

EMS ADVISORY COUNCIL MEETING MINUTES

October 15, 2020

Virtual Attendance Via Teams

Members Present: Tim Meyer, Jeff Sather, Heidi Lako-Adamson, Kelly Dollinger, Curt Halmrast, RJ Benth, Kari Enget, Tim Blasl

Members Not Present: Lynette Dickson, Karin Mongeon, Theo Stoller

DoH Representation: Christine Brondyk, Sam Harrison, Kerry Krikava, Kari Kuhn, Chris Price, Deb Dutchuk, Tim Wiedrich

Others Present: Lindsey Narloch, Corrie Geurts, Joe Lies, Adam Parker, Ken Rensch, PJ Ringdahl, Ron Lawler, Chris Montera, Patricia Hardy, Sandra O'Connor, Cheryl Flick, Tiffany Harr

Welcome and Introductions

Welcome and introductions were made for all present.

Approval of Minutes: October 17, 2019 (No quorum at previous meeting)

Motion made: Approve minutes from October 17, 2019 as written.

Motion made by Kelly Dollinger; seconded by Lynn Hardman.

No further discussion; motion carried.

Approval of Minutes: January 16, 2020

Motion made: Approve minutes from January 16, 2020 as written.

Motion made by Dr Sather; seconded by Kelly Dollinger.

No further discussion; motion carried.

NDEMSEA Legislative Initiatives – Adam Parker

- Adam reviewed proposed legislative initiatives for the upcoming session – not yet approved by the NDEMSEA Board
 - Tax District Reform
 - EMS Definition
 - NDPERS
 - Mental Health
 - Rural EMS Assistance Grand Funding
 - Maintain at least the same amount if not more
 - Grant distribution formula
 - Some minimal wording changes
 - Clarity regarding the minimum budget (\$60,000 base)
 - Defining of funding areas within the formula
 - Development of a system within the funding areas rather than funding of the ambulance services within the funding areas
 - Population greater than 1,000 or with a hospital has an ambulance service

- Allows for distribution of remaining grant funds
 - Encourages those that don't qualify for funding to apply for the grant
 - This gives us their data
 - They may qualify for some remaining funds even if not eligible for initial grant funding
- Outline of ambulance district and formation of a board

Council Membership

- Diane Witteman – retired from NDEMSEA
 - Kelly Dollinger appointing Adam Parker
 - Pending approval of SHO
- Lynette Dickson –
 - This position is not statutorily required
 - Council recommends Chris Price approach Lynette with question of interest
 - If Lynette is not interested come to next meeting with suggestions

Governance Document

- A draft has been distributed for review and comment
- Term limits – if enforced the council will lose majority of members including chairs
 - Suggested: put in a qualifier that the 'clock starts' upon adoption
 - Stagger terms so everybody doesn't drop off in 4 years
 - Some positions are related to other positions (i.e. NDEMSEA president, etc.)
- Good idea for structure
- Send this document along with all other information regarding membership to council members
 - Review and vote at next meeting

HRR/DEMS Update

- Health Resources and Response
- Joining with Health Facilities and Life Safety and Construction
- 15% budget cut
- Loss of trauma coordinator
- Telecommuting
- Administrative support shortage

Activity Update

- EMSC – federally funded
 - 9 deliverables
 - 58.1% response rate in recent survey
 - Regional virtual pediatric symposium
- EMS
 - Some EMS agencies have started to ask for staffing assistance due to COVID issues
 - Let the Division know if you hear of any
 - There have been many things rescheduled and altered due to COVID
 - Portfolio rollout
- Trauma
 - Some things have been put on hold due to lack of trauma coordinator

- Interviews are taking place next week
- Stroke
 - Stroke designations were not suspended by executive order but are now being done virtually
- Helmsley funding
 - AEDs in every PD vehicle including software training

Grant Update

- Presently in accounting and should be going out next week
 - Mostly the same as last time
 - Left base at \$60,000
 - Changes due to audit finding some errors in calculations on spreadsheet
 - Average cost per run has gone up
 - \$1487.89 (roughly \$200 increase)
 - No stipulations on submitting reimbursements
 - No way to carry-over funds at the end of the biennium

Rules

- These drafts are for discussion only
- **33-11**
 - 33-11-01.2-04
 - Draft attempt at ensuring that the Department has the authority to designate service areas
 - Concern over guidance to what ambulance to call next in line; hierarchy in distance/skill level
 - Physicians need to be able to make decisions in the best interest of patient needs
 - The intent is not to limit the decision-making power of the physician
 - Verify wording to maintain meaning
 - Chris will be vetting this through the hospital association
 - Alternative Destination –
 - Qualifier – ambulance must have an agreement with the alternative destination
 - Close to ET3 wording
 - We don't have any participants the first round
 - Non-specific and open to change
 - **The sentence 'ambulance service that elects to transport' will be changed to 'authorized by medical control'. This takes the responsibility off the ambulance crew.**
 - After feedback prior to the meeting, the difference between urban, rural and frontier chute time requirements was removed
 - 33-11-01.2-16 Service Areas
 - Remove due to the addition of 33-11-01.2-04
- 33-11-02-03 Minimum Staffing Requirement for BLS Service
 - EMT/CPR or EMT/EMR
 - If they can't find an EMR, they don't have a crew
 - A driver with CPR is often an entry point that may lead to additional training

- It's also often an exit point when people don't want to keep up their certification but want to continue working with the ambulance
- Consensus of the council: leave as EMT with CPR trained driver
- 33-11-03-02 Staffing
 - Expands the ability of an RN, without EMT certification, with Medical director authorization to function at the level of their scope of practice on an EMS agency
 - Additional training is not tracked by the State
 - Hands-off medical directors are not in the place to oversee this situation
 - Consensus of the council: leave on a BLS service an RN can work within their skillset; remove the ALS portion without enhanced trainings

Chris will rework any wording.

Chris and Adam will vet through the Medical and Hospital Association.

Chris will distribute clean copies to council members for review.

Motion to adjourn.

Motion made by Heidi Lako-Adamson.