

<b>Emphasis Area: Emergency Response- After-Crash Care</b>						
<b>Champion: Alyssa Johnson, Trauma System Manager, EMS &amp; Trauma Systems, DPHHS</b>						
<b>Co-Champion: Shari Graham, EMS System Manager, EMS &amp; Trauma Systems, DPHHS</b>						
<b>Objective: Reduction of morbidity and mortality of the Montana motor vehicle crash victim</b>						
<b>Strategy 1 - Access to the Emergency Response System; On Scene Care Training &amp; Education</b>		<b>Purpose:</b> Public awareness and education for those first on scene, before EMS arrives, can be crucial for survival. Lay bystanders can play a critical role in care, from activating the emergency response system to providing basic care of the injured patient. This requires access to 911 systems and medical advice from dispatch.				
<b>Opportunity</b>	<b>Timeline</b>	<b>August 2020 Status</b>	<b>Lead(s)</b>	<b>Reference</b>	<b>Resource</b>	<b>Measurement of Success</b>
Continue development of the Enhanced 9-1-1 & FirstNet & Next Generation 911 access for first responders	Ongoing.	FirstNet is a nationwide wireless broadband network for first responders being built & deployed through a first of its kind public-private partnership between the federal government and AT&T. DOAs role is to ensure AT&T delivers on the terms of its contract and creates a communication network that meets the needs of Montana public safety now and into the future. The First Responder Network Authority team has worked closely with Montana public safety officials since 2014, capturing feedback and translating it into the design of the FirstNet network. During the initial five-year build out FirstNet is focused on: Expanding coverage in rural and tribal areas, where many Montanans reside, Enabling state, local, tribal, and federal agencies to effectively communicate and coordinate along the border, and Increasing capacity during emergencies and natural disasters through the use of deployables.	Ed Tinsley, Statewide Interoperability Coordinator- DOA	Quinn Ness, Enhanced 911- POC, Public Safety Communications- Department of Administration (DOA); Tracey Murdock, First Net POC, Senior Public Safety Advisor and Regional POC	The First Responder Network Authority is the federal entity charged with overseeing the creation and delivery of the FirstNet network.	Sustain and increase coverage area, communication coordinate along the border, and capacity during emergencies and natural disaster.
Support Emergency Medical Dispatch (EMD) training for all dispatch centers	Ongoing.	TBD	Kim Burdick & Shari Graham, EMS System Manager- EMS & Trauma Systems (TS)-Department of Public Health and Human Services (DPHHS)	DPHHS EMS Systems	Association of County Public Fastly Communication Officials (APSCO) King Co. (Seattle) Training	Number of EMD trained dispatch centers
Support bystander/ non emergency personal training and education, (I.E. Stop the Bleed, First Aid, etc)	Ongoing.	By standers are the first "First Responders" to most emergencies. Beyond calling 9-1-1, they need to know basic skills in injury recognition and treatment to provide aid until help arrives. Supporting community and individual efforts to train lay persons in these skills is an ongoing effort by local EMS agencies, Law Enforcement agencies and schools.	Alyssa Johnson & Janet Trethewey	Hartford Consensus Paper FEMA	National Stop the Bleed Organization; American Heart Association (AHA); You are the Help Until Help Arrives	Number of bystanders providing appropriate care as documented by ePCR data
<b>Strategy 2 - Safe &amp; Rapid Transport of Crash Victims and Training of Emergency Responders</b>		<b>Purpose:</b> Well-equipped ambulances with trained staff is mandatory to ensure rapid transport. EMS education and training needs to be on-going, with providers enhancing their skills and knowledge. Communication and quick response to on-scene crash sites by Traffic Incident Management (TIM) teams is priority to secure and clear crash sites to reduce additional crashes and ensure safe travel for the motoring public.				
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Support ongoing education and training of emergency care responders.	Annual	Education & training to include but not limited to: (I.E. : Prehospital Trauma Life Support (PHTLS)- MDT Grant, Trauma Education, Psychological First Aid, Care for Children, Cultural Humility, among others) through continued annual grant funding.	Shari Graham, EMS System Manager- EMS & TS-DPHHS	DPHHS EMS Systems	DPHHS EMS Systems	Number of courses held & students trained. Prehospital Trauma Life Support (PHTLS)- MDT Grant: Trauma Education: Psychological First Aid: Care for Children: Cultural Humility:
Secure EMS equipment and training to properly restrain and care for children (EMS for Children)	Annual	TBD	Robin Suzor, EMSC Coordinator, EMS & TS-DPHHS	DPHHS EMS Systems		Number of services with proper pediatric restraints.
Support and promote MDT Emergency Medical Equipment Grant Program	Annual	Prehospital emergency medical services is a critical component of Montana's health care system. The availability of prehospital emergency medical services can improve the medical outcome for people suffering medical emergencies and may improve the severity of a motor vehicle crash victim by providing emergency care on scene and response to vehicle crash sites. MDT Emergency Medical Equipment grants are eligible to emergency medical service providers for purchasing or leasing of ambulances; emergency response vehicles; or equipment for training, communication or for providing medical care to a patient. This grant program is an annual, competitive grant.	Chad Newman, EMS Grant Coordinator, SHTSS-Montana Department of Transportation (MDT) & Shari Graham, EMS System Manager- EMS & TS-DPHHS	EM Equipment Grant Program- MDT	MCA 61.2.503	Number of grants awarded annually (vehicle/ equipment).
Promote and improve prehospital notification communication system with facilities	Annual	TBD	Shari Graham, EMS System Manager- EMS & TS-DPHHS			Number of services using available free software. Number of facilities registered.
Support and promote Trauma Emergency Response training for Law Enforcement Officers (LEO) & Equip Law Enforcement vehicles with basic trauma kits	Ongoing	Law enforcement officers (LEOs) often arrive at a motor vehicle crashes (MVC) prior to the EMS agency. Officers need to be able to recognize and treat the most critical life-threatening injuries prior to EMS arrival.	Shari Graham, EMS System Manager- EMS & TS-DPHHS	Tactical Emergency Medical Support	Pre-Hospital Trauma Life Support (PHTLS) for First Responders	Incorporation of the 8 hour PHTLS-FR course in the Law Enforcement Academy Training Requirements

Support and promote Traffic Incident Management Systems (TIMS) Training	Annual	Provide FHWA-developed certified 4-hour Traffic Incident Management Responder Safety Training to all first responders in Montana. Current status: 43.8% trained. Successful TIMS program is dependent on commitment of but limited to MDT, MHP, and DPHHS and other safety partners to continue education, train the trainer courses, and confirmation of training site locations. Upcoming training: FHWA EDC-6 initiatives is Next Generation TIM: Integrating Technology, Data, and Training	Marcee Allen, TIM Coordinator- FHWA; Jerry Prete, TIMS Coordinator- MSU Fire Services; Shari Graham, EMS System Manager- EMS & TS- DPHHS; MDT; MHP; Montana Law Enforcement Academy (MLEA)	FHWA SHRP2 Program; EDC-2, EDC-6	FHWA SHRP2 Program; EDC-2, EDC-6	Annual Number of TIMS courses conducted. Number Trained.
<b>Strategy 3- Hospital-Based Trauma Care</b>		<b>Purpose:</b> Optimally, all acute care facilities with emergency departments should be formally prepared and designated to care for injured patients at a level commensurate with their resources, their capabilities and community's needs. Ongoing education and training of hospital based emergency care providers is essential to improve patient care and outcomes.				
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Support ongoing education and training of the trauma team.	Annual. Ongoing.	Education and training including but not limited to: Advanced Trauma Life Support (ATLS), Trauma Nurse Core Course (TNCC), Emergency Nurse Pediatric Course (ENPC) and Together Everyone Achieves More (TEAM- MDT Grant), and Cultural Humility among others.	Alyssa Johnson, DPHHS Trauma Systems	Montana Trauma System Plan 2019	DPHHS	Number of courses held and students trained. ATLS: TNCC: ENPC: TEAM Grant: Cultural Humility:
Support and further trauma center designation for all Montana facilities that care for injured persons	Ongoing	Increased number of voluntarily designated trauma centers across the state.	Alyssa Johnson, DPHHS Trauma Systems	Montana Trauma System Plan 2019	NASEM: A National Trauma Care System; NHTSA-Trauma System Agenda for the Future; American College of Surgeons Committee on Trauma	Increased voluntarily designated trauma centers.
Support and further Pediatric Ready Recognition for all Montana facilities	Ongoing.	Increase number of Pediatric Ready Recognized facilities in Montana.	Robin Suzor, EMSC- DPHHS	DPHHS		Increase Pediatric Ready Recognized facilities.
Continue to support and promote the Rocky Mountain Rural Trauma Symposium (RMRTS)	Annual	An annual two-day conference offering trauma education for physicians, APCs, nurses and pre-hospital personnel.	DPHHS Trauma Systems	Montana Trauma System Plan 2019	DPHHS	Sustain and increase participant (and vendor) attendance.
<b>Strategy 4- Integrate Crash, EMS, Trauma and Roadway Surveillance Databases.</b>		<b>Purpose:</b> Improve the accuracy, completeness, collection, integration, timeliness, uniformity, and accessibility of crash and injury data from various sources. Data on injuries and injury events can be used to guide post-crash response, identify gaps in quality care, and inform injury prevention strategies.				
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Continue to utilize and enhance ImageTrend data (EMS patient care records) to track road safety trends and to improve overall EMS system performance	Annual.	DPHHS has been collecting EMS patient care data using ImageTrend since Jan 2017. With nearly all EMS services in Montana contributing data to the state data repository, the focus has shifted to improving data quality so that it can be effectively used for surveillance and system improvement.	Hannah Yang, Epidemiologist & Shari Graham, EMS Program Manager- DPHHS	Montana Trauma System Plan 2019	NEMESIS (National Emergency Medical Services Information System)	To measure data quality: NEMESIS state data submission dashboard metrics. To measure data utilization: Number of data requests filled, number of data reports published.
Utilize ESO/Digital Innovations (DI) data (Trauma Registry) to analyze hospital treatment of the patient and implement performance improvement using the data	Annual.	Analyze hospital treatment of the patient and develop and implement program-specific, regional & state-wide performance improvement indicators based on utilizing trauma registry data to drive change.	Carol Kussman, DPHHS Trauma Coordinator	Montana Trauma System Plan 2019	ESO/DI Data Dictionary; American Trauma Society position paper	Program-specific, regional & state-wide performance improvement implemented.
Continue to support and use available Montana Highway Patrol (MHP)-motor vehicle (MV) crash data for analysis to guide injury prevention strategies and emergency care of the patients.	Ongoing	Continue to support and use MHP MV crash data to analyze crash data to guide injury prevention strategies & emergency care of the patients.	Mark Keeffe, Data Analyst- SHTSS-MDT & Hannah Yang, Epidemiologist- DPHHS			Annual crash data for DPHHS to guide motor vehicle injury prevention strategies and emergency care of the patients.
Integrate ImageTrend, DI and MHP data sets (via Biospatial platform among others) to provide a full picture of crash injuries in Montana	5+ years	Currently, Biospatial ingests statewide EMS data in real time. Trauma registry data is added to the system each quarter. Record level linkage between EMS and trauma has not yet been completed. DPHHS utilizes Biospatial and other analysis platforms to look at EMS and Trauma datasets individually. MHP is not yet contributing data to Biospatial and in addition there is no way to access crash data for standalone analyses.	Hannah Yang, Epidemiologist- DPHHS	DPHHS	Documents linking motor vehicle crash records with EMS & other health datasets. NHTSA, Linking Traffic Records Data Systems; CDC, Linking Information for Nonfatal Crash Surveillance (LINCOS); & National Academies of Sciences, Engineering, & Medicine (NASEM), A National Trauma Care System: Integrating Military and Civilian Trauma Systems to Achieve Zero Preventable Deaths After Injury	Full integration of all three data sets.

Utilize Dept. of Labor & Industry data to further understand first responder crash injuries	Ongoing	Develop queries to determine baseline number of emergency response/EMS involved in a motor vehicle crash either on scene or transport to/from site. To include nature of injury and classification of responder. Responders to include EMS provider, EMS ambulance, law enforcement (LE) officer, LE vehicle, fire & rescue (FR), FR vehicle, maintenance or public works department, tow truck driver, or hospital staff.	Emily Healy, Epidemiologist-DLI & Hannah Yang, Epidemiologist-DPHHS			Base line data needed to determine risk to emergency responders. Responder Injuries-in-Transport & On-scene Injuries.
<b>Strategy 5- Provide Statewide Injury Prevention Education to Communities Through A Collaborative Effort</b>						
		<b>Purpose:</b> Crashes are considered a preventable problem with identifiable risk and protective factors and proven mitigation strategies. Building a statewide education network to promote and support injury prevention.				
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Provide guidance, support, coordination and technical assistance to local and regional injury prevention activities.	Annual	Activities based on valid injury data & evaluation criteria to gauge effectiveness. Establish baseline for number of CHIPs with MVC prevention-focused strategies.	Maureen Ward, Injury Prevention Program Manager, EMS & TS-DPHHS	DPHHS Injury Prevention Program, State Health Improvement Plan (SHIP)-DPHHS		Increase MVC prevention focused strategies by 20%
Integrate MDT Comprehensive Highway Safety Plan (CHSP) & DPHHS State Health Improvement Plan (SHIP) strategies.	Annual	Annual review and scheduled progress updates of motor vehicle fatalities & serious injuries (severe) related to th focus areas unrestrained vehicle occupants & impaired driving emphasis area strategies to maintain consistency between the SHIP & the CHSP	Maureen Ward, Injury Prevention Program Manager, EMS & TS-DPHHS; Pam Langve-Davis, CHSP program manager-MDT	Injury Prevention Program-DPHHS, SHIP-DPHHS,CHSP-MDT		Minimum of 2 coordinated joint educational outreach efforts based on SHIP & CHSP safety strategies. Annual progress review of CHSP and SHIP strategies.
<b>Strategy 6- Support Laws, Policy Development and Legislation</b>						
		<b>Purpose:</b> Effective after-crash response includes policy development and legislation. These may include policy and legislation that enable access to timely care; laws/policy surrounding crash investigation; and laws that protect first responders and emergency services personal onscene.				
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Support activities surrounding policies and regulations that provide for emergency care access, EMS, facility designation and care standards.		TBD				Increased awareness of EMS & Trauma System needs.
Support state law and enhance driver awareness of Montana's Move Over Law, including tow operators and vehicles.	Ongoing.	Sustain and support MCA & signage posted at state borders and on interstate routes and other areas. Develop a baseline to decrease incidents of injuries and deaths occurring within the area of traffic stops of LE, emergency responders, and the traveling public. Continue to promote and support public awareness campaigns.	Montana Highway Patrol (MHP)	MCA 61.8.346	Emily Healy, Epidemiologist- DLI; Move Over Montana FaceBook	Decrease in injuries and deaths of emergency responders resulting from roadside strikes.