Emergency Medical Services for Children (EMSC)/Child Ready MT Advisory Committee (VIRTUAL MEETING) JUNE 3RD, 2022 MEETING MINUTES- Meeting was virtual due to the rise in COVID cases.

ROLL CALL AND INTRODUCTIONS

PEDIATRIC LIAISON UPDATE – Attended the June 2022 Children with Special Needs Transport training in Kalispell. Facilitated two “It’s Your Choice” Distracted driving/Safe Transport/DUI collaboration with public high schools, Community EMS Services, Law Enforcement, Coroners, other partners. Sites were Park City and Dillon. Recreation of a DUI Crash. Collaborated with the MT Healthcare Preparedness Program to offer BURN VTTX tabletop exercises. Had 24 participants, with multiple entities. The scenario was an apartment fire with pediatric patients, and mental health issues with service providers. It was successful. Offered EPIC TBI trainings in Anaconda with hospital and EMS. Training in Ennis, MT for DECON. Had the first pediatric patient (8-month patient) in the scenario who went through the decon process with parent. Facilitated a training in Three Forks Ambulance Service, helping to build back the service for 911 response. Jason is a member of the Montana EMS Rules Revision Committee to help ensure that pediatric issues are included.

CULTURAL HUMILITY update- Lanette Perkins. She is continuing to adapt the MT Cultural Assessment to be more inclusive of diverse populations and expanding the scope. She is attending multiple webinars to gain insight and resources. Working on the draft of the assessment, develop a scoring sheet, and a possible PI/QI project for facilities. Updating the terminology to follow the National recommendations. Researching the Healthy People 2030 document. Working to strengthen the cultural humility of Montana hospitals and EMS. Hannah Yang offered to edit the document with the group at MT DPHHS Data Equity Project. She will include a list of the inclusive populations that Montana hospitals may serve.

MT FICMMR PRESENTATIONS: Kari Tutwiler presented Fetal, Infant, Child, Maternal Mortality Review and Prevention Program. Every state conduct death review although the structure differs. Montana is unique in that we have County FICMMR Teams. The program is driven at the local level by county teams that review and work to reduce preventable deaths. The team is a collaborative process bringing in community people from multiple disciplines to share and discuss comprehensive information on circumstances leading to the the response to the death. The in-depth review process identifies gaps, barriers, risk factors, and work in partnership to strengthen systems. FICMMR Teams for alliances and mobilize resources to inform and influence their communities to reduce preventable deaths. There are 30 county mortality review teams- 21 counties utilize neighboring teams as their team via MOU agreements. Currently partner with 4 of the MT reservations. FICMMR is a confidential process of data collections, analysis, interpretations, and actions that is guided by statute, policies, and rules. It is not to assign blame/responsibility for the deaths. The FICMMR Prevention Act provides the structural foundations for local count5y teams to form, operate and conduct in-depth analysis of fetal, infant, child, and maternal deaths –FICMMR State Statute #50-19-401-406. By definition - Fetus- state statute 350 grams of weight; Infant- live birth up to 364 days; Child-up through age 17. The Key Grant deliverables include review all previous year deaths, enter all death data by November 1; if team deems a death preventable- build in time at the review to identify a best practice, prevention recommendations and/or initiative; organize, implement, evaluate and report on best practice, injury prevention activity per year addressing a critical issue in their county. Interesting
to note is that FICMMR pushed for the first Montana traffic roundabout to decrease motor vehicle crashes and played a role in the MT Graduated Driver's License law. This resulted in a 35% decrease in the total teen crashes, 59% decrease in serious injuries 14-18 (2005-2014). The CHILD DASH data -Child Dynamic Analysis and Statistics Hub highlighted reports. The data system summarizes information from Child Death reviews Nationwide and State specific. ktutwiler@mt.gov or office number 406-444-3394 for more information.

**EMSC UPDATE:** shared the EMSC #1-9 Performance measures. Presented that Adolescent Mental Health is at a crisis level. These issues have risen due to the COVID pandemic. A National Center – Pediatric Pandemic Center – PPN launched in September 2021 funded through a 5 year HRSA cooperative agreement. –mission is to leverage the resources and expertise of National Children’s hospitals across the country in collaboration with national partners to empower all healthcare systems and their communities to be prepared to provide high-quality, equitable pediatric care in everyday emergencies, disasters, and global health threats. To improve the pediatric readiness across health systems; increase capacity and capability of telehealth to address children’s unique needs during disasters. Accelerate the real-time dissemination and uptake of research informed pediatric area to address the needs of children and their families. A New Pediatric Disaster Toolkit is in development by the EIIC (EMSC Innovation and Improvement Center). They hope to create a national disaster assessment instrument. Important considerations will include Social Determinants of Health; Physical Determinants of Health; Differences of Communities; and Creating a Generalizable tool.

The National State Partnership Grant for EMSC may be getting an increase in funding!

Multiple hospitals and EMS Services have been formally recognized.

The MT EMS Awards Ceremony was held in May during the 2022 EMS Week and on the EMS For Children’s Day. Montana EMSC gave a ten-year-old boy who saved his mom who was having trouble breathing. He was given the first HERO’S Award. Jim DeTienne was also honored post humorously for his work of over 40 years to Montana’s and National EMS And Trauma Systems work. His family received the plaque.

**Funding priorities are always working toward pediatric readiness across the spectrums of care both Hospital and Prehospital/EMS and community organizations such as child day cares/schools.** The data Hannah reported on and the results from the NPRP give support to the increased education and resource for: PEDIATRIC DISASTER PLANNING; PEDIATRIC QI/PI PROJECTS; ACCESS TO PEDIATRIC SIMULATION TRAINING/MOCK CODES/WEBINARS/VIRTUAL TRAININGS; INCREASE PEDIATRIC FACILITY RECOGNITIONS; INCREASE EMS RECOGNITIONS AND PEDIATRIC MENTAL HEALTH TRAININGS/RESOURCES.

Pediatric Sessions at the inperson RMRTS in September (15-16) will be 2 EMS Lectures on TOR and talking with families when a child dies; and Pediatric Trauma Management. Both will be on Friday, Sept 16th. She is a pediatric from Children’s Colorado/University of Colorado.

**MT TRAUMA SYSTEMS:** Alyssa reported that 19 Facility Designations are scheduled. Trauma designations has an injury prevention component. Working on updating the Motnana Trauma Designation Rules as a few Montana hospitals are working toward Level 1. Up to now, Montana does not have a level 1 hospital in the state. A Comprehensive Trauma Center-ACS designation may be the new level. Pediatric components are included in the updated ACS Criteria. Alyssa will facilitate a “Stop the Bleed” Training to local PEAK middle school students.

**ROUND TABLE:**

**SCHOOL NURSES ASSOCIATION:** Juanita Bueter- Schools are still seeing an overwhelming mental health/behavioral health issues. Dropouts are increasing. Need parenting resources. Violence is increasing in schools. More Narcan being used across Montana for overdoses. Working on ways to help adolescent graduate with possible options for early graduation.

**MT STATE LIBRARY-**

MT EMS SYSTEMS- Shari- working on a new EMS Data initiative (have 10 years of data) This will offer data back to the agencies submitting the data for quality improvement projects. A new QI Specialist position (2 years) is being funded and recruited for. This position will work with MT EMS to improve the system of care and data reporting. Working on Time Sensitive Injury and Illness recognition programs like the Pediatric EMS Recognition (cardiac/stroke/etc.) Submitted a Rural FLEX supplemental grant in March for EMS Training/data collections/PI/QI projects (6 awards Nationally-very competitive). 2022 EMS Awards Ceremony (in person) at the Capitol Rotunda on EMS Children’s Day (EMS Week) on May 18th from 10-12. Working with the EMS Task Force to help develop an EMS Advocacy group. Working on a MT EMS Rules revision with workgroup. Probably a 6-month project. This includes pediatric representation-Jason Mahoney.

HEALTHCARE PREPAREDNESS PROGRAM (HPP)- Don shared the link to the HPP Newsletter. This is full of relevant information. The register to receive the newsletter the best link is:

A Burn Surge Annex for inclusion in each regional HCC Response Plan has been developed. A tabletop exercise will need to be scheduled for each region. DPHHS Medical Surge Plan is in revision.

Will send out the HPP Newsletter to group/contact information. Various burn trainings are scheduled. Compassion Fatigue is a big issue, and 4 trainings are being scheduled in May. Jason is working in collaboration with the HPP as well for burn surge/peds disaster trainings.

BUCKLE UP MT-


MEMSA – New Vice President- no representation at this meeting.

MT FAMILY TO FAMILY-U OF MT- JENNA BANNA- working on the 988 roll out; offering lunch time presentations to help demystify and increase family discussion.

MT INJURY PREVENTION PROGRAM: Maureen Ward reported the work on the HOPE REPORT is in the works. This will be addressed at the September MT EMSC Advisory Committee meeting agenda. She is working on the development of the “Injury Prevention Coalition. She will send out invitation emails soon. Emma Perry has been hired. Working on new overdose prevention outreach.

MT AAP- Dr. Hall reported that the MT AAP has also recognized that children mental is as the health crisis level and the need for suicide prevention is growing. Resources are limited in MT.

NEXT MEETING DATES
Scheduled for Friday, September 2, 2022.