



**Testimony of
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**PR 19-23, Chief of the Fire and Emergency Medical Services (EMS) Department of
the District of Columbia, Kenneth Ellerbe Confirmation Resolution of 2011**

**Councilmember Phil Mendelson, Chairperson
Committee on Public Safety and the Judiciary
Council of the District of Columbia**

**Tuesday, February 22, 2011
3:00 PM, Hearing Room 412, John A. Wilson Building
1350 Pennsylvania Avenue, NW
Washington, DC 20004**

Children's National Medical Center, a 283 bed not-for-profit academic medical center located at 111 Michigan Avenue, NW, has provided hope to sick children and their families for more than 140 years. With Children's National's seven primary care facilities, two outpatient specialty centers, and two pediatric practices located in the District of Columbia, Children's National is proud to provide convenient, high quality pediatric primary and specialty care to the District's children and families.

Emergency Services at Children's National

The Division of Emergency Medicine at Children's National provides emergent medical and trauma care for the approximately 110,000 children who live in the District of Columbia and also a large regional catchment area. Last year, the Emergency Medicine and Trauma Center (EMTC) at Children's National main campus provided care for more than 85,000 children. With the opening last fall of the Children's National Pediatric Emergency Department on the campus of the United Medical Center, we anticipate that, in 2011, well over 100,000 children will receive emergency care in our system making

Children's National the busiest provider of emergency services of any type in the city, and one of the five busiest pediatric emergency departments in the country.

The pediatric emergency medicine physicians that comprise the faculty of the Division of Emergency Medicine at Children's National, and with whom I've personally had the privilege of practicing for more than 20 years, are recognized as national leaders in the development of best practices in emergency medical services and prehospital pediatrics. In addition, through the longtime local leadership of individuals like District of Columbia Emergency Medical Services for Children (EMSC) state manager, Ms. Cynthia Lightfoot, Children's National has been deeply invested and involved in advocating for optimal emergency care for children in the District of Columbia for more than 25 years.

Chief Kenneth Ellerbe

I am here this afternoon to register my support for the confirmation of Kenneth B. Ellerbe as Chief of the Fire and EMS Department of the District of Columbia (DCFEMS). Since being named by Mayor Gray, Chief Ellerbe has proactively reached out to EMS constituents and stakeholders all over town to listen and solicit input. He met last month with me, Ms. Lightfoot and the team of colleagues at Children's National who have developed a cutting-edge pediatric training module focused on the assessment, care and response to ill and injured children. Development of this resource came at the request of DCFEMS training leadership in response to workforce need for supplemental continuing education in this area. Chief Ellerbe has personally committed to seeing that delivery of this train-the-trainer curriculum to the appropriate personnel at the DCFEMS training academy actually takes place in the near term without the chronic logistical challenges that Ms. Lightfoot and I have been before this body to testify about many times in the past.

In addition, even though obviously not a situation that occurred on his watch, Chief Ellerbe has committed to follow through on establishment of a "patient's bill of rights" policy which was promised by his predecessor in the aftermath of the tragic death, one year ago, of 2-year-old Stephanie Stephens. As you will recall, the toddler, who died of necrotizing lobar pneumonia [Natural death ruling for 2-year-old D.C. girl, AP/Washington Post Editors, April 5, 2010], was initially not transported to the hospital for evaluation of her breathing difficulty. The establishment of a policy that would protect patients and obviate confusion about department personnel autonomously exercising non-transport of patients for whom there had been an emergency 911 dispatch was praised and widely reported through broadcast and print media outlets around the country when first announced by former chief Dennis Rubin last spring. I was recently informed of the departmental failure to complete the task of developing a patient's bill of rights policy as I was preparing for this hearing. To say that I am disappointed is an understatement. This lack of follow through on such a critical and high profile issue continues to undermine public trust and marginalizes the sweat equity of so many of us in the professional community who advocate for quality service on behalf of our patients and so desperately want to help DCFEMS improve on all fronts.

I am happy to report, however, that under Chief Ellerbe's leadership, I am assured that a new culture of accountability and responsiveness is on the way. We unequivocally

support, without hesitation or reservation, the nomination of Kenneth B. Ellerbe for confirmation as Chief of the Fire and EMS Department of the District of Columbia.

In closing, Children's National remains committed to working with all governmental and municipal stakeholders in developing a high quality Emergency Medical Services system in the District of Columbia. Children and their families deserve the comfort of knowing that their system is well-versed in pediatric protocols and prepared to deliver the highest quality care to our most vulnerable citizens.