

EMS ADVISORY COUNCIL MEETING
MINUTES
January 22, 2015
AV Room 210 – 212 State Capitol

Members Present: Diane Witteman, Terry Ault, Lynn Hartman, Ken Reed, June Herman, Karin Mongeon, Tim Meyer, Curt Halmrast, Kari Enget (phone), Jeff Sather, and Lynette Dickson (phone)

Members Not Present: Chet Pollert and Jerry Jurena

DoH Representation: Tom Nehring, Kelli Sears, Ruth Hursman, Shila Thorson, Elizabeth Pihlaja, Jan Franklund, Lindsey Narloch, Tim Wiedrich, and Kari Kuhn

Others Present: Adam Parker, Sherm Syverson, Jim DeMell, Mona Thompson (11:00)

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

Approval of Minutes:

Motion made: EMSAC approval of the minutes from the October 24, 2014 meeting.

Motion made by Dr. Sather, seconded by June Herman.

No further discussion; motion carried.

Conflict of Interest Waivers

- EMSAC purpose document brought to members with suggested changes including the addition of a conflict of interest section rather than a 'waiver'.
- This document was reviewed by council members.
- The council would like the inclusion of the Department's definition of 'conflict of interest.'

Motion made: EMSAC approval of updated purpose document to include the addition of the DoH definition 'conflict of interest'.

Motion made by Lynn Hartman, seconded by Diane Witteman

No further discussion; motion carried.

2015 Funding Area Grants

- Discussion centered around the lowering of the number of funding areas.
- DEMST has had many discussions regarding ways to accomplish this goal and would like input from EMSAC.
 - Possible distribution by county
- The decision has been made to take coming year to make a final decision and move forward with changes due to the time-frame.
 - Minor changes will be made to the previous application and sent forward for approval.
- Based on the ask from previous funding cycles there was an OAR for an increase of 6.4 million.
 - Not through the legislative process yet.
 - Has been lowered to additional 1.6 million.
- EMSAC input

- Set priorities of funding requests.
- Quality is a priority.
- Mandating collaboration.
- Criteria should be tougher.
- Some applications should be denied with no funding to show no enabling of ambulance services.
- Establish sustainability of EMS regionally; not each ambulance service individually.
- June Herman suggested looking at information from the Regional Education Associations.
 - Their website contains a map of their 8 established regions.
 - Legislatively approved.
 - <http://www.ndrea.org/index.html>
- Diane Witteman suggested looking into possible training regarding non-profit boards from 'Authenticity Consulting, LLC'
- Define reasonable EMS.
- Original intent – fund those necessary services to meet reasonable EMS requirements.
- Possible requirement of attending application assistance session as part of the application process.
- Education to include entire squad rather than the squad leader only.
 - Sometimes they do not inform the rest of the squad of the application, process, what is applied for etc.
- Suggestion of a panel of 12.
 - Groups of 2 reviewers each review a number of applications.
 - Bring back to full panel.
- UND scoring panel.

Rules

- Proposed changes to DEMST rules are currently with Tim Wiedrich for review.
- Due to legislative activities there will be another set of rules to be completed after the legislative session.
 - DEMST may be responsible for certification / recertification of community health worker.

Update Training Contract - NDEMSEA

- DoH negotiating contract with NDEMSEA.
- Collaborative effort from various funding sources.

System Updates

Trauma System – Ruth Hursman

- Lots of education with new trauma coordinators.
- Beginning preparation for 2015 trauma conference in Bismarck in September.
- Updating trauma treatment manual.
- Ruth was busy assisting with Ebola education and response in October / November.
- Trauma issue regarding ATLS certification and emergency medicine physicians.

Stroke/Cardiac System – Shila Thorson

Stroke

- Requirements for the Acute Stroke Ready hospital designation level is in final review in the office and will soon be distributed to hospitals – joint commission is working on preparing requirements – here CAHs are not joint commission certified due to cost limitations.
- Comprehensive Stroke Center
 - The highest level.
 - There are none in ND.
 - One facility is reviewing requirements.
- Primary Stroke Center
 - 5 of 6 tertiary facilities in ND.
 - The other one is looking at requirements.
- Comprehensive and Primary levels are designated by joint commission with state designation to follow.
- Public education
 - Campaign regarding contacting the ambulance at the first signs of stroke.
 - Greater than 50% of stroke patients come by private vehicle.
- Stroke education modules completed with one being EMS focused.
- Designation will begin soon.
- Transport plans will need to be designed.
- Being modeled after the trauma system including the site designation system.
- HB 1323 has passed unanimously in the house human services committee
 - Minor adjustments to allow for option of acute stroke ready certification since we aren't using national criteria.
 - Some adjustments to the database language.

Cardiac

- Meeting with task force by telephone next week.
- Updating protocols.
- Million hearts project with community paramedics doing hypertension referrals
- May 18 – 19 state conference.
- June trying to reintroduce into 1004 for funding.
- Designation and transport plans will be set up similar to stroke system.

EMSC – Elizabeth Pihlaja

- Working on equipment purchases with carry over dollars.
- Updating pediatric resuscitation chart.
- Working on criteria for a voluntary 'peds level' for ambulance services.
- Pediatric transport trainings in regional conferences.
- Working on disaster preparedness for grades K – 12.

Training – Kelli Sears

- Regional conference training on the new pilot project recertification process.
- Three instructor / coordinator refresher courses have been scheduled.
- Protocol review with Ken Reed and Jeff Sather.
 - Also including Elizabeth in the pediatric protocol review.

Data – Lindsey Narloch

- Meeting with vendor yesterday.
- Gave them 6 months to follow through with requested deliverables.
- Lindsey handed out the attached document and briefly reviewed.
- QI Pilot Project in NW – Dr Sather
 - Large services were purposely left out at this point.
 - Mohall, Powers Lake, Velva, IHS Belcourt, Rugby, New Town.
 - Ralph Raenger did a data presentation.
 - Ruth did trauma / quality presentation.
 - Benchmarking and goals were discussed.
 - Measurements done in Feb / March
 - Meet again in May.
 - Plan to move to regionalize quality similar to the trauma model
- Tom discussed the OAR that was submitted for a new database.

Updates - Subcommittees

System Development – Tom Nehring

- Hoping to have a meeting prior to Rendezvous in April to develop discussion materials for medical director meeting.
- Not met but lots of discussion taking place.

Dispatch – Lindsey Narloch

- Lindsey is working with Next Generation 911.
- Working towards an understanding of the dispatch side of ambulance issues.
- DEMST is making efforts to follow dispatch / 911 bills as approved by the Department.

Quality Improvement - Dr Sather

- See above.

Community Paramedic – Ken Reed

- 3 programs active
- Billings county still in training – clinicals in MPLS currently
- Carrington – sending two people to next program in Hennepin
- Mandaree – interested
- F-M looking at CP training program
- 2321 – community health worker - \$38,000 biennium
 - 76,000 for 17-18 biennium
 - Masters of public health at UND –
 - Creation of curriculum AEMT/EMT-Community Health Worker (life support side of CP)
 - Reimbursement through Medicaid
 - CHW – lowest form of training
 - CP – top level of training
 - Bottom two levels need creation of curriculum
 - Bill defining CHW – DEMST has not had approval granted yet for tracking. Just introduced

- Writing fiscal note including FTE to be working on this program as well as working with Lindsey on other projects
- Would also include promulgation of rules

Air Medical – Tom Nehring

- It was previously determined there should be an air medical committee.
- Determine membership.
- There was recommendation to enlist a couple users of air medical as well as stake holders.
 - Brandon Gosch– New Town
 - Tim Meyer
 - Tom Nehring
 - Jeff Sather
 - Lynn Hartman
 - Invite to each service
 - Trauma coordinator from a CAH
 - Ruth Hursman (?)
 - Insurance department rep
 - BC/BS rep (?)
- Meet in the short term and elect officers.
- Tim Meyer will check into Minnesota bylaws, etc.

Distribution of Ambulance Tax Levys

- Distribution is to be based on amount of county covered by the service even when service is not physically located within that county.
- County cannot override the statute.
- Waiting on an opinion from the AGs office.

Needs Assessment

- Any new license needs to have a needs assessment completed.
- The Division wasn't prepared with a process when the situation first arose.
- Various levels of need: requests for ALS into BLS coverage area, request for service where there is none, request for same level coverage, etc.
- Assessments have been done in Beach and Mandaree.
- In process for Casselton.
- More time consuming and complicated than first expected.
- Working on simplifying the process from the Division standpoint.

Sustainability of Ambulance Service – Esmond

- Tom feels notification should be given to EMSAC regarding changes in ambulance service status or those struggling to sustain service
- DEMST has met with Esmond.
 - Staffing issues; they have 3 EMTs.
 - People living far from service
 - Options
 - 6 month waiver:
 - Corrective plan of action

- Move to different level (substation offer on the table), QRU
 - Written schedule with minimum of 2 people.
 - Chute time issues.
- Close down.
- Aneta – not sure of their future status.

Legislative Update – Tom and Curt

- Curt stated that NDEMSEA is watching 29 bills
 - 1/3 of these are property tax related
 - This information can be seen on the NDEMSEA website.
- DEMST must be approved by the Department to track or monitor a bill.
- Several bills were discussed.

Other Business

- Health information network – ND has been pretty active.
 - A meeting will be established with Sheldon Wolf, Lindsey, Dr. Sather, Tom, Curt, and Lynette regarding participation and sharing of data.
- Leadership training 2015
 - DEMST is taking over coordination of leadership training but NDEMSEA will continue with flex funding.
 - April 18 – 19 Level I
 - August 29 – 30 Level II
 - October 10 – 11 Level III
 - December 12 – 13 Level IV
- First ever National Rural EMS Leadership Conference Building Integration and Leadership for the Future
 - <http://nosorh.org/calendar-events/national-rural-ems-conference/>
 - May 5-6, 2015
 - Cheyenne, Wyoming
 - \$100 registration
 - Information coming out soon

Upcoming Meetings

- April 23, 2015
- July 23, 2015
- October 22, 2015

Adjourn