



ASRC BOD Minutes

13 November 2005

Blackburn Trail Shelter, Round Hill, VA

Title	Name	From	Present	Proxied To
Chair	Peter Pennington	SMRG	Yes	
Vice Chair	Andrew Dorsett	MSAR	Yes	
Treasurer	Kevin Maskell	BRMRG	Yes	
Secretary	Kevin Cropper	MSAR	Yes	N/A
Roster	Steve Weiss	SMRG	No	N/A
Webmaster	Evan Keto	PVRG	No	N/A
Ops	Bob Allam	PSAR	Yes	N/A
Training	Mark Creighton	SMRG	No	N/A
PA OMD	Keith Conover	AMRG	No	N/A
VA OMD	Marsh Cuttino		No	N/A
WV OMD	Carl Werntz	MARG	Yes	N/A
Medical	Don Scelza	AMRG	No	N/A
ADC	Alex McLellan	SMRG	No	N/A
Comms	Keith Crabtree	SMRG	No	N/A
PIO	<i>vacant</i>			N/A
Safety	Carl Werntz	MARG	Yes	N/A
Group Reps	Name		Present	Proxied To
AMRG	Keith Conover		No	
BRMRG	Robert Koester		Yes	
BRMRG	Kevin Maskell		Yes	
MARG	Carl Werntz		Yes	
MARG	Don Ferguson		No	
M/SAR	Kevin Cropper		Yes	
M/SAR	Andrew Dorsett		Yes	
PSAR	Bob Allam		Yes	
PVRG	Stephanie Bean		Yes	
SMRG	Rene Carrier		Yes	
SMRG	Peter Pennington		Yes	
SWVaMRG	Sarah Dury		No	
SWVaMRG	James Harrison		<i>proxied</i>	Andrew Dorsett
TSAR	Theresa Crossland		Yes	
TSAR	<i>not identified</i>		No	
At Large Attendance (Name, Group)				
Megan Shaw	PVRG	Suzen Collins	PSAR	
Robert Fries	DELMARVA	Carol Beard	TSAR	
Jim Jackson	DELMARVA	John Coffey	SMRG	
Pamela Paulding	MSAR			

New Action Items from this meeting:

Action Item #	Assignee	Description	Section
20051113_01	All Directors	Ask GTOs to provide to the CTO the group testing and certification process	6.1
20051113_02	WV OMD (Carl Werntz)	Contact the VA OMD regarding WEMSI protocols in MD	8.3.1
20051113_03	DELMARVA	Investigate finding someone to develop Medical standards (or even be MD OMD) for MD for the ASRC	8.3.2
20051113_04	Vice Chair	Write to EMS for clarification on who can submit and do background checks	8.5.1

Summary of Motions from this meeting:

Motion	Section	Result
Approve the minutes from the previous meeting	1.1	Passed
Kevin Maskell offer the ICO spot to Rita Krenz and report back by the next BOD meeting.	2.4	Passed
Not to renew NASAR dues this year	3.1.5	Passed with three abstentions
Alex McLellan as ADC	5.2	Passed
April Cropper as AO	5.3	Passed
The Ops Officer will lead an exploratory committee to look at developing conference disaster response standards and begin the drafting of standards; in addition, the committee will look at how the conference should handle those standards (e.g., mandated for all members or included as optional standards). Suzen Collins and Robert Fries volunteered to be on the committee.	5.4	Passed
The mentoring group for DELMARVA transition from MSAR to SMRG	5.5	Passed
The CTO shall contact and ask the GTOs to provide the testing and certification process they use to meet the ASRC standard so that the CTO can see how the groups do it. This shall be done before the next BOD meeting	6.1	Passed
Resolution: The BOD has resolved that there are acceptable training standards that are consistent and demonstrable across the conference at all times	6.1.6	Passed
For the present time, the ASRC will maintain the ALS certification, as long as there is no cost to the conference. This is an update to a motion to move to BLS that passed at the last BOD meeting	8.1.5	Passed with four abstentions
Reduce the basic CPR requirement from Full-Health Care Provider to Adult CPR for the Lay Person.	8.2.3	Passed with one against and one abstention
The ICO identify an easy method for Blood Borne Pathogen conference wide training. (WV OMD (Carl Werntz) volunteered to set up a web-based course.)	8.2.4	Passed
For CPR, the BOD approves any provider who follows the American Heart Association (AHA) CPR standards is acceptable, including but not limited to American Red Cross (ARC), American Safety and Health Institute (ASHI), National Safety Council (NSC), and American Heart Association (AHA).	8.2.5	Passed
Release file box and AED earmarked funds and return to general account	9.3	Passed
Increase individual dues by \$5 a year (to \$15) beginning with the Jan 2007 dues	9.4	Passed

Motion	Section	Result
Evan Keto replace Steve Weiss as the Webmaster	10.1	Passed
Approve Kevin Maskell as IC-II	15.1	Passed

Minutes:

1. **Review of Previous Minutes from the July 2005 BOD meeting:**
 - 1.1. **Motion passed** to approve the minutes from the previous meeting.
2. **Outstanding Items:**
 - 2.1. There were thirteen **Outstanding Action Items**. The crossed out items were closed. A synopsis follows.

Action Item #	Assignee	Description	Section
20040710_04	Teresa Drag (lead), Alex McLellan, Kevin Maskell, Andrew Dorsett	Lead an effort to make IC training more widely available throughout the conference.	
20040710_06	Chair (Peter Pennington)	Talk to Bob Koester and Mark Eggeman regarding ASRC sponsorship of their research into SAR theory.	
20050409_01	All Directors	Look for group members willing to fill the Public Information Officer and Infection Control Officer positions	
20050716_01	All Directors	Ensure BOD Reps, GTO, Medical, and Ops officer attend November retreat.	3.2.2
20050716_02	MSAR	Establish procedure for calling out DELMARVA members once they are CQ	5.5.6
20050716_03	MSAR	Conduct CQ testing with DELMARVA by middle of September	5.5.7
20050716_04	MSAR	Conduct FTL training with selected DELMARVA members by next BOD meeting	5.5.8
20050716_05	DELMARVA	Provide copy of by laws, financial statements, etc. to Chair	5.5.10
20050716_06	All Directors	Please have everyone in groups review the Operational Doctrine, including annexes, as it will form the keystone upon which the other standards are based.	6.1.5
20050716_07	Conference Medical Officer	Provide clarification on current ASRC CPR standard, the delta to the proposed standards, the need for youth or child CPR training, and requirements imposed by our BLS license	8.2
20050716_08	Conference Medical Officer	Provide clarification on impact to ASRC and data on other WEMSI adopters.	8.3
20050716_09	Group Medical Officers	Review the group medical equipment list provided by the CMO.	8.6
20050716_10	Chair (Pennington)	More information on CISM, including possibly a speaker from the psychology or psychiatry field at the next BOD meeting.	8.7.2

- 2.2. AI20040710_04 – There remains money available for another course, so this action item shall remain open. (As noted during the Treasurer’s Report, the donator of the funds earmarked for this course has indicated that they cannot be used for any other purpose.)

- 2.3. AI20040710_06 – Documents were provided to the Chair who has contacted three funds that might be appropriate matches. So far, no responses have been heard, however, the decision date has only just passed for two and is in the near future for the third. As the action is now awaiting external response, it will be **CLOSED**.
- 2.4. AI20050409_01 – Kevin Maskell is in contact with Rita Krenz, who is qualified for ICO. A **motion passed** to have Kevin Maskell offer the ICO spot to her and report back by the next BOD meeting. As the conference remains in need of a Public Information Officer and all Directors continue to be asked to look for candidates, this action item shall remain open.
- 2.5. AI20050716_01 – This action item is **CLOSED** as OBE (over taken by events).
- 2.6. AI20050716_02 – This action item is **CLOSED**, as a process has been established (and successfully utilized).
- 2.7. AI20050716_03 – This action item is **CLOSED**; training was conducted and six members of DELMARVA were CQ certified. In addition, SMRG certified remaining DELMARVA members at a later training.
- 2.8. AI20050716_04 – This action item is **CLOSED**; discussion in the Operations committee has documented a process and SMRG will be assuming the Mentoring process for DELMARVA.
- 2.9. AI20050716_05 – This action item is **CLOSED**; the Chair has received and approved DELMARVA's Bylaws, etc. Some wording recommendations were made regarding the use of non-restrictive language for areas or tasks.
- 2.10. AI20050716_06 – Despite discussion of the Operational Doctrine during the retreat and BOD meeting, this is a living document still and members are again encouraged to read it. This action item shall remain open.
- 2.11. AI20050716_07 – During action item review, this item was left open, as the CMO had provided no new clarification. However, during the Medical discussion, an agreement was reached on CPR standards, so this action item is **CLOSED** to that change.
- 2.12. AI20050716_08 – During action item review, this item was left open, as the CMO had provided no new clarification. However, during the Medical discussion, two new action items (AI20051113_02 and AI20051113_03) were created addressing this issue, so this action item is **CLOSED** to that change.
- 2.13. AI20050716_09 – No comments were heard from Group Medical Officers, so this action item shall remain open.
- 2.14. AI20050716_10 – The Chair contacted several potential speakers, and discussed the issue with them. None were willing to attend the retreat event, however. This action item shall remain open pending further discussion, which should also include Keith Conover.

3. Chair's Report:

- 3.1. The NASAR are requesting renewal of dues (\$165), which gives 30 members cards, allows all members GPS purchase discounts, and provides life insurance to the Chair. What other advantages? Where is NASAR headed? Do we wish to renew membership?
 - 3.1.1. DELMARVA will renew as a group for instructor and grant reasons.
 - 3.1.2. SMRG is not renewing, as it can see no advantage.
 - 3.1.3. Is there any effect on search calls for us being a NASAR member? Not in VA, although VA is comparing standards.
 - 3.1.4. ASRC has been members for two or three years, with unidentifiable benefits, other than a reduced rate for the NASAR conference last year in DC.
 - 3.1.5. **Motion passed** not to pay the dues this year. Three abstentions.
- 3.2. Search Teams interested in the ASRC
 - 3.2.1. An application was received from a Georgia team looking to join the ASRC; the Chair suggested we had not yet spanned the Carolinas.

3.2.2. There had been interest from WEST, near Lancaster, PA, but the current status of their team is unclear.

3.2.3. Susquehanna SAR, through Pepper Broad, is interested in investigating joining. They are a church based group in northeastern Maryland and are wealthy. Bob Koester will be presenting them a lecture in January. They are skilled but a small team. That would put all MD ground resources in ASRC. Next move is theirs to invite the Chair.

3.3. An invitation has been received for up to twenty members of the ASRC to visit SAIC's IS3 team for a two to two-and-a-half hour visit in December on scenarios for ICS type stuff. Chair will forward the email invite.

4. **Vice Chair's Report:**

4.1. The report on group's standards for activities other than ground SAR (AOTGS) was left at home; however, a summary was provided.

4.1.1. In non-dog AOTGS, groups seemed agreed upon National standards – MRA for vertical, NCRC for cave, etc.

4.1.2. Dog standards, however, were diverse.

4.1.3. Based on previous discussion during this retreat, this is acceptable as the BOD asked for the teams to detail their AOTGS and the standards they undertook.

4.1.4. The ASRC would like to adapt MOUs to reflect that we can help RAs get the right people in these AOTGS (but not that we provide those resources).

4.1.5. The next renewal of the MOU with Virginia (probably within the next 6 to 8 months) will reflect changes.

4.1.6. The report should be finished by January BOD meeting.

4.2. The Vice Chair was to lead the ASRC effort to provide instructors and incident staff for the Maryland MSTTF; DELMARVA was the coordinator of the MSTTF and did a great job organizing the instructors and incident staff. DELMARVA presented a lengthy letter of appreciation to the ASRC for members who helped, specifically calling out Martin Juenge, Alex McLellan, Peter Pennington, Steve Weiss, Bob Koester, Ken Chiacchia, Heather Houlahan, Chris Ruch, and Pepper Broad.

5. **Operations Officer's Report:**

5.1. There was discussion of Hurricane Katrina response, disaster recovery resources, operational doctrine, and the DELMARVA mentoring process.

5.2. **Motion passed** to approve Alex McLellan as ADC.

5.2.1. It was pointed out he is also Deputy Ops, Chair of SMRG, and IC-II, and is a non-BRMGRG person (one of the first to hold the ADC position).

5.3. **Motion passed** to approve April Cropper as AO

5.4. **Motion passed** that the Ops Officer will lead an exploratory committee to look at developing conference disaster response standards and begin the drafting of standards; in addition, the committee will look at how the conference should handle those standards (e.g., mandated for all members or included as optional standards). Suzen Collins and Robert Fries volunteered to be on the committee..

5.5. **Motion passed** that the mentoring group for DELMARVA transition from MSAR to SMRG.

5.5.1. There was discussion of the issues surrounding the mentoring process. Pamela Paulding, MSAR Chair, provided the following comments and recommendations:

5.5.1.1. Ensure the mentoring team is willing and prepared to take on the task;

5.5.1.2. Be clear about the expectations of mentoring, including who sets them (the Board, the Chair, the Ops officer, the Training officer, the Probationary group, the Mentor group);

- 5.5.1.3. To be effective and to minimize frustrations, a timeline should be set and agreed to by all parties;
- 5.5.1.4. Communications should be clear and include all concerned parties; and
- 5.5.1.5. It was a learning experience that she hopes will be examined for maximum future benefit of the conference.
- 5.5.2. The Ops officer is codifying the process to make future efforts work smoother.
- 5.5.3. SMRG BOD and Training officer have agreed to take over the mentor role.
- 5.5.4. DELMARVA agrees that the process was unclear, appreciates MSAR's help, and looks forward to working with SMRG in completing items on the list developed by Ops.

6. **Training Officer's Report:**

- 6.1. **Motion passed** that the CTO shall contact and ask the GTOs to provide the testing and certification process they use to meet the ASRC standard so that the CTO can see how the groups do it. This shall be done before the next BOD meeting. (**Action Item 20051113_01:** All Directors, ask GTOs to provide to the CTO the group testing and certification process.)
 - 6.1.1. Discussion made clear that this was not to evaluate the groups' processes, but for the CTO to learn what is currently done. This will support future development of additions to the existing standards to allow measurement of the standards.
 - 6.1.2. This should be more than just the training schedule.
 - 6.1.3. The training process is not required, but would be greatly appreciated.
 - 6.1.4. An alternative suggestion was made that the CTO should make a phone call (instead of a mass email) to each GTO and ask for the information.
 - 6.1.5. This discussion also linked to recertification and how the BOD knows that the groups and members are competent; what are the measurements (and re-measurements)?
 - 6.1.6. **Resolution:** The BOD has resolved that there are acceptable training standards that are consistent and demonstrable across the conference at all times. To this end, the first step is that the BOD requires the CTO to collect the group training policy documents.
- 6.2. For clarification, the only difference between ASRC and VASARCO requirements for team approval is team participation in a Simulation. (This also fits into the Ops arena.)
 - 6.2.1. There was a request from VDEM to be invited to a simulation during which groups interested in joining the ASRC (or forming their own MOU with the Commonwealth) will be evaluated. The BOD wants to preserve the ASRC's ability to self-certify groups joining the ASRC. The Board's interpretation is that the invitation will be given, but it is not necessary for VDEM to accept the invitation.
- 6.3. There was discussion over when members need IC / IS recertifying; none are being brought up at today's meeting, and typically the first of the year is when they need it.

7. **Communications Officer's Report:**

- 7.1. No Comms report, as the Comms Officer is currently in Iraq.
- 7.2. Alex McLellan was approved as ADC (see Section 5.2, Ops report).

8. **Medical Officer's Report:**

- 8.1. There was discussion about the ALS / BLS level provider (an automated defibrillator, necessary for either, has been ordered and is awaiting delivery from the company). It was reiterated that the ASRC is no-one's primary affiliation as ALS / BLS provider. Is it worth the ASRC's while to remain ALS? Don Scelza (CMO) has suggested that the ASRC drop to BLS. Originally (15-plus years ago) the license was set up to cover members who were ALS and were on searches where ambulances arrived with BLS personnel but ALS equipment. Some of the original stipulations: that any provider must run with another squad; that we defer to local

EMS if they could provide capability; and we would be treated by the state similarly to the helicopter teams, in that we could supply our service anywhere in the Commonwealth. It has been taken advantage of at least once in that time. It was noted, however, that a provider is not supposed to use equipment that is not their own, that their skills 'expire' outside their area.

- 8.1.1. Could a provider obtain 'orders' from a local jurisdiction while in the field to perform to their level of training? Yes. Could even pull equipment off another ambulance and operate on protocol.
- 8.1.2. Would the VA OMD provide standing orders even if we are not a standing ALS agency? Not sure.
- 8.1.3. Could a non-VA licensed person operate in VA? No.
- 8.1.4. There was a concern that we represent ourselves as ALS, but we don't always have the appropriate equipment at the search (and for that matter, we don't always have the appropriate personnel). But the question was turned around; do we even claim we are ALS anywhere? No.
- 8.1.5. **Motion passed** that for the present time, the ASRC will maintain the ALS certification, as long as there is no cost to the conference. There were four abstentions. This is an update to a motion to move to BLS that passed at the last BOD meeting.
 - 8.1.5.1. A suggestion was made that Bob Koester's comments on the origins of our ALS certification be documented (perhaps on the *Map and Compass*) for future reference.
 - 8.1.5.2. Do we misrepresent ourselves as ALS? Or do we merely hold it in our records? No, we can call ourselves ALS without having the gear or the personnel available at all times. But getting someone to perform an ALS action when we do not have the license is much harder.
 - 8.1.5.3. Is there a wasted benefit because we toss our drug box every few months because we never use it?
- 8.2. CPR issue: the ALS/BLS providers (in VA) need to hold CPR. Currently ASRC FTM and up is Healthcare Provider with Child (a ten-hour training).
 - 8.2.1. Alternative institutes include ASHI (American Safety and Health Institute) and NSC (National Safety Council). Instructors should adhere to American Heart Association (AHA) standards.
 - 8.2.2. There is a difference between Lay Person CPR and Professional Rescue CPR; the latter presumes BVM, etc., which is significantly more equipment than we carry/use.
 - 8.2.3. **Motion passed** to reduce the basic requirement from Full-Health Care Provider to Adult CPR for the Lay Person. There was one against and one abstention.
 - 8.2.3.1. Blood Borne Pathogens training needs to be included and can be done via the web.
 - 8.2.3.2. It was suggested that the ASRC set a minimum standard and groups could set a higher standard if they so desired.
 - 8.2.4. **Motion passed** that the ICO identify an easy method for BBP conference wide training; WV OMD (Carl Werntz) volunteered to set up a web-based course.
 - 8.2.5. **Motion passed** that the BOD approves any provider who follows the American Heart Association CPR standards is acceptable, including but not limited to ARC, ASHI, NSC, and AHA.
- 8.3. WEMSI issues: This is a cross-state standards issue. The three OMDs probably need to address on a state basis. There is an ASRC requirement for WEMSI in PA. WV OMD offered to develop one for WV. In the MD setting, without a MD OMD, it was discussed whether we needed to do WEMSI, but MD standards are watered down WEMSI and we don't want to overstep.
 - 8.3.1. **Action Item 20051113_02:** WV OMD shall contact the VA OMD regarding this.

8.3.2. **Action Item 20051113_03:** DELMARVA will investigate finding someone to develop Medical standards (or even be MD OMD) for MD for the ASRC.

8.4. Don Scelza (Conference Medical Officer) would like to step down due to perceived lack of support from GMOs and BOD. (He is at PASARCO this weekend, as the Chair of that organization.)

8.5. As part of our EMS license, we do background checks. Originally we said third-party background checks were not acceptable. SWVaMRG, as part of the Blacksburg Rescue Group, did background checks there and the BOD accepted those. A couple of court cases recently regarding third-party checks supports the Board's original stance. As a member group of the ASRC, should the Blacksburg Rescue Group be able to run the checks and supply the info to the Board?

8.5.1. **Action Item 20051113_04:** Vice Chair will write to EMS for clarification on who can submit and do the check.

9. **Treasurer's Report:**

9.1. Projected Income \$5780, Projected Expenses \$7582. Differences about \$2000. That is in the bank account, but is not a pace we can maintain.

9.1.1. Rosters need to be updated.

9.1.2. Earmarked funds for management classes cannot be redirected.

9.1.3. Need to discuss fund sources, raising dues or fundraising.

9.2. Review of books will be completed next Tuesday.

9.3. **Motion passed** to release file box and AED earmarked funds and return to general account.

9.4. **Motion passed** to increase individual dues by \$5 a year (to \$15) beginning with the Jan 2007 dues.

9.4.1. Many parks are requiring SAR groups to have liability insurance to visit / play.

9.4.2. BRMRG has to file in April for next school year funds, so they need to know well in advance of any budget changes. SWVaMRG and PVRG file in October.

9.4.3. A recommendation was made that teams with budget timelines contact the Treasurer before their budgets are due regarding any likely future changes.

9.4.4. A fundraiser through a company in California that does Fire and Rescue calendars was suggested by Pamela Paulding.

9.4.5. United Way and Combined Federal Campaign were again suggested as other sources.

10. **IT Report:**

10.1. **Motion passed** that Evan Keto replace Steve Weiss as the Webmaster.

11. **VASARCO:**

11.1. Commonwealth IS standards (which include FEMA 700) are on the VASARCO website for discussion.

11.2. The Council suggested that teams talk to their local authorities and VA delegates and senators about upcoming changes to legislation on SAR, as well as inform them of what we do.

11.3. FTM standards were accepted and forwarded, and recertification was eased to "tasks" rather than "missions" due to a possible dearth of missions.

11.3.1. The CTO should conduct a quick compliance comparison between VA and ASRC standards.

12. **PASARCO:**

12.1. Meeting is today. Don Scelza is there.

13. West Virginia

13.1. No new news.

14. Maryland

14.1. MSTTF SAREX was held last weekend.

14.2. Within MSTTF, it was suggested that only NASAR-qualified teams be called out in Maryland

14.2.1. What sort of input has the ASRC had into this process? What impact does the MSTTF have? Maryland seems to be a “who you know and who likes you” search environment. The Chair is meeting with Maryland people to try to understand it. Other ends of the state could contact state police barracks and local contacts.

15. New Business:

15.1. **Motion passed** to approve Kevin Maskell as IC-II.

15.1.1. He was approved as IC-III at the April 2005 BOD meeting (General Meeting weekend.)

16. Future Meetings:

16.1. 22 January 2006, 10:00am, BOD meeting; location Prince William National Forest Park, and SMRG is conducting a SIM that weekend (21-22 January 2006)

16.2. 8-9 April 2006, BOD and GM; a committee to plan events and ensure meeting space includes the Chair (Peter Pennington, SMRG), Carl Werntz (MARG), Suzen Collins (PSAR), and Rene Carrier (SMRG). A suggestion that an FTL testing session occur then. Suggested location: Blackburn Trail Shelter, outside Round Hill, VA

17. The meeting officially adjourned.