Community Paramedic Sub-committee

Teleconference/BTWAN

January 6, 2014

MINUTES

Present – Ken Reed, Tom Nehring, Curt Halmrast, Jody Ward, Lynette Dickson, Lynn Hartman

Sherm Syverson, Tim Meyer, John Vaastag, Brendan Krupich, Karalee Harper, Jan Franklund

Ken welcomed all to the meeting and called the meeting to order.

Approval of meeting minutes from 11/22/2013 -

Minutes of the 11/22/2014 meeting were reviewed and discussed.

North Dakota Emergency Medical Services Advisory Board will be changed to read Emergency Medical Services Advisory Council (EMSAC).

Point of clarification under the Curriculum bullet point –

Tom asked for clarification of the $2,500 amount to send a paramedic to the Hennepin County program.

Ken – This is a rough cost. $2,000 is where the tuition is at; approximately $300 for books.

Tim made a motion to approve the minutes. Seconded by Lynette. Motion passed.

Appointment of Ken Reed as contracted Community Paramedic Coordinator -

The Legislature approved a .5 position for Community Paramedic Coordinator (CPC) and a .5 position for Stemi and Stroke Coordinator. It has been determined by the Department of Health to hire a .5 temporary contracted CPC and, unofficially at this point in time, a fulltime position for Stroke and Stemi.

The CPC position will be posted (hopefully today or tomorrow 1/7/2014) as a temporary .5 position. It will be advertised for one week and from there a decision will be made.

Possible conflict of interest was discussed regarding Ken applying for the Community Paramedic Coordinator position, as well as, seeking to be a pilot site; who decides who the pilot sites are? This has been discussed with the Department of Health and because the Community Paramedic Coordinator position is a temporary position and as long as Ken makes no financial decisions that benefit his organization, there is no conflict of interest. As far as selecting the agencies who will participate in the Pilot Project, those decisions will be made at the Committee Level not the Coordinator Level.

Pilot Project Progress -

Ken drafted and emailed a document for the committee's input, called Pilot Program Request for Proposals outlining the criteria for participating in the project. Ken asked for feedback from the committee regarding the criteria.

Feedback –

Below are the areas of the Pilot Program Request for Proposals that some felt needed clarification -

- The definition of Primary Care and who that encompasses.
- There is confusion with who has oversight.

The first two bullet points in the first section of the proposal after the sentence In order to qualify for inclusion in the pilot project, your service would need to have:

- At least one full time licensed paramedic with at least 2 years of ALS experience.
- An affiliation with licensed medical provider/medical facility that would be willing to serve as your primary referral and medical oversight for primary care services.

The above items were discussed and Ken answered any questions. Ken will work on clearing up any confusion in the proposal.

Ken asked for a motion to approve sending students from F-M Ambulance and Rugby EMS to the CP training so they can begin identifying and enrolling students.

Tim Meyer motioned to approve F-M Ambulance and Rugby EMS to send personnel to the Community Paramedic Training Program on January 27, 2014, out of Hennepin County with the understanding that both F-M Ambulance and Rugby EMS will be required to prepare a proposal for review from this committee. Lynette seconded the motion. Motion approved.

In the meantime Ken will send out letters to those services that are determined to be likely eligible to participate. If there is interest, we will begin working with them to develop a pilot site at their location.

Second Stakeholder Meeting – Tom

The first Stakeholder meeting was held and there were a number of associations and organizations who claimed they did not get an invite. This was not case, however, and from the input Tom received from people outside the Health Department, there needs to be another Stakeholder meeting held soon and one more after that.

Allies and Potential Allies -

- Nurse Practitioner Group
- Long Term Care Association
- The Health Department

Time, Location, Invitations and Agenda -

- Set the date and time (mid-February), location (Bismarck) and a means to register.
- Send out invitations.
- Prepare the agenda (Ken, Tom, Lynette).
- Have a forum where there can be input from the audience and a FYI session of education.
- Key thing to remember is making folks understand this is not going to be an attempt to supplant any of the existing medical directors. It is all about addressing the gaps within each individual local health unit.
- Lynette suggested bringing in a speaker(s) who have done this and have been successful.

- EMS Association will assist with providing resources.

Long Term Program Planning –

Pilot project aside, there are things we need to start working on if CP is going to become a long-term, viable process in North Dakota.

Legislative Action –

The first piece for any of this to move forward is that the Community Paramedic is going to have to be a defined viable and licensed entity within the state for anyone to even consider funding it.

Potential conflict with Home Health regulations –

Colorado ran into this problem and the CP projects had to actually license as Home Healthcare agencies in order to perform the community paramedic function. We need to investigate this potential conflict for North Dakota.

How Are We Going To Get Reimbursed? - Ken

In Ken's opinion one of the things that has held us back from community paramedic-like projects, in the ambulance industry, is if you did anything other than take somebody in an ambulance to an emergency room, you didn't get paid for it. In order for this to continue to be viable long-term, there is going to have to be some form of reimbursement for these services in order for ambulance services to find this to be something that they want to be involved in.

At the committee level and certainly at the Coordinator level, we are going to have to work on crafting legislation to recognize CP which means there is going to have to be an approved training process, a licensure process, a defined scope of practice that will be entered into the Legislature and become law.

Creation of in-state training program -

It would be ideal if we could do our own program in state. Anyone that takes this on would have to meet much of the same criteria as the paramedic training programs meet and be affiliated with a college. This would have to be a college course that would then grant credits for the coursework. We need to decide who to approach and who would have an interest in becoming the Community Paramedic entity in North Dakota.

Tom – Which ever college we approach, we also need to get involved with the curriculum development piece.

Other –

Tom will attend the Health Committee Hearing on Wednesday, January 8, 2014.

Senator Judy Lee and Karalee Harper will be added to the list serve of the sub-committee.

Next Meeting – Face to Face, Jamestown and the date TBA.

Meeting adjourned.