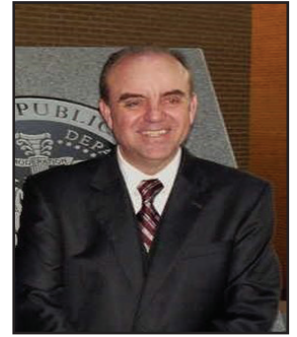


KEITH WAGES, DIRECTOR OF THE GEORGIA OFFICE OF EMS AND TRAUMA

An excerpt from our Q&A session with Keith Wages was printed in the Summer 2019 GEMSA Journal. Read the interview in its entirety below.



Keith Wages, Director of the Georgia Office of EMS and Trauma, has dedicated his entire career to the EMS community, serving as an EMT, EMS Director, EMS Program Director, Deputy State Director and State Director of EMS and Trauma, as well as serving as a Consultant for Disaster and Emergency Preparedness issues.

Throughout his career, he has been recognized with numerous Region and State EMS Awards, some of which include the Dr. Zeb L. Burrell, Jr., Distinguished Service Award (1993), Dr. John B. O'Neal, III, EMS Pioneer Award (2007), Georgia Association of EMS Chairman's Award (2009), and the Northeast Georgia EMS Special Achievement Award (2010). In 2018, he was selected as the recipient of the Governor's Public Safety Award in recognition of his outstanding contributions to the EMS profession over the past four decades.

As Keith prepares to retire from the Georgia Office of EMS and Trauma, we wanted to give Keith a chance to tell us more about his career and his accomplishments, but also let him address the Georgia EMS community. The following is an excerpt from our question and answer interview session with Keith.

GEMSA: *When did you get started in EMS?*

Keith: I started at Barrow County EMS in 1977 and worked there until I graduated from the University of Georgia. Soon after graduation, I was hired as EMS Director for Walton County Hospital in Monroe.

GEMSA: *Why did you decide to pursue an EMS career?*

Keith: I had a phenomenal high school biology teacher, Ms. Pearl Wall, who not only taught us so much about biology, but also wanted to show us the practical applications of science. So she arranged for professionals who use science in their jobs to lecture to us. One of those professionals was the local EMS Director (Bill Harris, who as many people will remember went on to become the

Regional EMS Coordinator for Northeast Georgia and later an accomplished EMS Educator) to lecture to our class about the EMS profession. Based on Bill's lecture, I decided that was how I wanted to work my way through college.

GEMSA: *Are others in your family involved in EMS?*

Keith: I was the first in my family to pursue a career in EMS, but I do have a much younger cousin who has since joined the profession.

GEMSA: *Tell us more about your background before joining the Georgia Office of EMS.*

Keith: As many people in EMS know, this is my second tenure as Georgia's State EMS Director. Prior to becoming the State EMS Director the first time, I served as Director of Walton County EMS and Regional EMS Director for northeast Georgia from 1983-1990. In 1990, I came to the State EMS Office as deputy director with our director at the time, Dr. John B. O'Neal was almost solely responsible for me having that first opportunity. He was an incredible director and an even greater human being, and even though his tenure was cut short due to illness, he had a tremendous impact on EMS in Georgia.

My journey back to the State EMS Director position in 2010 was considerably different and included several experiences including Medical Coordinator for the Office of the Governor's State Olympic Law Enforcement Command (SOLEC) in 1996, Executive Director of the Minnesota EMS Board (which is synonymous with Minnesota's State EMS Director), Director of Planning for the Georgia Emergency Management Agency, and Division Director and Project Manager for an international emergency management and homeland security firm. While in that position, I managed projects for the CDC in Atlanta, the Department of Homeland Security in Washington DC, the Prime Ministry of Turkey in Istanbul, and numerous state and local governments throughout the country. In 2007, I joined the Georgia Association of

EMS as Project Manager, and in 2010, I accepted the State EMS Director position to work for Dr. Pat O'Neal, who I believe has done more for EMS in our state than any one person.

GEMSA: *How long have you been Director of the Georgia Office of EMS?*

Keith: All total, I have served as Georgia's State EMS Director for 15 years with 9 of those years being during this second tenure.

GEMSA: *How did your previous positions help you in your current role as Director in Georgia?*

Keith: Obviously having been State EMS Director in both Georgia and Minnesota before was particularly helpful this time around because I really understood the role of the office and the position.

And working with GAEMS (now GEMSA) was a huge benefit because it helped me reorient to the Georgia EMS community after having been away for a few years. It allowed me to see EMS from a different perspective, so I was very grateful for that experience.

While those three jobs were valuable and necessary steps along the way, I actually think the two experiences that prepared me the most were the two times I worked for Gary McConnell, first as Medical Coordinator at SOLEC and then later as a Senior Manager at GEMA. Mr. McConnell was an incredible agency head, mentor and role model, and my only regret was that I didn't have a chance to work for him sooner and longer. He always put people ahead of politics, and I always said that if I ever had the chance to lead another state agency, I would do my very best to use what I learned from him as my guide. Gary has recently authored a book titled *"It's All About The People."* Everyone who knows him knows that there could not be a more appropriate title for his book because that truly is how he approaches his professional work and his life. It was an honor to work for him, and there is no way I ever could repay him for what he taught me.

GEMSA: *What were some of your goals when you became Director?*

Keith: In the 14 years that I had been gone from the position of Georgia's State EMS Director, there had been a significant amount of turnover in the position, which I do not think is good for an organization. One goal I had was to bring some stability to the office, which I think we did.

As for program goals, looking back, I wanted to improve the licensing processes for personnel and agencies, increase our role in systems of care such as trauma, stroke and cardiac, improve our data system (GEMIS) and enhance the visibility and image of Georgia's EMS system on a national level.

GEMSA: *What goals did you accomplish?*

Keith: As for the accomplishments, we certainly improved the speed in which we issued personnel licenses because we reduced the time from several days (and in some cases, weeks) down to one day in most cases. That was more a function of the hard work and determination by Jassene Williams, our Personnel Licensing Coordinator, than it was significant system improvement. My real goal was to transition to online applications for both personnel and agencies because that is much better for the applicant and for the operation of the office, so it definitely is a win-win. We will accomplish that in the next couple months, probably after I am gone, when we implement License Manager. While I am thrilled that we are going to have such a great tool, I am disappointed that it was not accomplished much sooner.

With respect to systems of care, we have had great success with the development of our stroke system, and many people around the nation believe we have one of the best overall stroke systems in the country. I always say that all really successful systems of care have three characteristics: 1-Great leadership; 2-A committed network of stakeholders; and 3-An environment where EMS and hospitals are totally integrated and working as a team.

With the stroke system, we have all those things. Our leader was Dr. Michael Frankel, Director of the Marcus Stroke Center at Grady, a professor at Emory and Medical Director for the DPH Coverdell Steering Committee. Our network of stakeholders was the Georgia Stroke Professionals Alliance (GSPA), an incredibly dedicated group of stroke coordinators from hospitals across the state who focused on collaboration rather than competition. And finally, we had outstanding EMS agencies from around the state that joined the Coverdell Pilot Project and worked closely with the Primary Stroke Centers to assure that we were doing everything possible to improve outcomes. While it would be impossible to name everyone from EMS who worked on this initiative, I would be remiss if I didn't recognize David Briscoe of National EMS, Greg Chapman from Houston County

Medical Center EMS, and Chris Threlkeld, the Regional EMS Director for Northeast Georgia, because they made a special commitment to the stroke project from the very beginning and have remained active members of the team to this day. While I have had many wonderful experiences in my EMS career, I consider the highlight to be my work with Dr. Frankel, GSPA, the Georgia Coverdell team, and the CDC because everyone was singularly focused on improving patient outcomes, and I believe we, as a statewide system, are truly making a difference.

Now we are early in the process of building a cardiac system of care, and I hope and believe that team will have similar success going forward. I know for a fact we have an incredible leader and advocate for that effort in Dr. Jeff Marshall from Northeast Georgia Medical Center in Gainesville. If not for Dr. Marshall's leadership, the legislation creating the Cardiac Care program never would have passed, and we are very grateful to him and the entire Northeast Georgia Health System team that supported us throughout the process and continues to support our efforts today.

With respect to our data goals, yes, we certainly were successful in increasing data submissions and improving data quality. As Angie Rios, our longtime Data Manager and the driving force behind our progress, would always remind us, data quality is a journey rather than a destination. There always will be more to do and more improvements to make.

And for the last goal I mentioned, yes, I am confident we accomplished the goal of enhancing our image and visibility on a national level.

GEMSA: *How has EMS changed during your career?*

Keith: In 42 years, there obviously have been many changes, but I generally think of the most significant changes being in four main areas:

1. The knowledge and capabilities of the medics have increased immensely,
2. The quality and sophistication of the equipment have improved dramatically,
3. Our access to reliable data is at an all-time high, and
4. Financing of the EMS system is far more complex and challenging.

GEMSA: *Outside of the OEMS, what other organizations have you been involved with and what did you do?*

Keith: While related to my role as State EMS Director, I serve as Georgia's Commissioner on the Interstate Commission for EMS Personnel Practice, sometimes referred to as The EMS Compact, which was created by the enactment of the REPLICA legislation in 2017. Also, I am a member of the National EMS Museum Board of Directors and on the faculty of the NREMT EMS Physician Fellowship Program.

GEMSA: *Specifically, what was your involvement with The National Association of State EMS Officials (NASEMSO)?*

Keith: Over the years, I have served in several capacities for NASEMSO after returning as State EMS Director in 2010 with my first positions being chair of the south region and chair of the committee that focuses on highway safety, which we call Highway Incident and Traffic Systems (HITS). And as a regional chair, I also was a member of the Board of Directors. In 2014, I was elected president-elect, and in the September of 2016, I assumed the position of president. Normally terms are for two years, but we changed our election cycle, so I actually will have served two years and nine months when I pass the gavel to the incoming president on May 16 in Salt Lake City.

And related to my role as president of NASEMSO, I am the current chair of the Joint National EMS Leadership Forum, which is a group of representatives from each of the national EMS organizations who come together to facilitate a shared vision, collaboration, and purpose to improve EMS and the conditions that affect EMS throughout the country.

I think participating in national organizations is important for a variety of reasons: it provides a unique educational opportunity to learn from colleagues in other states who face similar challenges, it provides a forum to talk about our successes and share our best practices with others, and it builds strong relationships with other State EMS Offices and those relationships, especially with neighboring states, are very important during major events such as hurricanes, floods, or tornado outbreaks because we obviously are sharing resources and providing mutual aid across state lines.

As president of NASEMSO, I was provided the opportunity and honor of representing our profession at many meetings and serving as a liaison to numerous groups,

so to summarize all that I learned or gained from my NASEMSO experience in a few lines would be impossible, but I would like to highlight two examples that stand out to me.

One example is my membership in and participation with the Federation of Association of Regulatory Boards (FARB). I doubt anyone has ever heard of that group, but in short, for every profession that must have a license to practice (EMS, physician, nurse, architect, accountant, funeral director, etc.), there is a state agency that issues that license, and each of those state agencies has a national association such as NASEMSO. Approximately 18 of those associations come together as FARB with a simple mission: to advance excellence in regulation of the professions in the interest of public protection. While the things our licensees do may be very different, the things we do as regulators of those professions are very similar (exam administration, investigation, suspension, revocation, administrative hearings, etc.), and I learned more about professional regulation from Dale Atkinson, FARB's Executive Director and my FARB experience than I have ever learned about anything else from any other source. It absolutely changed the way I approached our regulatory processes and it dramatically enhanced my ability to fulfill my responsibilities. There is no doubt in my mind that we do a better job as professional regulators because of FARB, and if not for NASEMSO, I never would have been introduced to FARB.

The second example is completely different: in 2017, the US Department of Health and Human Services, the US Department of State, the CDC, and Phoenix Air (a Georgia-based air medical service) conducted a full scale exercise to simulate the medical evacuation of patients from West Africa back to the United States. I was given the opportunity to represent the EMS profession in the exercise. About 30 of us boarded a Boeing 747 Cargo plane in Atlanta with a state-of-the-art ISOPOD and flew all night to Dakar, spent the day there, then flew to Sierra Leone to meet with local officials and then load simulated patients on the 747 and transported them to Washington DC and New York City area airports for local EMS agencies to transport them to local hospitals. While certainly not as useful as the things I learned from my FARB experience, other than living and working in Istanbul, Turkey for two years, it was the most unique work experience I have ever had. I will be forever grateful.

GEMSA: *What advice do you have for Georgia's EMS profession in the future?*

Keith: My suggestions are relatively simple: join GEMSA; be active in the association and its activities; be united as a profession, put aside minor differences and focus on the many common goals we all share; and be good storytellers. Georgia's EMS community has a great story, and it needs to be told widely and frequently. We need to tell it to elected officials, both state and local, to other healthcare professionals, to other public safety colleagues and to citizens. We should never allow misinformation and outright false information to be the message people are hearing about our profession, but the only way to prevent that is for us to be the messenger.

GEMSA: *From your involvement with EMS on the national level, how would you rate Georgia's EMS System?*

Keith: Georgia is bordered by five states and if we go out one more tier to include the states of Mississippi, Kentucky and Virginia, we literally are surrounded by eight states with great EMS systems and great state EMS offices. I am proud to call each of those state directors a friend and colleague.

I obviously have a bias for Georgia's EMS system, but I honestly do not think any state system or state EMS community is better than what we have here in Georgia. At the risk of sounding like I have a geographical bias, I do not think any region of the country does a better job of providing EMS than the nine southern states I mentioned. I think each of us have areas where we do a particularly great job and of course, we all have areas where we can improve. I think the really important thing is that we all recognize what those areas of improvement are, and we all working to improve in a collaborative way. Not a week goes by without David and/or I talking with another state EMS director or state EMS data manager about an issue of mutual interest. We are constantly sharing information and supporting each other.

GEMSA: *From your involvement with EMS on the national level, what sets Georgia's EMS system apart from other states?*

Keith: We do have a lot of strengths. Being the eighth largest state by population in the country and having a significant number of visitors associated with sports, tourism, conventions, and the film industry, we have one of the most robust EMS systems in the country, responding to almost 2.5 million EMS calls each year

and consistently ranking in the top five (and as high as number two) in number of patient care reports submitted to NEMSIS (the national EMS database). Our EMS system does a great job managing the volume of calls in a professional and capable manner.

And speaking of data, thanks to David Newton, we are emerging as a leader in EMS data collection, linkage, and analysis. Florida has been a leader in that area for a long time, and we have learned so much through the years from Steve McCoy, Florida's State EMS Director (who by the way received his paramedic training in Albany, Georgia and is a former Georgia paramedic), and then when David joined the OEMS, we really elevated our performance to a higher level. But I always tell EMS groups that our EMS data system is completely reliant on the medics who complete the reports and our services that submit the data, so we are very grateful for the wonderful job our providers are doing in documenting the great service they are providing. We brag on our providers every chance we get.

And two other things stand out as points of pride for our EMS system:

1. how well our agencies respond to challenges such as coastal evacuations due to hurricanes, tornado outbreaks, large sporting events, and the Ebola Outbreak in 2014 that impacted our state.
2. how our medics, instructors, service directors, and hospitals embrace national standards such as the National Education Standards, NREMT examinations, paramedic program accreditation, FBI criminal background checks, National Scope of Practice, the NEMSIS data standard, ambulance design standards, American College of Surgeons standards for trauma centers, national accreditation for stroke centers, just to name a few.

GEMSA: *What do you think Georgia's EMS system needs to improve upon?*

Keith: In some communities, EMS and hospitals need to improve the relationships, cooperation, and integration they have with each other, specifically as it relates to the exchange of patient information from EMS to the hospital staff and to the interhospital transfers of patients with time-sensitive conditions such as stroke, cardiac, or trauma.

In order to provide optimum care to critical patients,

hospital staff, whether in an Emergency Department or Cath Lab, they need certain information from EMS personnel regarding observations and treatments that occurred in the prehospital setting. Unfortunately, that is not always occurring, and we must make providing that information a priority.

And if we are truly committed to getting the right patient to the right place at the right time with the right care and by the right means, we must apply that to, not only our 911 patients, but also to those patients who are in a hospital that cannot provide the necessary lifesaving intervention and who need immediate transportation to a tertiary center.

GEMSA: *Do you have any advice for this to happen?*

Keith: As for the solution to the EMS/hospital integration, I would rather it not be additional regulation, but rather enhanced communication and collaboration between EMS providers and hospitals at the local level. I told this story yesterday at a stroke conference in Atlanta: when I was state EMS director in the 1990s, I kept a coffee cup on my desk from Archbold Medical Center in Thomasville because of the slogan on the cup: "Teamwork saves lives. Be a part of the team." I believe that applied then, and I believe it applies now. If we are going to improve outcomes, EMS and hospitals must work together as a team.

GEMSA: *What goals do you hope the next Director will consider?*

Keith: Dr. O'Neal and I created some talking points that we have used to convey our message; we always said "we aspired to create EMS systems that are physician-directed, data-driven, community-based, and patient-centered." We applied that to prehospital, stroke, cardiac, trauma, mobile integrated health, infectious disease, and really any and all systems. Obviously, I believe that approach has value, so naturally I hope the new director will embrace goals that are consistent with those principles.

A few general examples might be better linkage between different data sets, more involvement of local EMS medical directors in protocol development and quality improvement initiatives, and expansion of mobile integrated healthcare and community paramedic programs.

GEMSA: *What other advice do you have for the next Director or Georgia EMS as a whole?*

Keith: Shortly after I returned as state EMS director, I was talking with Chris Threlkeld, who has been my friend for many years, and he said “given all the experiences you have had since you were State EMS Director before, I bet you know better what to say in certain circumstances this time.” I immediately replied “maybe...but the really important thing I learned between the first time as director and this time is what NOT to say.” In other words, it is not necessary to always share every opinion, just because you have one, even if you are right.

I think it is important to listen to all views and perspectives and to stay engaged in meaningful dialogue with the formal organizations such as GEMSA, EMSAC and EMSMDAC as well as with individual medics, directors, educators, physicians and other stakeholders. No one in any leadership role can please everyone, nor should they try, but we all can listen, try to understand other points and be respectful when there is disagreement.

GEMSA: *What do you plan to do once you retire?*

Keith: As for my future involvement with EMS, for now I plan to fulfill my term as immediate past president of NASEMSO, which means continuing to serve on the board of directors and executive committee, and I’ll also continue to serve as member of the board of directors for the National EMS Museum.

Other than working with those two national associations, I really do not have any major plans right now. I recently completed the renovation of my farmhouse on my family farm, but I still have a few finishing touches that need to be done, so I’ll work on those tasks during June and July. Also during that time, I am going to attend some concerts by a few of my favorite bands at various venues around the country and hopefully get some rest. After the summer, I’ll see what happens.

GEMSA: *Any final comments?*

Keith: As I said at the GEMSA Leadership Conference at Lake Lanier and a couple other forums, I am grateful beyond words for the opportunities I have had to serve Georgia’s EMS community, and while I cannot possibly thank everyone by name, I do want to thank all of the staff at the Office of EMS and Trauma, including those who are no longer there and specifically Mickey Moore and Ernie Doss for their past service as deputy director.

They were directly involved in and contributed to all of our successes, and I cannot thank them enough. Also, my sincere and special thanks to Dr. Pat O’Neal for giving me the chance to return to the position of state EMS director, to Courtney Terwilliger for giving me the chance to work for the Georgia Association of EMS in 2007 because it was that opportunity that paved the way for all that followed, to David Newton for making my last year as director successful as well as enjoyable, and to Don Cargile for his friendship and support for all 40 years and for making sure I always felt in touch with the Georgia EMS community regardless of where I was working. And finally, to Kim Littleton, for being so gracious to me since she assumed the position of Executive Director of GEMSA and for always sharing thoughts and observations with me in such a constructive and professional way. As she has traveled around the country representing GEMSA, she has represented Georgia in such an amazing way, and I appreciate so much all the positive things she has said about the relationship between GEMSA and OEMS; it has been an honor and pleasure to work with her.

And in closing, I would like to pay tribute to all the leaders in the generation that preceded ours. While there were many, I want to name five who meant so much to me and had an immeasurable impact on my life and career: Pat Atkins (National EMS), Bo Pounds (Metro Ambulance and Gold Cross), Stanley Payne (Floyd Medical Center), Steve Mobley (Med Star- Savannah), and John B. O’Neal III, MD (state EMS director and state EMS medical director).

One of my favorite quotes is: “If you do not participate in planting the trees for the future, you do not deserve the honor of standing in the shade of the trees planted in the past.”

The generation that preceded us left us with a great a system and an incredible foundation. My only hope is that we do the same for the generation that follows us.

To borrow lyrics from one of my favorite Jimmy Buffett songs as he closed out a concert: “it has been a lovely cruise; thank you for having me on your ship.” ■