• Keys to the Future: Dino Marsden and Jed Doxtater.

**Items of Concern:**

• None

**Request for Action:**

• None

**Items of Concern:**

**ASCLS-CO:**

1. Dwindling membership numbers continue to plague the organization.
2. ASCLS-CO requests the BOD re-visit the deadlines associated with the Annual meeting: Reports to the BOD and HOD; credentialing date for delegates; early bird meeting registration. Due to the change in the annual meeting dates the current deadlines are not relevant for a lot of states.

**ASCLS-ID:**

1. Retaining membership levels after student graduations.
2. Succession planning for ASCLS-ID leadership roles while minimizing recycling of current members.

**ASCLS-MT:**

1. Membership join/renewal times for non-members.
   a. We had quite a few people lapsed members (1+ year lapsed) wanting to renew at our state meeting, but the prorated fees didn't apply to them, and the full price fee would only allow their membership to be good through 07/31/19.
      i. Suggestion: Add prorated fees to the full year membership price for the extra months they are going to get.

**ASCLS-UT:**

1. Leadership recruitment
2. Member participation
3. Member recruitment
## Activities of the Region Director

- Served as reviewer of Voices under 40 applications
- Serving as Board liaison for the ASCLS Patient Safety Committee
- Serving as Board liaison for the ASCLS Membership Committee
- Participated in teleconferences for the ASCLS Membership Committee
- Participated in teleconferences for the ASCLS Patient Safety Committee
- Participated in teleconferences for BOD check-in
- Responded to requests from ASCLS Board of Directors
- Corresponded with Region IX Council
- Prepared agenda for Region IX President’s Council
- Submitted Region award nominations for Omicron Sigma
- Reviewed reports from assigned committees and Region State Presidents
- Attended Legislative Symposium
- Held region meetings via Zoom
- Appointed a person for the national PAC Committee

## Items of Concern:
Region Council member participation in meetings and responses to RD emails and requests. Volunteers for open Region positions. Interpretation of budget and funding of RD activities.

## Request for Action:
None.

### State Reports

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<tr>
<th>ASCLS – WA</th>
<th>BY: Leslie Nakagawa</th>
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<tr>
<td><strong>Activities:</strong></td>
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<td><strong>President Activities:</strong></td>
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<tr>
<td>Submitted ASCLS Today Article - To be published in June</td>
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<tr>
<td>Composed and edited Winter meeting minutes, followed up with Ascending Professional/Bylaws Committees</td>
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<tr>
<td>Submitted OS/KTF/MOY awards</td>
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Started program planning for NWMLS, serving as local program committee contact
Conducted State Spring Meeting and State House of Delegates meetings
Submitted delegate credentials for national meeting

**Budget requests:**
None

**Items for Discussion: Will be discussed as New Items**
None

**Items of Concern:**
None.

**Request for Action:**
None.

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**CLSA**

**BY:** Erin Frasher

**Items of Concern:**

**Request for Action:**
None.

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**ASCLS – OR**

**BY:** Patty DeTurk

**Activities of the Constituent Society**

Our last BOD meeting was held during the Oregon Spring Seminar, a collaborative annual event with AMT. The meeting was held 05/03/2019.

Among the items covered:

1. Nomination and vote for recipients of the Betsy Baptist Scholarship, which is limited to MLT students at Portland Community College, and MLS students at Oregon Tech (OHSU/OIT). We awarded four scholarships this year.
2. Election of New Officers:
   - Next year’s President-elect: Laura Sage
   - Next year’s Secretary: Maja
   - Next year’s Ascending Professional: Mariah Grant
   - Voting for Developing Professional will be conducted on-line.
3. Delegates for National:
   - Maja will be Proxy for President
| Rachelle Barrett as President-elect  
| Laura Sage as Proxy for Ascending Professional  
| Mariah as incoming Ascending Professional/Delegate  

| **Items of Concern:**  
| Lapsing membership; we will use toolkit from National’s website.  

| **Request for Action:**  
| None.  

Region X Activities

- Goals for 2018-19 year: Create regional job descriptions that can be used at the state level, and create regional mentorship program: In process of completion
- Region X director attend Hawaii ASCLS board meeting on 4/17/19, ASCLS Arizona/Nevada board meeting: unable to attend ASCLS California board 4/10/19.
- Participated in Board Check in calls.
- Participated in Long Range Planning Committee and assisted with updating position description document.
- Participated in mentorship committee calls.

Activities of the Arizona/Nevada Chapter
- No Report Provided

Activities of the California Chapter
- Teleconferences April 10th 2019 and April 22, 2019
- A few of our state members were able to attend both the CLEC and the Legislative Symposium.
- We are in the process of updating and approving our state logo. We are updating our facebook page staying active by continuing to post laboratory related happenings. We are in the process up building a new website. We will be starting to update our bylaws to reflect changes made to membership from the national organization. Our spring newsletter is in final editing steps and coming out this week. We are also in the middle of elections to be completed by 5-18-19.
- Angel City Brewery Event for June.
- Members to attend the National Meeting in June.

Activities of the Hawaii Chapter
- Presented New Generation Sequencing Symposium October 2018, 8.5 hrs PACE
- Board Meetings on 11/14/18, 3/20/19, 4/17/19
- Mid-Year Business Mtg, 1/16/19. Complimentary dinner provided to 24 members. Presentation by Dr. Joannie Dobbs on Food Fads and impact on clinical testing, 1.5 PACE approved.
- Co-sponsored ASM Medical Mycology Workshop 8.0 PACE hrs, 2/11/19
- Charmaine Kuehne nominated for Developing Professional of the Year award
- Microsoft Office 365 for 6 users purchased for use by Board members and other committee members
- 2 scholarships, $2500 each will be awarded to CLS/MLT students in Fall 2019. Notices sent to program chairs of Univ of HI MT and MLT program. Deadline for applications is 8/1/19.
- MLPW 2019 – Half sheet cakes were delivered to 12 clinical labs. Popsockets with ASCLS Hawaii logo purchased and distributed to members. Instagram contest held for Lab Week photos.
- Mike Lieberman, Margo Aquino, Jan Kong nominated for Keys to the Future
- CLS career presentations given to middle and high school students
  - 2/26/19 Health Opportunities State Conference
  - 4/20/19 Joint Health Opportunities Conference
  - 4/23/19 Hawaii Baptist Academy
- Marcella Yee and Kristen Croom attended 2019 Leg Day
- Hawaii Clinical Lab Conference 5/15-5/16/19, collaboration with CLMA Aloha Chapter
  - $20 rebate offered to registered members
  - 2 speakers, Rick Panning and Janelle Chiasera, sponsored to present 5 sessions
  - Cvent contracted to manage web site and registration

**Items of Concern:** None at this time.

**Request for Action:** None at this time
Activities of the Forum

- National Level:
  - Conference calls held every month
  - Continuing to work on crash course videos
  - Continuing to work on digital welcome packet
  - Continued to update and revise the new Guidelines for Governance to replace the Quick Guide as a more prescriptive document and resubmitted to the Board for approval
  - Annual Lab Week Run
    - Total Race packets sold: 1404
  - Offered six $1000 travel grants to Annual Meeting. Deadline was April 29th. Selection committee still deciding who will receive grants from seven total applicants.
  - Submitted articles for ASCLS Today
  - Formed the Cynthia L. Breen E&R Fund Scholarship from profits of LWR to benefit ASCLS Developing Professional Members and Ascending Professional Members, $500 amount with two scholarships offered each year over ten years.
  - Continued weekly Facebook posts on topics including CE opportunities, career tips, and interesting books, videos, and articles
  - Sent out nomination forms to begin identifying those interested in becoming officers for 2019-2020.
  - Will send out APF membership survey to establish goals, charges, and strategic action plan for next year
  - Planning Annual Meeting events - orientation/business meetings and social events

- Region I: Nathan Howell
  - No Report received

- Region II: Joshua Cannon
  - Pennsylvania
    - Paint and Sip social event and fundraiser planned for May 25
- ASCLS-PA Ascending Professional Representative will travel to Harrisburg for the ASCLS-PA Annual Meeting on May 5 and 6.
  - Delaware
    - No Activity to report
  - New Jersey
    - No Activity to Report.
  - Virginia
    - No Activity to Report
  - West Virginia
    - The student forum voted to hold a fundraiser to support Lily’s Place. The fundraiser was hosted at Marshall University April 23-25.
    - The spring WVSCLS board of directors meeting was held; planning is currently underway for the fall conference (date TBA).
  - Maryland
    - No Activity to report
  - Capital Area/DC
    - Constituent society is current rebuilding; AP Representative TBD
- Region III: Ally Storla
  - No Report Received
- Region IV: Darby Naheedy
  - No Report Received
- Region V: Esther Iheme
  - No Report Received.
- Region VI: Jess Sheffield
  - Illinois
    - No activity to report
  - Nebraska:
    - No activity to report
  - Kansas:
    - No report received
  - Iowa:
    - Currently does not have an ascending professional, but do have a couple of people interested.
    - Sarah Taylor notes that Iowa needs to update their policy and operations.
  - Missouri:
    - No report received
- Region VII: Ellis McCoy
  - Arkansas:
    - We held our Spring joint meeting with CLMA on April 5 th. The day prior was the MLT and MLS student quiz bowl competition with participating teams from across the state. That evening a lab mixer was held and a local trendy bowling alley where students from across the state could interact with one another as well as mingling with local lab
professionals. At the meeting, our state AP rep, Sabra Hanna, helped to organize our fundraising efforts with her creation of a lab themed gift card wheel.

- Arkansas looks to once again send a full delegation to the National Meeting including our Region VII APF representative and newly elected President-Elect, Ellis McVoy. Sabra is also trying to attend if her schedule allows.
- During lab week, lab professionals from central Arkansas met with Governor Hutchison for a state lab week proclamation. He took a photo with the lab group on the steps of the capitol.
  - Louisiana:
    - Participated in the Annual Bi-State meeting with Mississippi. There was a student bowl competition and several of the Ascending Professionals were judges. There was a mixer with the AP and DP members where we painted lab themed paintings and had food. Everyone had a blast at the painting mixer!
    - There are several APs going to the National Meeting in Charlotte, NC. Cheyenne Reyes was voted the incoming AP Chair and Jessica Lawless will also be attending the National Meeting as a delegate from Louisiana.
  - Oklahoma:
    - No Report Received
  - Texas:
    - No Report Received
- **Region VIII: Franki Herdt**
  - Wyoming: per Franki Herdt
    - Retaining members is still continuing to be an issue. Most of our students we gain are moving out of state and we have a number of ASCLS members retiring this year and they do not want to continue membership.
    - We had a meeting in Casper, WY on April 6th, 2019. Since we did not have fall meeting, we had advertised this as a late fall meeting but no other members could attend. We had a few new developing professionals sign up deeming the meeting successful.
    - We have gained more developing professional members after advertising internally in some of our labs around the state as well as giving a presentation at the school in Casper, WY.
    - CO and WY combined meeting, CLCC, was May 2-3rd in Denver, CO. We had a great turn out from our Wyoming members, including one new developing professional.
  - Colorado: per Sam Buck
    - Had state meeting CLCC with ASLCS-WY where I interacted with students introducing them to vendors and other ASLCS members.
- Moderated the panel for students on Friday at CLCC in which they learned other careers MLS's can have rather than just a bench tech.
- Hosted Friday evening happy hour social for students and new professionals to network with each other and other ASCLS members.
- 2018-2019 Goals: Help Kelsey become acquainted with mentoring Mindi as the newly elected student rep for ASCLS-CO.
- Activities of state society: help give advice to Mindi (student rep) and Sheena (new professional rep) for attending the national conference in June in Charlotte, NC.
- **Idaho per Kate DeAngelo**
  - I held another successful session at the Idaho state convention back in April about "Life After Graduation". I provided information on the BOC exam, successful internships, interviews, ASCLS involvement, etc. All of the students were given a copy of the presentation so they could refer back to it. I had several students thank me after the presentation for all the great information. We even had a few students renew their memberships at the convention! I hope to continue this session in the future.
  - We also had a lot of student involvement this year. Idaho had 9 students who took on the developing professional representative role. I emailed all of them and gave them ways they could get involved with ASCLS (forum, Facebook, etc.). The students stepped up at the state convention and really helped out. They held their own social event on the first night of the convention. It was a great way for the three campuses to get together and network.
- **Utah**
  - No Report Received
- **Montana**
  - No Report Received
- **Region IX: Timothy Olden**
  - No Report Received
- **Region X: Amanda Fulton**
  - No activity to report

**Items of Concern:**
- Lack of responses from Regional Representatives for Board Reports.
- Region VI:
  - Iowa: Sarah Taylor asked if Region or National has any information to provide new Ascending Professionals.
Request for Action:

I move that the ASCLS BOD approve the Ascending Professionals Forum Guidelines for Governance as they appear attached and refer to the BOD Policy and Procedures Committee for the corresponding SOP revisions.
NEW PROFESSIONALS AND NEW MEMBERS FORUM (NPNMF)

The NPNMF was created as a way for all new professionals and new members to come together to provide ideas, give input to the society about new professional and new member needs, and learn how to access resources that are uniquely available to ASCLS members. As a new professional or new member, ASCLS realizes that even though you’re out of school or new to the society, you may still have questions about the way ASCLS provides benefits to its members or leadership development programs that are available to you.

Responsible and Reports to: ASCLS Board of Directors

Purpose: The New Professionals and New Members Forum will serve to engage and inform individuals new to the profession and ASCLS about the various opportunities that membership affords. The Forum is responsible for assuring that the activities of the society address the needs and interests of First Year Professionals, new clinical laboratory science professionals with less than 5 years of experience in the practice, or new members with less than five years in the society and communicate them to the Board of Directors for consideration and implementation to meet those needs and wants whenever possible.

Composition, Leadership, Appointment, Term, Nominations and Elections:

1. Composition: The total forum membership consists of new professionals and new ASCLS members. Elected officers/appointees include one (1) Forum Chair, one (1) Forum Vice-Chair, one (1) Forum Secretary, ten (10) Regional Communication Coordinators, and one (1) Forum Advisor.
   a. New Professional Definition: new clinical laboratory science professional with less than 5 years of experience in the practice
   b. New Member Definition: clinical laboratory science professional with less than 5 years of membership within ASCLS

2. Leadership and Term
   a. Chair: Serves a one (1) year term beginning and ending with the ASCLS House of Delegates Meeting. The Vice-Chair ascends to the

ASCENDING PROFESSIONALS FORUM (APF)

The APF was created as a way for all ascending professionals to come together to provide ideas, give input to the society about ascending professional needs, and learn how to access resources that are uniquely available to ASCLS members. As an ascending professional, ASCLS realizes that even though you’re out of school, you may still have questions about the way ASCLS provides benefits to its members or leadership development programs that are available to you.

Responsible and Reports to: ASCLS Board of Directors

Purpose: The Ascending Professionals Forum will serve to engage and inform individuals new to the profession about the various opportunities that membership affords. The Forum is responsible for assuring that the activities of the society address the needs and interests of clinical laboratory science professionals with less than 5 years of experience and communicate them to the Board of Directors for consideration.

Membership: The total Forum membership consists of the Ascending Professional members. Forum leaders are required to maintain Forum membership.

Forum Leadership Council, Appointment, Term, Nominations and Elections:

1. Composition: Ascending Professionals Forum Leadership Council consists of elected officers and appointed regional representatives: one (1) Forum Chair, one (1) Forum Vice-Chair, one (1) Forum Secretary, one (1) Past-Chair, and ten (10) Regional Representatives.
## The Quick Guide to the NPNMF

a. Chair: The Vice-Chair may succeed to the Chair position through the appointment process for a one (1) year term. The Chair may not concurrently serve as the Regional/Constituent Society Chair.

b. Vice-Chair: During the ASCLS Annual Meeting Forum members will elect an individual to serve as Vice-Chair of the Forum. The Vice-Chair may succeed to the Chair of the Forum during the second year of their two (2) year term through the appointment process.

c. Secretary: During the ASCLS Annual Meeting Forum members will elect an individual to serve as Secretary of the Forum for a one (1) year term, maximum two (2) terms.

d. Past-Chair: The NPNMF Chair will succeed to the NPNMF Past-Chair position for a one (1) year term.

## Proposed APF Guidelines for Governance

<table>
<thead>
<tr>
<th>3. Appointments and Term</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. Regional Communication Coordinators: One (1) representative from each of the ten (10) regions, three to four (3-4) coordinators appointed annually by the most recently elected regional directors</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>3. Appointments and Term</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. Regional Representative: One (1) representative from each of the ten (10) regions, five (5) representatives appointed annually for a two (2) year term. Regional Representatives for Regions I, III, V,</td>
</tr>
</tbody>
</table>
### The Quick Guide to the NPNMF

for a three (3) year term. Communication Coordinators can only serve for one (1) term.

b. Appointed by the Regional Directors during their first year in office; the regional Communication Coordinator’s term begins during the second year of the Regional Director’s term. The Communication Coordinator should be appointed to the Regional Council and should not be limited to the New/First Year Professional Representative

c. NPNMF Advisor: Forum Advisor: One (1) Advisor appointed through the appointment process for a three (3) year term.

### Proposed APF Guidelines for Governance

VII, and IX are to be appointed on odd numbered years. Regional Representatives for Regions II, IV, VI, VIII, and X are to be appointed on even numbered years. Regional Representatives may serve up to two consecutive terms. Regional Representatives must be eligible for the Ascending Professional membership category for his/her entire term.

1) Appointed by the Regional Director.

2) If a Regional Representative cannot finish his or her term, a replacement will be appointed by the Regional Director to finish that term. The replacement is eligible to serve for an additional term, if he or she is eligible for the Ascending Professional membership category for the entire two years of their term.

b. APF Advisor: One (1) Advisor appointed through the appointment process for a three (3) year term.

### 4. Nominations and Elections:

<table>
<thead>
<tr>
<th>The Quick Guide to the NPNMF</th>
<th>Proposed APF Guidelines for Governance</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>a. Forum leadership will solicit nominations for elected officers starting in January with a nomination deadline of June 30.</td>
<td>a. Candidate presentations shall occur at the AP Forum Annual Membership Meeting</td>
</tr>
<tr>
<td>b. Nominations will be accepted until the start of the Forum Orientation at the Annual Meeting.</td>
<td>b. Elections occur concurrently with the ASCLS elections, using the same method, timeframe and schedule. Forum leadership will solicit nominations for elected officers starting in January with a nomination deadline 28 days prior to the Annual Membership Meeting. All candidates must be a member of ASCLS for a minimum of four (4) months prior to the election. All nominees meeting the requirements for office will be slated. Information about each candidate compiled from their nomination form will be made available for review by APF Members.</td>
</tr>
<tr>
<td>c. Elections will be held during the Forum Elections and Planning Session at the Annual Meeting. Forum members will vote by secret ballot and simple majority. If no candidate receives a simple majority on the first ballot, then there will be a runoff election between the two candidates receiving the highest number of votes. In the event of another tie, lot will determine the election.</td>
<td>c. During the AP Forum Annual Membership Meeting, nominations will be accepted from the floor for any positions without a slated nominee.</td>
</tr>
<tr>
<td></td>
<td>e. Any Ascending Professional Member in attendance at the Annual Meeting is eligible to vote in the election of Forum officers.</td>
</tr>
</tbody>
</table>

### Forum Responsibilities:

#### Forum Responsibilities:
## The Quick Guide to the NPNMF

To engage and inform individuals new to the profession and ASCLS about the various opportunities that membership affords. The Forum represent the interests and needs of First Year Professionals, New Professionals, and New Members with less than 5 years experience in the practice of clinical laboratory science or less than 5 years of membership within ASCLS. The NPNMF holds at a minimum at least one annual Forum meeting in conjunction with the ASCLS Annual Meeting. Additional meetings and communications of the Forum are held through monthly conference calls and emails throughout the year. Any member of the Society may attend the annual Forum meeting or offer assistance to the Forum in achieving its goals and creating strategic action plans.

### Chair's Responsibilities:
1. Directs and coordinates the activities and functions of the Forum.
2. Serves as the spokesperson for the Forum.
3. Prepares reports of Forum's activities for the Board of Directors as requested.

## Proposed APF Guidelines for Governance

To engage and inform individuals new to the profession about the various opportunities that membership affords. The Forum represents the interests and needs of Professionals with less than 5 years experience in the practice of clinical laboratory science. The APF holds, at minimum, one annual Forum meeting in conjunction with the ASCLS Annual Meeting. Additional meetings and communications of the Forum are held through monthly conference calls and emails throughout the year. Any member of the Society may attend the annual Forum meeting or offer assistance to the Forum in achieving its goals and creating strategic action plans.

### Chair's Responsibilities:
1. Direct and coordinate the activities and functions of the Forum.
2. Serve as the spokesperson for the Forum.
3. Orient new regional representatives regarding Forum activities and their role.
4. Develop a strategic action plan to meet the Ascending Professionals Forum charges and monitor progress to ensure completion.
5. Preside over the Forum business meeting/candidates presentation during the ASCLS Annual Meeting and any other Forum meetings.
6. Obtain reports from the regional representatives to be included in ASCLS Board Directors reports.
7. Prepare reports of Forum's activities for the Board of Directors as requested.
8. Communicate with the Forum Advisor on all Forum activities and copy the Advisor on all other Forum related correspondence.
9. Assume overall responsibility for all activities, programs and projects undertaken by the Ascending Professionals Forum.
10. Make appointments to any Ascending Professionals Forum ad hoc committees as appropriate and make recommendations, in consultation with the Forum Advisor, to the ASCLS President-Elect for Ascending Professional representatives to serve on ASCLS committees for the next governance year and for task force appointments as needed. (ASCLS committee appointments usually occur in March.)
<table>
<thead>
<tr>
<th>The Quick Guide to the NPNMF</th>
<th>Proposed APF Guidelines for Governance</th>
</tr>
</thead>
<tbody>
<tr>
<td>11. Solicit nominees for Forum officers; distribute nomination forms and review submissions with the Forum Advisor to confirm candidate eligibility.</td>
<td>12. Maintain a current file of Forum activities and transfer to the incoming Forum Chair within thirty days after the ASCLS Annual Meeting.</td>
</tr>
<tr>
<td>12. Maintain a current file of Forum activities and transfer to the incoming Forum Chair within thirty days after the ASCLS Annual Meeting.</td>
<td>13. Attend the ASCLS Meeting and make an effort to attend the Legislative Symposium.</td>
</tr>
</tbody>
</table>

**Vice-Chair’s Responsibilities:**
1. Become familiar with the duties of the office of Chair and assume those duties in the absence of the Chair.
2. Copy the Chair and Forum Advisor on all Forum related correspondence, as needed.
3. Assist in the development of a strategic action plan to meet the Forum charges and participate in the activities to meet them.
4. Participate in monthly Forum calls.
5. Chair the Forum Session at the Annual Meeting in the absence of the Chair.
6. Maintain a current file of all activities appropriate to the office and transfer to the incoming Vice-Chair within thirty days after the ASCLS Annual Meeting.
7. Make an effort to attend the Legislative Symposium and the ASCLS Annual Meeting.

**Secretary’s Responsibilities:**
1. Maintain the Forum directory to include regional and constituent society representatives.
2. Assist in the development of a strategic action plan to meet the Forum charges and participate in the activities to meet them.
3. Record the proceedings of all meetings of the Forum officers as well the monthly Forum calls.
4. Prepare meeting minutes for review by the Chair and Forum Advisor; disseminate finalized minutes to the Forum members.
5. Publicize all eligible, nominated officer candidates.
6. Maintain a current file of all activities appropriate to the office and transfer to the incoming Secretary within thirty days after the ASCLS Annual Meeting.
### New Professionals and New Members Forum (NPNMF) Regional Communication Coordinators

Each regional Communication Coordinator shall be a member of the Society and hold membership in a constituent society within the region that each represents. The respective Regional Director shall appoint the regional Communication Coordinator.

The following are some of the responsibilities of a regional Communication Coordinator; however, each region may have a specific position description that is available.

1. Maintain a current contact list of constituent society New Professional and New Members Forum representatives in your region.
2. Volunteer for and assist with National NPNMF projects to meet Forum charges.
3. Prepare a strategic plan to meet charges assigned by the Regional Director, if applicable.
4. Work with the constituent society NPNMF representatives to meet regional charges, if applicable.
5. Serve as a mentor and resource to NPNMF/SF representatives and members in all states within your region. Encourage all new professionals, new members and students to become involved in ASCLS.

### Ascending Professionals Forum (APF) Regional Representatives

Each Regional Representative shall be a member of the Society and hold membership in a constituent society within the region that each represents. The respective Regional Director shall appoint the Regional Representative.

The following are some of the responsibilities of a Regional Representative; however, each region may have a specific position description that is available.

1. Maintain a current contact list of constituent society Ascending Professionals Forum representatives in your region.
2. Volunteer for and assist with National APF projects to meet Forum charges.
3. Prepare a strategic plan to meet charges assigned by the Regional Director, if applicable.
4. Serve as a mentor and resource to APF/DPF representatives and members in all states within your region. Encourage all new professionals, new members and students to become involved in ASCLS.
5. Provide feedback to the ASCLS APF and Regional Director about state and regional activities.
6. Communicate needs, concerns, and opinions of the region’s APF members to the ASCLS APF and Regional Director.

7. Make an effort to attend the Legislative Symposium and the ASCLS Annual Meeting.

### Past Chair Responsibilities:

1. Serve as the Ascending Professional Director on the Board of Directors representing the interests of ascending professionals.
2. Serve as a mentor to the Forum leadership.
3. Provide guidance to the Forum when warranted.
4. Communicate the actions and views of the Board of Directors to the Forum.
### The Quick Guide to the NPNMF

**VI.** Provide feedback to the ASCLS NPNMF and Regional Director about state and regional activities

**VII.** Communicate needs, concerns, and opinions of the region’s NPNMF members to the ASCLS NPNMF and Regional Director.

**VIII.** Communicate all national and/or regional NPNMF related information to the state NPNMF representatives as appropriate.

**IX.** Keep the Regional Director informed of correspondence to the national NPNMF and the state NPNMF representatives.

**X.** Write articles for national, regional or state publications as requested.

**XI.** Make an effort to try to attend the Regional meetings, Legislative Symposium, and the ASCLS Annual Meeting. If you are unable to attend, work with your Regional Director to find another member to attend those meetings.

### Proposed APF Guidelines for Governance

**7.** Communicate all national and/or regional APF related information to the state APF representatives as appropriate.

**8.** Keep the Regional Director informed of correspondence to the national APF and the state APF representatives.

**9.** Write articles for national, regional or state publications as requested.

**10.** Make an effort to attend the Regional meetings, Legislative Symposium, and the ASCLS Annual Meeting. If you are unable to attend, work with your Regional Director to find another member to attend those meetings.

### New Professionals New Members Forum (NPNMF) Constituent Society Representatives

The following are some of the responsibilities of a constituent society representative; however, each constituent society may have a specific position description that is available.

<table>
<thead>
<tr>
<th>I.</th>
<th>Solicit input, opinions, needs, and concerns of new professionals and new members in your respective constituent society.</th>
</tr>
</thead>
<tbody>
<tr>
<td>II.</td>
<td>Review all correspondence from the regional Communication Coordinator and disseminate information to respective new professional and new members.</td>
</tr>
<tr>
<td>III.</td>
<td>Communicate needs, concerns and opinions of new professionals and new members to the NPNMF regional Communication Coordinators and state President along with activity updates when requested.</td>
</tr>
<tr>
<td>IV.</td>
<td>Prepare a strategic plan to meet charges assigned by the constituent society President, if applicable.</td>
</tr>
</tbody>
</table>

### Ascending Professionals Forum (APF) Constituent Society Representatives

The following are some of the responsibilities of a constituent society representative; however, each constituent society may have a specific position description that is available.

<table>
<thead>
<tr>
<th>1.</th>
<th>Solicit input, opinions, needs, and concerns of ascending professionals in your respective constituent society.</th>
</tr>
</thead>
<tbody>
<tr>
<td>2.</td>
<td>Review all correspondence from the Regional Representative and disseminate information to respective ascending professional members.</td>
</tr>
<tr>
<td>3.</td>
<td>Communicate needs, concerns and opinions of ascending professionals to the APF Regional Representative and state President along with activity updates when requested.</td>
</tr>
<tr>
<td>4.</td>
<td>Prepare a strategic plan to meet charges assigned by the constituent society President, if applicable.</td>
</tr>
<tr>
<td>5.</td>
<td>Work with the constituent society APF members to meet constituent society charges, if applicable.</td>
</tr>
</tbody>
</table>
### The Quick Guide to the NPNMF

**V.** Work with the constituent society NPNMF members to meet constituent society charges, if applicable.

#### Annually Recurring NPNMF Charges

1. Establish a key network of those members interested in participating in efforts of the NPNMF and communicate with them on a monthly basis, reporting all activities to the ASCLS Board of Directors.

2. Educate members of the NPNMF on ASCLS and opportunities within ASCLS. All involved should gain a better understanding of the inner workings of ASCLS.

3. Identify the needs of those new professionals and new members and determine how ASCLS can help meet those needs as an organization.

### Proposed APF Guidelines for Governance

#### Annually Recurring APF Charges

1. Establish a key network of those members interested in participating in efforts of the APF and communicate with them on a monthly basis, reporting all activities to the ASCLS Board of Directors.

2. Educate members of the APF on ASCLS and opportunities within ASCLS. All involved should gain a better understanding of the inner workings of ASCLS.

3. Identify the needs of those ascending professionals and determine how ASCLS can help meet those needs as an organization.

During the Ascending Professionals Forum business meeting at the ASCLS Annual Meeting Forum members can identify additional charges to pursue.

#### Finance

1. A Majority vote of the Forum Leadership Council will be required for a net expenditure up to $1,000.

2. Any net expenditures Over $1,000 will require an additional approval of the ASCLS Board of Directors.

3. Appropriate Expenditures
   a. Expenditures will be approved for activities that support the purpose of the forum which is to engage and inform individuals new to the profession about the various opportunities that membership affords. This includes grants, scholarships, and promotion of the profession.
   b. Forum officers may be reimbursed up to $400 to attend the Annual Meeting for registration, transportation and lodging, unless they are fully funded from another source.

4. Reimbursements
<table>
<thead>
<tr>
<th>The Quick Guide to the NPNMF</th>
<th>Proposed APF Guidelines for Governance</th>
</tr>
</thead>
<tbody>
<tr>
<td>Forum members will be reimbursed for expenditures incurred that were approved by the Forum Leadership Council and, if applicable, the ASCLS Board of Directors.</td>
<td>Policies</td>
</tr>
<tr>
<td>1. This document should be reviewed on odd numbered years.</td>
<td></td>
</tr>
<tr>
<td>2. Revisions must be approved by the Forum Leadership Council and the ASCLS Board of Directors.</td>
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</tr>
</tbody>
</table>
REPORTS TO: Board of Directors
REPORT OF: Developing Professional Forum
SUBMITTED FOR: 2019 Annual Meeting Board Report
PREPARED BY: Christal Lane, ASCLS Developing Professional Forum Chair
DATE: May 26th, 2019

Activities of the Developing Professionals Forum
- Been in constant communication with the Vice Chair, Staff Liaison, and Regional Representatives.
- Held Conference Calls with developing professional officers, regional representatives, staff liaison on March 27th and May 30th.
- Participated in the ASCLS Spring Book Club reading the Simon Sinek book, “Start with Why”
- Participated in the ASCLS Board of Directors Planning Day, March 16th
- Attended the Board check-in call on May 22nd
- Attended appointments committee meetings on March 5th, April 2nd, and April 23rd.
- Attended the ASCLS Legislative Symposium
- Three students applied for the Student Forum Legislative Symposium’s travel grant. Two of those students were selected to receive the $750 travel grant to help with their Travel expenses.
- During the 2019 Legislative Symposium, the Developing Professional Forum planned a dinner social for attending students
- Submitted one article for ASCLS Today
- Designed and published an informational email to remind graduating students to update their emails for ASCLS.
- Designed tumblers and shot glasses to be sold at the 2019 Annual Meeting for funds for the Developing Professionals scholarship and grant fund.
- Planned a “garage sale” for previous fundraiser items that remained unsold to be sold at the 2019 Annual Meeting.
- Planned a Lab Olympics activity for an ice breaker at the 2019 Annual Meeting.
- Planned a social mixer at WoodenRobot Brewery in Charlotte, NC with the Ascending Professional Forum for the 2019 Annual Meeting.
- Reviewed previously edited SOP templates for State and Regional Student Representatives to distribute at the 2019 Annual Meeting.
- Four students were selected to receive the $500 Developing Professional Forum Annual Meeting’s travel grant to help with their Travel expenses.

Items of Concern:
- We do not have a representative for Region I.
- No response from forum secretary

**Request for Action:**
None
<table>
<thead>
<tr>
<th>REPORTS TO:</th>
<th>Board of Directors</th>
</tr>
</thead>
<tbody>
<tr>
<td>REPORT OF:</td>
<td>Finance Committee</td>
</tr>
<tr>
<td>SUBMITTED FOR:</td>
<td>2019 Annual Board Meeting</td>
</tr>
<tr>
<td>PREPARED BY:</td>
<td>Debbie Shell, Chair</td>
</tr>
<tr>
<td>DATE:</td>
<td>June 8, 2019</td>
</tr>
</tbody>
</table>

**Activities of the Finance Committee**

The Finance Committee for 2018-2019, consisting of Debbie Shell, Chair; Roslyn McQueen, President; Cindy Johnson, President-Elect; and BOD members Beth Warning, Maddie Josephs, and Kristen Croom has reviewed the FY2019-2020 Budget, the FY2018 Audit and the FY2018 Form 990 Tax Filing forms. The audit and tax forms were prepared by Calibre CPA Group.

**Items of Concern:**

None

**Request for Action:**

- On behalf of the Finance Committee, I move that the ASCLS Board of Directors approve the budget prepared for FY2019-2020
- On behalf of the Finance Committee, I move that the ASCLS Board of Directors accept the independent auditor’s report from the consolidated financial statements of the American Society for Clinical Laboratory Science and Affiliates (a nonprofit organization), which comprise the consolidated statement of financial position as of July 31, 2018, and the related consolidated statements of activities and cash flows for the year that ended, and the related notes to the consolidated financial statements.
- On behalf of the Finance Committee, I move that the ASCLS Board of Directors accept the *Return of Organization Exempt from Income Tax* 990 form for FY2018 that was filed on behalf of ASCLS.
**Reports to:** ASCLS BOD  
**Report of:** Policy and Procedure Committee  
**Submitted for:** 2019 ASCLS Annual Meeting BOD Report  
**Prepared by:** Holly Weinberg, Chair  
**Date:** May 8, 2019

**Activities of the Committee:**  
**Committee Members:** Beth Warning, and Nadine Fydryszewski with support from Roslyn McQueen and Jim Flanigan.

The Policy and Procedure Committee of the ASCLS Board of Directors updated the SOP to reflect those amendments that were approved at the Interim BOD meeting on March 17, 2019. The updated version was posted April 29 on the ASCLS website.

**SOP updates completed:**
- Article XIII, Section B, item 1.a.1 of the Standard Operating Procedures (SOP) to provide an adequate time frame for identifying a new Editor in Chief or to reaffirm continuing appointment of the current Editor in Chief
- Article III, Section D, item 2 of the Standard Operating Procedure (SOP) to provide clarity and meet with current practice regarding membership dues processing for constituent societies
- Article IV, Section B, item 2.d. of the Standard Operating Procedure (SOP) to provide greater opportunities for individuals wishing to run for the position of Regional Director.

**Items of Concern:**
- None

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

Since the Interim report, the AMSC has worked with many of the speakers to refine their presentations and help make their sessions more interactive for the audience. We are focused on our goal of providing a new experience for our members which will allow them to personalize their own meeting and will facilitate active learning and increased networking opportunities.

The committee has also helped to recruit additional vendors for the meeting and promote the new vendor interaction opportunities.

We are working to help refine the new Wedbased system for managing the entire session proposal process. We will be using Cvent’s abstract collector and members of the committee are trying it out, giving feedback and helping to refine the process.

We are planning a Pre-Meeting in Charlotte for the current ASMC and the incoming ASMC members. We will use this meeting to introduce the new incoming members to the process and the team. Plus we will review our plan with the current members to take care of any last minute logistics and make sure we are prepared for success.

The goal is to ensure a successful meeting by:
- Reviewing the meeting together one last time and taking care of any last minute needs
- Making sure we have the moderators coordinated and assign committee members to check on each session just prior to it’s beginning.
- Give committee members ½ day assignments to be “on duty” to help with any unexpected events or issues that arise
- Prepare the Committee members help promote the interactive spirit of the meeting and get attendees engaged. Plus have them gather feedback, comments and suggestions as the meeting progresses for review prior to the 2020 meeting in Louisville

# Items of Concern:
None

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

✓ Zoom Videoconference calls were scheduled for March, April, and May, but we found that April and May calls had conflicts for many members, so we communicated by e-mail.

✓ The Omicron Sigma Awards and Keys to the Future online application process worked fairly well, although there were some complaints and some confusion as some leaders were unaware of the new process. The Awards Committee did extensive follow-up for OS, directly to the Constituent Society President and through the Regional Directors, to be sure worthy members were recognized. We will continue to refine the online Omicron Sigma submission process.

✓ We had very few nominations for Scientific Research and Theriot awards this year, and some of the applications were not as high quality as in the past.

✓ Thanks to the help of many members, nominations were judged, winners notified and asked to RSVP using the online form, non-winners were notified, and other awards were calculated. The Awards Committee coordinated with other Committees who provide awards and scholarships, and with the ASCLS Office. The compression into a shorter time frame complicated the process this year.

✓ The Awards Committee will be responsible for placing the certificates into the plaques this year. Ed Neren is no longer able to secure sponsorship, and we will assume the task.

✓ The following is the number of applications that were received this year. The previous year is in parentheses.

- Lifetime Achievement – 5 (4)
- Developing Professional Leadership – 4 (5)
- Ascending Professional Leadership – 6 (5)
- Website – 11 (12)
- Publications – 10 (9)
- Theriot – 1 (4)
- Scientific Research – 4 (3)
- Scientific Assembly Bio-Rad Professional – 5 (3)
- Constituent Member of the Year – 22 (29) members will be recognized
- Omicron Sigma – 697 (464) members will be honored
- Key to the Future – 54 (48) members will be honored
- Golden Service (50 year members) – 21 (18)

✓ Arrangements were made for a memorable Member Awards Ceremony. The Ceremony will be held on Tuesday, June 25, at 4:30 pm in Charlotte. Scott Aikey will be the Emcee.

Items of Concern: NONE at this time

Request for Action: NONE at this time
Activities of the Committee or Affiliated Organizations

Held teleconference March 12, 2019.
Reviewed ASCLS-IL Bylaws; did not approve, submitted for further revision.
Reviewed and approved ASCLS-MN Bylaws, with additional changes
Reviewed and approved ASCLS-MI Bylaws, with additional changes
Reviewed and approved ASCLS-MT Bylaws, with additional changes

Items of Concern:
Most constituent societies still have not submitted their bylaws for approval after the 2018 National Bylaws changes. Please remind your states that they have only two years to update their bylaws to reflect the National Bylaws changes.

Request for Action:
Activities of the Committee

CEPI met 6 times via Zoom during 2018/2019 year and communicated extensively via email.

CEPI had two main focal areas for 2018/2019 which we chose in fall 2018:
1) Continue to add to the modules in the ASCLS Laboratory Educators Institute (LEI)
2) Support the “Current State of the Laboratory Survey” written by Gerlach/Hoag at MSU to specifically assess Immunohematology, Medical Microbiology and Molecular Biology staffing and platform use in Medical Laboratories

We now have 4 modules within LEI available to educators. Ten other modules are under development, 5 of which were new proposals accepted this year by the committee.

The Current State of the Laboratory Survey was part of the keynote presentation at CLEC 2019. The distribution of the survey to gain reasonable laboratory manager/director participation has been disappointing and a stumbling block for this project.

In addition, part-way through the year Vice Chair deRegnier solicited and collected examples of Simulation Laboratories currently in existence in MLS programs and created an online posting of these activities with contact information for each. This was done to provide resources and guidance to aid those who may need to create simulation laboratories as a part of their educational programs.

CEPI sponsored two session proposals for CLEC 2020:
1) How to write SMART objectives to guide your students’ learning (Hoag and Robinson)
2) Simulation Laboratories in MLS Education: Best Practices, Models, and the Future (Ruskin and deRegnier)

Items of Concern:
None

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

Paperwork for relisting in PubMed was submitted in February 2019. We still do not have issues that look or feel like an electronic journal. It is my hope that APEX will assemble these issues as soon as possible. Based on the last phone call with Jim Flannigan in April 2019, APEX is working on putting together the PDFs and assembling the issues. The plan is to resubmit all PDFs back to the corresponding authors for proof.

CLS Journal has worked or is working on the following initiatives:

**Website and Journal access**

The journal website is now available to everyone and is functioning as an open access journal until the subscriber database is functional and enabled. There is no update on when this will be functional. There are still a few issues centered on the DOI and the “publish ahead of print” process.

**Acceptance and Rejection Rates for CLS Journal (June 1, 2018 - May 12, 2019)**

We have 89 submissions (including abstracts). Manuscripts assignment for review are averaging 10 days. The average time to review manuscripts is 38 days, with revised papers taking 104 days to complete the process from submission to acceptance. The journal has a 70.79% acceptance rate. This is somewhat higher than previous reports, however if abstracts are eliminated rates are in the 50-60% range. In summary authors are able to determine the complete decision and acceptance on their manuscripts in 40 days or less depending on revisions. This is appropriate and should help us remain competitive with other journals as our journal website and activities improve. There are 11 manuscripts in process. There are concerns that submissions are waning due to lack of PDF issues and PubMed listing.

**Presentations in Support of the Journal**

We presented “CLS Journal: Your Place for Articles and Enhanced Author Content” CLEC 2019, and have submitted an abstract for CLEC 2020, Publish or Perish: The need for scholarly activity in medical laboratory science.
Progress on Items of Concern

Jim Flanigan worked with the Perry Scanlan the EIC to complete the following items:

1. Resolve the XML file conflicts with Highwire and Cross-ref
   - Completed
2. Repaired Digital Object Identifier issues
   - Thought to be completed, but still some remaining issues in Publish ahead of Print
3. Completion of 2018 electronic journal issues with APEX
   - Still in progress
4. Submission of paperwork for Pubmed relisting
   - Paperwork for aim and scope, peer-review process, Conflict of interest, informed consent, animal care requirements, and human and animal rights statements were completed.
   - This is scheduled for pubmed review at their June meeting

In summary, the journal continues to request patience and understanding while we work hard to build a website and submission system that will carry the journal into the future. It is also appropriate to thank the board of directors, president, and executive vice president for giving us the tools to start competing with other publishers for high quality manuscripts. We are not quite there yet but with your continued support the journal will make ASCLS proud. Please continue to speak positively and consider submitting manuscripts to our journal.

Items of Concern:

1. APEX has not yet completed any actual issues for the 2018 or 2019 calendar year.

Some authors need PDF versions of their article in publishable form. Our “publish ahead of print” is a PDF of the word document is not sufficient for most universities or tenure committees. Authors need to examine the proofs and I cannot determine any areas we lack in the publications themselves until a draft is made. Progress is being made now that other issues are beginning to resolve. A time table for expected completion would be very helpful.

2. Address remaining issues with Pubmed to be relisted

This is a significant issue as we will not be getting the number of manuscripts we need if this is not corrected. This will remain a concern until we are relisted in Pubmed. While this is submitted for consideration at Pubmed's June meeting, there are concerns that not having actual issues from 2018 or 2019 will result in failure for pubmed consideration. There is not a solution to this problem at this time. Even if the PDFs were available in May, it is not likely that all proofs of these manuscripts can be
sent to corresponding authors and back to APEX in time to have them put together in issues.

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Activities of the Committee

- Held 2 conference calls
- Working on advertising, funding and pins for purchase at AM
- Awarded a DAC Travel Grant for an Ascending Professional to attend the AM
- Creating the Glenda Price Leadership in Diversity Scholarship (see RFA)

Items of Concern:
There should be questions on demographics (race, culture, LGBTQIA+, ethnicity, religion, education, etc.) on surveys and/or membership applications to identify the diversity of ASCLS.

Request for Action:
I move that the Board of Directors approve the transfer of $4,000 from the DAC escrow fund to establish, with the E&R Fund, the Glenda Price Leadership in Diversity Scholarship. Be it noted, as set forth in Attachment A (attached)
The DAC would like to establish the **Glenda Price Leadership in Diversity Scholarship** to be maintained, awarded and fundraised by the E&R fund according to the criteria below:

- Annual scholarship for a current Leadership Academy student to support attendance to Leg Day and their graduating Annual Meeting.
- Scholarship amount of $1000.
- To be marketed in the summer for fall/winter awards.
- Half the funds are to be used for travel/lodging/incidentals for the annual Leg Day in March of their LA.
- Half the funds are to be used for travel/lodging/incidentals for the Annual Meeting in June for their graduation from LA.
- The DAC will support this with $4000 contribution.
- Glenda Price will support this with $1000 contribution.
- Grading, acceptance, and awarding criteria will be developed and forwarded to the E&R Fund once complete.
Activities of the Committee or Affiliated Organizations

Summary of Activities since March 2019.
- Zoom conference was held on April 9th.
- Continued work on the BOK, RFP, website, and marketing of the DCLS.

Committee has 8 subcommittee work groups to address the goals for 2018-2019:

Sub-committee groups (each item corresponds to the official ASCLS DCLS charges):
- Certifications for DCLS – ASCP expects a timeline of approximately 3-5 years for development. Need to have at least 30 practicing DCLS to do a job analysis. RFP from the committee still in review.
- Potential institutions for DCLS programs – No updates.
- Development of educational and professional standards:
  - Body of knowledge subcommittee – under review.
  - Clinical Residency subcommittee – a draft of competencies has been developed and is under review.
- Communication with NAACLS – DRC scheduled to meet June 13-14th 2019
- Professional issues related to DCLS practice –
  - CLIAC met in April to discuss recommendations to CMS including establishing the DCLS as a degree for the CLIA medical laboratory director (CFR 42).
  - AAB reported a falsified DCLS degree used in an application for their HCLD certification.
- Facilitate and maintain standardization and certification of DCLS – This charge is addressed in a variety of subcommittees see above 1 & 2.
- Financial assistance for DCLS students – Recruitment of potential donors for a DCLS specific scholarship through the E&R fund is still on going.
- Marketing the DCLS – A draft of website content has been developed, interactive content and “testimonials” being discussed. Will be reviewed at Annual meeting.
• Reimbursement for DCLS services – this charge will be addressed through the professional issues related to DCLS practice subcommittee.

The following days are proposed for upcoming meeting dates for 2019:
6/23 1300-1500 in-person at the Annual meeting in Charlotte, NC.
Dates for 2019-2020 will be established at the annual meeting.

KUMC accepted their first class to start Fall 2019.

UTMB will have their first set of DCLS graduates in August 2019.

Items of Concern:
No new concerns at this time.

Request for Action:
None at this time.
1. **Introduction of Group(s) presenting the proposal.** ASCLS is a national professional organization that provides advocacy, standards setting, education (professional and continuing), personal and professional development for clinical laboratory science practitioners. The ASCLS DCLS Oversight Committee provides a means for DCLS programs to share resources including courses and faculty and input and expertise for the development of educational and professional standards. The Committee maintains ongoing communication with applicable accreditation and certification boards regarding DCLS Standards and facilitate the consistent interpretation of these standards globally.

2. **Name of group under consideration for a credential (e.g., practitioners of cellular therapy) with a description of the profession.** Doctorate in Clinical Laboratory Science. The DCLS is an advanced practice doctoral program requiring an entry level baccalaureate degree and national certification as a Medical Laboratory Scientist, MLS (ASCP)® as a prerequisite. The mission of the proposed DCLS is to prepare graduates for advanced practice in clinical laboratory science as a member of the inter-professional team approach to health care.

3. **Name of the proposed credential (e.g., Cellular Therapy Technician) and rationale for why the credential should be considered.** DCLS

4. **How does this credential benefit patient welfare?** With a plethora of clinical laboratory tests and new molecular methodologies being added to the clinical laboratory test menu, clinicians are challenged with keeping abreast of the latest in laboratory services. The DCLS will serve as a consultant, similar to the PharmD and other allied health professionals who take part in clinical rounding and patient care. Their contribution as the expert in clinical laboratory testing would benefit the clinician and other health care providers by promoting appropriate and cost-effective utilization of clinical laboratory services and maximizing patient safety by reduction of medical errors.

5. **Number of current U.S. practitioners in the field (based on membership in professional organizations and all other available data.)** One practitioner with ___ currently enrolled in DCLS programs ___ Programs located at:
   - Rutgers-School of Health Related Professions, Newark, NJ,
6. Is there international interest in this certification? If so, indicate number of practitioners outside of the U.S. ????

7. Number of practitioners entering the field annually (based on all available data). Suggest projecting number of graduates annually beginning in some future year.

8. Detailed description of body of knowledge required of all practitioners: In progress:

9. Are there recognized best practices guidelines, peer-reviewed collections of essential information and/or key textbooks that are regularly updated? In progress? Add Timeline.

10. Survey description and results of survey Add

11. Job Analysis – description of assistance that will be provided in completing a job analysis of the profession (e.g., providing e-mail list of practitioners, assistance in developing survey questions, etc.) In progress? Add Timeline.

12. Financial support – describe support that the group is willing to provide. As the newest terminal degree for laboratory professionals, and based on current interest from professionals as well as employers, we anticipate those seeking the DCLS credential will produce revenue in excess of costs.

13. Marketing – describe support that the group is willing to provide; identify key meetings and journals in the field; identify on-line networks: ASCLS pledges the full force of its abilities to promote and support the new credential, including the advocacy of its enshrinement in federal personnel regulations governing laboratories as well as state licensing laws and regulations. ASCLS already has provided prominent visibility via the Clinical Laboratory Science journal, ASCLS Today Newsletter, as well as the ASCLS Website and social networks.

14. Timeline for development of the credential Add

15. Information on formal training programs including accreditation body (e.g. NAACLS, CAAHEP, etc.), number of programs, sample curriculum, number of students. Summary

16. Any problems or issues that should be considered. Summary

17. Any regulatory issues affecting this practice. Ensuring that practitioners with this credential will qualify as Laboratory Directors under CLIA and within state licensing regulations.
REPORTS TO:        | Board of Directors
REPORT OF:         | Education and Research Find
SUBMITTED FOR:     | 2019 Summer Board Report
PREPARED BY:       | Louann Lawrence, Chair
DATE:              | 5-24-19

Activities of the Committee:

1. A total of $10,000 in scholarships will be awarded this year in memory of Bunny Rodak, Michele Kanuth and Edward Dolbey and in honor of Dan Southern.

2. Five ASCLS member grant and one Spradling graduate grant applications were received and reviewed by 5 trustees. Two $5000 member grants were awarded and one Spradling grant. Recipients of member grants: Tim Randolph from St. Louis University for "Effect of Exercise on Abnormal Baseline Biomarkers in Sickle Cell Trait" and Nadine Lerret from Rush University Medical Center for “Hyperglycemia-induced Inflammation via the CD27/CD70 Pathway.” The Spradling graduate student grant was given to Leah Ames from the PhD. In Health Sciences program at Northern Illinois University for “Reducing Medical Errors: Perceptions of Collaboration with a Doctor of Clinical Laboratory Science.”


4. Trustees met by conference call on April 18, 2019. Jim Flanigan reported that the silent auction at CLEC brought in $1839 and individual contributions to E&R added an additional $336. This additional income will be added to the general funds and allow us to give two member grants this year.

5. Trustees were informed of two potential new scholarships: Ascending Professionals Forum has committed $10,000 to establish the Cynthia Breen scholarship and the Diversity Advocacy Fund is in the planning stages of a scholarship in honor of Glenda Price’s mother, Dorothy Price.

6. Trustees are continuing to request the names of donors to the E&R fund so that we can send thank you notes. Jim is continuing to try to make this available to us.

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

3-17-19 GAC Meeting, Washington, D.C.
3-18 & 19-19 Legislative Symposium, Washington, D.C.
4-15-19 GAC Conference Call

### Legislative Update

Congress has been focused on the medical device excise tax and hearings on prescription drug issues. They want transparency in drug pricing. Congressman David Cicilline (D-RI) is interested in the workforce shortage issue and in introducing the legislation Patrick Cooney and ASCLS have been working on, the “Allied Health Personnel Shortage Act of 2019.” The hope is to introduce the bill the first week in May.

### Regulatory Update

**Workforce:** There was a significant focus on workforce at the Legislative Symposium in March. It was truly a grass roots effort and members are urged to keep in contact with their legislators back home and advocate on behalf of their profession. The CDC Thinktank continues to meet. The CDC is planning to attend the ASCLS Annual Meeting in June and will be conducting focus groups.

**PAMA:** Although there was a presentation on PAMA at the Legislative Symposium and the issue was discussed during our visits to Capitol Hill, there is nothing new to report. The Lab Coalition focused on trying to find a legislative solution to PAMA is in a holding position.

**Personnel Regulations:** CLIAC is in support of our stance on personnel regulation, particularly the educational background. They want the Physical Science Degree removed as an appropriate degree for a laboratorian. The CLIA regulations are outdated based on the technological advances seen in the laboratory these days. The American Association of Bioanalysts (AAB) is opposed to DCLS being allowed to be directors of high complexity labs.

### Items of Concern:

None

### Request for Action:

None
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<td>PREPARED BY:</td>
<td>Cathy Otto, Chair 2018-2019</td>
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<td>DATE:</td>
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There are no activities to report at this time.

Items of Concern:

None.

Request for Action:

None.
Activities of the Committee

✓ The committee met three times between the interim report and submission of this report to develop draft goals for ASCLS Communication and Marketing efforts.
  - Please note: these goals will continue to be refined and measurable objectives will be developed to accompany each of the goals.

✓ The current draft status of the goals is as follows:

Draft Communications Goal:

The Goal of the ASCLS Communications effort is to tell our story to patients, fellow laboratory professionals, other healthcare professionals, and the public.

To fulfill this goal, the following stakeholders must be engaged in the following manners:

- Patients
  - Evolve knowledge of the importance of laboratory professionals
  - Showcase the passion laboratory professionals have for their work
  - Facilitate patient safety through education and advocacy

- Laboratory Professionals
  - Evolve knowledge of the importance of laboratory professionals and ASCLS
  - Provide communication that will resonate w/each laboratory professional.
  - Share critical society functions with all laboratory professionals.
  - Demonstrate the passion ASCLS members have for the profession.

- Other Healthcare Professionals
  - Evolve knowledge of the impact laboratory professionals have on patient care
  - Highlight the important role laboratory professionals make in healthcare
  - Provide meaningful communication and collaboration that benefits patient care processes

- The General Public and Policymakers
  - Promote knowledge, awareness, and importance of laboratory professionals
  - Advance society positions and actions
  - Expand the workforce development through recruitment efforts
Draft Marketing Goal:

The goal of the ASCLS Marketing efforts is to expand the knowledge and reach of the ASCLS Brand to patients, fellow laboratory professionals, other healthcare providers, and the public.

To fulfill this goal, ASCLS will evoke the following perceptions of its brand:

- The feelings and emotions associated with being a member in ASCLS
- Continuity in the visual appearance of the ASCLS Brand
- Adoption of an appropriate tone that conveys our message effectively
- Promoting and harmonizing our identity

Items of Concern:

The committee would appreciate input and commentary on the current status of the committee’s proposed goals. We are especially interested in assuring continuity between the Board’s goals for the association and our proposed efforts.

Request for Action:

None at this time
## Reports to:
Board of Directors

## Report of:
Mentorship Committee

## Submitted For:
2019 Annual Board Report

## Prepared By:
Tim R. Randolph

## Date:
5/13/2019

### Activities of the Committee

1. **Meetings**
   a. Since the Interim Board Report the committee has met monthly as follows:
      1) March 8, April meeting was cancelled; could not find a common time for a committee meeting

2. **Mentorship Program**
   a. 31 mentor/mentee pairs were formed and continue
   b. Tim addressed questions from two pairs; all others are presumably going well

3. **Mentorship Materials**
   a. The committee was tasked to review all materials to revise for next year which has been accomplished
   b. Materials revised since the Interim Board Meeting includes:
      1) Final Evaluation Form, Program Applications uploaded to Survey Monkey, advertisement plan, advertisement text
   c. Tim is working with LDC (Kathy Doig) and LA (Mallory Janquart) to coordinate activities. The three of us met once since the Interim Board Report and we are planning our final meeting on May 21, 2019. Tim provided Kathy a list of modules that need developed to support the Mentorship curriculum.
   d. Committee was concerned about the lack of a policy to handle serious conflicts that could occur between mentors and mentees. Kristen brought this concern before the BOD and we were advised to investigate leadership materials. We reviewed these materials and they did not satisfy the concerns of the committee. Tim and Stephanie are planning to put together some bullet points to present to the BOD as seeds for discussion.

### Items of Concern:

Meeting attendance has been poor throughout the term. Committee was surveyed on three occasions at various intervals throughout the term and common times were identified but attendance remained poor.

### Request for Action:

The Mentorship Committee requests the BOD to extend the term of Stephanie Noblit as a Special Advisor to the committee through 2022.
## Activities of the Committee

1. Established and provided a question to the President Elect candidate for response at the National Meeting Issues Update.

## Upcoming Activities

1. Recruitment of candidates for the next election year.

## Items of Concern:
- Continued un-contested elections.

## Request for Action:
- None
Activities of the Committee (February 14, 2019 thru May 10, 2019)

Accomplishments:
1. **Products, Programs, Projects Completed:**
   a. Patient Safety Committee Member Orientation Program (completed by Education & Research (E&R) workgroup)
   b. Patient Safety Tips Brochures (completed by Product & Promotion (P&P) workgroup): Cardiac Biomarker (Provider), Reference Interval (Provider), INR Test Meter (Provider & Caregiver), Point-of-Care Use & Limitations (Provider)
   c. Three new products have been selected to be developed by the P&P workgroup for the 2019-20 year
      i. Drawing blood after transfusions (Provider)
      ii. Reference Interval (Patient)
      iii. Glucometer use/guidance (Patient)
   d. ASCLS Patient Safety articles written for LabTesting Matters (5 of 6 are complete and published)

2. **Patient Safety Committee Annual Review:** Annual evaluation of committee composition, structure, and function completed; revisions made to the PSC guiding document for the 2019-20 year; committee survey completed to assess PSC and provide suggestions for improvement

3. **Coalition to Improve Diagnosis (CID):** PSC interviewed by Society to Improve Diagnosis in Medicine (SIDM)/CID to allow publication of a spotlight article on ASCLS and Patient Safety involvement

**Workgroups & Patient Safety & Healthcare Quality Community:**
1. **PSC Workgroups:**
   a. Three active workgroups continue to meet monthly to achieve goals of the PSC - 1) Education & Research (E&R) 2) Products & Promotion (P&P) 3) Benchmarking (Benchmarking)
   b. PSC continues to meet every other month

2. **Patient Safety & Healthcare Quality Community – PSC continues to actively maintain this community including communication to Community and ASCLS Open Forum members through blogs and discussions, library resource documents; continue to market Community to ASCLS members**
   a. Community Membership: 117 (at the time of this report)

198-19 PSC Assigned Charges, Accomplishments & In-progress Actions:
#1 Continue to develop and revalidate existing patient safety tools and resources available through ASCLS and publicize their availability via appropriate media. During the revalidation, identify articles to support included information, and include that information on the Patient Safety page of the ASCLS website.
   a. Completed:
      i. Patient Safety Tip brochures (Refer to Accomplishments above)
      ii. Marketing of ASCLS and Patient Safety products to non-ASCLS groups through CID; revised organization of Patient Safety Tips to be easier to understand for non-laboratory professionals and/or groups
   b. In-Progress: Professional Communication educational product (for laboratorians & students); Revitalization of the ‘It’s Up to Me’ patient safety campaign; conversion of previous Patient
#2 Collaborate with other ASCLS committees as a resource for patient safety information  
   a. ASCLS Marketing & Communication Committee – PSC continues to serve on this committee

#3 Design, develop, publish and distribute new patient safety products as needed  
   a. Benchmarking Toolkit Workgroup: product development has begun and is in initial phases; toolkit components have been identified and initial quality measures are being formulated; has established a 6 month working timeline for the product
   b. P&P Workgroup: selection of 3 new products have been identified for the 2019-20 year; development will begin in July
   c. E&R Workgroup: initial assessment of the potential development of an Interpretive Comment library for laboratory professionals

#4 Continue to develop and provide patient safety resources to be used in clinical laboratory science curricula  
   a. Professional Communication Educational product - in-progress (E&R Workgroup)
   b. Patient Safety – Model Curriculum for MLS/MLT – in-progress (E&R Workgroup)

#5 Strengthen media response to patient safety issues and promote the value of the clinical laboratory profession  
   a. In-Progress: Develop program to enhance Patient Safety publications for ASCLS  
      i. Request has been evaluated and recommendations were submitted to the PSC 5/9/19
   b. In-Progress: LabTestingMatters (PSC is producing 6 articles [Jan-Jun] 5 of the 6 have been completed for this site; URL to view articles: http://www.labtestingmatters.org/category/ascls/
   c. PSC continues to publish discussions and blogs in the Patient Safety & Healthcare Quality community to share hot topics, new programs and offerings with this community and the Open Forum

#6 Evaluate new routes to patient safety committee initiatives (test utilization, chose wisely, harmonization, interdisciplinary approach/education for non-laboratorians, IOM reports)  
   a. PSC continues to monitor laboratory patient safety and healthcare quality organizations websites/articles for new movements, programs, etc. – information is published as blogs and discussions for the Patient Safety & Healthcare Quality Community and Open Forum
   b. CID Membership: PSC is attending coalition meetings to develop relationships with organizations in the CID to allow dissemination our patient safety products/programs through CID to member organizations and to determine potential new products that can be developed

Items of Concern:  
#1: Developing Professional committee members were not been assigned to the PSC (repeat concern from previous Board reports)  
   • We are aware of how massive the appointment process must be for the President-Elect, the Appointment Committee and the Board of Directors and wonder if our current standard process can be enhanced utilizing standard process and deadlines for State Society Leaders and Regional Directors to obtain DP and AP volunteers for committees prior to the beginning of the appointment process.

#2: Time involvement by PSC members to complete all assigned charges and to accomplish goals set by the committee and workgroups  
   • It is noted that the size of the committee was increased this year and that because of this more accomplishments for ASCLS has occurred through the year
   • With the increased accomplishments have come setting more goals and the committee is now concerned with being able to keep up this momentum. (from committee annual survey)
   • It is also noted that the professional workload for laboratorians has increased in the workplace which prevents meeting attendance and limits assisting with accomplishing goals of the committee.

Request for Action:  
None
Activities of the Committee

PAC donations were collected onsite at the Legislative Symposium, March 18, 2019, as well as onsite at various state meetings.

“Color of the year” PAC pins (white) were obtained and distributed along with bade ribbons to states for PAC donations received at the state level. (Donation levels for recognition were updated for 2019: $20 donation recognized with badge ribbon, $40 donation recognized with annual PAC pin, $300 total donation in one year recognized with Gold PAC pin, 3 consecutive years of $300 donations recognized with special pin.)

The “PACtastic Trophy” was awarded on an interim basis to Region IV for most donations through the Legislative Symposium. This traveling trophy will be brought back to the Annual Meeting, and will be awarded to the Region with the most total donations for the 2018-2019 year, as determined through the beginning of the 2019 House of Delegates.

Items of Concern:

None

Request for Action:

None
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<td>Katie Franz MT(ASCP)  PACE Chair</td>
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**Activities of the Committee**

The committee members continue to review submitted program proposals as requested and submit recommendations to the P.A.C.E.® Director.

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Activities of the Committee or Affiliated Organizations

- Since the Interim board call, the committee met over Zoom on March 25th and May 7th
- The App is available for download through Membercentric and was introduced to the committee members, but has not gone live to the entire membership due to the attached marketing campaign. Andrea shared how to navigate the app and its key features and there was some discussion and agreement about using the resource libraries to store the new products developed.
- Off The Bench Podcasts are now available for download through the Apple Store. Thank you to Julie O’Donnell who was very helpful in achieving this task. Activity since the podcast became available are in the table below. Sam Treutel and Lindsey Davenport-Landry developed two more podcasts—one with Dr. Kyle Riding and one for #LabWeek. Next steps would be to investigate purchasing higher quality equipment for future podcasts.
- Member Survey will be sent out to the membership before the national meeting at the end of June. Committee verified that there are no questions about the App in the survey so it can be sent out anytime. Some edits to the questions were made mainly in the area of the members’ CE needs and where they are getting them from.
- Professionalism modules has been tabled until we can verify whether the LDC is creating something similar so that efforts are not duplicated.

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<td>From MLS to PhD: An Interview with Dr. Kyle Riding had the most downloads in the last 30 days – 116</td>
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**Activities of the Committee:**

- Committee had its last meeting on May 21, 2019
- **Charge 1:** Representative to Awards Committee – Alice has sent out a second reminder to all state presidents about award. Getting some interest for multiple state participation in a community venture – will discuss at next committee meeting
- **Charge 2:** Continue to develop and update promotional tools – All members are tasked with looking at current state and determining where the needs are – also, looking at layout to make it more appealing and easier to find
- **Charge 3:** Demonstrate the value of the profession, other healthcare professions and to the public – Member from committee on the Marketing/Communication Task Force will continue to develop options for this charge.
- **Charge 4:** Promote patient advocacy to demonstrate value – Hope to utilize the Bench Connection to meeting this charge with articles and “stories” that will reach out to demonstrate value
- **Charge 5:** Utilize the ASCLS Blog “The Bench Connection” – Working on themes for the various months and guidelines for blog writers. Hope to have this wrapped up to be able to launch at the Annual Meeting
- **Charge 6:** Collaborate with Director of Marketing – MLPW products were developed and made available through the ASCLS website and store. Continue to bless our lucky stars that Julia is part of our group!!
- **Charge 7:** Annual Meeting Charitable Organization – Classroom Central is our project this year and there will be several options for constituency to participate. Just wrapping that up to be able to advertise to all meeting attendees
- **Charge 8:** Collaborate with other ASCLS committees to promote the profession e.g. National Science Event – Have met once with MaryAnn McLane who is writing an SOP for us. We will then have committee members come on board for the various areas that will need assistance, planning, procuring and PEOPLE for this event.

**Items of Concern:**

None at this time besides time

**Request for Action:**

None at this time
Activities of the Committee

- The committee has been working at developing a new curriculum and identifying resources needed to aid in this task. We have chosen a format for the new curriculum and are working at identifying new areas where we will need outside expertise.
- A revised application was created and sent out to the membership via help from the National office.
- 10 applications were received and offers to the incoming class have been sent out.
- Monthly conference calls are scheduled to ensure deadlines are being met and we are progressing in our curriculum updates.
- Check in calls are also scheduled just to touch base in between larger meeting to make sure everyone has the resources they need.

Items of Concern:

- With the overhaul to the curriculum, the committee views the updates that need to be made as a phased process. We will continually evaluate if certain topics are working and if additional topics need to be added. A new and elevated Leadership Academy will take some time to develop.

Request for Action: None
Activities of the Committee:

- Met via Zoom: 3/20, 4/18, scheduled for 5/29
- Developing additional documents needed to support authors and committee members as we embark on development of first leadership modules. Lynda Britton and Michelle Campbell have taken the lead on these documents to be finalized at upcoming meetings. (Charge 2)
- Carol Rentas and Kathy Doig are in conversation with Connie Mahon for development of a mentorship module. (Charge 2)
- Carole Rentas (also on the Product Development Committee) is in conversation with Cathy Otto regarding a module on professional identity that may mesh with the PDC module on professionalism. (Charge 2)
- Chair Kathy Doig is scheduled to meet again 5/21 with Mentorship Committee chair, Tim Randolph, and Leadership Academy chair, Mallory Janquart, to continue discussions on ways to work together. It was suggestions from their committees that focused the LDC on its first two module topics. (Charge 2)
- Solicited Key to the Future submissions (Charge 5) using various announcement means developed in consultation with Julia O’Donnell. This included asking Regional Directors to help us. Thanks to the BOD for that help. We were late in starting this as compared to prior years, as we were focused on Charge 2. In the end, 54 members were submitted for honor from 26 constituent societies. The committee plans to poll societies that did not submit to understand better the reasons. At least 2 indicted that they had no one to nominate. We want to understand this better and perhaps develop some recommendations to help states in the identification and selection process.

We encountered some bugs in the on-line submission system. Jim corrected some before we began advertising but it appears we still have some issues to correct before next year. Will work with Jim on that.

- Invited Julia O’Donnell to the April meeting for advice on Charge #3: Develop ways to demonstrate the return on investment for membership/activity in ASCLS: how involvement can translate into the development of leadership skills that can be used to advance in the workplace. A plan was developed to collect
testimonials at the annual meeting that can then be used in various on-line formats (website, social media, etc) and excerpted for print, like ASCLS Today.

We also discussed with Julia Charge #6: Work with the marketing staff for developing a plan and schedule to feature these new leaders (Key to the Future). Since the number is large, as compared to Voices Under 40, the coverage will be more modest, but coverage in ASCLS Today and on the web are planned. We will need to solicit photos and a sentence or two about each candidate. Also, the committee plans to send the list of honorees to the president-elect for possible committee appointments.

• Charges 1 and 4 were previously completed, so we have addressed or are in process on all 6 charges for 2019-20.

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<th>Items of Concern:</th>
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<th>Request for Action:</th>
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</table>
REPORTS TO: ASCLS Board of Directors, Claude Rector Board Liaison  
REPORT OF: Scientific Assemblies  
SUBMITTED FOR: 2019 Summer Board Report  
PREPARED BY: Susan Stalewski, SA Coordinator  
DATE: 6/13/2019

<table>
<thead>
<tr>
<th>Activities of the Committee or Affiliated Organizations</th>
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<tr>
<td>Serves to provide expert consultation and technical reviewers for such areas as examinations, conventions, continuing education, etc. in discipline-related areas.</td>
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**Activities and comments of SA Coordinator in bold. March 2019-June 2019**

- Promote the use of the online Scientific Assembly Communities to foster involvement. *Increase in activity is evident, most communications are via the general forum vs. specific SA sections*
- Collaborate with the SA Chairs and others e.g. constituent society presidents, to increase the number of nominees for the Professional Achievement Award from EACH Scientific Assembly. *Submitted awards for Education, Chemistry, Immunology/Immunoheme, Hematology/Hemostasis (received 2 for Hematology/Hemostasis). Fab 5 intended to submit but missed the deadline. This represents one more award than 2018*
- Collaborate with the SA chairs to facilitate ways to empower our members to provide clinical laboratory science expertise. SA members participated in the Body of Knowledge (BOK) meeting at CLEC 2019 and reviewed BOK documents for generalists and molecular diagnostics and additionally were asked to provide input to BOK reviews for administration, immunohematology, immunology. SA members participated in requests for feedback for Choosing Wisely recommendations and CLSI. The SA leadership and Body of Knowledge Committee will meet jointly at the ASCLS Annual meeting on 6/23
- Monitor activities of Scientific Assembly/member community. The chair participates in all SA communities and has recommended postings to specific SAs related to BOK review, CLSI review/input requests, Choosing Wisely input and specific technical feedback requests
- Identify and assist any Scientific Assembly that may require help in strengthening activities and developing a plan for communicating and engaging members. Some SAs routinely communicate specific SA content, other requests for expertise and input come through the open forum. The FAB5 chair was not originally communicated to me following the 2018 annual meeting. I have since been in touch with Kristi Enerson
- Appoint a Scientific Assembly representative to the Awards Committee to coordinate the awards process, no later than August 1. Coordinate awards process with the Awards Committee. *Did not do this – will definitely make this appointment in 2019*

**Specific SA Chair Activities to date: March 2019-June 2019**

**Chemistry/Urinalysis Chair: Gerald Redwine**

- Submitted monthly technical questions to SA community
- Submitted nomination for Biorad award
Microbiology/Public Health Chair: Marcia Firmani

- Will elect a new vice chair at the 2019 annual meeting

Fab Five Chair: Kristi Enerson

1. There are currently 2086 members of this scientific assembly.
2. There have been 24 postings on the ASCLS Community for the Fab 5 (compared to 42 for the previous year and 9 the year before that). This years postings included 21 responses. The postings with the most responses included the following topics:
   - Transgender Patient Identification
   - BOC Requirements and Validation
   - Gram Stain Competency
   - Instrument Printouts and Worksheets
   - POCT Competency Assessment Software
3. ASCLS Patient Safety Committee had requested guidance from the Laboratory Administration/Consultant/Quality/Accreditation/Industry Scientific Assembly members on a potential new patient safety product. The survey deadline was January 19, 2019.
4. Kristi Enerson, Chair and Brandy Gonsolus, Vice-Chair working on developing an agenda for the Monday, June 24, 2019 SA meeting at the Annual meeting. A new Vice-Chair will be selected.

Immunology/Immunohematology Chair: April Nelson

No report

Hematology/Hemostasis Chair: Toula Castillo

No report

Generalist Chair: vacant

No report

Education Chair: Floyd Josephat

Activities of the Committee or Affiliated Organizations

- Coordinated posters and case study reviews with vice chair for annual meeting 2019
- A total of 7 abstract were reviewed and 6 were accepted for the annual meeting 2019
- Had over 6 volunteers to help review abstracts
- Various email communications with Melanie Giusti, ASCLS Staff
- Contacted Cheryl Caskey about submitting an article for the June ASCLS TODAY Newsletter.
- Various communications with Tera Webb, ESA Vice-Chair

Vice Chair Report

Abstract Submitted:

- There were a total of six posters accepted for poster consideration. Two of which were oral
- Oral: Evaluation of Fecal Calprotectin Testing in the Diagnosis and Management of Inflammatory Bowel Disease
- Oral: Cost-Effectiveness of LAMP Test for Molecular Diagnosis of Human Schistosomes
- Multiple Parasite Infection Detection in Pregnant Women from Ghana
- Disinfection Practices Used in the Student Respiratory Therapy Laboratory: A Clinical Lab Perspective
- Impact of CLSI Breakpoint Changes on Bacterial Resistance
- Centrifugation Validation of the Drucker APEX 24 Centrifuge Relative to the Eppendorf 5702 using Chemistry and Coagulation Analytes
• Each abstract had two reviewers, one of which was from the E&R committee.

Case Studies Submitted for Competition:
• There were a **total of two case studies submitted** for competition
  1. Is Nocardiosis more severe in the Immunocompromised?
  2. Complications- Death: A Case Study Review of a Thoracoabdominal Aneurysm Repair
• Each case study had two reviewers
• Winner of the case study competition was, Kendra Johnston of Baptist Medical Center, Jackson, MS, School of Medical Laboratory Science. Title: Complications- Death: A Case Study Review of a Thoracoabdominal Aneurysm Repair; A Case Study Report
• *Winner will receive a $500.00 check*

Research Papers Submitted for Competition:
• There were no research papers submitted for competition

Report of: Committee on Educational Programs and Initiatives (CEPI), a sub-committee of the ESA

**Committee**
Committee members include Mike Bishop, Daniel deRegnier, Cindy Handley, Kathy Hoag- chair, Joan Polancic, Cathy Robinson, Melanie Giusti, Floyd Josephat and Tera Webb

**Committee Activities:**
• CEPI met 6 times via Zoom during 2018/2019 year and communicated extensively via email.
• CEPI had two main focal areas for 2018/2019 which we chose in fall 2018:
  1. Continue to add to the modules in the ASCLS Laboratory Educators Institute (LEI)
  2. Support the “Current State of the Laboratory Survey” written by Gerlach/Hoag at MSU to specifically assess Immunohematology, Medical Microbiology and Molecular Biology staffing and platform use in Medical Laboratories
• We now have 4 modules within LEI available to educators. Ten other modules are under development, 5 of which were new proposals accepted this year by the committee.
• The Current State of the Laboratory Survey was part of the keynote presentation at CLEC 2019. The distribution of the survey to gain reasonable laboratory manager/director participation has been disappointing and a stumbling block for this project.
• In addition, part-way through the year Vice Chair deRegnier solicited and collected examples of Simulation Laboratories currently in existence in MLS programs and created an online posting of these activities with contact information for each. This was done to provide resources and guidance to aid those who may need to create simulation laboratories as a part of their educational programs.

CEPI sponsored two session proposals for CLEC 2020:
1. How to write SMART objectives to guide your students’ learning (Hoag and Robinson)
2. Simulation Laboratories in MLS Education: Best Practices, Models, and the Future (Ruskin and deRegnier)

**Phlebotomy Chair: Estelle Ninneman**
• Sent welcome e-mails to new Phlebotomy Scientific Assembly members monthly
• Created a Phlebotomy Highlight section in the Phlebotomy SA community to showcase the important work of the specimen collector
• Submission of ASCLS Today article

Molecular Diagnostics Chair: Rachel Alexandeer
• Submission of ASCLS Today article (by Josh Pulido)
• Post showing Universities which offer Molecular/ Lab Career programs
• Discussed/ Introduced LabRoots.com to SA for additional training/ CE credits
• Would like to:
  - Create a study guide for Molecular (perhaps other) ASCP test
  - Inquire about Texas Tech University expansion of student internship sites

Point of Care: Stephanie Mihane
Seeking a new chair to complete the 2018-20 term

Informatics: Shashi Mehta
No report
Will elect a new vice chair at 2019 annual meeting

Items of Concern:
SA coordinator:
1. Encountering lack of response from several SA chairs. Will work to facilitate consistent and timely communication among SA chairs and chairs with their communities
2. Generalist SA chair/vice chair positions are vacant
3. SA chairs indicate a need for better notification of due dates and duties. Will investigate a shared calendar with auto notifications (unless ASCLS has something like this in place or planned)
4. The chair notes some lapses in communication in this year (note lack of reports for the march-June time period) and plans to improve this (see also item 4)
5. Would like to identify SA leaders in each state and do not have a strategy for working with leadership in states regarding scientific assemblies. State by state email does not seem scalable or sustainable.

Request for Action:
None
Activities of the Committee or Affiliated Organizations
The Body of Knowledge Committee submitted the Immunohematology and Administration documents to the Scientific Assemblies and uploaded them to the Open Forum for membership feedback. A few responses were received, but far fewer than we really need for a robust review of the documents.

**NO** final feedback was received on the General Practice, Immunology, and Molecular Diagnostics documents. These will be finalized and submitted to the Board for approval and the annual meeting.

Next steps are to update and revise the Immunohematology and Administration documents for presentation in a working session at the annual meeting. Feedback will be gathered and processed into the documents.

The Microbiology document requires significant revisions due to the tremendous amount of change that has occurred in this practice area. We hope to assemble a team of microbiologists specifically to review and edit the document during the summer.

More feedback is also needed for the Immunohematology document

See Request for Action below:

**Items of Concern:**
Significant lack of engagement from the general membership and from the scientific assemblies to help update and revise these documents.

**Request for Action:**
We request that the Board ask for specific volunteers to help the committee with each section of the BOK.
We recommend that there should be 5 members for each topic area from a variety of employment backgrounds to provide a breadth of input necessary for these document.
<table>
<thead>
<tr>
<th><strong>REPORTS TO:</strong></th>
<th>Board of Directors</th>
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<tr>
<td><strong>REPORT OF:</strong></td>
<td>ASCLS Newsletter</td>
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<tr>
<td><strong>SUBMITTED FOR:</strong></td>
<td>2019 Annual Meeting Board Report</td>
</tr>
<tr>
<td><strong>PREPARED BY:</strong></td>
<td>Chery Caskey, Editor</td>
</tr>
<tr>
<td><strong>DATE:</strong></td>
<td>May 10, 2019</td>
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**Activities:**
- Backlogged articles from the period during which the newsletter was not published this year were published.
- Content was solicited and submitted for scheduled issues.
- Editor served on the Marketing and Communication Committee—subcommittee of committee was appointed and will utilize committee discussions and material to develop a modified approach to the newsletter content during the 2019-20 year.
- Eight issues scheduled for the 2019-20 year.

**Items of Concern:**
None

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

Received and distributed the February 2019 edition of the IFBLS Newsletter and it included:
- IFBLS President, Past-President and President-Elect attended the 144th Executive Board meeting for the WHO
- 2019 Membership fees reminder
- Call for IFBLS Scientific Network of Experts
- Seeking volunteers to a Congress Advisory Group
- International BLS Day April 15, 2019
- Alternate CAD/CD meeting 13-15 September 2019

Announcement of the IFBLS Britta Karlsson Advancement Program

**Items of Concern:**
None

**Request for Action:**
None
<table>
<thead>
<tr>
<th>Activities of the Committee or Affiliated Organizations</th>
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<tr>
<td>✓ The CCCLW Steering Committee met by conference call in May and the entire CCCLW met in March, and will meet on June 10, 2019.</td>
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<td>✓ The <a href="#">CCCLW website</a> continues to be updated as content is received. The <a href="#">Laboratory Science Careers website</a>, which was launched in early December 2018, will be updated by ASCLS member Joshua Cannon, who was a member of the design team.</td>
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<td>✓ CCCLW continues to look for ways to market their two websites, and member organizations will be asked to describe what they have done to promote them.</td>
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<td>✓ Chair Susan Morris continues to work to engage the participating organizations in CCCLW, and to gather some ideas for the future direction of CCCLW. Please see the two questions in the Request for Action. These questions will be discussed on future CCCLW calls.</td>
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<th>Request for Action:</th>
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<tr>
<td>I move that the ASCLS Board of Directors provide guidance to the CCCLW as to the following questions:</td>
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<tr>
<td>• What does ASCLS see as the number 1 priority to impact the workforce shortage?</td>
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<tr>
<td>• What does ASCLS want to see from CCCLW in the coming year?</td>
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Activities of the Committee or Affiliated Organizations

The NAACLS Board of Directors met on April 25, 2019. The following items were addressed:

- All accreditation action taken by RCAP and PARC are found on the NAACLS website. Of note RCAP and the BOD approved the accreditation of 5 new programs (1 MLS, 3 MLT, 1 PathA). There were 9 voluntary withdrawal of accreditation (1 MLS, 6 MLT, 2 HT). PARC and the BOD approved 4 voluntary withdrawal of accreditation (1 CA, 3 Phleb).
- The NAACLS BOD delayed the election of replacing the ASCLS representative (Bill Hunt) because candidates had not been submitted. NAACLS currently has the submissions. The NAACLS BOD will hold the election after the Nominations committee meets.
- There has been turnover in the office. NAACLS is reorganizing the work and is expected to hire a replacement.
- NAACLS is accredited by the Council for Higher Education Accreditation (CHEA). Two reports to CHEA have been submitted. The 6 year interim review and a 2nd report in response to new CHEA standards adopted in September 2018.
- Indigo Interactive and NAACLS continue to work on the AMS (Accreditation Management System). A joint war-room testing session has occurred. No launch date has been set.
- NAACLS has an AMT Recognition Task Force to assess if NAACLS should recognize AMT certification for Program Directors.
- **NAACLS has received its first Doctorate in Clinical Laboratory Sciences (DCLS) preliminary program report for review.**
- In 2018 the turnover of NAACLS approved Program Directors was 13%. This is the second year in which turnover is above 10%. This has created a challenge to NAACLS to increase professional education opportunities for program officials and program volunteers.
- The NAACLS internal process for monitoring that all programs post or make outcomes accessible to the public is ongoing. This is a CHEA requirement. It appears that the monitoring is a factor in increasing compliance by our programs. This year NAACLS is checking the compliance of all 600 plus programs.
There are two future Workshops planned: November 8, 2019 in Chicago with a topic covering preparing for accreditation: standards, self-study and the site visit. Another workshop (topic to be determined) will be held February 27, 2020 in Orlando Florida prior to CLEC.

The NAACLS booth at CLEC in Baltimore was a success and will be repeated in Orlando.

**Items of Concern:**

None

**Request for Action:**

None
**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 HPN Board Meetings. I continued to serve as HPN’s Treasurer and Finance Chair until Dec 31, 2018. As of Jan 1, 2019, I was elected to serve as President of HPN.

I represented ASCLS at the following Health Professions Network (HPN) Summits:

The HPN continues to work with national stakeholders in the series of Summits being held. The theme of the HPN Spring Summit was “Industry Impact on Healthcare & the Workforce” which was held April 2-5, 2019, in Cincinnati, OH. (Please see attached for summary and links.)

The HPN hosted the “Association Summit,” 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. Additional work was done to develop the summary. (Please see attached HPN State of the Industry white paper)

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 Competencies 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 2019-2020**

<table>
<thead>
<tr>
<th>Fall 2019, Oct 1-5, 2019</th>
<th>Albuquerque, NM</th>
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<td>Spring 2020, TBD</td>
<td>TBD</td>
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**Request for Action:** None

**Rationale:** N/A

*If you need access to the HPN Summit Presentations, please contact Dan Olson at Dan.Olson.Aloha@comcast.net*
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...

- opportunity & diversity? (6)
- actionable data? (7)
- better-fit students & employees? (8)
- job security... (9)
- 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.


Competencies would facilitate

1. Foundational quality assurance
2. Recognition of qualifications
3. Better workforce supply information
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.

Competencies would facilitate

4. Greater opportunity
5. Greater diversity
6. Future quality care
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 policy makers 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?
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

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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, CAA-HEP, 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.

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.
Kicking off the HPN Spring Meeting 2019, Mark Dalpiaz (area sales manager, OnShift), discussed root causes behind the healthcare workforce shortage currently impacting senior care providers, and what lessons allied health professionals can take from outside industries to approach this pervasive problem.

OnShift is a company focused on providing healthcare organizations software applications and other technological solutions to address the impediments they are coming up against in their recruitment, retention, and employee engagement efforts. Understanding the fundamental challenges borne out of a changing healthcare workforce is a critical first step to finding feasible solutions to those challenges. Mark’s presentation began by thoroughly painting a picture of the current workforce struggles across the allied health professions, after which he explored strategies, which can be applied by providers and their organizations to anticipate change, and meet these workforce obstacles.

The following are detailed, free-form notes, though not an accurate transcript, from the presentation:

Current low unemployment rates present a crisis for healthcare providing organizations, as they increase competition between organizations vying for the same pool of qualified applicants. In addition, the complications of a low unemployment rate are compounded by increased scrutiny from both potential applicants searching for fulfilling, long-term jobs, and patients, who are invested in the quality of the experiences healthcare professionals deliver to them on a daily basis.

One of the traditional organizational responses to staff shortages is offering voluntary overtime, which exacerbates the workforce issue by:
1. Making it more difficult to expand the organizations/services offered because of stagnant staff numbers
2. Forcing the organization to delay admissions for potential clients and patients due to staff shortages
3. Increasing complaint rates among staff who feel overworked and patients who feel their needs are not being met, and
4. A greater degree of staff turnover

In terms of financial impact that these responses and effects have on healthcare organizations, Mark noted that “6% of an organizations budget is overtime costs,” which translates to about $350 – $640 thousand annually on average.

Industries both within and without healthcare have been adapting innovative strategies for staffing and labor management, finding new methods to approach and retain staff, and creating and implementing software that automate hiring and retention processes, so that current staff and newly on-boarded staff have a higher likelihood of being maintained by an organization throughout their careers.
All of these tools and strategies require an awareness of who exactly comprises the upcoming workforce. In senior care specifically, 78% of new hires are millennial, yet despite this composition “only 35% of employers have expressed changes in their approach to onboarding and recruitment processes.” This emphasizes that the labor force is not being “met” in the virtual and actual environments where they currently exist.

Examples from outside healthcare where organizations have successfully changed their approach to attract and retain new talent include:

1. **McDonalds “Snaplication”** – McDonalds used a Snapchat® filter to gather 10-second video applications from young people interested in working for the company.

2. **“Play Time”** – Many companies have begun developing opportunities for individuals and consumers to actively engage with branded materials, through games, quizzes, and the like, which places consumer experience with the brand at the forefront of their brand “knowledge.” The more positive the experience, the more likely the consumer/clients are to engage with the brand in their daily lives.

3. **General Electric’s “Owen” ad campaign** – GE sought to change the perception in the workforce and general public that they were merely a company that developed consumer products. With this ad campaign, they tried to emphasize the more technical/digital aspects of their work in order to appeal to a new group of potential applicants interested in jobs that are sustainable, enjoyable, purposeful, and based in technological innovation (i.e. recent STEM graduates).

4. **Hashtag Campaigns** – Numerous brands have employed hashtag campaigns on Twitter, Facebook, and Instagram to keep their company at the forefront of peoples’ minds. These are a great way to facilitate interaction between organizations and individuals (both consumers/clients and potential staff), by utilizing a platform that promotes dialogue, commentary, and individual perspectives, in addition to providing information. ([Here is a list](#) of successful hashtag campaigns from the past few years.)

While a 10-second video, branded games, or a (probably expensive) re-branded ad campaign may not be appropriate or feasible for healthcare organizations, these approaches still offer insights for the allied health professions’ workforce: experimentation, creativity, and using platforms/tools that potential hires and clients are familiar with is an effective strategy for attracting new talent to your organization.

Notably, some form of social media is present in each of these innovative approaches. This is not surprising given social media’s ubiquity in our daily lives.

Other effective strategies for battling the workforce crisis in healthcare include the use of referrals, which are useful for reaching passive job seekers; looking outside the industry towards professionals who may have overlapping skills; making applications simpler (1 – 2 minutes), so that they act as an introduction to candidates to get the conversation moving, rather than an evaluation of candidates to make a decision whether or not to hire them; and text-based recruiting to simplify the logistics of interviews etc., and improve the immediacy of response.
Hiring for an organization's unique culture is likewise critical for effective retention. This requires that employee feedback be captured, and it should be demonstrated to employees how their feedback is being put to use. This demonstration validates employee contributions, as do incentive drives, improved recognition within the organization, and the creation of new leadership roles for “star” employees.

Maintaining employee contact for the first 90 days of employment improves retention rates. This time should be used to clarify the operations of staff’s “daily life” working for the organization. Prioritizing engagement, as well, with small gifts, welcome letters, and allowing paperwork to be taken care of online prior to the first day of on-site work improves retention rates.

Finally, mentorship and training are standard practices, which improve the retention of staff. This allows organizations to more clearly define potential career tracks, identify measurable goals, identify work preferences for employees, and align staffing to daily targets (e.g. ratings from clients and supervisors).
HealthForce Minnesota—Valerie DeFor & Anthony Schaffhauser

Valerie DeFor (Executive Director) and Anthony Schaffhauser (Director of Workforce Development), discussed what HealthForce Minnesota is doing within the Minnesota state system to identify “Centers of Excellence” and close the skills gap between current education programs in healthcare, and the immediate needs of a growing healthcare sector.

HealthForce Minnesota works to coordinate efforts between students, educators, and industry partners in order to meet the needs of both stakeholders and patients in healthcare. Pipeline development and strategically formulated curriculums are the methods with which they are seeking to change Minnesota’s healthcare landscape.

The following are detailed, free-form notes, though not an accurate transcript, from the presentation:

As we look into the next decade, Minnesota’s healthcare sector is growing at a rate of 3.2% annually, and there is a 65% skills gap between the current healthcare student population, and the jobs that are going to require secondary education and/or additional certification requirements. Right now, HealthForce is working with around 375,000 students at 30 colleges and seven universities.

Establishing “Centers of Excellence,” Healthforce seeks to identify community education and health centers that will be capable of driving innovation in the years to come.

Engaging employers in the education-focused work that HealthForce delineates clearer professional pipelines for students who are entering into the job marketplace. An example of this coordination is the Health Industry Executive Partnership Committee (HEIP), which has met once a quarter for the past 21 years in order to “identify and addresses a broad spectrum of healthcare workforce challenges.”

The Clinical Coordination Partnership (TCCP) is another example of fostering a more clearly defined relationship between industry partners and students looking to enter the healthcare workforce. TCCP began as a pilot program in 2008 with a focus on scheduling clinical experiences for Registered Nursing students. Today it is a membership organization involving 64 hospitals and about 55 schools to streamline the necessary hands-on clinical training needed to enter the workforce. It compiles scheduling data into a single location, so that “what once took hundreds of phone calls and emails can now be accomplished with relative ease online.”

HealthForce has also worked in curriculum development for nursing programs, identifying the appropriate skills pathways, making video tools/resources available for NA or NP training, and designing “a practical nursing program,” which can be accomplished by the end of high school.

The Healthcare Core Curriculum is a foundational course that sets the stage for entry into any healthcare career. The impetus to this programs creation was a desire to give high school students the resources and education necessary to immediately seek either further education or work experience. Over the past two years, this program has grown from 20 – 70 high schools, and has become a forum of sorts for employers to interact with an upcoming pool of healthcare professionals. (An example of this is the hospital CEO who has taken on the responsibility of teaching this core curriculum to high school students, on-site at a hospital in Minnesota.)
The “Scrubs Camp,” initiated in 2008 at Winona State University offers students the chance to work with professionals directly, getting a sense of the daily operation in a wide variety of healthcare jobs. With a 50% scholarship rate, and about 900 students, the camp focuses on reaching potential future employees with diverse backgrounds, interests, and educational/professional paths. A main benefit of this program has been “emphasizing possible healthcare careers outside of ‘doctor’ or ‘nurse.’”

Taking this emphasis on direct care experience for young students, HealthForce’s Senior Care Campaign involves nursing homes and assisted living centers who invite the community into their campuses on a regular basis in order to present an accurate idea of what working in this healthcare setting demands.

All of these programs and initiatives demonstrate the efficacy of broadening student horizons/perceptions of what healthcare professions entail and require. By opening the door to new professional possibilities in the minds of Minnesota high schoolers, HealthForce is working to ensure a sustainable, diverse, and educated workforce with the skills to succeed in the changing healthcare environment of the next decade.
AI in Healthcare: Project Survey – Matt Wortman

Matt Wortman (Portfolio Manager Digital Health and Care Delivery, Cincinnati Children’s Innovation Ventures) is a molecular biologist by trade who is interested in the continued commercialization of healthcare provision and innovations.

His presentation emphasized the successes and limitations of artificial intelligence in the healthcare space, focusing on the ways in which, healthcare professionals can use AI as a tool to augment their expertise, precision, and accuracy when delivering care.

The following are detailed, free-form notes, though not an accurate transcript, from the presentation:

There are numerous examples of artificial intelligence in healthcare and in our daily lives. This technology is constantly evolving to meet more specified needs, making it both more useful, and more accessible as we become more accustomed to its presence and functioning.

Electronic Health Records (EHRs) are an example of AI that has multiple variations within a specified area. As they continue to be developed/honed, their “value,” defined both monetarily and in terms of how they impact care, is being evaluated in relation to their utility to healthcare professionals.

EHRs have two basic requirements in order for their utility to be emphasized. They must 1) reduce “screen time” when interacting with patients, and 2) be sought after by professionals, so that their use becomes standard practice in the industry.

Many “big players” (i.e. Apple, Microsoft, Google, Haven, etc.) are entering the healthcare AI market, anticipating that the use of AI is only going to increase. The FDA is reacting to this movement by offering precertification of “software as a medical device.” Increasing competition in this space is going to force clunkier, less effective technologies to “either innovate or get out.”

Part of what’s compelling these large companies to enter the healthcare space is the development and collection of increasingly complex data, in increased amounts (e.g. genomic information, telemedicine ventures, Bluetooth thermometers, etc.). The collection of data is being outsourced to connected devices at the hands of individuals, rather than the research and treatment settings where healthcare professionals have traditionally been responsible for collecting this information.

Clinical decision support, such as dose algorithms, “rules-based” decision-making, and more, is moving closer and closer to becoming an automated process.

Across all types of AI – patient-facing information, telemedicine, doctor-facing assistance, and research AI – the tools and solutions that AI facilitates should be thought of as a “spell check” rather than a replacement for professional competencies or processes. This is in part due to the fact that defining what “intelligence” means in a technological context is a much more subjective task, and has not yet been clearly outlined by the technology developers, or healthcare professionals in their specific contexts.
An example of this is that machine learning technology is only valuable if it is fed good data. (“A program that has been taught to identify numbers in individual handwriting will not be equipped to do so correctly a significant percent of the time until it has been shown the handwriting from a representative portion of the population.)

Connecting AI more directly our healthcare system’s needs – in terms of systems, processes, organizational structures, and patient needs (i.e. desired outcomes) – is the next step in artificial intelligence.
Duane Rohr (Manager, CVS Health Workforce Initiatives) shared his experience as the person responsible for designing and implementing workforce initiative programs, which “provide employment services and training to underserved communities.” Working with a wide variety of community-based organizations, healthcare institutions, business leaders, and individuals, Duane delved into the fiscal impetus, workforce shortage solutions, and broad social/societal impact with which these programs are founded.

The following are detailed, free-form notes, though not an accurate transcript, from the presentation:

Focusing on increasing diversity in the workplace, CVS makes trips into communities to act as a liaison between various communities’ needs, and CVS’s hiring needs. This is done in an effort to align these considerations such that CVS’s hiring and recruitment programs have the largest social impact.

Thus far, there have been a number of federal acts, initiatives, and partnerships that buttress CVS’s own efforts and successes:

1. *Welfare Reform Act* – This has transitioned over 100,000 individuals to date from welfare and the use of social programs, to sustained employment and independence.
2. *Workforce Investment Act* – CVS has worked to create “one-stop” career centers, where individuals can not only receive the necessary skills and training, but also achieve employment upon the completion of specified programs.
3. *Jobs for the 21st Century* – Under this initiative, CVS has fostered numerous business-education partnerships (technical centers, externships, etc.), and awarded $1.7 million through a healthcare apprenticeships grant.
4. *Office of Faith Based and Community Initiatives* – Here, CVS develops wellness programs, ensures individuals receive medications, and offers standard check ups in coordination with community-based organizations.
5. CVS has undertaken many efforts to support the creation of public-private partnerships between community organizations and industry representatives.
6. Working with the Cassadaga Job Corps, CVS created a pharmacy technician program which has trained over 1,500 individuals.

Exploring opportunities to partner with public institutions has yielded a number of auxiliary effects. For instance, the school-based health care pilot program, which CVS participated in with public schools in Chicago, saw that not only did access to healthcare improve the health markers of the student population, but also saw grades, attendance rates, and student body morale improve in tandem.

Continuing to seek out partnerships with schools, the “Pathways to Pharmacy” program offers tours and fieldtrips to school groups from as early as second grade onward, and by the time students are high school seniors they have a chance to come work at CVS pharmacy for 2 hours during the school day, granting students access to work-based mentoring, interview training, and resume assistance. This program emphasizes the extent to which CVS has taken “training” outside of their immediate workforce, extending it early on to students under the broad vision of “career preparation.” Doing so, CVS has begun cultivating a stable workforce in an environment that is continually fluctuating in terms of worker availability, qualifications, and expertise.
Training programs specifically focused on disabled and underprivileged populations have increased both the diversity and the efficacy of CVS career preparation. In an effort to increase access to jobs, more universally applicable training principles have been uncovered and implemented by CVS’s teams working within these underserved populations. Additionally, as an increasingly diverse talent pipeline is fostered by these initiatives, the need for direct “recruiting” has been replaced to some degree by an opportunity to “live within the mission” of CVS.

Examples of bringing career opportunities to diverse populations with specific needs, skills, and time/training requirements:

- “Ageless programs,” where a part-time workforce is able to subsidize their retirement with additional income, while continuing to develop and hone skills later in life
- Youth-focused “Pathways to Healthcare Careers” initiatives that have resulted in the hiring of about 23,000 individuals between 18-24 years old, and have exposed roughly 1 million children and young adults to the possibility of healthcare/pharmaceutical careers
- “Abilities in Abundance,” a program focused on individuals with disabilities, which has partnered with over 150 disability organizations throughout the U.S. – This program uses mock stores to generate hands on experience, accommodating the specific needs of the individuals it serves.
- Military alliances, which allow active military to maintain CVS employment while moving base-to-base, and supports promotion from within the organization

Taken as a whole, this emphasis on partnerships with community organizations, populations with specific needs, and facilitating the hands-on training required for employment in real and simulated environments represents a new approach to workforce development. It allows CVS to be proactive with community-based groups as the communicate their needs in terms of employees while at the same time supporting the initiatives that are most important within the community.

The impact CVS has had is significant as well: 110,000 people have transitioned from public assistance to careers with CVS health programs.
The Power of Co-Creation and Co-Development – Jennifer Dauer

Jennifer Dauer (Entrepreneur in Residence, CincyTech) offered a broad overview of the skills and flexibility needed to adapt in an ever-changing environment. Delegation and talent identification were emphasized as key components for accomplishing this task.

In health care specifically, reform, digitization, consumerization, decentralization, labor shifts, and increased external funding continue to impact the professional environment. Consequently, professionals and organization leaders need to be able to “keep their needs in mind” while they look outside of health care for potentially applicable approaches, tools, and solutions to a growing list of obstacles. One must “keep a wide stance,” so as to avoid becoming inhibited by a limited world-view.

Understanding the intersection of organizational culture, strategy, and capacity is a primary task, and it’s worth creating/asking questions that paint a clear picture of this intersection. What unique motivations are there for staff across the organization? What solutions have employees proposed to the problems they identify? What do we see other organizations in our field doing that are or aren’t working, and why?

In addition to understanding where your organization sits within its larger context, there is impetus to create a “net attraction” for individuals and community collaborators to come to you, “not only for a job, but also to offer feedback and share their ideas.”

“It’s a passion-driven field, figuring out how to harness that passion should be done on an ongoing basis and from person to person.”
Collaborating to Build our Regional Workforce – Panel Discussion

Moderator: Hope Arthur – Director, Health Careers Collaborative

Panel Participants:
Bill Lecher – Assistant VP – Division of Patient Services, Cincinnati Children’s Hospital
Sue Kathman – Executive Director, Mercy Neighborhood Ministries
Heleena McKinney – Manager, The Health Collaborative

This panel was convened to outline some of the ways in which technical education centers, community-based organizations, and health service providers are collaborating in the greater Cincinnati area to ensure coordination between current and upcoming employer needs, and the skills of the rising labor force.

The following are detailed, free-form notes, in speaker order, though not an accurate transcript, from the presentation:

Bill Lecher:

A primary element of this work involves designing a holistic strategy, which takes into account the initiatives and projects that are already being pursued by community-based organizations. Not only does this facilitate the ready acceptance of community organizations to partner with teams of educators and healthcare professionals, but also, by building healthcare career training into the pre-existing programs of community organizations reduces the pressure for all parties to acquire funding for these projects.

Since the community initiatives are already being pursued, collaborative programming becomes a matter of adjusting current programs, rather than creating them from scratch. Further, the necessary motivation to complete the projects are already being demonstrated at the community level, so the “buy-in” of all collaborative partners is greater from the outset.

“Every time you change a life, you change their family tree.”

Sue Kathman:

At community organizations, this partnership has resulted in the focused improvement and education of necessary academic/occupational skills, and the development of a referral program with hospitals in need of filling specific positions.

Because the collaborative was originally focused in in-home healthcare, they were able to recognize the workforce crisis in a nascent period, which compelled them to expand the collaborative early on.

This expansion has led to improved communication among the organizations involved, such that they share their challenges with one another, as well as their recruitment, retention, and hiring practices.

By identifying the most prevalent barriers to long-term job acquisition, the collaborative was able to create and alter specific programs within the community-based organizations in order to close the gaps they observed. Gaps included the reading level of most job seekers upon entering the program (roughly a 5th or 6th grade reading level); the timing of job fairs (Monday through Friday is difficult for single working mothers); the cost of various trainings; etc.
Acknowledging these gaps, the collaborative created an STNA training program that emphasized looking for willing students, and then *bringing the training to them*, in a timeline and setting that was suitable to their schedules. In addition, the collaborative coordinated partnerships with specific hospitals in the area, where individuals trained via the collaborative’s programs were looked at *first* as potential hires, so that they were able to avoid being overlooked upon graduation and entrance into the general job pool.

*Heleena McKinney:*

Focused in a role of facilitation rather than direct leadership, Heleena acts as a go-between for the health care providers, and potential hires. As such, she works to share information between groups, and “tap” potential teachers and counselors, recruiting them to be a part of the collaborative. Specifically, she identifies the health care providers’ (hospitals, nursing homes, etc.) needs, and seeks out students and programs that fill these holes by providing students with skills and/or data literacies that could be of use.

In outreach to new students, “the human body as an engineering experience” is emphasized to appeal to an increasingly STEM-focused educational population.
**HPN Talks**

**Degree Creep and Impediments to Entry Level Healthcare Positions – Carolyn O'Daniel**

By elevating entry level requirements without compelling evidence or data to do so, you exacerbate the workforce crisis currently being experienced by many of the fields and care providing organizations in healthcare.

The National Network of Health Career Programs in Two-Year Colleges (NN2) created the H2P Consortium in 2011 as part of a movement to improve health careers education. H2P has been working to develop strategies, which reform health professionals’ preparation before entering the workforce.

At an NN2 meeting in 2010, there was some pushback against the suggestion that Respiratory Care Therapists would need a bachelor’s degree by 2015, rather than an associate’s degree, which up to that point had been the educational requirement. NN2 formed a workgroup to create a new organization for associate’s degrees in respiratory care. This was done to create an advocacy wing, provide an alternative support organization for respiratory therapists, develop sponsors for accreditation if needed, and provide a “unified voice” for the silent majority of respiratory therapists (84% come from associate’s degree level programs).

All of this work points to arguments for career ladders rather than degree inflation, as this increases the flexibility of the workforce far more than educational arbitration. Further, while clinical skill sets are constantly changing, so are the associate degree programs which provide professionals to fill these much needed positions.

**A New Teaching Paradigm, Approaching Relationships for Deep Learning – Nanci Burchell**

Nanci Burchell (Radiation Safety Officer, Children’s Mercy Hospital, Kansas City, MO) discussed the merits of interpersonal connection, and personal challenges for effective teaching. Development of leadership skills was emphasized as the single thing that yields success in students later in their professional careers. These skills are predicated on “communication and commitment,” which involves creative problem solving, and a willingness to try and fail, especially in our entrepreneurial, innovative current environment.

Nanci suggested that developing human potential, rather than ranking it, was a more effective method for developing deep learning and informed curiosity in students who are in a test-motivated environment. One way to do this is to intentionally connect learning (didactic and experiential) with real world skills.

This focus also opens the door to more flexible teaching paradigms, such as those that accommodate working students by only requiring “classroom time” two times a week in the evenings, after the work day is over. Giving students a chance to consider solutions to real world problems that affect them in their communities (litter on the side of the road as an example), gives them a chance to further develop broad, necessary problem solving skills.
Creating the Pipeline for Industry – Kristen Davidson

Kristen Davidson (Career and Technical Education Coordinator, Northridge High School) discussed her experience with HOSA, a student led organization focused on developing education programs and extracurricular opportunities for future health profession careers. Their project-heavy curriculum emphasizes hands on learning, with instructional tools being developed and disseminated over time.

HOSA focuses on entry-level work, including paths that provide further education and certification. By setting realistic career and educational goals, they set the stage for students to reinforce their efforts through accomplishment. Further, the continuing alumni service opportunities build relationships within the organization. The use of competitions and conferences provide opportunities for these relationships to develop consistently over time, granting students access to state and local leaders with the potential for partnerships to incubate.
HPN Spring 2019 Business Meeting Notes

Dan Olson introduced the meeting by briefly recapping the board meeting from April 3rd, and providing an overview of HPN’s action items for the coming months.

Action items:

- Reaching back out to ASRT due to Albuquerque this Fall (Oct. 2-4)
- Bringing employers together to better understand their challenges and approaches
- Management and creation of pipelines to support flexibility in the workforce
- Reaching out to Wyoming to get an education speaker
- Reaching out to New Mexico public ed. dept. – alternate certificate program (Contact Nanci Burchell for names from NM consortium)
- AMA representative should be coming to discuss telemedicine
- We may call the conference more of a pipeline conference, emphasizing a college ready workforce in addition to stackable credentials
- Question to frame our thinking: How are physicians standing in the way of the workforce?
- El Paso has a busy port, yielding many adult learners and new workers

Dan then provided an overview of projects being considered by HPN for the coming months/Fall Meeting

Projects being considered:

- Finalizing agenda sooner, so that people can see this information and make their decision to come
- Developing a communication plan for members, involving use of data, and how to communicate about HPN to their respective agencies
- Recruiting and retaining a new workforce: Seeking to better understand this challenge from the perspective of multiple members
- Development of white papers that are relevant and applicable to members, including supplementing the summary and presentations with data, such as footnotes and references, which makes it a more useable reference for members (this project is ongoing).

Our overarching goal is to better understand how the allied health professions will fit into the new world created largely by the “big dogs” (Apple, Haven, etc.) in business as they dip their toes in the waters of healthcare.

A possible approach from Valerie DeFor: Cleveland Clinic empathy video

- This video is used as a resource for understanding how many occupations are involved in the holistic delivery of care, and how students feel/understand this breadth of potential careers
- After students offer up the professions they noticed, Valerie shows them her list, and illustrates the holes where their perception of occupations might be
- Perhaps there is room to do something like this for HPN – creation of a common resource to demonstrate the wide reach and impact of allied health professions
- For example: Taking a car accident victim and going through what tests, treatment, etc. are needed in detail – This is drawn out from the incident requiring care to the “end” of treatment, in order to illustrate the wide array of professions involved in healthcare.
General Member questions:
1. What keeps members up at night from a care and development standpoint?
2. Is it possible to use people within our associations as “influencers,” to present a more tangible face to our organizations/the public?
3. What would a repository or links that make HPN a resource and partner for industry look like?
4. How can we continue sharing what’s working, in any capacity, which is the point of this organization?

Please be free and inquisitive with the information you bring to the table.

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Midlothian, VA 23113
The Health Professions Network’s 2017 Chicago Association Summit convened executives and representatives from professional organizations of non-physician health professions to discuss the challenges facing associations and the industry.

Via teleconference, Greg Morrison of the American Society of Radiologic Technologists led the group in a fascinating look at the grand scale of what change in both the association and the industry may bring to its organizations and professionals.

The group continued the discussion by sharing outlooks—the trends groups are monitoring and the challenges they are facing, as well as outlining potential collaborative solutions to these shared challenges.

Common themes, topics and solutions shaped this state of the industry report.
The State of Change

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Associate Executive Director - American Society of Radiologic Technologists | Executive Director - ASRT Museum & Archives

One of the easiest ways to think about change and what is happening in the industry is to put it in four buckets [FIGURE 1].

SOCIAL VARIABLES
• Demographics—Demographically, we have or have the potential to have five generations in the workplace. In addition, the U.S. is becoming far more culturally diverse. We also need to think about family dynamics in the broader picture of demographics.

• Lifestyle—When we talk about lifestyle, we talk about work-life balance and how important that is to Millennials. The focus people have on their own health and staying fit is another lifestyle change. We might also think about education and the role it plays in peoples’ lifestyles. We also have to talk about relationships—what types people have and how they are formed.

• Values—Value systems are changing and society has different attitudes towards equality, individualism, mobility, or a commitment to volunteerism.

TECHNOLOGICAL VARIABLES
• Development—The vast majority of us have lived through what has been a technological boom. Your cell phone has way more computing power than the average computer running a hospital not more than ten to fifteen years ago.

• Life Cycle—This is the speed at which development in IT occurs. In other words, how much and how quickly things change—for example, in the mobile environment, how many apps are introduced in a month. Life cycle is also about ease of use, and what that means for some of our professions. For example, while it has been great not to have to know command language, what has that done to the perception of professions if others see equipment that appears to be something anyone can operate just by pressing a button?

• Security—When it comes to technolo-
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governance and leadership; and staff.

THE ASSOCIATION ENVIRONMENT
There are plenty of internal effects of change—for example, declining memberships and changes affecting the success of your conferences and events.

- The sheer volume of information changes how we work. • Digital education and webinars are changing the way you operate as an organization. • Publications are changing—you must have multiple forms and multiple pathways to communicate.

- Sponsorships and exhibits have seen a lot of change. • Participation of volunteers and apathy are major areas of change, internally. • We need to think about the government and various regulatory bodies—how they affect our work, internally. • How are component relations affected by changes in your organization or in their organization?

There are also external effects of change—for example, the changing health care industry. • Government action at State and Federal levels can have significant effects on health care. • Technology change and the speed at which it occurs is very influential. • The volume of competitive action between providers, etc. is also changing health care.

RESPONDING TO TRENDS
Operating within these categories, we start to see a number of trends to which organizations need to respond. External, for example, there are substantial changes in the regulatory State laws.

REGULATORY TRENDS
Under the guise of regulatory reform, budget control and job growth we’ve seen a trend towards the elimination of licensing laws. For example, last year New Hampshire passed a radiology licensure law—this year there was an attempt to repeal it. There is a move to consolidate licensing boards into single groups, eliminating the independent boards that exist.

In one State, what was an independent advisory board made up of professionals from the profession was moved into another group made up solely of physicians and physicists. The control of the professions’ own destiny was removed.

Another bill tried to move 25 different licensing boards underneath the Board of Health. The bill died, but is endemic of what we’re seeing in the regulatory environment. This movement is budget-related—an attempt to reduce costs. In other States, licensing boards are being asked to hand over reserves used to operate the boards to make up for budget shortfalls.

There is also legislation around various labor issues. We’ve seen bills come floating through which look to establish specific definitions of what an employee is and how that employee may work, or what kind of mandatory overtime can be expected.

A very interesting bill in California would have changed the definition under minimum wage acts to require allied health students be paid minimum wage for all of their clinical hours. Doing so would blur the line between employee and student. Program accreditation would be in jeopardy as many accrediting agencies have prohibitions against working or being paid during clinical time.

We do not want to treat students more like an employee than like a student. There is the potential the law would jeopardize a significant number of educational programs due to dropped clinical site affiliations. That bill is still pending, but stagnant, at least this year.

TECHNOLOGICAL TRENDS
Technological trends also affect our organizations, internally and externally:

- Social media, for example—do we really understand the demographics of the people using our social media? How do we gather and utilize that information? Are we hitting the right people? Are you still relying on Facebook, or have you incorporated a multitude of different apps into your communications? Do you have specific strategies around how you are going to use social media?

- Website—many groups have not made the move into responsive design; as a result, one still sees a lot of websites that do not adjust to differing device platforms. Do you have an appropriate budget to handle the need for rapid change? Are you incorporating video into what you do? Many Millennials, Gen Y and Gen Z are heavy into the video environment; it is the way they learn and multi-task, they’re more adept at visuals and learn a significant quantity from them.

- Our ability to be the source of information—are we continuing to gather information? How are we displaying it, and what are we doing with it? Privacy and security is a huge issue when collecting information. Also, we have to talk about the quality of the information and how we are determining what is the best information. How are we supporting our members in that area?

- Artificial intelligence—externally, what does AI mean for our members and your organization?

SOCIAL TRENDS
- Socially, there are five generations our organizations need to reach—how do...
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we interact with them? The average age of membership is increasing. If you are not analyzing the demographics of your membership, you should be.

• There is social change in how organizations are run—was it built by boomers for boomers, governed by boomers? If that is the case, you have to pay attention to who is going to follow you and how you’re going to change as people retire. Along those lines, how is your governance structured—are you helping people be involved in your organization?

• Individuals want customization of the member experience—for boomers, they may want a print magazine, but Gen Y might want it on their phones.

• The number of different pathways to communicate change how we work—how are you managing that? Are you analyzing your email open rates, comparing those against potential generational differences? Are those in the boomer category still stuck on email while that is not the way the average Millennial wants to see things? How are you using social media to ensure you’re crossing all the generations that exist and that you’re getting the most bang for your buck?

• Is your professional development compelling across those generations? Are all generations willing to pay for these non-dues revenue streams?

• Work-life balance and apathy—are you garnering enough volunteers to support your organization? Competition for time, money and attention continues to be a major issue. In many ways, members want to meet the needs of their employer and family before they ever get to the volunteer stage.

ECONOMIC TRENDS

There are also economic trends that affect our organizations, like:

• Uncertainty—How have our members recovered from the economic crisis of 2008 and how does that affect our services? How does uncertainty about the economy affect the same?

• Employers are influencing the changing scope of professions, which can lead to huge change in our organizations.

• Specialization is a trend. There is more specialized credentialing—are we prepared to assist our members in support of those types of activities?

• Continuing education—economically, there is a swing in terms of who pays for and who provides continuing education. Many members see that as a right of membership, or they believe that their employers should provide it. We need to understand that value chain. Employers are restricting money for continuing education as they deal with budget deficits.

• Consolidation is a trend—physicians moving from what used to be independent practices to physicians being employees. That affects what they do & how they do it, and our professions.

• Competition, in general, is a trend—we are no longer the only information source. There is a lot of competition from for-profit ventures that exist in areas like continuing education. There is competition for our conferences. Going back to generations, it is about engagement for the Millennials—how are we going to engage with them? What is our competition for Millennials’ attention?

• Networking is changing—the era of going to a conference to network has changed. Millennials create relationships via social media platforms over their cell phones, and it does not necessarily need to be that face-to-face interaction.

• Loss of vendor support for large trade shows is a trend. The community that supports activities is smaller and more confined as mergers and consolidations exist within that industry.

• Availability of time to attend meetings might be decreasing. Will your members be able to attend out of their own dime, and how can you make it compelling enough for them to spend that money?

“Can you create a must-have membership? What is your relevancy in what is quickly becoming the new order? Who is competing with you... Have you looked at where that competition comes from?”

PARTING CHALLENGES

The big questions are this: can you create a must-have membership? What is your relevancy in what is quickly becoming the new order? Who is competing with you—do you really know? Have you looked at where that competition comes from? Do you truly know and completely understand your own market and what that brings?

We are going to see change at lightning speed. We all want to make things happen, but we all have to be prepared for nothing to happen. Ultimately, the only thing that is constant is change. Are you ready for it?

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Following Greg Morrison’s presentation, HPN President Lynn Brooks opened discussion among the group for an analysis of what might be missing from the picture, and what particular issues are most important for organizations to be monitoring:

IDENTIFYING GAPS

• Globalization—health care has spread and the differences are quite large. Professions here aren’t even heard of even in Western European societies with which we most associate.

• Future technology—what do robotics and artificial intelligence mean for our professions in five to ten years?

• Drug & opioid epidemics—for some employers, 30 percent of applicants failed drug tests. It’s a societal issue that is impacting the workforce.

• Fragmentation—of the delivery systems we have. There is more specialization, and super specialization. There are different alignments in different orgs.

• “Uber” -ization—medical professionals are showing up at patients’ doors on-demand.

• Telemedicine—many health systems and professions are focused on making inroads on telemedicine.

• Business models—telemedicine is changing business models in the industry, some areas have competition between two systems with very different business models.

• New professions & credentialing—new professions are popping up all the time and older ones are fading away—the workforce and workplace is so dynamic, credentialing is a factor that is becoming a bigger issue.

• Micro-credentialing & badges—we are seeing more credentialing in particular procedures or applications.

SPECULATION: A core allied health profession?—It is possible that this could lead to, rather than multiple specialized professions, a core profession with specializations through micro-credentials. Professionals are not going to have one skill they do throughout their whole career, they’ll have to change and be flexible throughout their career. Providers will drive what they need, but politics and money drive it differently and those processes may become barriers.

• Non-dues revenue—several organizations noted that a small percent of their revenue came from membership, more revenue came from education and vendor sponsorship of said education.

• Cost of care—costs are skyrocketing unsustainably. What happens when the economics of health care break on us? We need to change the way we deliver health care, and if we don’t, we lose, the patient loses.

• Misinformation—State governments and media, what they know and more accurately what they don’t know. Legislatures act quickly when there’s media outrage, but common sense expansions of scope of practice struggle for years and get nowhere. Media could be way more informed about professions.

• How competency is measured—competency includes application of skills and knowledge. In theory, you’d have to do some demonstration of skills—that’s gone away in allied health certification processes, but that’s changing. How you demonstrate competence is changing, it’s more than taking a test and passing.

• Credentialing transparency—see the Credential Engine project.

• Degree creep—while one group indicated they wanted to raise the academic level of their professions’ programs to a four-year degree, others suggested that there isn’t a statistically significant difference in pass rates for credentialing between Bachelors degree and Associates degree groups, and that a skills validation study would be interesting to see if higher level degrees have an effect on quality patient care.

LICENSING DE-REGULATION

The group expanded on talk of licensing de-regulation by pointing to policy papers and legislation linked here.

• Occupational Licensing: A Framework for Policymakers—from the Obama administration. Mobility for former military and their spouses might encourage reductions of licensing barriers to industry in various states.

• Jobs for Californians: Strategies to Ease Occupational Licensing Barriers—many States are also producing similar reports.

The fervor for deregulation may be an opportunity—no group is standing up for the patient, here.

ORGANIZATIONAL OUTLOOKS

It was suggested that a good place to start discussions of potential collaborative opportunities would be each organizations’ ideal status—what goals are allied health organizations working towards? The following are goals and ideas, big and small, that could help achieve those goals.

• Succession planning—one group was making strides in succession planning & engaging Millennials through national and regional leadership training programs, as well as inclusion of student and first-year professional members on the national board.

Millennials are actually more like boomers than any other generation in terms of wanting management/development opportunities. We need to make that possible and figure out the best way to do it.

• Creating career ladders—for one group in a lower-skilled, lower-paid profession, career ladders are of particular interest to support their members. Identifying where bodies of knowledge and competencies aren’t so different and supplying the training for career advancement.

• Credit exchange collaboration—there’s not a lot of acceptance of credits from other programs. It would be helpful for all professions to align their educational curricula so that more credits could be exchanged between programs in different professions.

• Stackable credentials—the ability to stack competencies allows all allied health professions to have a broader base; “We need to grow to survive,” suggested one group. Another shared that
they are working on stackable credentials that lead to an Associates degree, and another suggested that would be ideal for their entry-level profession for whom cross-training is the norm.

- **Attracting new professionals**—one group was interested in lowering barriers to entry, for example, getting returning military personnel with transferable soft skills into the profession by implementing a recruitment plan.

- **Advocacy collaborations**—it was noted that allied health organizations are stronger together, and focused collaborations could put partners in a position to testify in front of congress to get big rations could put partners in a position stronger together, and focused collaborating that allied health organizations are positioning a recruitment plan.

OTHER CONSIDERATIONS: “To what extent can the professions control anything?”—It was noted that many changes may be out of professions’ control, and organizations and professions should be prepared to reinvent themselves. It was also noted that the many changes discussed are in different stages of development across the U.S.

- **Responsibilities are moving down the ladder**—some of the less complex things at the top are being dropped down to a lower level—we’re seeing the same things in each professional tier. That’s the trend set by the employers.

- **But competencies are a constant**—if we have job titles being cut, pasted and shredded—all of our competencies will continue to be there. How do we market those? How do we attract others to our skill sets and competencies?

- **Shortages are forcing providers’ hands**—we have on-the-job training in a lot of places that doesn’t quite meet the bar, but they need people in those jobs. This is being driven by the workforce capacity not being there.

- **So, how do we attract more people to our professions?**—Grants are assuming that people will fall out of trees with specific advanced skill sets, but that’s not the case. HPN has the perspective to understand and communicate the value of accredited training programs and demonstrated competencies that other stakeholders do not have.

ASSOCIATIONS’ ROLE IN EDUCATION
- **Education is necessary**—how do we get policy makers to realize that there needs to be an educational component to any innovation?

- **But education will look different**—technology is going to drive a change in what is taught, what is necessary to learn. We have to partner with educators to determine how it is taught, as well—it can’t be through the traditional semester system. MOOCs have disrupted that. How and how quickly can it be taught?

- **Associations can get out in front of quality through education**—we’re all moving towards asynchronous, digital learning. Associations are uniquely positioned to provide both entry-level education and maintenance of credential continuing education.

- **Employers don’t have the time; associations can provide necessary skill and knowledge attainment**—there are multiple models that could work, here.

CONVENING & COLLABORATING
- **Where do synergies exist between stakeholders?**—Employers do care about and have pressures on safety and quality. Safety and quality isn’t controversial, everybody can get on board.

- **Bringing stakeholders to the table is a challenge**—how do you get people to show up, what do you convene around?

PATIENT SAFETY
- **The patient safety movement is important**—hospital medical errors are the third leading cause of death in the U.S., approximately 700 people per day. This is a cause organizations can rally around. How do associations capitalize on patient safety in terms of continuing competency and education?

- **Patient safety is our raison d’être**—a longitudinal study as to why people join associations suggested one of the top reasons is for the good of the order—making the profession better. That’s about improving patient safety, improving quality. We have to tie the emotional outcomes and heartstrings back to what we do for our members and for society.

INCREASING OPPORTUNITY
- **How can we better serve students?**—We have students graduating with biology bachelor degrees but they aren’t working in health care because they don’t have the right credential or qualification. We aren’t serving them well, and we aren’t serving ourselves in health
care by allowing that to happen when there are still shortages.

- **Breaking down skills discretely could improve transparency, lateral movement**—when you break down a professions’ competencies discretely, you might find overlaps between professions. For someone in health care, they might look at another profession as something they can do. HPN could convene to standardize terminology. Professions would own the whole competency set, but pieces can travel across fields. Professions wouldn’t be less protected, they’d be more open—there’s more opportunity in the system.

**COMMON GROUND**

- Organizations need something to rally around—to convene groups together and establish valuable relationships. Once the relationships are there, it’s easier to tackle the tough areas where there’s conflict. But there’s commonalities with industry—we’re all being worked upon by economic, political and technological forces. That unites us.

- **Patient safety is a burning platform**—if we don’t step up to be a part of the solution, it’s going to be someone else doing those things. There are big players making changes without us, and we need to be a part of those discussions.

- **Licensure is an area of conflict, but cost-effectiveness and competence is a common-ground issue**—we want other groups to understand and help co-promote our continuing education we provide for competency. All stakeholders want our professionals to be competent.

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**More Thoughts on Health Care**

At the Health Professions Network’s Fall Meeting in Alexandria, VA September 6-8, HPN opened discussion again for further thoughts on the State of the Industry:

**IDENTIFYING GAPS**

- **Burnout**—workforce shortages are a vicious circle that create burnout and further shortages. How much of the workforce will leave health care?

- **Patient-controlled information**—there is a democratization of information. Increasingly, everyone we take care of has more information about their physical and mental health than we can imagine. Patients are controlling their information and looking for the right matches for their health, doing research to get the right care.

- **Information overload**—providers are generating tons of data. Scribes are an entirely new profession in medicine, and electronic health records are capturing a massive amount of information.

- **Interconnectivity of patient data**—Electronic health records are a big issue for physicians, and there’s little standardization. EHRs don’t usually transfer to each other. How do we create interconnectivity to patient data without exposing proprietary processes, etc. There are legal issues arising in that. Who owns the patient’s records?

- **Geographical differences**—metro and rural areas have completely different trends to consider. The picture is highly fragmented geographically.

- **Minimizing losses**—Systems are losing money in hospitals and doing everything they can to minimize those losses. They are moving things outpatient where they make money, etc.

- **Companies moving into Health Care?**—With Amazon buying Whole Foods, how long until they move into the health care space as well? Large, disruptive companies could change health care.

- **Consumers driving change?**—Consumers are asked to pay more and more—what are they getting for $50,000 per year in health insurance premiums? Consumers and consumerism should drive change in the systems, but there’s little cost transparency. Also, the system has somewhat spoiled consumers to expect everything for a co-pay. There’s no cost transparency.

**A BURNING PLATFORM?**

- **Quality**—Everything we’re doing as associations feeds into quality—ultimately, providing better care for out patients. What are the leading indicators of quality? What can we learn from best practices in determining those indicators?

- **Unemployment and underemployment**—How can we help people get educated and into jobs in health care?

- **Poverty**—Health improves with income. Even though a lot of health care consumers are very knowledgeable, I would say a majority are not knowledgeable. Either they don’t have access or they haven’t learned how to access information. Part of the discussion is quality of life, how can we bring up impoverished people in our communities to improve their quality of life and their health?

- **Reactivity**—We are in a reactive mode in terms of reimbursement and new delivery systems. How can we support a more proactive approach?

- **Cost**—We’re awash in money for health care. $10,000 are spent on every man, woman and child annually. For $10,000, what do we get? We’re not leading the pack in anything except spending.

- **Innovation**—health care has traditionally been a low innovation industry.
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More Thoughts on Health Care

Perhaps we can look at these things by taking a step back and rethink how we can provide health care. Should we start from scratch and imagine a completely new health care system?

• Health literacy—even educated patients are not following directions and doing what they’re supposed to be doing. How do we improve health literacy? Those who are not health literate cost the system 10x more than a health literate patient.

• Data—our professional associations, many have a lot of good workforce data. HPN is in a unique position to gather and collect data. We would be able to collect more granular data than the BLS... but there are problems with definitions of health professionals in associations as well. What data do we need to gather?

A Focus on Quality

In Spring 2018, the Health Professions Network will visit the home of Mayo Clinic, Rochester Minnesota, to convene expert speakers from the large providers in the Rochester area with a sharp focus on providing quality care.

HPN’s discussions in Chicago and Alexandria have clearly identified quality as common ground for all stakeholders in health care and a potential burning platform for innovation in the industry. In Rochester, we’ll be asking providers directly what metrics they use to measure quality, where their priorities lie in improving quality, and how the professions might fit into the bigger quality picture.

What are the leading indicators of quality? What are best practices in identifying those metrics? How might professions help to collect data, provide better continuing education, or better prepare new professionals to further the goal of improving quality in health care? These are questions we’ll get deep insights into direct from influential providers.

An excellent program will come together soon, as HPN carries the energy of its Chicago Association Summit and Fall Meeting through to 2018.

HPN meetings provide leaders in associations of health professionals an ideal, low-cost opportunity to learn from leading experts the latest & greatest developments in health care and the health workforce, plus a unique opportunity to discuss common issues and collaborate with other associations.

Membership in the Health Professions Network more than pays for itself with attendance at the two annual meetings. Consider joining HPN, and joining us in Rochester, to stay up to date on the state of the health care industry and the latest developments and innovations in health care and the health workforce.

This report makes it clear just how much change is occurring in health care—from many different directions. HPN makes the daunting task of staying ahead of these changes—crucial to the sustainability of our organizations—a manageable and valuable endeavor.

Health care is changing with or without us. HPN aims to collaborate meaningfully to create positive change for all stakeholders in health care. Joining HPN is your opportunity to be directly involved in these collaborative efforts.

JOIN HPN, TODAY

SEPTEMBER 7, 2017
FALL MEETING, ALEXANDRIA
HEALTH PROFESSIONS NETWORK

The Health Professions Network 2017 State of the Industry Report
The Future of Employer Signaling – Jason A. Tyszko

Jason A. Tyszko, Vice President of the Center for Education and Workforce of the U.S. Chamber of Commerce Foundation discussed the organization's workforce initiative promoting data interoperability and real-time demand signaling from employers to other stakeholders in the talent pipeline.

"The labor market is more dynamic than ever, with a very fast restructuring of the nature of jobs... We're looking at data systems to promote interoperability between stakeholders... The talent pipeline is a team sport, and it's important to keep score... This is not just an employer engagement problem, but a technological problem. Our rudimentary algorithms for hiring are not very good solutions. They're time-intensive, expensive, and don't really measure competencies... How you organize data matters. We are looking at applying an underlying data standard to the labor market and extending that data standard to include skills, competencies, and link that to the web in real-time. Which allows stakeholders to make real-time adjustments to training. A set of open data resources leading to occupational taxonomies that are updated in real time."

Following are detailed, free-form notes, though not an accurate transcript, from the presentation:

Historically, it’s been difficult to keep employers at the table. Time is money, and that’s increasingly scare. There’s also a huge trend towards pay for performance and a focus on ROI. The labor market is more dynamic than ever, with a very fast restructuring of the nature of jobs... Skill obsolescence is the number one threat to individuals, and the middle class is not safe.

We’re looking at data systems to promote interoperability between stakeholders. We are demand-driven and employer-led, which everyone says, but what that means is we’re focused on getting employers engaged on their key pain points... Don’t chase solutions in search of a problem. We pursued a lot of solutions when the data wasn’t there, we didn’t really know that it was the right thing to do ahead of time.

The talent pipeline is a team sport, and it’s important to keep score—to keep all stakeholders accountable. We are facilitating collaboration through the TPM National Learning Network, which is also a member service to companies...

This is not just an employer engagement problem, but a technological problem. Our rudimentary algorithms for hiring are not very good solutions. They’re time-intensive, expensive, and don’t really measure competencies... How you organize data matters. We are looking at applying an underlying data standard to the labor market and extending that data standard to include skills, competencies, and link that to the web in real-time. Which allows stakeholders to make real-time adjustments to training, etc. A set of open data resources leading to occupational taxonomies that are updated in real-time.
The government solution is a Federal, top-down BLS job taxonomy that’s completely divorced from the field! No more rigid, top-down taxonomies – we need to let employers decide what they need... It’s also important not to chase technology in search of a problem. There are applications for AI and machine learning to help measure competencies. But we are focused on collaborating on data standards to promote interoperability and improve employer signaling. All this data needs to be linked so that the individual has access to it. The most important tool in this dynamic labor market is data about yourself.

I’d like to invite you all to our October 30 Talent Forward Conference... Associations can get involved as data partners. We’re open, we’ll find you a seat at the table. We’re just getting started, but in the next five months we want to start populating data and would love your help on that.

It’s really just about sending a better signal to all stakeholders as to what employers want. This might also have applications in defining what an “industry-recognized” program may be—there’s money for that tied to the GI Bill, but it’s not spent because there’s no definition of “industry-recognized.”

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**Artificial Intelligence (AI) in Medical Imaging - Nanci Burchell**

Nanci Burchell, Radiation Safety Officer at Children’s Mercy Hospitals & Clinics, discussed the intersection of artificial intelligence and medical imaging— noting, significantly, that while radiologists were initially threatened by artificial intelligence, they are now looking towards a new future where artificial intelligence can enhance their work.

"Radiologists are embracing AI as an augmentation to their practice, not a threat to their practice... AI plus a radiologist results in better outcomes than an AI, alone... With the help of AI, radiologists can move away from the traditional role of diagnostician to becoming a true clinician, for the patients' benefit."

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**A Discussion with Daniel Sodickson**

Daniel Sodickson, MD, PhD of NYU Langone Health, a pioneer of parallel imaging technology, joined HPN via video conference to discuss innovations in imaging using artificial intelligence technology, including a current collaboration with Facebook Artificial Intelligence Research (FAIR) to accelerate MRI imaging.

"We are at very beginning stages, but we've already made some fascinating progress. The idea behind the collaboration is simple. Speed is currency in imaging, for any number of reasons. Patients -- nobody likes a long scan. So, a better patient experience. But also seeing things we couldn't see before -- taking very fast..."
frames. There's also the economic factors -- in terms of shorter examination times. The goal is to accelerate MRI by a factor of 10, a concrete goal...

"When you think of how our eyes and brains work, we have learned what the usual information content of a scene is -- we spend less mental effort, and we focus on unusual information. We believe you can do the same with an MRI -- the AI can learn the characteristic structure of a medical image, so you don't have to waste data focusing on the normal parts. You use data focused on what's unique to the individual patient."

Following are detailed free-form notes, though not an accurate transcript, of the conversation:

Founder of parallel imaging. Started rolling in practice in the mid-90s. All it is, in a nutshell, is just like using a camera rather than a scanner – all data coming in simultaneously, rather than slowly taking in a line. It's a fairly simple idea... Facebook – this began with a random fix-up. Looking to make a societal impact – applying AI for good. We actually have a lot in common in how we thought about the impact of what we wanted to do, despite being a tech company and an academic health center. Will Facebook get into healthcare? Not really – it's just a problem they found interesting, accelerating MRI. But they're not entering the space commercially, just as collaborators and researchers. FAIR -- is a research division of FB whose mission is to advance the state of the art of AI to improve society. In that mission, they found the medical application of speeding up AI to be compelling.

We are at very beginning stages, but we've already made some fascinating progress. The idea behind the collaboration is simple. Speed is currency in imaging, for any number of reasons. Patients -- nobody likes a long scan. The poor patient who's sick, a child who's restless. So, a better patient experience. But also seeing things we couldn't see before -- taking very fast frames. There's also the economic factors -- in terms of shorter examination times. The goal is to accelerate MRI by a factor of 10, a concrete goal. If previously you had to be in there for an hour, in the future you're done in 5 minutes. Or if you were going to be in there for a minute, in the future you're done in seconds.

When we take an MR image -- we're taking in all the data we might conceive as potentially necessarily. Because the worst thing that can happen is an image that says no cancer when there is cancer, etc. When you think of how our eyes and brains work, however, we have learned what the usual information content of a scene is -- we spend less mental effort, and we focus on unusual information. We believe you can do the same with an MRI -- the AI can learn the characteristic structure of a medical image, so you don't have to waste data focusing on the normal parts. You use data focused on what's unique to the individual patient.

Brain, knee, liver -- we wanted a range of challenges as well as a range of impact. We're using 10,000 MR examinations, 3mil individual images. De-identified datasets coming in from patients scanned at our institutions. Obviously, all of this data has been de-identified. We even went so far as to stop at the face, so that the data we're sharing can't reconstruct a face that might be recognized.

Q. Working with current scanners. If you're changing the paradigm on how the information is gathered, is the output the same? In the initial phases, we're focused on generating the SAME information in less time, as a milestone we've set for ourselves. But once you can do that, you can start rethinking how imaging is done -- if robust AI is on one end, it could cut out the middle-man and go direct to
information/diagnosis, why not flow all the way through. Not claiming we’ll do that today, but that’s what this kind of work gets you thinking about.

Q. What is your hope for a timeline? We’ve tried carefully not to promise a timeline – Facebook is very much in the public eye. This is basic research, and they took it on because it’s a tough challenge. But I’ll tell you, we’ve set challenging internal deadlines for ourselves and we’re meeting those deadlines. We’re going to try to create ways for people to compete over the best results. (open sourcing the solution)

Q. Why was Facebook interested? In AI, there’s been development towards pitting two learning networks against each other—one creating fictions and the other discerning if something is fictional or not, which is able to create extremely convincing fictions. Which is scary! But the uniqueness to the MRI challenge is that the AI needs to create data that is TRUE, rather than a convincing fiction. It’s a different challenge... We hope that imaging companies will be able to adopt these techniques and do that relatively quickly. The hope is that it won’t be a long process for the manufacturers to add this technology onto new scanners and existing scanners.

Q. Talk about integrating diagnostic function with detecting function to accelerate getting the image. Could that also be connected to the therapeutic – through robotics? Thinking of the challenge in this way, it’s more of a data stream, image reconstructions to guide ultrasound therapies, but you could imagine that other procedures could be guided by this sort of data stream. Streaming paradigm – rather than successive snapshots, you’re getting streaming data. It starts to work more like not only our eyes but our brains.

Q. What do you see as the role of the radiologist in this new paradigm? Period of intense fear in radiology circles... But that has changed to more collaboration – to create capabilities that didn’t exist before, not just take over what has been happening. Not just trying to copy human performance – which has been the beginning emphasis of AI, but now we’re looking at how AI and humans can, together, each new solutions. There’s a lot more AI can bring to us than just trying to copy what we already do.

Data scientists think the data and algorithms are the end-all be-all, but radiologists are the curators of the unsolved needs. Facebook didn’t know this problem of accelerating MRI existed, we brought it to them and they were grateful. Radiologists can bring biology to AI and all these synergies.

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**How can healthcare professionals and AI coexist?**

John Licato, PhD, Director of the Advancing Machine and Human Reasoning Lab at the University of South Florida, discussed specifics of machine learning technology, its limitations, and limitations in human reasoning—ultimately pointing towards intersections where humans and artificial intelligence can work together to improve societal outcomes.
We need to be careful about the hype of AI systems and advocate for knowing the strengths and limitations of both artificial and human intelligence. Figure out what each side does well, and what each side does poorly... Correlation is not causation. Causal knowledge doesn't come from the data -- that comes from top-down from the human.... Moral and ethical reasoning requires causal concepts... Because we don't have a detailed understanding of what's going on inside of the "black box" learner, we assume that the outputs are correct -- but that might be a bias in the underlying data... This is a huge growing concern, because you could accidentally introduce bias in how you teach AI.

Let's not let humans off the hook -- our natural ability to assess arguments is very bad, especially if argumentation is supposed to be truth-oriented... Our natural intuition is extremely biased... An AI designed to constantly second-guess you wouldn't be very popular, but it may be one of the best ways for humans and AI to work together... There are low-tech analogs for helping with human biases, like a simple check-list. But AI can be used as a high-tech analog to these low-tech solutions.

Following are detailed free-form notes, though not an accurate transcript, of the conversation:

IBM Watson... UIMA High-Level Architecture. Taking a huge amount of unstructured information and representing it in a structured way. The Watson team was not given advance knowledge of the Jeopardy! Categories – they had to prepare for any question in all of human knowledge. It was an amazing success, and IBM started asking – what do we do next? They targeted healthcare.

Watson marketing hype... very few of the “Watson” headlines used the same underlying technology of the Watson that won Jeopardy! We need to be very careful about the hype of AI systems and advocate for knowing the strengths and limitations of both artificial and human intelligence.

Figure out what each side does well, and what each side does poorly. Watson is properly considered a black box, because it’s so large and so complex that no single human could understand entirely what’s going on inside – you know what’s input and output but you don’t know how it’s reaching the output. If you put garbage in, you get garbage out. (GIGO)

Correlation is not causation. Causal knowledge doesn’t come from the data, that comes from top-down from the human. AI is really good at finding patterns. Human beings are good at asking why the patterns exist. Humans provide data to machines, machines find a conclusion, and we find meaning from the conclusion. Sounds simple—like a calculator. That mode of cooperation is nothing new.

Moral and ethical reasoning requires causal concepts. If you find patterns in the data, those patterns in themselves are not sufficient arguments for what we should do – for what is morally and ethically responsible. An artificial intelligence that could determine whether or not defendants were a flight risk. However, although the statistics were high-level favorable, better at human judges, but at the specifics it made more false positives with African Americans and more false negatives with Caucasians. It encoded bias that was present in the data.

Because we don’t have a detailed understanding of what’s going on on the inside of the black box learner, we assume that the outputs are correct— but that might be a bias in the underlying data. Machine learning is just statistics applied to computer science. If a bias exists, machine learning could find it. But this is a huge growing concern, because you could accidentally introduce bias in how you teach AI.
Let’s not let humans off the hook – two people can reach exact opposite conclusions from the same arguments. Especially if argumentation is supposed to be truth-oriented. But our natural ability to assess arguments is very bad. 2017 – Mercier and Sperber, the enigma of reason. We argue not to find truth, we argue to find consensus. The function of argumentation is social. Our natural intuition is extremely biased. You don’t use the same criteria to evaluate arguments if they disagree with your opinion. Confirmation bias. Diagnosis momentum.

Individuals with higher cognitive ability was a poor predictor of the amount of myside bias. High intelligence does not mean you’re free of that. Heuristics. Judges are not free of the affect heuristic. How do we know when we’re free of these biases?... Thought-stoppers signal that you might be prone to biases. But an AI designed to constantly second-guess you wouldn’t be very popular. It may be one of the best ways for humans and AI to work together, but forcing them to do so might make AI very unpopular. There are low-tech analogs for helping with these biases, like a simple check-list. But AI can be used as a high-tech analog to these low-tech solutions.

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"There are many different forms of AI, but it's not a new field... Why now -- the AI explosion? There's a huge amount of data -- we've never seen this before. That's a key driver of any ML system, having enough data to create your models. And there's a huge amount of computation power -- to get great models, especially with regards to neural networks, you need a lot of processing power. To train algorithms to get something meaningful in a short amount of time, we need to throw a lot of computer power at it. Now that's relatively cheap with cloud infrastructures. This has pushed folks to take another look at AI...

"Machine learning is a subset of AI -- it is data-driven. Without the data piece, nothing works... For early machine learning, feature extraction is key before you feed data into the system. But now, with deep learning, that isn't necessary. It eliminates a lot of the manual tasking to label data sets -- labeling can be done as we training the machine. If you pull the feature extraction out, you can achieve a lot more with less data... But you'll still probably spend 80-90 percent of your time just gathering and cleaning data... For smaller data sets, you really need to think before training your system... Really what's important is generalization -- it does you no good to have a well-performing ML system on a small data set, but it doesn't work in the world... More data beats a complex algorithm. Simple is better."

Following are detailed free-form notes, though not an accurate transcript, of the conversation:

I teach machine learning, artificial intelligence, data mining. We’re in the hype cycle right now of AI. Hopefully this will give you a clear idea of what’s available. It’s very important to have a clear
understanding and get the most benefit from AI deployments. Teams often overpromise and under-deliver when it comes to AI.

There are many different forms of AI, but it’s not a new field. Without the data piece, nothing works. How to choose machine learning algorithms – tailored to the healthcare field as much as I could.

Why now – the AI explosion? It’s been a big thing in research for a long time, but it never made it’s way into industry until now, for a few reasons. Huge amount of data – we’ve never seen this before. That’s the key driver of any ML system, having enough data to create your models. Computation power – to get great models, especially with regards to neural networks, you need a lot of processing power. Train algorithms to get something meaningful in a short amount of time. We need to throw a lot of compute at it. Now that’s relatively cheap with cloud infrastructures. It’s pushed folks to take another look at AI.

But we’ve gone through AI winters, cycles where people weren’t interested. The overpromise and under-deliver happens, and people shy away... everything dries up. Hopefully we’re a bit more stable now. Now we can see the potential for applications across many industries. Google, Apple, etc. pumping a lot of money into this space.

Machine learning is a subset of AI – it is data-driven... Reinforcement learning – if you can structure your problem as a game, that’s a great tool for that.

In my own work, I’m getting into understanding the black box. We can train them to perform well, but we don’t really know what they’re doing. Certain applications, like AlphaGo, can’t be used to diagnose cancer – but AlphaGo serves as an indicator of how these systems learn, and then we can take that understanding into other domains. Self-driving cars was a moonshot goal, but with the potential to transform humanity. We could substantially reduce the amount of accidents on the roadway and subsequently the amount of deaths. But we have to be very careful – I am very cautiously optimistic.

With intelligence will unquestionably come some kind of fault – systems will never be perfect. There are too many random variables in the universe to be perfect. You have to define an acceptable level of performance and roll with it... For early machine learning, feature extraction is key before you feed data into the system. But now, with deep learning, that isn’t necessary. It eliminates a lot of the manual tasking to label data sets, that can be done as we train the machine. They’ve shown you need a lot less data to train the classification piece. If you pull the feature extraction out, you can achieve a lot more with less data. The system already learned what’s important or what’s not important in the images.

The big application in health care – with the potential to make a lot of money – is in drug discovery.

You’ll probably spend 80-90% of your time just gathering and cleaning data. We spent almost a month just dealing with data on a project with a relatively small sample set. Issues in data collection, missing data... these are things you have to deal with. And deep learning AI won’t work with small samples. The sexiness of Deep Learning and all you can do – the people using that are sitting on a data set of millions of images. For smaller data sets, you really need to think before training your system.

Scikit-learn.org... Most of the state-of-the-art has made its way to an open-source, robust library that’s well-tested.

Really what’s important is generalization – it does you no good to have a well-performing ML system on a small data set, but it doesn’t work in the world. Intuition fails in high dimensions – be careful with that.
If you have the data, make sure you have sound methods of evaluation for your models that will test your gut. More data beats a more complex algorithm. Simple is better. Correlation is not causation.

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**HPN Talks**

**The Good, The Bad and the Ugly: A Qualitative Review of Graduate Medical Trainees' Written Descriptions of their Residency Experiences - Paul Rockey, MD**

Paul Rockey, MD, of the Accreditation Council on Graduate Medical Education (ACGME) shared analysis of 2016 ACGME survey data detailing a large percentage of negative residency experiences among physicians, significant due to its potential impact on the health care system.

"We're not going to deal with the issue of well-being unless we really work with the data intentionally... Both the ugly and the bad concerns are remediable... I took data about the frequency of liability exchange and malpractice premiums and correlated it to differences in humiliation and belittlement -- the correlation R was 0.8. There's a very high relationship to the practice environment and the liability and malpractice claims and the amount of belittlement, humiliation and unprofessional treatment of residents in the same specialty."

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**Engagement, Exhaustion and Program Dissatisfaction Correlate Highly with Depression and Resident Abuse - Joanne Schwartzberg**

Joanne Schwartzberg, MD, Scholar-in-Residence at the Accreditation Council on Graduate Medical Education (ACGME) joined Dr. Rockey in discussing data from the 2017 ACGME survey related to resident abuse and its impact.

"We get 15-20% response per year. We can't ask a lot of questions, so we pare it down to a few and have to be very intentional and iterative... You can imagine what insight looking at the data this way gave us into what was happening... This is a systems issue we have to address -- this won't be addressed by self-care and eating well. There is mistreatment we have to address..."
Mentoring - It's a Two-Way Street - Nanci Burchell

Nanci Burchell, Radiation Safety Officer at Children's Mercy Hospitals & Clinics, shared a perspective on formal mentorship and how it can be most impactful, stressing the importance of mentorship in health care and our professional lives across specialties.

"Mentoring is a really important aspect of what we do and it applies across the board no matter what specialty you do... A mentee must be willing to learn and listen to the guidance and ask for help when needed. The relationship is based on mutual respect and trust... A mentor should help you set realistic goals. They should provide guidance and inspiration and help you navigate through your life and find focused solutions... The mentee should learn through active dialogue... It's important to celebrate little successes along the way."

AI Applications for Health Care Learning Environments - Margaret Biblis

Margaret Biblis of FA Davis shared a publisher’s perspective on AI and advanced technology in health care learning environments, discussing the tech hype cycle, IBM Watson Classroom, and exploring several gadgets and experiments from the tech development team at FA Davis.

"A lot of these technologies like machine learning are at the height of the hype cycle, but we can expect them to enter into the trough of disillusionment... We’re playing with chatbot assistants -- support pop-ups. We think that whatever we start off with will be very simple... Personalization is through branching logic, that's all pre-determined...

"IBM Watson Classroom... it sounds amazing, to have that tool in the classroom with you and to fill in all those other details. They’re calling it personalized learning, but it’s not the full-force AI... But they put a lot of content in here... They also give the instructor a 360 profile of the student -- learning styles, strengths, interests outside of the classroom -- a full picture of how to work with that student."
A History of Allied Health in 27 Slides - Fred Lenhoff

Fred "Freddy Flow" Lenhoff aka, the frEditor, and Director of the Academic Physicians Section at the American Medical Association, led a discussion of the history of allied health with an eye towards history repeating itself.

"The history of allied health mirrors the history of medicine and its trend towards increased specialization along with advances in medicine and medical technology. As allied health professions continue to grow and develop separate identities and greater public awareness, how do we maintain cohesion and collaboration? Without a strong, unified voice, allied health—particularly fields with less visibility and lower educational requirements—are at risk of reduced funding for workforce development and education... History repeats itself... maybe we need to do another Flexner Report."
HPN Fall 2018 Business Meeting Notes

Lynn Brooks introduced the business meeting with a short presentation re-capping the presentation of Jason Tyszko of the Chamber of Commerce Foundation and further illustrating the potential of micro-credentialing. The meeting then split into group discussions around focusing questions: what is currently happening in healthcare from your organization’s perspective, what are opportunities for HPN to get involved in, and how should we collaborate with the Chamber of Commerce workforce data initiative?

The following are bullet points gathered from group discussions.

What’s happening? / Threats

- Licensure
- Better defining / raising awareness
  - Self diagnosis
- Globalization of health
  - Certifications
- Migration / immigration
- Role of accreditor – current / future
- Open resources
  - Consequences
- Declining grad. Rates
- Pipeline issues (k-12) → community colleges
- BA level entry
- Defining occupational / career ladders.
- College – hospitals & annual initiatives – young vets
- People undereducated, underemployed or unemployed
- Greatest demand in Asia
- Competition – territorial
- Recognition – what can you do, what should you do
- Ed. System can’t change quickly enough for tech changes
- More or less
- Jobs for future
- State licensure and recognition for the profession
- Government driving the access and affordability of devices.... Organization balances cost with need for qualified providers
- Globalization of health, standards decreased. Migration of patients and practitioners (recognition of foreign credentials)
- Where is the role of accreditation with industry?
- Open educational resources
- Student life-balance
- K-12 pipeline
- Degree inflation affecting relevant programs
Opportunities / Getting Involved

- Advocacy around recognizing advances vs. allowing the status quo
- Access to accurate information – educate clientele
- Mix of providers is not correct
- International standards are often different than U.S., should we try for international homogeneity?
- Career laddering within health professions
- Ohio – partnership
- Core curriculum
- Advocacy – access to accurate info
  - Tech connections
- Communication – with legislators
- International engagement
  - As we think of threats and opportunities
  - Globalization of healthcare

Collaboration with the Chamber of Commerce

- Business partnership
- Marianne – Health Careers Collaborative
- Educating Jason about what he doesn’t know… they need to learn from us about how education interacts with employers
- SOC Classification… discussion of SOC
- Conference set for Oct. 30
- Awareness about – pushing info from HPN to associations
Activities of the Committee or Affiliated Organizations

General Activities:
- The BOC met April 11-13, 2019 in Miami Beach, FL. The next meeting will be in Phoenix, AZ Sept 14-15. The BOC Executive Committee met by monthly conference calls.
- The BOC approved the motion by the Credential Maintenance Committee that one hour (point) of CE required for certification maintenance must be in a medical ethics-related topic (e.g., compliance, HIPAA). This will not increase the number of CEU points (36) required for certification maintenance. All those who recertify after Jan 2023 will be required to document this.
- Kathy Hansen, Dr. Susan Beck, and Scott Aikey will all receive the ASCP Distinguished Service Award at the September BOC meeting.
- Effective January 1, 2020, all Exam Committee volunteers will be required to have current credential maintenance.
- BOC Chair, Susan Harrington, PhD, D(ABMM), MLS(ASCP), participated in the CLIAC Personnel Standards Working group. Dr. Lee Hilborne, also of the BOC, chaired the group.
- Ethic Committee Chair, Elaine Francis, EdD drafted a short paper concerning credentials fraud to be sent to hiring bodies and HR Departments to warn about these activities and to encourage use of primary credentials verification.
- Susan Johnson, MT(ASCP)SBB, the AABB representative to the BOC was elected as Chair. She will assume the position at the September meeting. Dr. Linda Smith was re-elected to her second term on the BOC and to the BOC Executive Committee.

Exam-related:
- The Biorepository Working Group met in December 2018. They continue work on the criteria, content outline, eligibility requirements and examination for this Qualification. The official title of the credential will be: Qualification in Biorepository Sciences. This examination represents a collaboration between BOC and ISBER.
- Examination Committees continue to meet this year for review of questions.
- The Examination Committee for the doctoral level Immunology Examination will be selected and will meet in late 2019 or early 2020 to begin writing questions and determining eligibility requirements.

**Items of Concern:** None

**Request for Action:** None
REPORTS TO: ASCLS Board of Directors  
REPORT OF: Consumer Information (CI) Response Team  
SUBMITTED FOR: June 2019 Annual Meeting  
PREPARED BY: Susan J. Leclair  
DATE: May 22, 2019  

Current Status:

1. We have added members from both AACC and ASCLS this year. There have been some difficulties in mentoring due to illness and work issues on the part of several mentors.

2. We are now connected with Patient Power™, the MPN Research Foundation, and the CLL Society. In each we are spoken of as a major resource for laboratory and physiology explanations.

Items of Concern:

1. A growing concern (see past reports to the Board) is the lack of acknowledgement for the work we do on the LTO site. There are essentially two portions to the site: the first consists of static pages (which are not always accurate, i.e. synonyms for platelet count are platelet distribution width and mean platelet volume) and our interactive person-to-person reply service. It is this second portion that caused LTO to be recognized as we were the only service to do this for over 15 years. I believe that there are now 1-3 others that do this, but the replies are given by physicians who do not know the laboratory aspect of the tests.

   Yes, when you look at the front page, ASCLS’ logo is in a stream of “supporters” and not always visible. When you ask a question, we are mentioned but in an area that is easily skipped over. We are getting the hint that LTO does not value our work. And if we are not valued, then perhaps we should think of moving to a site at which we will be valued.

2. The team is extremely unhappy about the continued inability of AACC or its IT subsidiary to correct the issues with spam, blind advertisements, duplicate messages, and the like. These actions began when AACC or their IT department changed their web page. We have complained frequently – now almost daily – to get this fixed. All to no avail. Despite multiple assurances that it “is going to be/is now /will soon be” fixed, the frequent intrusions have increased the volunteer time which we spend to answer the queries. Often it is not clear if the query is real or not and this causes both a waste of time (which we at least think it valuable) and only encourages frustration on our part. Many duplicates appear on different days so there are duplicate replies. On the other hand, while highly unlikely, it is possible that
two people might write a question in close enough language to make it only seem to be a duplicate and by ignoring it, we may be ignoring queries of real people in actual need.

It appears that a few times since last October we experienced a slowdown in these submissions (leading to a false sense of security that something was being corrected). Sadly, experience has taught us that these were just random slowdowns in the originators’ attacks. The general consensus is that we stop doing this work for AACC until this problem is fixed. It didn’t happen for 18 years, we cannot see why this cannot be fixed.

Request for action

1. I move that the ASCLS Board request AACC move the acknowledgement of our work to the front page and have an explanation of our level of contribution.
2. I move that the ASCLS Board communicate with AACC that if these spam-related issues are not fixed by September the Society will consider withdrawing its support.
3. I move that the ASCLS Board direct staff to develop plans to move the consumer response service to its original site within the ASCLS web page.
Activities of the Committee or Affiliated Organizations
The CW task force met by conference call on 1/10, 4/11, and 5/23/2019 to develop and review Choosing Wisely recommendations. Once approved by Task Force members, recommendations are forwarded to their respective scientific assemblies for review and approval. Approved recommendations are forwarded to the ASCLS BOD for final approval before forwarding to the American Board of Internal Medicine for consideration. Attached is a summary of our 5/23/2019 meeting.

One CW recommendation was reviewed in 2018 and approved by the ASCLS BOD: Avoid routine blood typing and screening for low risk surgeries without a clinical indication.” This recommendation will be forwarded to ABIM subsequent to the ASCLS national meeting, June 23–26, 2019.

Three additional recommendations have been sent to their respective Scientific Assemblies for review with a deadline of 6/14/2019. The SA actions will be forwarded to the ASCLS BOD in time for the June 23, 2019 and used in consideration for approval.

Item of Concern:
None

Request for Action:
I move the ASCLS BOD approve the following three recommendations for submission to the Choosing Wisely Campaign.

- **Don’t order a factor V Leiden (FVL) mutation assay** to identify a congenital cause for a thrombotic event. Order the phenotypic activated protein C resistance (APCR) ratio assay.

- **Don’t order a comprehensive microscopic stool ova and parasite (O&P) exam on patients presenting with diarrhea less than seven days’ duration who have no immunodeficiency or no history of living in or traveling to endemic areas where gastrointestinal parasitic infections are prevalent. If symptoms of infectious diarrhea persist for seven days or longer, start with molecular or antigen testing.**

- **Don’t use herpes simplex virus (HSV) polymerase chain reaction (PCR) testing for screening.** Real-Time HSV PCR testing should only be used to confirm herpes diagnosis in patients with suspected herpes.

Be it noted: Full text recommendations accompany this report. Pending approval, these will be forwarded to ABIM accompanied by the “type and screen” recommendation indicated above.
American Society for Clinical Laboratory Science

Choosing Wisely Recommendation

Don’t order a factor V Leiden (FVL) mutation assay as the initial test to identify a congenital cause for a thrombotic event. First order a phenotypic activated protein C resistance (APCR) ratio assay.

There exist several acquired APCR conditions such elevated factor VIII and antibody-mediated APCR. Further, several factor V Leiden-independent mutations occur that may associate with thrombosis.¹,²,³ Best practice guidelines recommend testing for APCR using one of several clot-based APCR ratio assays as an initial assay and following up positive APCR results with the molecular factor V Leiden assay.⁴ Most currently available phenotypic tests are economical, have a greater than 95% concordance with molecular testing and up to 99% clinical sensitivity.⁵ Based on Medicare reimbursement rates, switching to initial-phase phenotypic testing and relying on its negative predictive value with follow-up genotypic testing could result in a 75% reduction in costs.⁵

American Society for Clinical Laboratory Science

The FVL mutation assay is often ordered to determine the cause of venous thromboembolic disease when the APCR ratio assay provides greater clinical sensitivity at a lower cost. Substituting the APCR ratio assay is within the control of a facility’s medical and surgical review boards. This American Society for Clinical Laboratory Science (ASCLS) recommendation was developed under the leadership of ASCLS’s Choosing Wisely Task Force and the ASCLS president and executive vice president. The Task Force examined numerous options based on evidence available through an extensive review of the literature. Subject matter experts from the ASCLS Hematology/Hemostasis Scientific Assembly reviewed and recommended approval of this recommendation, which was subsequently approved by the ASCLS Board of Directors.

George A. Fritsma, The Fritsma Factor

References

⁴ Moore GW, *Van Cott EM, Cutler JA, Mitchell MJ, Adcock DM. Recommendations for clinical laboratory testing of activated protein C resistance; communication from the SSC of the ISTH. Accepted for Publication, doi: 10.1111/j.th.14532
American Society for Clinical Laboratory Science
Choosing Wisely Recommendation

Do not order a comprehensive stool ova and parasite (O&P) microscopic exam on patients presenting with diarrhea less than seven days’ duration who have no immunodeficiency or no history of living in or traveling to endemic areas where gastrointestinal parasitic infections are prevalent. If symptoms of infectious diarrhea persist for seven days or longer, start with molecular or antigen testing and next consider a full O&P microscopic exam if other testing is negative.

The comprehensive O&P microscopic exam often requires submission of multiple stool samples, it is labor intensive, requires significant expertise to perform, and typically has lower sensitivity when compared to many other tests now available. Instead, consider ordering antigen detection tests (i.e. direct fluorescent antibody, enzyme immunoassay, indirect immunofluorescence assay, rapid immunochromatographic tests), modified acid-fast stain, or molecular tests that detect specific gastrointestinal parasites most commonly acquired in the U.S. When investigating cases of gastrointestinal disease, it is important to take a comprehensive clinical history that considers the patient’s exposure risk, mechanism(s) of transmission, and immune status. Patients lacking international travel history or residence in areas where parasites are endemic are most likely to be exposed to intestinal parasites associated with outbreaks from exposure to contaminated food or water. In the U.S. these pathogens include Giardia duodenalis (G. lamblia, G. intestinalis), Entamoeba histolytica, Cryptosporidium, and Cyclospora. For most individuals with healthy immune systems, symptoms self-resolve without treatment. In individuals with prolonged symptoms, risk for development of severe infection, or when pathogen identification is necessary for public health reasons, testing is recommended. Numerous antigen detection assays and molecular tests, including multiplex panels, have been developed for targeted detection of the most common gastrointestinal parasites acquired in the U.S.

Lisa Cremeans, MMDS, MLS(ASCP)CM, SMCM, MBCM Clinical Assistant Professor
The University of North Carolina at Chapel Hill, Division of Clinical Laboratory Science

References

Choosing Wisely Recommendation

Do not use herpes simplex virus (HSV) polymerase chain reaction (PCR) testing for screening. Real-Time HSV PCR testing should only be used to confirm herpes diagnosis in patients with suspected herpes.

HSV shedding is intermittent. Therefore, testing swabs from asymptomatic patients is not recommended for routine diagnosis since it is unlikely to yield confirmation of carrier status. However, laboratory confirmation in all patients with suspected herpes is recommended. HSV DNA detection by real-time PCR is considered the gold standard for diagnosis. Swabs for testing are taken from the base of the lesion (vesicles should be unroofed with a needle or scalpel blade). HSV typing into HSV-1 and HSV-2 is recommended in all patients with first-episode genital herpes to guide counselling and management.

American Society for Clinical Laboratory Science

This American Society for Clinical Laboratory Science (ASCLS) recommendation was developed under the leadership of ASCLS’s Choosing Wisely Task Force and the ASCLS president and executive vice president. The Task Force examined numerous options based on evidence available through an extensive review of the literature. There is little to be gained in screening non-symptomatic individuals. Further, real-time PCR provides superior clinical efficacy compared to previous antibody-based assays. Instituting this recommendation improves care, lower costs, and employs laboratory resources effectively and economically. Subject matter experts from the ASCLS Hematology/Hemostasis Scientific Assembly reviewed and recommended approval of this recommendation, which was subsequently approved by the ASCLS Board of Directors.

References

4. Centers for Disease Control and Prevention. Genital Herpes – CDC Fact Sheet (Detailed), August 2017

Dawn Rudnick MT(ASCP)SM, U of Michigan Health Svices Lab Mgr
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<td>2019 Board of Directors Board Report</td>
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<td>PREPARED BY:</td>
<td>Linda Goossen, Chair and Rick Panning, Vice Chair</td>
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**Task Force Charges:**
- Review the findings of the Root Cause Task Force and use those findings as the basis for its work.
- Recommend a list of objective, quantitative measures (KPIs) that are indicators of constituent society health and which may be used in an annual assessment. Some of those KPIs may already exist, while others may need to be developed.
- Develop and recommend a single or multidimensional categorization system that utilizes those KPIs to identify the absolute and relative health of each constituent society.
- Develop and recommend a transparent system of annual assessment (which includes timeframe, methods for collection and who is responsible for performing the task) that reliably indicates the health of each constituent group.
- Develop and recommend specific interventions ASCLS should make with constituent groups that fall into categories of substandard function.
- Offer recommendations for interventions that may be utilized to strengthen and prevent high and standard performing constituent societies from falling into substandard groups. The Task Force may also suggest ways in which higher performing constituent societies may be leveraged to improve poorly performing constituent societies.
- Develop and offer recommendations for a standard approach to addressing non-functioning groups that may include mergers, dissolution, or re-chartering.

**Activities of the Committee**
- Constituent Society Task Force was established and approved by ASCLS Board of Directors.
- Task Force Members include:
  - Linda Goossen, Chair and Rick Panning, Vice Chair
  - Mary Ann McLane, Miles Tompkins, Suzanne Campbell
  - Jim Flanigan, staff liaison
  - Roslyn McQueen, board liaison
- Tasks:
  - Review ASCLS minimum requirements for an “active” constituent society.
  - Discussion of the concept of KPIs (Key Performance Indicators)
  - Selection of a KPI matrix model
• Model modified to reflect ASCLS constituent society performance and identify constituent societies “at risk”
• Development of Constituent Society Task Force assessment tool and grid
• Determined which information data is available from ASCLS office
• Pilot utilization of assessment tool for Minnesota, Michigan, Kansas, Oklahoma and Connecticut
• Presentation to Board during Planning Day on March 16 (Rick Panning)

Next Steps:
- Make final edits of the survey
- Hand out grid at Constituent Society Leadership Symposium at National meeting (Suzanne Campbell)
- Develop Survey Monkey version of assessment tool (Jim Flanigan)
- Send finalized tool to all constituent society presidents and copied to their Regional Director September 1; due date November 1, 2019
- Put survey on ASCLS leaders’ link
- Identify “at risk” societies
- Develop interventions to assist “at risk” societies

Items of Concern:

Request for Action:
The Constituent Society Taskforce requests that the term of the task force be extended through the 2019-20 association year.
New Business
I move the Board of Directors rescind its authorization to the DCLS Steering Committee to develop a Request for Proposal for a DCLS certification.

Background
When ASCLS, ASCP, and AGT agreed to merge the NCA into the Board of Certification (BOC), the Society agreed to forgo participating in any competing certifying programs.

Initial discussions with the Board of Certification in 2016 about DCLS certification left members of what was then the DCLS Oversite Committee with the impression that the BOC would consider the DCLS certification like any other certification presented to it but received no firm commitment to move forward. The result was a request, approved by the Board of Directors in 2017 to develop an RFP.

Though both formal and informal conversations between ASCLS and the BOC in recent years have indicated a strong willingness to consider the certification, there has been no formal notification of the BOC’s intentions.

On May 21, President McQueen received a detailed letter from BOC chair Susan Harrington formally claiming the BOC’s right of first refusal to develop the DCLS certification. Based on our Memorandum of Understanding with the Board of Certification, ASLCS is precluded from further pursuing an RFP with alternative certifying bodies.

Dr. Harrington further notes, “The ASCP BOC is on solid ground financially. Given the close relationship of our societies and the core nature of this certification to completing a career ladder in medical laboratory science, the BOC can financially support development and maintenance of the DCLS examination, barring any significant change in financial status.”