

**NEVADA DIVISION OF PUBLIC AND BEHAVIORAL HEALTH
Nevada Emergency Medical Services for Children (EMSC) Committee**

**MINUTES
April 25, 2019
1:00 PM**

MEMBERS PRESENT

Michael Bologlu
Dr. David Slattery

Donald Watson
Dr. Jay Fisher

Dr. Andrew Eisen

MEMBERS EXCUSED

Stephanie Mead

Susie Kochevar, RN

IN ATTENDANCE

Jenna Burton

Rachel Marchetti

1. Roll call and approval of the January 31, 2019, minutes.

MOTION: Michael Bologlu motioned to approve the January 31, 2019, minutes.

SECOND: Jay Fisher, M.D.

PASSED: Unanimously

No public comment.

2. Discuss pediatric medical supplies purchased through the FY19 budget period.

Michael Bologlu gave an update to the Committee on accomplishments during the grant period for FY19. He informed the Committee that Nicolette Johnston, EMSC Program Manager, is no longer with the office. He and Nicolette collaborated to purchase approximately \$55,000 of much-needed pediatric medical supplies and equipment, the plan being to distribute the equipment to rural Emergency Medical Services (EMS) and fire services, both paid and volunteer, and to agencies that are strictly volunteer services without funding for special equipment. Using the grant funds, they were able to purchase 100 pediatric tape systems, 56 TransWarmer[®] pediatric mattresses, and 70 fully stocked Intermediate Life Support (ILS) pediatric kits; the full list of supplies in the kits is quite extensive. He explained that, since unfortunately the kits are on back order, not all the medical supplies have arrived. As soon as all the supplies have been received, the EMS program will be working on a plan to distribute them to our EMS agencies. One goal is to review the performance measures to determine how the equipment just purchased can be utilized to obtain improved results for our next pediatric survey in 2020. This equipment comprises the items purchased with FY19 grant funds, and now we're moving into FY20. Dr. Andrew Eisen commented that the more extensively we are able to stock these pediatric items, particularly out in the rural areas, the more improved will be the outcomes for pediatric patients. Dr. Jay Fisher agreed, commenting, "Great work, congratulations."

3. Discuss and make recommendations for FY20 budget, goals and objectives.

Michael explained that the project period began April 1, 2019, and runs through March 31, 2020. Currently, the grant is funded for approximately \$77,000 worth of supplies, which can include training equipment, medical equipment, and supplies. However, the amounts funded for each of these categories can be redirected. Michael explained that, while meeting the goals for performance measures has improved, meeting those measures consistently will require continued attention.

Michael explained that last year's grant funds purchased a quantity of medical supplies and equipment, stocking rural EMS agencies with updated, high-quality medical equipment for pediatric patients. It is hoped that agencies receiving equipment will pull from their vehicles their older pediatric equipment and use that for future training.

Performance Measure 3 relates to the use of pediatric equipment, currently at only 31%. Michael explained that many agencies without the recommended pediatric equipment are rural agencies. The equipment purchased in FY19 will boost Performance Measure 3 substantially.

Michael asked the Committee whether we should suggest ideas to boost other performance measures, or whether we should continue to try to improve Performance Measure 3. If it seems more crucial to buy additional medical supplies for EMS agencies, we can do that. However, it may be more important this year to train providers, especially since agencies recently received supplies. He thinks this is an effective way to use funds but would like to hear the opinions of the Committee members. Dr. Eisen told the Committee that, while he appreciates equipment purchases, he believes there should be a specific role for that function. He went on to explain they are close to the 2020 target on Performance Measure 3 for equipment but added there is room for improvement on Performance Measure 2, specific to pediatric emergency-care coordinators. He also explained they have not quite met the 2021 targets for Performance Measures 6 and 7, in terms of guidelines and agreements, which he explained really pertain to people, suggesting this area may be where the Committee should focus emphasis this year for the grant. He suggested providing support to people who could be identified as pediatric emergency-care coordinators, which directly addresses Performance Measure 2. He explained that people assigned as pediatric emergency-care coordinators most likely would be responsible also for developing and sharing transfer guidelines, as well as creating agreements. He believes the emergency-care coordinators will have an increased positive impact on the performance measures if the Committee focuses on supporting personnel.

Dr. Eisen explained that some particular agencies have a dire need for equipment; he feels that purchasing equipment for those agencies shouldn't be taken off the table entirely. He commented it is great that funding is coming in from Health Resources and Services Administration (HRSA), and that it's nice to see they're planning on continuing the funding for the next couple of years, provided the state continues to make progress, but asked the other members for their input on improving the numbers for the different performance measures.

Dr. Dave Slattery asked if there are any unused funds for this fiscal year. Michael said that currently we have not spent any of the money funded by the HRSA Notice of Award

(NOA). However, the budget will be affected significantly, because the state plans to hire another full-time Emergency Medical Services (EMSC) Program Manager. He explained that, with this full-time support staff, we can start pursuing additional funding opportunities. So, we are anticipating a tradeoff that will work in our favor. Currently, as of last year, \$25,000 of the grant funds were unused. He explained that amount consisted mostly of travel funds and the indirect costs that the state hasn't pulled out yet. This year, our travel has amounted to approximately \$4,000 less than was spent the previous year; we did try to adjust our budget to reflect that. Michael also explained that HRSA is only three weeks into the budget period; there will be plenty of time for the Committee to decide how to use the funds. Mike clarified this is the Committee's time to plan everything and start moving forward.

Another suggestion from the Committee was to sponsor a statewide disaster exercise, which potentially could improve Performance Measures 6 and 7. Dr. Eisen said he wasn't sure if a disaster exercise would be in the scope of this particular grant. However, once the vacant staff position of EMSC Program Manager is filled, they will be able to look into other funding sources that could support an activity like a disaster exercise. He explained he does like the idea of the Committee's sponsoring a large-scale, communitywide pediatric disaster-response drill. In his opinion, that will help the Committee to highlight the importance of interfacility-transport protocols and agreements; he believes there are entities that may have funds to support that kind of activity.

Michael mentioned he recently attended his first Health Public Preparedness (HPP) meeting, where they completed a pediatric mass-search training event with East Fork Fire, Lyon County, Mason Valley, and Carson City Fire. HPP ran an exercise simulating a head-on collision between two full school buses, on highway 395, South, in the Gardnerville area, which was a fantastic training opportunity for providers. Michael wasn't sure if Department of Emergency Management (DEM) participated in that training as well, but he offered to reach out to both programs to see if our Committee can get involved with those trainings. Unfortunately, the Committee does not have the money required to provide that type of training, but other programs within the state may be willing to assist. Dr. Eisen asked for public comments and, hearing none, he moved on to the next agenda item.

4. Discuss and make recommendations to fill the vacant Family Advisory Network (FAN) Advisory Committee position.

Michael clarified that a Family Advisory Network (FAN) representative is supposed to be someone who is an advocate for an entire family, meaning not only for a particular child's health care and treatment, but also for treatments and/or benefits received by families, especially those with children with special needs. Unfortunately, the current FAN representative has missed more than three consecutive meetings and, per the Committee's bylaws, must be removed. This important position for the Committee requires out-of-state travel to our EMSC All Grantee meeting, as well as to possible webinars and conferences conducted specifically for FAN representatives of each state. Michael explained that anyone who is a parent, or an advocate for an entire family's health, fits this job description. This position, required by HRSA, is similar to the Project Director and Program Manager positions, but is for volunteers only. Michael requested that anyone at this meeting who is acquainted with colleagues or parents who are in the

health-care profession make recommendations to him directly. If possible, Michael would like to include an action item at the next Committee meeting to fill this position. Michael will forward to all Committee members a HRSA job description with a very detailed explanation of the FAN-representative position and its requirements, so that Committee members can begin looking for qualified candidates. Dr. Eisen suggested also reaching out to Nevada PATH, an active advocacy group of parents, many of whom have children with chronic medical conditions. Many parents in this group engage fairly frequently with EMS; they may be resources as well.

Dr. Slattery inquired if funds could be provided to support the FAN position. Michael clarified that some of the position's expenses, such as airfare and per-diem hotels, will be reimbursed, but that the person's attendance at annual meetings and Committee meetings must be on a volunteer basis, since the only position funded by the grant is the EMSC Program Manager. Dr. Eisen asked if there would be any possible way to reimburse the FAN representative for costs incurred for child care during their work for the Committee. With this perspective, the grant would not be paying the FAN representative to fill the position, but rather to cover costs that they may incur in order to participate in the Committee. Michael said he would reach out to the grant's point of contact to determine if this is an option we can pursue.

5. Public Comment - No action may be taken on a matter raised under this item of the agenda until the matter itself has been specifically included on an agenda as an item upon which action will be taken.

Dr. Eisen asked if anyone else had any public comment. Michael informed the Committee that Donald Watson, EMS Program Manager, now also holds the position of EMSC Project Director. Michael told members that the updated members list can be found on the EMS website. Dr. Eisen welcomed and congratulated Donald on his new positions as EMS Program Manager and EMSC Project Director. Dr. Slattery also welcomed and congratulated Donald and asked if he would mind sharing with the group a bit of information about himself. Donald explained he came to state service after having spent 22½ years in coast guard service. He has about 20 years of experience with EMS, both military and civilian. He graduated from the paramedic academy in Houston, TX, and also holds a degree in Emergency Medical Services. He explained that currently he is certified as an Advanced Emergency Medical Technician (AEMT) and has been with the state for about a year.

Michael commented on EMS Performance Measure 1, submission of data compliant with NEMSIS v. 3.3.4. He explained the EMS program currently is working with ImageTrend to implement the ELITE data system. This system will enable everyone, with the exception of Clark County, to upload NEMSIS-compliant data directly to the EMS program. The goal is to have the new system implemented by June 1, 2019; training dates have been announced for Reno, Carson, Elko and Ely. The good news is that EMS Performance Measure 1 is expected to reach 100% no later than the end of this year. Without the ImageTrend system, achieving this goal would have been a huge hurdle for the grant activities to overcome. Fortunately, however, now that the EMS program has purchased and implemented the ImageTrend system, Performance Measure 1 seems to be handled for the foreseeable future.

6. Adjournment at 2:29 p.m.