



Healthy People 2010: Mapping to the EMSC Performance Measures

General links to Healthy People 2010 can be found at www.healthypeople.gov

Performance Measure	Healthy People 2010 Objective	Objective Details
<p>Performance Measure 71 (formerly PM 66a (i))</p> <p>The percent of prehospital provider agencies in the state/territory that have on-line pediatric medical direction available from dispatch through patient transport to a definitive care facility.</p>	<p><i>Healthy People 2010, Vol. 1, Objective 1-14:</i> Increase the number of States, and the District of Columbia that have implemented guidelines for prehospital and hospital pediatric care</p>	<p>“Emergency care of children presents a particular challenge because prehospital providers often treat fewer children and have limited pediatric experience and assessment skills...experienced providers can offer medical direction in two ways, either online (direct communication e.g. voice) or offline (guidelines, protocols, procedures and policies).”</p>
<p>Performance Measure 72 (formerly PM 66a (ii))</p> <p>The percent of prehospital provider agencies in the state/territory that have off-line pediatric medical direction available from dispatch through patient transport to a definitive care facility.</p>	<p><i>Healthy People 2010, Vol. 1, Objective 1-14:</i> Increase the number of States, and the District of Columbia that have implemented guidelines for prehospital and hospital pediatric care</p>	<p>“Emergency care of children presents a particular challenge because prehospital providers often treat fewer children and have limited pediatric experience and assessment skills...experienced providers can offer medical direction in two ways, either online (direct communication e.g. voice) or offline (guidelines, protocols,</p>

		procedures and policies).”
<p>Performance Measure 73 (formerly PM 66b)</p> <p>The percent of patient care units in the state/territory that have essential pediatric equipment and supplies as outlined in national guidelines.</p>	<p><i>Healthy People 2010, Vol. I, Objective 1-14:</i> Increase the number of States, and the District of Columbia that have implemented guidelines for prehospital and hospital pediatric care</p>	<p>“Emergency care of children presents a particular challenge because prehospital providers often treat fewer children and have limited pediatric experience and assessment skills...experienced providers can offer medical direction...”</p> <p>”1-14b, increase the number of states that have acute care facilities with equipment...and other resources...”</p>
<p>Performance Measure 74 (formerly PM 66c medical)</p> <p>The percent of hospitals recognized through a statewide, territorial, or regional standardized system that are able to stabilize and/or manage pediatric medical emergencies.</p>	<p><i>Healthy People 2010, Vol. I, Objective 1-13:</i> Increase the number of Tribes, States, and the District of Columbia with trauma systems that maximize survival and functional outcomes of trauma patients and help prevent injuries from occurring</p>	<p>“the main goal of the system are to match the available trauma care resources in a community, region, or State with the needs of individual patients and to ensure that patients have rapid access...in a trauma care system prehospital, acute care and rehabilitation services are integrated and administered by a public agency that provides leadership, coordinated services delivery, establishes the minimum standards of care, designates trauma centers, and fosters ongoing system evaluation and quality improvement.”</p>
<p>Performance Measure 75 (formerly PM 66c trauma)</p>	<p><i>Healthy People 2010, Vol. I, Objective 1-13:</i> Increase the number of Tribes, States, and the District of Columbia</p>	<p>“the main goal of the system are to match the available trauma care resources in a community, region, or State with the</p>

<p>The percent of hospitals recognized through a statewide, territorial, or regional standardized system that are able to stabilize and/or manage pediatric traumatic emergencies.</p>	<p>with trauma systems that maximize survival and functional outcomes of trauma patients and help prevent injuries from occurring</p>	<p>needs of individual patients and to ensure that patients have rapid access...in a trauma care system prehospital, acute care and rehabilitation services are integrated and administered by a public agency that provides leadership, coordinated services delivery, establishes the minimum standards of care, designates trauma centers, and fosters ongoing system evaluation and quality improvement.”</p>
<p>Performance Measure 76 (formerly PM 66d)</p> <p>The percentage of hospitals in the state/territory that have written interfacility transfer guidelines that cover pediatric patients and that include pre-defined components of transfer.</p>	<p><i>Healthy People 2010, Vol. 1, Objective 1-10: (Developmental) Reduce the proportion of persons who delay or have difficulty in getting emergency medical care</i></p> <p><i>Healthy People 2010, Vol. 1, Objective 1-11: (Developmental) Increase the proportion of persons who have access to rapidly responding prehospital emergency medical services</i></p>	<p>“EMTALA stipulates that anyone seeking care at a hospital emergency department (ED) must receive a medical screening examination for a emergency medical condition and appropriate stabilizing measures.”</p> <p>“the outcome of many medical emergencies depends on the prompt availability of appropriately trained and properly equipped prehospital emergency care providers...assuring a prompt response requires a well coordinated system of care...the availability of well-trained and appropriately certified response personnel...medical direction and oversight, and destination hospitals that are well-equipped and appropriately</p>

<p>Performance Measure 77 (formerly PM 66e)</p> <p>The percent of hospitals in the state/territory that have written interfacility transfer agreements that cover pediatric patients.</p>	<p><i>Healthy People 2010, Vol. 1, Objective 1-10: (Developmental) Reduce the proportion of persons who delay or have difficulty in getting emergency medical care</i></p> <p><i>Healthy People 2010, Vol. 1, Objective 1-11: (Developmental) Increase the proportion of persons who have access to rapidly responding prehospital emergency medical services</i></p>	<p>staffed.”</p> <p>“EMTALA stipulates that anyone seeking care at a hospital emergency department (ED) must receive a medical screening examination for a emergency medical condition and appropriate stabilizing measures.”</p> <p>“the outcome of many medical emergencies depends on the prompt availability of appropriately trained and properly equipped prehospital emergency care providers...assuring a prompt response requires a well coordinated system of care...the availability of well-trained and appropriately certified response personnel...medical direction and oversight, and destination hospitals that are well-equipped and appropriately staffed.”</p>
<p>Performance Measure 78 (formerly PM 67)</p> <p>The adoption of requirements by the state/territory for pediatric emergency education for license/certification renewal of BLS/ALS providers.</p>	<p><i>Healthy People 2010, Vol. II, Objective 23-8: (Developmental) Increase the proportion of Federal, Tribal, State, and local public health agencies that incorporate specific competencies in the essential public health services into personnel systems</i></p>	<p>“In addition to basic knowledge of public health, all public health workers should have specific competencies in their areas of specialty...national licensing and certification programs that measure competency already exists...coordination with these national programs will be important to ensure that new certification</p>

	<p><i>Healthy People 2010, Vol. II, Objective 23-10: (Developmental) Increase the proportion of Federal, Tribal, State, and local public health agencies that provide continuing education to develop competency in essential public health services for their employees</i></p>	<p>efforts cover essential public health concerns.”</p> <p>“...must be grounded in the areas of expertise needed to deliver essential public health services, this objective may be accomplished by developing specific courses...there is an ongoing need to train and educate people...several disciplines have continuing education requirements as part of the licensing or certification process.”</p>
<p>Performance Measure 79 (formerly PM 68 a,b,c)</p> <p>The degree to which state/territories have established permanence of EMSC in the state/territory EMS system by establishing an EMSC Advisory Committee, incorporating pediatric representation on the EMS Board, and hiring a full-time EMSC manager.</p>	<p><i>Healthy People 2010, Vol. II, Objective 23-11: (Developmental) Increase the proportion of State and local public health agencies that meet national performance standards for essential public health services</i></p> <p><i>Healthy People 2010, Vol. II, Objective 23-8: (Developmental) Increase the proportion of Federal, Tribal, State, and local agencies that incorporate</i></p>	<p>“National performance standards could be used to improve quality, increase accountability for dollars invested, and create credibility...a number of States have or are developing State-specific performance standards for local public health agencies...CDC in conjunction with national, State and local public health organizations is developing national performance standards for the State and local health departments.”</p> <p>“...basic knowledge of public health, all public health workers should have specific competencies in their areas of specialty, interests, and responsibility...the</p>

	<p>specific competencies in the essential public health services into personnel systems</p>	<p>workforce needs to know how to use information...and deliver services to select populations...their combined areas of expertise enable the organization to provide essential public health services.”</p>
<p>Performance Measure 80 (formerly PM 68d)</p> <p>The degree to which state/territories have established permanence of EMSC in the state/territory EMS system by integrating EMSC priorities into statutes/regulations.</p>	<p><i>Healthy People 2010, Vol. II, Objective 23-12: (Developmental) Increase the proportion of Tribal, States, and the District of Columbia that have a health improvement plan and increase the proportion of local jurisdiction that have a health improvement plan linked with their State</i></p> <p><i>Healthy People 2010, Vol. II, Objective 23-15: (Developmental) Increase the proportion of Federal, Tribal, State, and local jurisdictions that review and evaluate the extent to which their statutes, ordinances, and bylaws assure the delivery of essential public health services</i></p>	<p>“...a health improvement plan is a long-term, systematic effort to address health problems on the basis of the results of a community needs assessment...the health of a State or local community can be improved by setting priorities so available resources are used more efficiently. Plans should include all community interests and should tie health goals to other State goal setting or benchmarking processes.”</p> <p>“The statutes, ordinances, and charters that create the agency and set forth its powers and duties form the legal basis for any public health agency. General language in such document usually states the agency’s responsibility to preserve, promote, and protect the health of the persons in its jurisdiction.”</p>