



EMSC Family Advisory Network Webinar

Date: January 8, 2009
Time: 3:00p.m. EST
Theme: Understanding EMS in your State/Territory/District and EMSC Performance Measures 66a and 66b
Facilitators: Theresa Morrison-Quinata, EMSC NRC Outreach Team Leader
Diana Fendya, Trauma & Acute Care Specialist

State Family Representatives in attendance:

Arkansas, Judy Taylor California, Debbie Smades-Henes Connecticut, Wendy Wheeler Kansas, Dee Jo Miller Kansas, Phyllis Larimore Louisiana, Linda Savoie Maine, Kelly Roderick Montana, Joe Hansen Nevada, Melissa Krall	North Dakota, Leann Domonoske South Carolina, Melissa Cook Utah, Shauna Hatton-Ward Virgin Islands, Christine DeJongh- Lewis Virginia, Betsy Smith Washington, Zita Wiltgen Wisconsin, Elizabeth Davy Indra Hernandez
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EMSC Program Managers in attendance:

Alaska, Raj Maskay
Delaware, Marie Renzi
Maryland, Cyndy Wright-Johnson

NEDARC Attendees:

Craig Hemingway and Kent Page

NRC Attendees:

Gayathri Jayawardena and Tasmeen Singh-Weik

For more information contact Theresa Morrison-Quinata at tmquinat@cnmc.org

Outline of Webinar

- I. Instructions to navigate through the webinar
- II. Overview of Agenda
 - a. Types of EMS Agencies, Services & Providers
 - b. Overview of EMSC PM
 - c. Education on EMSC PM(s)
 - i. Medical Control
 - ii. Pediatric Equipment
 - d. How FR can help
 - e. Your Role in EMSC
- III. EMS Agencies
 - a. Private
 - b. Hospital
 - c. Fire Service
 - d. Law Enforcement
 - e. Municipal
 - f. Local Government
- IV. EMS Services
 - a. 911 vs Transporters
 - b. Urban vs Suburban vs Rural vs Frontier
- V. EMS Providers
- VI. PM 66a

The percentage of pre-hospital providers agencies in the State/Territory that have on-line and off-line pediatric medical direction at the scene of an emergency for Basic Life Support (BLS) and Advanced Life Support (ALS) ambulances.
- VII. PM 66b

The percentage of BLS and ALS patient care units in the State/Territory that have the essential pediatric equipment and supplies, as outlined in the national Guidelines for pediatric equipment and supplies for basic and advanced life support ambulances
- VIII. Why are these PM important?
- IX. What can family representatives do to help?
- X. What are others doing to help?
- XI. Launch survey to poll participants
- XII. Webinar closed

To view the PowerPoint slides, please go to the “For Families” webpage on the EMSC NRC website at www.childrensnational.org/emsc

Information Sharing, Comments and Questions

Comments:

- Lack of funding is horrific in the State. It's unbelievable how great the need is.
- If I understood what pediatric equipment was missing on the patient care units, I would be better able to help by seeking alternative funding resources in the state.
- As far as I know my state has not completed its survey of EMS agencies to learn exactly what pediatric equipment may be missing. I believe they are waiting for the revised pediatric equipment list to be released before surveying the agencies.

Questions:

How familiar are you with the EMSC Performance Measures?

Several responses from participants revealed that some had little to no knowledge, while others were very well versed and wanted to hear about another topic. *The NRC is now working with some very experienced family representatives to develop educational webinars geared for the more-experienced family representatives.*

What are some activities you are involved in with your State EMSC Program?

The Wisconsin EMSC State family representative, Elizabeth Davy, in collaboration with the State EMSC program partnered with the General Federation of Women's Club (GFWC) in Wisconsin and the Kiwanis group to purchase and distribute pediatric equipment bags. In 2002, four EMS departments in Wisconsin carried Pediatric bags; today 183 (41%) carry the Pediatric equipment bags on all their ambulances and 59 (13%) have at least one but need more. Additionally, 11 First Responder departments now have First Responder pediatric equipment bags. Over the years, funds in excess of \$230,000 have been allocated to purchase and distribute pediatric bags to EMS agencies in Wisconsin. *Ms. Davy has provided the NRC with resources related to this project to share with the EMSC community. If you would like a copy of the resources, send your request to tmquinat@cnmc.org.*

The Utah EMSC State family representative, Shauna Hatton-Ward, is working with local hospitals to conduct focus groups of parents/caregivers to children. The purpose of forming the groups is to learn some of the reasons why children are left "unattended in automobiles" and the consequences of those actions. Those involved in the project want to better understand the reasons why in order to develop an effective educational campaign to reduce the frequency of these incidences.

Shauna is also involved in the education process of the State of Utah Medical Information System. This on-line system enables pre-hospital providers the ability to obtain critical up-to-date medical information on children with special health care needs. The purpose of this system is to develop standardized information to

providers responding to these children and to improve quality of care. EMS providers and health care providers are currently being educated and are supportive in this regard.

Leann Domonoske, North Dakota EMSC family representative, is collaborating with several foundations in North Dakota to obtain funding to purchase pediatric backboards for ambulance service in ND that are lacking this piece of equipment.

Betsy Smith, Virginia EMSC State family representative, explained that the ambulances in Virginia are stocked with the nationally recommended items for pediatric supplies/equipment; the pediatric equipment list is part of the VA State Rules and Regulations. Should ambulance services be found to be lacking the equipment, non-compliance results in infractions imposed by the State office; however, by having the specific pediatric equipment items as a State requirement, agencies are eligible to apply for Rescue Squad Assistance Fund grants. The grants are available to help agencies purchase the required items should they be lacking.

Virginia modeled their required list after the National recommended pediatric list. However, the VA list does not show a “one-to-one match” with the national equipment list as the specific size of some of the IV equipment is decided by the Operational Medical Directors.

Will this PowerPoint be available to share with others?

Yes. The PowerPoint has been uploaded to the EMSC NRC website. Please go to the “For Families” section on the EMSC NRC website.

Evaluation Results

The EMSC NRC polled the webinar attendees upon completing the session. The feedback received from the respondents will be used to improve future educational webinar sessions offered to the EMSC State Family Representatives.

Next FAN Webinar

February 20, 2009 @ 3:00PM

PM 66c, d and e – Pediatric facility recognition and transfer guidelines and agreements