

IEMS for Children (EMSC) Committee Meeting
Virginia Office of EMS
1041 Technology Park Drive
Glen Allen, VA 23059
January 3, 2019
3-5 p.m.

Core Members Present:	OEMS Staff:	Guests:
Sam Bartle, MD , EMSC Committee Chair, EMS Advisory Board Pediatric representative (& VA AAP)	Gary R. Brown, Director (also core member)	Bob Page
David Edwards , EMSC Program Manager (VDH, OEMS)	Camela Crittenden, Manager of Trauma and Critical Care	Greg Neiman
Steve Rasmussen , VA Emergency Nurses Association (ENA) Representative	Wanda Street, Secretary Sr.	Brad Taylor
Kae Bruch , VA Association of School Nurses Representative		
Jane Tingley , Office of Chief Medical Examiner (VDH, OCME) Representative		
Dusty Lynn , Pediatric EMS Educator		
Petra Connell , EMSC Family Advisory Network (FAN) Representative		
Eddie Ferguson , EMS Provider Representative		
Kelley Rumsey , Prehospital Care Committee Member (Pediatric Nurse)		

Topic/Subject	Discussion	Recommendations, Action/Follow-up; Responsible Person
Call to order:	The meeting was called to order at 3:02 p.m. by the Chair, Dr. Samuel Bartle.	
Introductions:	Everyone around the room introduced themselves.	
Approval of the minutes from October 4, 2018 meeting:	A motion was made by Steve Rasmussen to approve the minutes from the October meeting. The motion was seconded by Kae Bruch. The minutes were approved as submitted.	The minutes were approved as submitted.
Chair Report – Dr. Samuel Bartle:	Dr. Bartle reported that we now have the new trauma system committees and we would like to make sure there is pediatric representation on all of the committees. There is something that is coming up in legislature and Mr. Brown will cover it later in his report. It concerns deregulating child restraints in ambulances, fire vehicles and police vehicles.	
OEMS Report:	Gary Brown stated that the bill just mentioned is HB1662. This bill <u>exempts</u> the Emergency Medical Services agency vehicles, fire company and fire department vehicles and law enforcement agency vehicles from the requirement that certain minors be secured in a child restraint device or a safety belt. The Medical Direction Committee of the State EMS Advisory Board met this morning and have taken a position of opposition to this bill. Gary expects that there will be a lot more bills introduced on the legislative information system. Gary also spoke about legislative bills being carried over from last year that will affect EMS. Each year, the Office of EMS tracks legislation and	

Topic/Subject	Discussion	Recommendations, Action/Follow-up; Responsible Person
	<p>produces a grid of the bills that we are lead on. This Legislative Grid goes out by email every Friday to staff and other interested parties. It will also be posted weekly on the OEMS website.</p> <p>This November will be the 40th Anniversary of the Virginia EMS Annual Symposium. We want to do some great things for the 40th. We will also have a dedicated pediatric track. The deadline to submit to Call for Presentations is January 15, 2019. If you have ideas for courses, please submit them even if they are a few days past the deadline. Gary also mentioned that they are asking Governor Northam to be the guest speaker at the general session, which will be new this year. It would also be nice if he could teach a pediatric course.</p>	
<p>EMSC Program Report Highlights – Full Report is at the end of these minutes.</p>	<p>David will be providing a written report to the committee in an email.</p> <p>David reported that we are continuing to recommend a core set of items to Virginia hospital emergency departments that go along with the pediatric readiness assessment and QI initiative. He is also trying to get everyone to weigh and record the pediatric weights in kilograms. This is still not happening at all facilities. David also wants to ensure that children are included in hospital disaster and emergency plans, and he would like hospitals to designate a pediatric emergency care coordinator for the ER or the hospital. He has been working to make sure pediatrics are included in the ED performance improvement process. The last thing is reviewing and/or adopting pediatric safety policies. He will continue to work on these items and find better ways to get this out to the emergency departments.</p> <p>David plans to send out the current inventory of child restraint systems by the end of the month and will purchase another batch of them shortly. He plans to purchase 80 to 100 more.</p> <p>He awarded 30 symposium registrations in November and that was quite a success. Many of them stopped by the EMS for Children booth and thanked EMSC for sponsoring their registration. He plans to continue the symposium registration awards next year.</p> <p>The EMSC Boot Camp is still in the planning phase and David is working with the Division of Educational Development on this.</p> <p>The Stop the Bleed initiative continues to be pushed out to schools and other organizations.</p> <p>David has also included a list of calendar events in his report that the committee may be interested in.</p> <p>(The complete EMSC Report is at the end the meeting minutes.)</p>	

Topic/Subject	Discussion	Recommendations, Action/Follow-up; Responsible Person
EMSC Family Representative Report – Petra Connell:	<p>Petra reported that the EMS Awards Committee asked us to review the criteria for the EMS for Children award. There was a discussion at the last EMS for Children Committee meeting and we all agreed that the broader, the better. It was suggested to add an individual EMSC award and a group EMSC award, although she does not see this happening. The committee decided to keep the criteria the same.</p> <p>David is supposed to get the due dates for the different regions and we will reach out to make sure all the regions have a nominee, as it gets closer to the due dates.</p>	
Committee Member Organization Reports:	<p>Kae Bruch stated that she will update everyone on the legislation that was continued from last year to this year.</p> <p>Jane Tingley reported that the team is still working on the drowning report recommendations and it may come out in May or June. David said that they had some conversation about potential topics for the CME’s office. If the committee has any additional suggestions, now is a good time mention them and get them into the Call for Presentations. Steve Rasmussen stated that death is no longer for old people. They could talk about the child/youth deaths showing the patterns and trends of injuries. Also, youth suicides or mental health issues were discussed. The topic could be called “The Changing Faces of Death” or something similar. Cam stated that pediatric trauma is always a good topic that interests EMS providers. Jane mentioned that the CME’s office has done some mock fatality reviews at other conferences. Steve said another topic name could be “The Hidden Faces of Pediatric Trauma”.</p>	
Special Presentation – Bob Page:	<p>Bob discussed Upping the Game in Pediatric Education. He did not have a formal presentation, but wanted to share his expertise in pediatric education. He has studied how people learn. He and his wife, Dusty Lynn, have developed a Pediatric Assessment Course. This course tests for competency. He also discussed simulation as a learning tool and ideas for funding. Bob mentioned the PEPP Courses and the development of PEPP Instructors in Missouri. EMSC funded this and after it was taught all over the state, no more EMSC funds were needed. He also discussed ITLS case-based scenarios to show mastery. He proposes bringing simulation labs to Virginia, but rural areas do not have the funds. EMSC funds could possibly help support the purchase of simulators. He could put together a bid or proposal and go from there. Maybe start out small with one simulator that can be taken to underserved, rural areas. It can be used for OB and pediatric scenarios, which are the main two types of simulation requests. He wanted to through this out there to see what the committee thinks and to up our game.</p> <p>The committee provided feedback about simulators and agreed that funding was an issue. They also discussed who might maintain it, ownership of it, and competing interests.</p> <p>Bob explained that the first step is to see what funding is available and make a list of equipment to get started. It may take two years to get it</p>	

Topic/Subject	Discussion	Recommendations, Action/Follow-up; Responsible Person
	up and fully running. It was advised to start small with a mobile simulation. The committee is very interested and feels that this is a worthwhile project, even if not done by EMSC.	
Unfinished/Old Business:	<p>a) 2018 Symposium status (pediatric track & sponsored registrations)</p> <p>b) EMSC Award criteria (work group) – updated under the Family Rep report.</p> <p>c) Future composition of the EMSC Committee – Dr. Bartle asked if this committee should meet in conjunction with the other Advisory Board meetings. More information to come on this.</p>	
New Business:	<p>a) 2019 Symposium planning (& EMSC Boot Camp)--already discussed during EMSC program report).</p> <p>b) Other</p>	
Public Comment:	None.	
Adjournment:	<p>The meeting adjourned at approximately 4:59 p.m.</p> <p>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.</p>	

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

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)**—*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).

Current inventory of child restraint systems shipping now.



EMS agency leaders with interest in receiving Quantum ACR-4 child restraint systems need to contact the EMS for Children program (david.edwards@vdh.virginia.gov) with their requests, as the last of the current inventory is being shipped out now to EMS agencies, and a new batch of ACR-4's will be procured in the very near future. EMS 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.

Symposium Pediatric Registration Awards a success!

30 EMS providers attended last November's 39th Virginia EMS Symposium as guests of the EMS for Children program, as their registration fee of \$189 was taken care of by EMSC funding (they also had to sign up for at least 3 pediatric track offerings). Many of the awardees stopped by the "EMSC Booth"

outside the vendor hall and expressed their gratitude, and several commented that they would not have been able to attend had it not been for that support. Additionally, a lot of interest was generated for the *pediatric coordinator* role that EMSC would like each agency (or groups of small agencies) to designate.

EMSC “Boot Camp” concept developing.

Plans are underway to develop several modules of an EMSC Boot Camp that would debut at the 2019 EMS Symposium. So far, module topics include the following.

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

We will be 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.

Fifteen articles touting EMSC in one issue...

The *September 2018* issue (<https://www.sciencedirect.com/journal/clinical-pediatric-emergency-medicine/vol/19/issue/3>) of *Clinical Pediatric Emergency Medicine* (CPEM) is a tour de force for the EMS for Children Program. Many EMSC leaders contributed to the success of this compilation, which highlights the many activities and achievements of the EMSC Program and the significant progress made over the last three decades. Meeting the needs of children across the entire emergency care continuum requires that focus be at once broad and narrow. With many projects and programs working simultaneously, grasping the full scope of EMS for Children can be difficult. However, this issue of CPEM provides an overview of the larger network *working in sync* to improve emergency care for children across the United States. Specific topics covered in this issue include: Injury Prevention Efforts, Disaster Preparedness, Pediatric Readiness, Workforce Innovation, Prehospital Pediatric Emergency Care, Quality Improvement Science, Role of Nurses in EMSC, Knowledge Translation, Transitions of Care, Analytics and Measurement, Trauma Management, and Engagement with the Family Advisory Network.

Emergency Nursing Pediatric Course Updated.

Recently, the ENA launched its updated Emergency Nursing Pediatric Course (ENPC) 5th edition, featuring significantly revised content, multi-platform learning with a comprehensive five-color provider manual, interactive pre-course online modules and instructor-led activities. New in this edition, participants work through classroom case-scenario based content and an online avatar-driven simulation experience. The fifth edition also includes patient experience videos, which allow learners to hear directly from pediatric patients and their caregivers. ENPC focuses on the most current fundamental pediatric emergency nursing information, along with added content on issues such as dermatological and environmental emergencies, human trafficking, allergies and more. The Virginia EMSC Program works to facilitate access to this excellent course, and at times will provide books, fees and instructor support..

“Stop the Bleed” toolkit evolves.

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. The Planning Committee for “STB in Virginia Public Schools Scenario Day” was scheduled to meet January 25th at the VA Public Safety Training Center in Hanover.

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 last met January 3, 2019 at the OEMS offices in Glen Allen and worked a full agenda. The Special Presentation at this meeting came from Bob Page, well-known national EMS educator, who now resides in Virginia. Bob offered a vision of how pediatric preparedness might advance in Virginia by using mobile simulation training (“Upping the Game for Pediatric Education”). The EMSC Committee next meets again April 4, July 11 and October 3, 2019 (location to be determined).
- EMSC Coordinator David Edwards will attend a required workshop in late February titled “Using Pediatric NEMESIS Data to Drive Quality Improvement.”



MARK YOUR PEDIATRIC CALENDAR...

- **2019 Preparedness Summit** -- March 26-29, 2019, in St Louis, MO. Registration is open for the Summit: <http://www.preparednesssummit.org/home>. The Summit features experts from the health care and emergency management fields in addition to public health preparedness professionals to address the gaps between these representatives to facilitate collaborations when planning for emerging threats.
- **Advanced Pediatric Emergency Medicine Assembly** --March 19-21 2019 at Disneyland, Anaheim, CA. Hosted by ACEP and AAP. Link to meeting information: <https://www.acep.org/pem/>. Whether you want to brush up on your pediatric emergency medicine skills or you want to take your dual-boarded training to the next level, you will find a wide range of valuable content.
 - Receive clinical updates that offer the latest scientific advances
 - Scan recent literature for evidence-based diagnosis and management tools
 - Learn from the most respected names in pediatric emergency medicine
 - Gain confidence to make difficult situations less stressful
 - Enhance your ability to treat even the most complicated patient
- **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, please email LegislativeConference@aap.org.

- **Pediatric Academic Societies:** April 24-May 1, 2019, Baltimore, MD.
- **Joint Commission 2019 Emergency Preparedness Conference** will meet in Washington DC, April 23 & 24, 2019. Registration open.
- **National Association of State EMS Officials (NASEMSO):** May 13-16, 2019, Salt Lake City, UT.
- **Society for Academic Emergency Medicine:** May 14-17, 2019, Las Vegas, NV.
- **EMSC: A Journey to Improve Pediatric Emergency Care.** August 19-22, 2019, Hilton Crystal City in Arlington VA. This EMSC Program conference is an opportunity to interact with EMSC colleagues across the grant spectrum. Watch this page and your email for further details.
- **40th Annual Virginia EMS Symposium:** November 6-10, 2019, Norfolk, VA. This is truly one of the nation's premier educational opportunities for EMS providers and Registered Nurses to obtain continuing education and network. Extra care and effort is planned to make the 40th anniversary something special.

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.

--END--