In attendance: Dr. Amy Juelson, Pediatrician in Bismarck; Renae Sisk, RN (School Nurse – Maternal and Child Health - NDDoH), Mandy Slag, RN (Injury Prevention Program Director – NDDoH), Sarah Myers, RN (Child Care Health Consultant - Child Care Aware), Carol Thurn (Highway Traffic Safety Administrator), Elizabeth Pihlaja (EMSC Coordinator), Lindsey Narloch (DEMST Research Analyst), and Jan Franklund (EMSC)

Review of June 9, 2016 Meeting Minutes-
- Minutes from the June 9, 2016 meeting were approved with no changes

EMSC Program Update – Powerpoint Presentation - A review of the last year – Elizabeth -
- Discussed Performance Measures 71-80 and progress made. There are a few PMs we have not achieved yet according to the last data collected, but new assessments should show improvement. Reviewed new performance measures to be implemented in the future.

Projects & Activities –
- Emergency Guidelines for Schools
  - Elizabeth worked with Renae Sisk to revise and update the North Dakota Emergency Guidelines for Schools, which should soon be ready for distribution. Hoping to update the larger Health Guidelines for Schools, as well. Elizabeth would like to update both these resources to include children birth-five for child care.
- Outreach events
  - Did not attend any this summer, but next summer will work to get out in the community and spread injury prevention information and safety tips.
- Distribution of pulse oximeters
  - EMSC had some pulse oximeters on hand from previous grant purchases. In coordination with the Cardiac Ready Communities the Division of Emergency Medical Systems has helped plan and implement, EMSC distributed pediatric pulse oximeters to area ambulance services.
• Pediatric vital sign decals
  o Completed! Instead of decals, we got very sturdy stickers printed. EMSC will be sending these to services and hospitals, as well as distributing them at events and conferences.

• Pediatric drug dosing charts
  o EMSC recently purchased small pediatric dosing charts for EMS agencies and emergency departments. Will be sending to all soon.

• Communication Boards
  o Developed by EMS personnel to communicate with those who do not speak English or are having difficulty speaking. May work to communicate with children with special health care needs. Will distribute to agencies and emergency departments, then see how they are received. If they do not help with children with special health care needs, EMSC will provide a different tool.

• Pediatric Prepared Ambulance Program
  o We currently have 14 services registered and Elizabeth is pushing the big services (like Metro and F-M) to apply. In 2017, subcommittee will reconvene to discuss additional levels and achievements.

• Pediatric Prepared Guides for Emergency Departments
  o These guides will address Peds Ready gaps and areas to improve. Will also encourage hospitals to retake the Peds Ready assessment. Will be sending soon, after review from ENA rep.

• EMS Protocols
  o Completed at end of 2015/early 2016. Available on DEMS website for download and agency customization. Includes updated pediatric information and encourages personnel to have a dosing guide or tool on hand.

• Sponsored an speaker for the North Dakota Injury Prevention Conference
  o Katrina Altenhofen, MPH, NREMT-P, spoke on safe transport, window falls and safety, and ATV safety. Very well received and we were so happy to have her speak!

• Medication Dosing Safety Project
  o In 2015, EMSC sent information of an online medication dosing safety course appropriate for paramedic practice and useful for EMTs to view. With proof of completion, services could request to receive a Handtevy System to improve safety practices. Bowman Ambulance received this educational item.

Partner Presentation: Dr. Amy Juelson, Mid Dakota Clinic – “Medical Homes”
Patient Centered Medical Home (PCMH) is a team-based health care delivery model led by a health care provider that is intended to provide comprehensive and continuous medical care to patients with the goal of obtaining maximized health outcomes.

PCMH encompasses five functions and attributes -
• Comprehensive care
• Patient-Centered
• Coordinated Care (Important during transitions)
• Services that are accessible
• Quality and safety

Who can be a part of PCMH?
• Physicians
• Social workers
• Home health workers

Why do we have PCMH?
• To improve healthcare
• Reduce costs to healthcare systems
• Reduce crowded emergency rooms

How is this measured?
• Accessibility
• Family centered care
• Comprehensive care
• Coordinated care

How does EMS fit in?
• EMS is the pre-hospital treatment chain for patient care
• National Highway Traffic Safety Administration predicts expanding EMS to helping bridge the gaps

Benefits –
• Community paramedic program may especially benefit

Federal Government PCMH Reform –
• Increase the number of people who are insured
• Regulate the benefits that must be covered
• Payment is the big driver of the reform
• If you are part of a medical home you will be getting the best coverage for insurance

Mid Dakota has met the criteria to be called a Patient Centered Medical Home

Partner Presentation: Nicole Brunelle, DEMS Trauma Coordinator – “Child Abuse”
• Nicole was unable to present due to activation in the Department Operations Center (DOC) regarding the protest of the Dakota Access Pipeline on Standing Rock Indian Reservation

The Future of EMSC –
• Logic Model/Strategic Planning
  • Strategic Planning subcommittee provided feedback on logic model (on website). Will provide additional feedback when requested. Elizabeth will draft a strategic plan this fall/winter.
• Children with special healthcare needs
  • As seen on the updated logic model, EMSC hopes to do more to help CSHCN and their families by focusing on family-centered care and training.
• Proposed pre-hospital performance measures
  • Review of new performance measures.
- National EMS Information System (NEMSIS)
  - #1 - 0% for us – no NEMSIS
- EMS agency have a designated individual who works with pediatric emergency care coordinator
- Looking at the percentage of EMS agencies in the state that have a process requiring EMS providers to physically demonstrate the use of pediatric special equipment and skills

**Future Activities -**
- Update School Health Guides and distribute – continue working with school nurses and Child Care Aware
- Finish and distribute emergency department guides
- Finish a grant for transport
- Would like to work on car seat safety on Ft. Berthold and Standing Rock Indian Reservations – education for parents/caregivers AND ambulance personnel
- Work with Child Care Aware to develop a template for disaster and emergency plans for child care centers
- Provide pediatric skills simulation training
- Work on Family-Centered Care Resources
- HRSA Grant – EMSC reauthorization

**Program Partner Updates –**

**Sarah –**
- Applied for a Child Care Aware of America grant for disaster preparedness; it was not awarded
- Even though Child Care Aware did not receive the grant, they are making emergency preparedness a priority and are developing resources

**Carol –**
- National Child Passenger Safety Week is September 18-24, 2016 with National Seat Check Saturday scheduled for September 24, 2016. NDDoH is working statewide with partners to schedule car seat checkups during this week.
- Open Your Eyes Distracted Driving presentation by Shelley Forney at the Northern Region Association of Safety Professionals in West Fargo, September 7-8, 2016
- North Dakota Driver and Traffic Safety Education Association is planning the annual Driver Education Teachers Conference, March 31-April 2, 2017
- Planning of the Ford Driving Skills for Life event – looking for a location in Grand Forks for June 2017
- Child Passenger Safety Observation Survey is completed. Should receive the final results in the Fall.
- Car seat roundup being held September 8 from 4p-6p at the Target parking lot.
- Completed special needs training car seat program at the NDDoH and Altru Health Systems in Grand Forks
Lindsey –
Long term goal –
• Our current electronic medical record system is inoperable and we are looking at transitioning to NEMSIS III
• NEMSIS III is the EMS standard for electronic charting and flow of information
• Our vendor announced in June there will be a cost associated with NEMSIS III – the cost is high and we will not be able to make the transition

Regional Meetings –
• The ND EMS Association and our office have held eight regional meetings around North Dakota about where EMS is at

Important points covered were –
• The state of volunteerism with our ambulance services and a dwindling volunteer pool
• How it is time critical for First Responders to get to the scene
• Importance of involving the community
• Get people talking realistically about what we can do
• Fund staff, etc.

Renae –
• Applied for a HRSA grant that was for developing a telehealth system for small and rural schools, however, the grant was not awarded
• Hire school nurse (regional telehealth school nurse)
• Utilize a mental health screening tool
• Connect Federally Qualified Healthcare Centers for mental health services
• Youth Risk Behavior Survey questions are coming up

Dr. Juelson –
• The Bismarck Doula Community is coordinating and hosting the 2016 Bismarck Baby Expo at the Bismarck Event Center, October 21-22

Upcoming Events -
• North Dakota State Trauma Conference – September 27-30, 2016, Grand Forks

Resources & Links
• EMSC Innovation & Improvement Center (EIIC):
  https://emscimprovement.center/

Next meeting – December 8, 2016 – 1:00 pm - Teleconference

Meeting adjourned