

EMS for Children (EMSC) Committee Meeting
Virginia Office of EMS
Embassy Suites Hotel
2925 Emerywood Parkway
Richmond, VA 23294
April 4, 2019
3-5 p.m.

| Core Members Present: | OEMS Staff: | Guests: |
|---|--|----------------|
| Steve Rasmussen , VA Emergency Nurses Association (ENA) Representative | Camela Crittenden, Manager of Trauma and Critical Care | Bob Page |
| David Edwards , EMSC Program Manager (VDH, OEMS) | Wanda Street, Secretary Sr. | |
| Jane Tingley , Office of Chief Medical Examiner (VDH, OCME) Representative | George Lindbeck, VDH, State Medical Director | |
| Dusty Lynn , Pediatric EMS Educator | | |
| Petra Connell , EMSC Family Advisory Network (FAN) Representative | | |
| Kelley Rumsey , Prehospital Care Committee Member (Pediatric Nurse) | | |
| Tanya Trevilian , Pediatric Trauma Coordinator, Carilion | | |

| Topic/Subject | Discussion | Recommendations, Action/Follow-up; Responsible Person |
|--|---|--|
| Call to order: | The meeting was called to order at 3:02 p.m. by Steve Rasmussen who is facilitating the meeting for Dr. Bartle. | |
| Introductions: | Everyone around the room introduced themselves. | |
| Approval of the minutes from January 3, 2019 meeting: | A motion was made by Kelley Rumsey to approve the minutes from the January meeting. The motion was seconded by Jane Tingley. The minutes were approved as submitted. | The minutes were approved as submitted. |
| Chair Report – Dr. Samuel Bartle: | No report as Dr. Bartle was not in attendance. The committee discussed the possibility of holding the EMSC meeting in conjunction with the other EMS Advisory Board meetings. Most committee members agreed that it would be a good idea to hold these meetings during that time. | |
| OEMS Report: | Dr. Lindbeck reported that the OEMS Division of Educational Development has been restructured into two divisions. It is now the Division of Accreditation, Certification and Education (ACE) and the Division of Consolidated Testing and Video Production (CTVP). A new ACE Manager position has been posted. David reported that OEMS is still undergoing the office renovation and some employees are telecommuting while others are still at the office in temporary workspaces. No meetings are being held there for now. | |

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| <p>EMSC Program Report Highlights – Full Report is at the end of these minutes.</p> | <p>David briefly discussed the annual data collection of performance measures 02 and 03.</p> <p>All of the child restraint seats that we had at the Office of EMS have been sent out to ground ambulance agencies. A new batch of ACR-4 restraint seats are in procurement. Agencies have been contacting David with interest in receiving the child restraints.</p> <p>Since this is the 40th Annual EMS Symposium in November, we are looking to provide 40 free registrations for 40 attendees. The committee discussed Continuing Education credits for the attendees.</p> <p>David is continuing to work on the EMSC Boot Camp modules. He will get with Debbie Akers on this. The Boot Camp will consist of three modules (see David’s report).</p> <p>David stated that we have talked about trying to get data. We are going to look at the pediatric call types and volumes. He asked the committee what information they are interested in seeing. He needs three to four people to help him with a list of questions. Kelley stated that it is helpful to know the field that you want to search. David will send out an email to solicit the questions.</p> | <p>David will send an email for feedback on the data questions.</p> |
| <p>EMSC Family Representative Report – Petra Connell:</p> | <p>Petra reported that she has received all the Regional EMS Award dates. Her goal is to have more nominations this year for the EMSC Awards. If you know someone or an agency who has been providing excellent services for children, please nominate them. All it takes is about five minutes of your time to fill out the online form.</p> | |
| <p>Committee Member Organization Reports:</p> | <p>Steve Rasmussen, ENA – ENA will have a new pediatric format for their ENPC Course. EMS credit used to be given for this class, but he is not sure if this has changed since the format has changed.</p> <p>Dr. Lindbeck stated that he and Dr. Bartle discussed working on some pediatric patient care guideline templates. These will not be mandatory statewide templates. There are best practice documents. They discussed pediatric seizures as a starting point. Dusty Lynn stated that at UVA they did a simulation for pediatric sepsis and she realized there was no checklist for the current guidelines. So she drafted a checklist and will pilot it with another simulation. Steve stated that he also talked to Dr. Bartle about this. He suggested getting with the Office of EMS to gather data to go with the guidelines and possibly an EMSAT to augment asthma, sepsis, trauma, dehydration, etc. Kelley Rumsey added that they should focus on the least common illnesses as well as the most common.</p> <p>Jane Tingley, OME – The Maternal Mortality Review Team was enacted into code during the 2019 General Assembly. Per Jane, this team has been around for 20+ years. Being in code should help with the record collection.</p> | |
| <p>Special Presentation:</p> | <p>There was no presentation scheduled for this meeting.</p> | |

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|---------------------------------|---|---|
| Unfinished/Old Business: | a) 2019 Symposium Planning (& EMSC Boot Camp) – The symposium pediatric track has 35 classes. There will be a total of about 425 classes. It will be held in three hotels this year: The Main, the Marriott and the Sheraton. b) Distribution of Child Restraints to Ground Ambulances c) Liaisons to other Committees | |
| New Business: | a) Office of EMS Structure Evolves b) Updated OEMS 5-Year State Plan c) Revising EMS for Children Website d) Other | |
| Public Comment: | None. | |
| Adjournment: | The meeting adjourned at approximately 4:59 p.m. 2019 Meeting Dates: (All Tentative) April 4, July 11, October 3 Location: Virginia Crossings, 1000 Virginia Center Parkway, Glen Allen, VA 23059 Time: 3:00 p.m. to 5:00 p.m. | |

Below is the full version of the EMS for Children program written report presented by David Edwards and provided as a handout at the EMSC Committee meeting:

VIRGINIA EMS for CHILDREN (EMSC) PROGRAM

Collection of Performance Measures 02 & 03 Data Set to Become Annual:

HRSA announced April 3rd that the all state EMSC programs will adopt an annual data collection process to assess each state partnership program’s degree of achievement from year to year related to the EMS-based performance measures EMSC 02 and EMSC 03. The 3-month data collection period will be from January through March, beginning in 2020.

- EMSC 02 = Pediatric Emergency Care Coordinators (EMS agency level)
- EMSC 03 = Pediatric Skills Verification

Continuing EMSC recommendation (and plea) to Virginia hospital Emergency Departments:

- Weigh AND record children in **kilograms** (*to help prevent medication errors*).
- Include children specifically in hospital disaster/emergency plans.
- Designate a **Pediatric Emergency Care Coordinator (PECC)**—*nurse, physician, or both—the single most important item a hospital can implement to ensure pediatric readiness, including patient safety.*
- Ensure *pediatric* patients are included in the quality improvement process.
- Review and/or adopt **pediatric safety policies** (*radiation dosing, medication dosages, abnormal VS*).

Agencies Lining Up for Next Shipment of Child Restraints:

EMS agency leaders with interest in receiving Quantum ACR-4 child restraint systems are contacting the EMS for Children program (david.edwards@vdh.virginia.gov) with their requests. The previous inventory of child restraint systems was fully distributed, and a new batch of ACR-4 systems is in procurement now. Agencies are strongly encouraged to adopt safety policies and procedures requiring the use of child restraints by their providers, and the Virginia EMSC program is available to assist in this.



Plans for EMSC-Funded 2019 Symposium Registrations:

A topic at the next EMSC Committee will be the final details for offering full registration awards to 40 attendees to the 2019 Virginia EMS Symposium (40th Annual Symposium...).

Planning for Voluntary Hospital ED Site Visits:

A calendar is under construction for future pediatric-focused evaluations of hospital emergency departments (upon hospital request). These are being provided at no cost by the Virginia EMSC program, and will be coordinated when possible with activities of other OEMS Divisions related to regional EMS system evaluation. The bulk of these will probably be small and/or rural hospital ED's. Those EMSC Committee members who may wish to participate in one or more of these hospital site visits should let their interest be known to David Edwards, Pediatric Emergency Care Coordinator; the best method at this time would be by email (david.edwards@vdh.virginia.gov).

EMSC “Boot Camp” modules evolving:

As you know, we plan to host an “EMSC Boot Camp” at the 2019 EMS Symposium. We are still developing the concept, with at least three adjacent modules:

- “EMS Agency Pediatric Coordinator”
- “Pediatric Skills Verification”
- “EMS Agency Pediatric Readiness”

We are working with the help of staff from the Division of Educational Development at OEMS (and input from other state EMSC programs) as we evolve these subjects into curriculum.

Upcoming Webinar Specifically Targeted to EMSC Family Advisory Network Members

The EMSC Innovation & Improvement Center (EIIC) is presenting a webinar “Effective Use of Social Media for the EMSC Family Advisory Network (FAN) on Tuesday, April 16th from 4-5 EST. To register, please click the link <https://www.surveymonkey.com/r/DYK8V7R>.

The webinar will feature Dr. Padma Swamy, a pediatrician at Baylor College of Medicine and Texas Children's Hospital. Dr. Swamy's clinical interests include providing care for vulnerable and underserved children. She is also passionate about using social media for advocacy and has presented lectures locally and nationally on this topic. You may also follow her @PadmaGloHealth, her personal Twitter account. Please note that this account does not reflect the official views of the EMSC, TCH, BCM or the EIIC.

Dr. Swamy maintains that social media has many benefits that can support your work:

- Create targeted messages for specific demographics
- Build relationships with your partners and community
- Create word of mouth advocacy--and its FREE

“Stop the Bleed” Toolkit for School Nurses (and others) Still in Development:

Virginia EMSC is still collaborating with the *VA Department of Education*, the *Central VA Coalition to Stop the Bleed*, and the *School Nurses Institute Partnership* to develop a toolkit to assist school nurses

(and others) in combining traditional “**Stop the Bleed**” training with scenario-based decision-making (and additional repetition of hemorrhage control techniques). School nurses will be able to receive continuing education credit as well for participating in these courses, in which participation of EMS agencies (as instructors, victims or students) can create a value-added experience.

MARK YOUR PEDIATRIC CALENDAR...

- **2019 AAP Legislative Conference.** The 2019 AAP Legislative Conference will take place April 7 – 9 in Washington, DC. Each year, the conference brings together pediatricians who share a passion for child health advocacy. Activities include skills-building workshops, guest speakers, learn about policy priorities and go to Capitol Hill to urge Congress to support strong child health policies. To be notified when registration for the 2019 conference opens, email LegislativeConference@aap.org.
- **Joint Commission 2019 Emergency Preparedness Conference** will meet in Washington DC, April 23 & 24, 2019 and focuses on how compliance with Joint Commission standards will help prepare organizations for emergencies and disasters. Registration open.
- **Pediatric Academic Societies:** April 24-May 1, 2019, Baltimore.
- **EMSC Town Hall** – 3-4 pm ET, May 1, 2019.
- **National Association of State EMS Officials:** May 13-16, 2019, Salt Lake City.
- **Society for Academic Emergency Medicine:** May 14-17, 2019, Las Vegas.
- **National EMS Week** – May 19-25, 2019.
- **National EMS for Children Day** – May 22, 2019. This year’s theme is “*BEYOND the CALL.*”
- **EMSC Town Hall** – 3-4 pm ET, August 14, 2019.
- **EMSC: A Journey to Improve Pediatric Emergency Care.** *The EMSC Program’s 2019 All Grantee Meeting*, held every other year, will be August 19-23, 2019, at the Hilton Crystal City in Arlington, VA. This EMSC Program conference is an opportunity to interact with EMSC colleagues across the grant spectrum. August 19 & 20 are preconference days. The main conference begins on Wednesday, August 21 and will conclude on Friday, August 23.
- **EMSC Town Hall** – 3-4 pm ET, November 13, 2019.

Distracted Driving—An Issue for All Sizes of Patients and Providers!

(From the National Safety Council) According to a survey released today by the National Safety Council and the Emergency Responder Safety Institute, 71% of U.S. drivers take photos or videos when they see an emergency vehicle on the side of the road responding to a fire or a crash, or simply making a routine traffic stop. Sixty percent post to social media, and 66% send an email about the situation – all while behind the wheel. Those distracting behaviors are markedly less frequent, but still alarming, during normal driving conditions – 24% of drivers surveyed said they take photos or video while driving, 29% admitted to using social media and 24% said they send email. Worse still, 16% – more than 1 in 10 – said they either have struck or nearly struck a first responder or emergency vehicle stopped on or near the road. In spite of all this, 89% of drivers say they believe distracted motorists are a major source of risk to first responders.

NSC is releasing the survey during Distracted Driving Awareness Month (observed every April) to raise awareness and educate about the importance of being attentive behind the wheel. Funding for the survey was provided to the Cumberland Valley Volunteer Firemen’s Association through the FEMA Fire Prevention and Firefighter Safety Grant Program. “The cruel irony is, we are putting the people who are trying to improve safety in very unsafe situations,” said Nick Smith, interim president and CEO of NSC. “Our emergency responders deserve the highest levels of protection as they grapple with situations that are not only tactically difficult but also emotionally taxing. Save your communications for off the road; disconnect and just drive.”

Thousands die each year in distracted driving crashes, though NSC investigations show these crashes are significantly underreported and undercounted. Emergency responders are particularly vulnerable, because they exit their vehicles and tend to situations on active roadways. In 2013, 37 people died in crashes involving ambulances, fire trucks or police cars, and an additional 17,028 were injured. Since January, 16

emergency responders have been struck and killed by vehicles. Sadly, 49% of survey respondents said possibly being struck by a vehicle is “just part of the risk” of being a first responder.

“The Emergency Responder Safety Institute was born 21 years ago following the tragedy of two highway incidents that took the lives of first responders who were struck while helping others,” said Greg Yost, President of the Cumberland Valley Volunteer Firemen’s Association, parent organization of the Emergency Responder Safety Institute. “Because of distracted driving, we’ve been focusing our efforts on educating drivers who are often not paying careful enough attention when passing emergency scenes. In 2019, already 16 responders have lost their lives and many others have been injured in these types of crashes,” he added.

Other important findings from the poll include:

- 19% of drivers admit their own inattentive driving has probably put first responders at unnecessary risk
- Despite being willing to engage in risky behaviors while driving around emergency vehicles, 62% say they are “above average” drivers when passing an emergency vehicle with its lights flashing on the side of the road
- 24% do not realize that there are legal requirements for what drivers must do when they see an emergency vehicle on the side of the road
- Even though 97% say they will see an emergency vehicle if it has its flashing lights on, 74% would still like responders to wear reflective clothing
- 80% of drivers say they slow down to get a better look when they see an emergency response vehicle tending to a fire, crash or traffic stop. Doing so backs up traffic and creates other safety hazards.
- Encouragingly, 67% have heard of “Move Over” laws and 73% say they move over when they see an emergency vehicle stopped on the side of the road with its lights on – the proper response on nearly all roadways

“Those that serve the public are exposed to a number of risks, including risks from those that they serve,” said I. David Daniels, chair of the NSC Government and Public Sector Division, which initiated the NSC-ERSI partnership. “These two organizations’ joint efforts will most certainly help increase safety for public sector workers and reduce communities’ costs incurred from vehicle crashes involving public employees.”

The full survey and methodology are available at nsc.org/firstrespondersurvey. For more information about Distracted Driving Awareness Month, visit nsc.org/ddmonth.

- ***About the National Safety Council***

The National Safety Council is a nonprofit organization whose mission is to eliminate preventable deaths at work, in homes and communities, and on the road through leadership, research, education and advocacy. Founded in 1913 and chartered by Congress, NSC advances this mission by partnering with businesses, government agencies, elected officials and the public in areas where we can make the most impact.

- ***About the Emergency Responder Safety Institute***

The Emergency Responder Safety Institute (ERSI), a Committee of the 118-year-old Cumberland Valley Volunteer Fireman’s Association, is an advisory group of public safety leaders and transportation experts committed to reducing deaths and injuries to America’s emergency responders while working on the roadways helping others. The ERSI mission includes responder training as well as public education.

Deadlines for EMSC Awards by EMS Regional Council

- Blue Ridge - May 10, 2019
- Central Shenandoah - April 15, 2019
- Lord Fairfax - May 31, 2019

- Northern Virginia - May 1, 2019
- Old Dominion - April 19, 2019
- Peninsulas - April 29, 2019
- Rappahannock - May 5, 2019
- Southwest Virginia - May 24, 2019
- Thomas Jefferson - April 17, 2019
- Tidewater - April 15, 2019
- Western Virginia - May 31, 2019

Please do what you can to make sure that appropriate people, groups, entities, etc. are nominated for these awards! Tristen Graves at OEMS may be a helpful conduit if you do not know where to start (tristen.graves@vdh.virginia.gov).

EMSC State Partnership Grant.

- Each state receives only one EMSC State Partnership Grant, and in Virginia, the Virginia Department of Health through the Office of EMS administers the grant. The current grant will run through March 31, 2022 (with the possibility of a 1-year extension), relying on Congress each year to authorize specific budget amounts.
- The EMSC Committee of the EMS Advisory Board advises the EMSC program and assists in developing strategies to make progress toward achieving specific measurable national EMSC Performance Measures. The Committee will be meeting going forward at the Embassy Suites Hotel last met January 3, 2019 at the OEMS offices in Glen Allen and worked a full agenda. EMSC Coordinator David Edwards will attend a required workshop in late February titled “Using Pediatric NEMESIS Data to Drive Quality Improvement.”



Suggestions/Questions

Please submit suggestions or questions related to the Virginia EMSC Program to David P. Edwards via email (david.edwards@vdh.virginia.gov), or by calling 804-888-9144 (direct line). The EMS for Children (EMSC) Program is a part of the Division of Trauma and Critical Care, within the Virginia Office of Emergency Medical Services (OEMS).



The Virginia EMSC Program receives significant funding for programmatic support through the EMSC State Partnership Grant (H33MC07871) awarded by the U.S. Department of Health and Human Services (HHS) via the Health Resources & Services Administration (HRSA), and administered by the Maternal and Child Health Bureau (MCHB) Division of Child, Adolescent and Family Health.

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