MINUTES
NORTH CAROLINA EMERGENCY MEDICAL SERVICES FOR CHILDREN ADVISORY COMMITTEE

Department of Health and Human Services
Division of Health Service Regulation
Office of Emergency Medical Services

Dorothea Dix Campus
Wright Bldg., Room 134
Raleigh, North Carolina

May 23, 2011 – 1:30pm

Members present
Dr. Kim Askew, Chair (via conference call)
Mr. Daniel Cheek
Dr. Cheryl Jackson
Mr. Jarrett Nycamp
Dr. Jessica Katznelson (via conference call)
Dr. Dawn Kendrick (via conference call)
Dr. Gerri Mattson
Dr. Donna Moro-Sutherland (via conference call)
Ms. Jennie Olympio
Ms. Muriel Overman (via conference call)
Ms. Krista Ragan
Ms. Rose Whitehurst (via conference call)

Staff present:
Ms. Gloria Hale
Ms. Heather Majernik
Ms. Nadine Pfeiffer

(1) Purpose of the Meeting
To provide an update on initiatives of the EMSC Program and determine next steps for addressing needs in EMSC.

(2) Actions of the Committee
(a) Introductions were made and the meeting minutes from February 28, 2011 were approved.

(3) Old Business
(a) Ms. Muriel Overman attended the UNC May Day Trauma Symposium and provided a brief report. The presentation on the terrorist attack at a school in Beslan, Russia provided attendees with a detailed depiction of how the attack unfolded and the conditions that the hostages had to endure. It was mostly geared toward law enforcement, however, focusing

on the best points to intervene, and how to gain a better understanding of terrorists' strategies in order to know how to be prepared to respond. The take home message was that the U.S. was not well prepared for such attacks and that there was too much reliance on Special Forces teams to save us. Other conference topics that focused on pediatric trauma were concussions and transfusions.

(b) Dr. Cheryl Jackson provided an update on the Emergency Department Preparedness for Pediatrics project. Hospital survey response was 50% to date. Discussion took place on whether the online survey should remain open to give hospitals more time to respond and how to increase the response rate to provide more meaningful data. It was decided that a letter from Dr. Cheryl Jackson, on UNC Hospitals letterhead, would be sent out to non-responding hospitals asking for participation and the deadline for completion would be extended. In addition, Dr. Jackson offered the assistance of a volunteer in her office to assist with making follow up phone calls to non-responding hospitals.

(c) NC EMS Standards/Policies Revisions – Dr. Donna Moro-Sutherland reported that all of the pediatric protocol revisions submitted from committee members would be presented to the NCCEP public input session scheduled for Thursday, May 26, 2011 at WakeMed. In addition, a recommendation to have all of the pediatric protocols assembled together, separate from the adult protocols rather than embedded within them, would be put forward. It was felt that this would facilitate quick access to pediatric-related information for prehospital professionals.

(d) Safe Pediatric Transports for Children – Ms. Gloria Hale reported that progress continues to be made on the development of this online video training; demonstrations of the correct installation of various pediatric restraint devices were taped as were scenarios of what to do and what not to do in various transport situations. The next phase will be editing and narrator voiceovers.

(e) EMSC Program Update – Ms. Gloria Hale shared the results of the EMSC Performance Measure surveys for EMS Systems and hospitals. Results were as follows:

- EMT-Basic and Intermediate systems with online pediatric medical direction: 86%
- EMT- Paramedic systems with online pediatric medical direction: 93%
- EMT-Basic and Intermediate systems with offline pediatric medical direction: 90%
- EMT- Paramedic systems with offline pediatric medical direction: 99%
- EMT-Basic and Intermediate ground ambulances with all nationally-recommended equipment and supplies: 100%
- EMT-Paramedic ground ambulances with all nationally-recommended equipment and supplies: 80%
- Hospitals with inter-facility transfer guidelines and components inclusive of pediatrics: 39%
- Hospitals with inter-facility transfer agreements inclusive of pediatrics: 59%

(4) <u>New Business:</u>

(a) Ms. Heather Majernik, OEMS Education and Credentialing Manager, provided an update on the state's plans and efforts toward implementing the new EMS Education Standards and an update on EM Today conference planning. The Education Task Force of the EMS Advisory Council will be recommending a continuation of the four year credential for EMTs, but will recommend a requirement of 24 hours per year of continuing education rather than 96 hours every four years. The latter requirement will allow for a more even distribution of continuing education hours throughout the period of credentialing. Specific numbers of hours were recommended to assist the state in carrying out its regulatory duties. The Education Task Force is expected to finalize its recommendations to the EMS Advisory Council at the August meeting.

The EM Today response to the request for presentation proposals was outstanding. Two hundred and fifty-three proposals were received. A review committee will meet to select the presentations for this year's EM Today conference. All other conference planning is on track.

(6) Special Report:

(a) Ms. Jennie Olympio, Research Assistant with the North Carolina Child Fatality Prevention Team, provided a summary of findings from a study undertaken for the EMSC Program on EMS response to child fatalities. The study included response to suspected child abuse or neglect, SIDS, and toxins. Key findings included: a lack of calls made to local departments of social services when abuse or neglect was suspected and a lack of notification to ED staff, resuscitation efforts made by EMS when it was noted that there were obvious signs of death, non-use of the term "SIDS" in EMS documentation which was considered a positive action, a lack of EMS records available in PreMIS, and the absence of narratives in PreMIS.

Ms. Jennie Olympio will complete a report of the study findings and incorporate recommendations for EMS response to these child fatalities. It will be available on the OEMS web site in the coming weeks.

(7) Other Business

There being no other business, the meeting adjourned at 3:00pm.