

**EMS ADVISORY COUNCIL MEETING
MINUTES
July 23, 2015
AV Room 210 – 212 State Capitol**

Members Present: Kari Enget, Curt Halmrast, Lynn Hartman, Lynette Dickson, Tim Meyer, Ken Reed, Diane Witteman, June Herman

Members Not Present: Terry Ault, Karin Mongeon, Jeff Sather

DoH Representation: Tom Nehring, Kelli Sears, Amanda Roehrich, Shila Thorson, Elizabeth Pihlaja, Jan Franklund, Lindsey Narloch, Tim Wiedrich, Dr Szlabick and Kari Kuhn

Others Present: Adam Parker, Sherm Syverson, Ken Rensch, Ron Lawler, Tom Petrik, Jim DeMell

Curt Halmrast welcomed the committee and introductions were made around the table.

Approval of Minutes:

Motion made: EMSAC approval of April 23, 2015 meeting minutes.

Motion made by Diane Witteman; seconded by Dr Szlabick.

No further discussion; motion carried.

Review / Approval of EMSAC purpose

- Changes were made regarding the conflict of interest section per April's meeting and signature / date lines were added.
- There was discussion regarding the possibility of all decisions being a conflict of interest if there is no monetary cap added as all council members work within the industry.
 - Tom feels that any dollar amount equals a conflict of interest.
 - Missing:
 - Terry Ault
 - Curt Halmrast
 - Jerry Jurena
 - Karin Mongeon
 - Chet Pollert
 - Jeff Sather

Motion made: Adopt the EMSAC Purpose as written.

Motion made by June Herman; seconded by Diane Witteman.

No further discussion; motion carried.

Tom requests the signed copies to be submitted today.

Funding Area Grants Update

- 6/30/15 final date for last year's cycle.

- One grant is outstanding.
- Issues with grant recipients not spending all their money and supplying appropriate documentation.
 - Amanda has made efforts to encourage spending on appropriate items.
 - Extra staff time and resources are used in attempts to move forward with these services.
 - Lack of spending and the possibility of turning back money does not reflect well when it comes to showing need to legislature.
 - Requesting funds back from services and redistributing to other services is a difficult and time consuming task.
- Tim Wiedrich asked for EMSAC advice on the issues.
 - Sherm expressed his belief that services are awarded funds that they don't need.
 - Reward success rather than give funds to failing services.
 - Collaboration is requested and not rewarded appropriately.
 - Awardees that do not follow through appropriately should not be eligible the next cycle.
 - Provide enough time to complete the application.
 - Limit the number of grants awarded.
 - Require more explanation as to what they are doing for collaboration; maybe even face-to-face
 - Lynette brought up the committee formed that has not met yet.
 - Hold repeaters responsible.
 - Provide technical assistance even if funding is withheld.
 - Documentation of issues and reasoning for not funding in following years.
 - Legislators look for the impact of the funds.
 - Tom stated that the intent of this grant was initially decided by the legislature.
 - Have accomplished some of the original intent, but there is a long way to go.
 - The money has never been refused from a service due to underfunding of a project from this grant or from the oil impact grants.
 - Intent of supporting the funding areas and building an EMS system rather than individual ambulance services.
- This is the first cycle with applications consisting of combining funding areas.
- \$18,200 - \$350,000 range of request.
- HB 1004 mandated no more than 15% of funding be rewarded to services receiving oil impact funds.
- Changed the funding process.
- Amanda does individual monitoring of each grant regarding when they are spending, when to attempt to reallocate, etc.
- Amanda will look at getting the committee together for discussion
 - Look at the funding area grant process and engaging future changes.
 - Kari Enget
 - Diane Witteman
 - Lynette Dickson
 - Jim DeMell

Rules Update

- Handout shows rules that are in the final formatting process.
- Tom suggests an annual rule change process consisting of timelines and policies as established by the Division unless something is needed in urgent manner.

- A calendar will be created by the Division and presented at the October meeting.
- Take into consideration legislative activity, etc.
- Through this current rule change process there has been a shift of eliminating detail that has been contained in rule but we feel should be contained in policy.
 - This will create less of a need of frequent rule changes.
 - Policy creates much more flexibility.
- Additional rules will be added for licensure of community paramedics as well as air ambulance.
- Policy may or may not be reviewed by the EMSAC as this is a management function.

Update Training Contract – NDEMSA / DoH

- 77 phase 1 trainings have been completed, 75 being EMS.
- This biennium will consist of curriculum changes as needed.
- On-line training, conference training, as well as on-site trainings will take place this biennium.
- Evaluations have reflected attendees like the 70% hands-on training.
- Not intended to remain dedicated to LUCAS or stroke training, etc.
- Meant to maintain a current education stream as needed to local ambulances.

HB 1255 / Air Medical

- Requires a listing of usual and customary charges of air ambulances and their fee schedule and availability of this information to all providers.
- Requires a primary and secondary list.
 - The primary list consists of those providers that participate in those insurance plans that cover 75% of the insured lives in ND.
- Requires DoH to promulgate rules regarding air medical.
- A subcommittee was formed and a meeting was set up inviting interested parties.
- A complaint was filed against the DoH leading to a legal opinion and DoH was advised not to hold the meeting as this would be an opening for discussion on any related topic.
- This law is in effect at this time.
- A meeting has been scheduled with the governor's office and other high level officials in regards to movement on this law.
- Ken Rensch works with Stanley, Parshall and Crosby ambulance services which are in regions that often use air ambulance.
 - Ken joined the meeting by telephone to share concerns regarding time-to-launch issues as well as concerns with training / certification levels of flight crews.
 - Ken will be added to the subcommittee when the time comes to get them together.

DEMST Moving Update

- Moving through phases of construction and looking at a September move date.
- Hopefully the October EMSAC meeting will be held at the new facility.

System Updates

Trauma System – Dr. Szlabick

- Nicole is out today but has been working with Ruth to learn the trauma system.
- There has been little movement in 'well time' prior to transfer.

- The state trauma committee is looking at adding a requirement of designation to include at least 50% attendance by medical directors to PI meetings.
- The state trauma treatment manual has been updated.

Stroke/Cardiac System – Shila Thorson

Stroke

- Working towards acute stroke ready designation.
 - Applications have been received.
 - The designation process is in the works.
- Working on a template for stroke transport plans.
 - Differs from trauma transport plans as some hospitals will choose to not be designated and bypass rules will need to be in place.
- Dr. Darkhabani is leaving and the stroke committee will be looking for a new chair person.

Cardiac

- Mission LifeLine funding that has been sub-granted to the program has some remaining funds that Shila will be seeking a continuation for.
- Cardiac transport plans will also be in the works.
- Million hearts paramedic project was intended to be done June 30.
 - \$50,000 will be granted to assist the continuation of this program.

Cardiac Ready Community – Tom

- Community that is prepared to take on cardiac emergency events and improve the survival rate.
 - Recognition of signs and symptoms and access to the EMS system.
 - Availability of AEDs.
 - High performance CPR.
- Powers Lake is the pilot community led by the Powers Lake ambulance.
 - Powers Lake does not have a hospital and has a clinic staffed ½ days per week.
 - The size of the community lends itself to the project (approximately 400).
 - June 24th was the public kickoff to promote awareness.
 - 15% of the almost 100 people screened for hypertension found out they were hypertensive and did not previously know it.
 - The event was video recorded in order to create an introductory video for cardiac ready communities.
 - Train at least 50% of the community in CPR.
 - Set number of AEDs.
 - CPR instructors within the community.
 - The Sim truck will be in Powers Lake for a cardiac demonstration on August 1 and they will continue doing hypertension screenings.
- The Division is now looking at ways to replicate this in other communities.
 - Dickinson and Rugby have expressed interest.
 - Discussing different levels of designation.
 - Interested communities should contact the Division.
- CPR is now a graduation requirement in North Dakota.

EMSC – Elizabeth Pihlaja

- Launched pediatric prepared ambulance designation program.
 - 2 ½ services have completed the application.
 - Rugby, Oakes and West Trail.
 - The application can be found on the DEMST website.
 - Services receive a decal showing their designation.
- Reaching out to work with ENA to move pediatric readiness ahead in hospitals as well.
 - Trying to strengthen North Dakota relations with ENA.
- Working on applying for carryover funding.
 - PEARS training in each of the four regions.
 - Discussing NDEMSEA regarding pediatric preconference training possibilities.
- Next EMSC advisory council meeting will be September 3; 1:00 – 3:00 PM in AV Room 210 – 212.
 - Need more rural representation.
- Looking for funding for restraint devices to be kept in ambulances.
- Broselow tapes, neo-natal bag valve masks, lower extremity traction devices for distribution. If in need, contact Elizabeth.

Education – Kelli Sears

- NREMT changes regarding recertification and the (pilot) project.
 - DEMST will be requesting a conference call with NREMT.
- Ghana education and certification trip was successful.
 - Now have 4 NREMT EMTs.

Data – Lindsey Narloch

- Creating an on-line app functioning to replace the outdated map book.
 - Waiting on next generation 911.
 - Collaborating with DES.
- New national person in charge of data.
 - National performance measures – over 400 submitted in May when requested.
 - Goal is to have 50 – 75.

Leadership Training – Tom Nehring / Elizabeth Pihlaja

- Have the minimum number of spots already registered but do have a few spots left.
- \$100 cost to the attendee.
- Funding for Level III and IV is unknown at this point.
- Lack of evaluation and measurements to show value.
 - Can any measurements be seen in the funding area grant applications / scores compared to those that have attended training and those that have not.
 - UND is currently looking at evaluation.
- Expansion of the program needs to happen to increase effectiveness, possibly to management training.
- \$40,000 in flex funding lost.
- Leadership was brought up for discussion many times in the EMS Rural Conference.
- Possibly have something by October meeting.

- Easier for a leader to get buy-in by service members if more service members have attended training.
- Sustainability tool that was displayed and discussed at the EMS Rural Conference.

Community Paramedic Program – Ken Reed

- Ken has resigned as the CP Coordinator with DoH as of July 1.
- Summary hand out of the program was distributed.
- Sherm – F-M program is currently following 30 patients. Their ER visits have been cut by half and their no-show to primary providers by 30%.
 - Major financial impact.
- Capturing the numbers of people as well as the financial impact will be important when looking for funding.

Updates - Subcommittees

System Development – Tom Nehring

- No meeting

Dispatch – Lindsey Narloch

- No meeting
- Continue working with DES and dispatch

EMS Information Interoperability – Lindsey Narloch

- No meeting
- Participants think it can be done, but the how needs to be formatted

Air Medical – Tom Nehring

- No meeting
- Plan to meet soon

Other Business

- National Rural EMS Conference
 - North Dakota was widely represented.
 - Put on by JCREC.
 - 200 participants.
 - Was received well and there are hopes of having an annual conference.
- EMS Rendezvous Recap
- CAH/EMS Collaboration meetings – Lynn Hartman, Mona Thompson, Jim DeMell
 - Relation with the flex program
 - Carrington, Dickinson, Tioga, Jamestown and Harvey (NDEMSEA website)
 - Lynn: 17 people representing ambulance services, air services, hospitals, etc.
 - Clarification of community paramedics
 - Collaboration
 - Immediate completion of PCR
 - Preference to short report or oral report
 - These are not adequate nor do they express the importance of the EMS field
 - Jim: funding area grant scoring inconsistencies and the feeling that they are predetermined.
 - Open to the public for review if needed
- Time was spent with council members broken into the following groups:

- System Development
- EMS Assistance Grant

Adjourn (Next meeting scheduled October 22, 2015 at the new Burlington Dr location).