Just Released! The EMS Workforce Agenda

Released in May, the "EMS Workforce Agenda for the Future" provides a vision for the future of the EMS workforce. Prepared by the University of California San Francisco (UCSF), the EMS Workforce Agenda envisions a future in which all EMS systems have a sufficient number of well-educated, adequately prepared, and appropriately credentialed EMS workers who are valued, fairly compensated, healthy, and safe.

The EMS Workforce Agenda, a project funded by NHTSA and Emergency Medical Services for Children (EMSC), identifies four components critical to the development of a thriving EMS workforce that will be a driving force for achieving integrated, community-based EMS systems.

These four components are health, safety and wellness of the EMS workforce; education and certification; data and research; and workforce planning and development. The agenda also proposes the establishment of a National EMS Workforce Technical Assistance Center to aid national, state, territorial, tribal, local, and private EMS stakeholders with workforce development. The vision of the EMS Workforce Agenda is ambitious but achievable with the continued collaboration of local, tribal, territorial, State, national and Federal EMS stakeholders. For more information, contact Gamunu Wijetunge.

News from NHTSA

Dear Colleague:

Each Fall, the NHTSA Office of EMS provides a brief overview of many of our projects. In this Update our staff shares information on long-established activities as well as those that are just beginning.

The Office of EMS continues to address a variety of issues and ideas—with continuous input from the EMS and 911 communities. The programs and products described in this issue have been developed in close collaboration with our Federal partners, EMS and 911 stakeholder organizations, the National EMS Advisory Council, and the support of many talented emergency care professionals across the nation.

Highlighted in this edition are two new reports—the EMS Workforce Agenda of the Future, which envisions the development of a strong, educated, healthy and safe EMS workforce, and the NG911 "What's Next" white paper, which provides insight into how next generation 911 technology can improve emergency response, from the point of view of EMS, law enforcement, fire and traffic operations.

We appreciate your thoughts and feedback and encourage you to contact our staff with questions or suggestions. Our contact information is listed on page 6 of this edition, and you may always communicate with the Office of EMS through the Web site, www.ems.gov.

Best Regards,
Drew Dawson, Director, Office of EMS

Contents

National EMS Culture of Safety	State EMS Technical Assessments
Institute of Medicine Preparedness Forum	FICEMS Committee and Working Group Update 4
Evidence-Based Guidelines2	Evidence-Based Guidelines4
911 News	EMS Cost Analysis Project
NHTSA-NIOSH: Workforce Safety Project	News from NEMSAC

National EMS Culture of Safety

This summer, more than 100 experts and EMS community members gathered in the Washington D.C. area to discuss the creation of a Culture of Safety in EMS.

The conference prompted discussion of cultural change as it relates to safety, and input was sought from stakeholders and experts within EMS and from other professions regarding important safety and cultural issues, what has caused change within the culture of EMS in the past, and what opportunities exist for creating change in the future.

This was just one part of a larger, three-year project, the development of a national strategy to promote a culture of safety within EMS. A cooperative agreement between the NHTSA and Health Resources and Services Administration's (HRSA) Emergency Medical Services for Children (EMSC) and the American College of Emergency Physicians (ACEP), the project was initiated after a recommendation by the National EMS Advisory Council (NEMSAC).

The strategy will guide the development of an EMS culture to make safety for the practitioner, the patient, and the bystander the number one factor in every decision.

"The conference was an extraordinary experience," said Dave Bryson, NHTSA's contracting officer's technical representative. "So often we address issues on a micro-level, and this conference has provided a unique opportunity to step back and look at EMS at the macro level.

"The faculty shared so much information about how safety issues can be managed, which prompted great discussion," he continued. "This conference and the resulting strategy are opportunities to utilize lessons learned from other industries and create a plan that can make a difference for our patients and EMS personnel."

The first draft of the strategy is currently under review by NHTSA and the project Steering Committee. Future drafts of the strategy document will be available for public review and comment, and a national review meeting will take place in 2012. The final strategy will be provided to NHTSA in September 2013.

For additional information, contact Pat Elmes of ACEP at pelmes@acep.org or call 972-550-0911 ext.3262 or David Bryson at NHTSA at dave.bryson@dot.gov.

Podcast interviews from the national conference can also be viewed at: http://www.mediccast.com/blog/. ■

Institute of Medicine Preparedness Forum

An EMS system, ready every day for every emergency, is the nation's best preparation for catastrophic incident response. Assuring the integration of the nation's EMS systems and preparedness systems is an integral component of NHTSA's efforts to improve the response to catastrophic medical incidents.

In an effort to improve all-hazards preparedness and public health integration of EMS systems, NHTSA joined the Institute of Medicine's (IOM) Forum on Medical and Public Health Preparedness for Catastrophic Events. The Forum provides a neutral venue for broad policy discussions that facilitate coordination and cooperation among public and private stakeholders in developing and enhancing the nation's medical and public health preparedness.

The most common type of multiple casualty incidents in the United States is traffic-related crashes and incidents. In August 2010, the Forum hosted a workshop on preparedness and response to rural mass casualty incidents, and at the request of the Federal Inter-Agency Committee on EMS (FICEMS), addressed a recommendation by the National Transportation Safety Board (NTSB) concerning a 2008 mass casualty bus crash in Mexican Hat, Utah.

The workshop report, "Preparedness and Response to a Rural Mass Casualty Incident: Workshop Summary," was published by the IOM in 2011 and is available for download from the IOM website at http://iom.edu/Reports/2011/Preparedness-and-Response-to-a-Rural-Mass-Casualty-Incident.aspx. For more information, contact Gam Wijetunge. ■

Evidence-Based Guidelines

If EMS were to adopt a process for developing protocols and guidelines based on scientific evidence, what would that process look like? After years of determining EMS practices using a "best guess" approach, a more scientific process may be on its way.

A draft national model for a process to create prehospital evidence-based guidelines was the result of a September 2008 national meeting, which brought together experts in academic EMS and national stakeholder organizations. This meeting was cosponsored by FICEMS and NEMSAC.

The model process is currently being pilot-tested through a cooperative agreement with Children's National Medical Center, funded by NHTSA and EMSC. A group of experts in adult and pediatric emergency medicine, guideline development, trauma surgery, pain management, medical library science, prehospital care, and nursing was convened, and—using the model process—these experts developed draft, evidence-based protocols for prehospital pain management and for the helicopter transport of patients from the scene of injury.

As part of this pilot project, both protocols were reviewed by the Maryland Institute for Emergency Medical Services Systems (MIEMSS). The prehospital pain management protocol was accepted by the MIEMSS protocol review committee and is currently being implemented. Prior to implementation, educational materials were developed and prehospital personnel across the

Continued on page 4

Consensus Guidelines for the Assessment of a Statewide 911 System

The National 911 Resource Center is currently working with 911 stakeholders to develop guidelines for the assessment of a statewide 911 system. These guidelines serve as a basis for a state's self-assessment, or if the state prefers, the guidelines can be used by outside subject-matter experts gathered as a team to assess the statewide 911 system. The guidelines address optimal operational and governance programs and processes that will enable a uniform, nationwide 911 network. A final draft of the assessment guidelines will be completed in late 2011. Next steps include pilot testing and guideline revisions based on the pilot test.

911 Resource Center

For the past year, the National 911 Resource Center has been operated by the National 911 Program with a team led by L. Robert Kimball and Associates. Kimball's partner in this effort is the National Emergency Number Association.

The Center serves the 911 community as an information clearinghouse and a technical/operational assistance center for state and local 911 authorities. The Center is also developing a national database for compiling information to measure and report on the progress of 911. The database, the Center's newest feature, includes basic demographic information about state 911 systems and data to measure progress in implementing Next Generation (NG) technologies in 911 services. The database is currently being beta tested, and should begin officially collecting data in 2012.

While the Center is not a consulting service, it does provide technical assistance on a variety of topics. Call center managers and local 911 authorities can get answers to their specific questions related to 911 technology and operations by submitting them through an electronic form, e-mailing or by calling.

The Center's clearinghouse features online information about a range of 911 topics, including technology, operations, and governance. The center continues to actively solicit documents and links. To access information, submit a question related to technical assistance, or to contribute an article, visit www.911. gov and click on "National Resource Center."

Update on the 911 Grant Program

The National 911 Program continues to provide oversight for a grant program for the benefit of 911 public safety answering points. With one appropriation of \$43.5 million in 2009, the office awarded grants to 30 states and/or territories for the imple-

mentation and operation of phase II enhanced 911 services and migration to an internet-protocol-enabled emergency network. The grant-funded projects must be completed by September 2012. For contact information and abstracts about each project, visit to www.911.gov and click on "Grants."

For more information on the National 911 Program, visit www.911.gov, or contact Laurie Flaherty. ■

NG911 Initiative

The US DOT's NG911 Initiative represents a major step in moving the national 911 system out of the analog age and into the digital world.

Specifically, the goal of the NG911 Initiative is to define a system architecture plan that enables the general public to make a 911 "call" (any real-time communication—voice, text, or video) from a variety of wired, wireless, or Internet Protocol (IP)-based devices.

The new system will provide this voice, text or video data to 911 call takers who can then share this data with and among first responders. The NG911 initiative also considers the responsibilities, cost, benefits, and schedule of deploying an NG911 system nationwide.

The newest product of this initiative is the "What's Next" Forum and Report. At a forum, held on September 23 and 24, 2010, representatives of law enforcement, fire services, EMS and transportation operations learned about the forms of digital data (photos, text messages, video, telematics data) that will be available to first responders as the NG911 network is built.

Using the NG911 model as a basis, each of the four disciplines spent several months producing white papers outlining the recommended process for deciding what digital data will make their jobs safer, more efficient and more effective. The document combining these white papers—the NG911 What's Next Report —was released August 30, 2011 at the National Rural ITS Conference in Couer d'Alene, Idaho.

The Next Generation 911 What's Next Project is managed by the Transportation Safety Advancement Group (TSAG), a multidisciplinary group dedicated to enhancing traveler safety on the nation's roadways through the application of advanced technologies and the facilitation of inter-discipline and inter-agency cooperation. More information regarding the Forum and the NG 911 What's Next project may be found at: http://www.tsag-its.org/projects/nextgen911.php.

The NG911 Initiative is funded by the Intelligent Transportation System—Joint Program Office (JPO) and co-managed by NHTSA's Office of EMS. To learn more about the US DOT NG911 Initiative, contact Laurie Flaherty or visit: http://www.its.dot.gov/ng911/index.htm.

state of Maryland were trained, and are now using, the new protocol. An evaluation methodology is being developed to assess system-wide compliance with the new protocol and to document changes to patient care and outcomes. The final report for this project will be available in 2012.

For more information on the evidence-based guideline project, contact Cathy Gotschall. ■

State EMS Technical Assessments

The State EMS Technical Assessment process offers States and communities a tool to assess their statewide EMS program. NHTSA facilitates this process by assembling a team of professionals with expertise in EMS development and implementation. This team evaluates information provided by the State against an objective benchmark describing eleven key components of an EMS system. For each component, the team assesses the status, acknowledges strengths and makes constructive recommendations for improvement.

Since the program's inception in 1988, assessments have been done at the request of 52 States and Territories, and 20 reassessments have been conducted. The most recent reassessment was conducted this year in Ohio. The program has proved so valuable that similar assessment programs are under development for other aspects of State programs, including the statewide 911 system. For more information on State EMS Technical Assessments, please contact Susan McHenry.

FICEMS and Technical Working Group Update

Congress created the Federal Interagency Committee on EMS (FICEMS) in 2005 to ensure coordination among Federal agencies involved with state, local, tribal, or regional emergency medical services and 911 systems.

FICEMS met this July in Washington, D.C. with more than 50 members of the public in attendance. This was the first meeting led by 2011 FICEMS Chairperson Dr. Alexander Garza, the Assistant Secretary of Health Affairs and Chief Medical Officer for the Department of Homeland Security. Meeting highlights are as follows:

- Dr. Garza acknowledged that an options paper was recently delivered to the National Security Staff at their request, addressing the creation of a Federal Lead Office for EMS.
- Highlights of the progress of the Committee and its Technical Working Group were presented at the meeting. Each of the chairs of the Technical Working Group committees presented an update on work related to their two-year working plans. The Assessment, Medical Oversight, Data/Research, Preparedness and Education/Workforce committees' plans

- and updates are available on www.EMS.gov.
- Dr. Bob O'Connor from the American College of Emergency Physicians (ACEP) provided an update on the Culture of Safety Strategy project.
- FICEMS approved an interim report to the National Transportation Safety Board outlining its response the recommendations made to the Committee in 2009 relating to responses to rural roadway mass casualty incidents and the utilization of helicopter EMS. As part of this effort, Dia Gainor, executive director of the National Association of State EMS Officials (NASEMSO), presented two new tools for use by states to evaluate their capabilities to respond to mass casualty incidents on rural roadways. The development of these tools is funded by NHTSA and EMSC.
- Dr. Greg Mears of the University of North Carolina, Chapel Hill, EMS Performance Improvement Center, provided the first set of preliminary findings from the National EMS Assessment. The Assessment was funded by NHTSA and provides almost 500 pages of national information on EMS systems, agencies and providers. FICEMS and NHTSA will be reviewing the final report, which should be published in the fall.
- FICEMS is engaging in a strategic planning process involving all member agencies to better align projects behind common goals and objectives. The formal process, funded by the Department of Homeland Security, will begin shortly, and will also include streamlining operational processes for the Committee.

For more information about FICEMS and to review documents from this and all prior meetings, please visit www.ems.gov and click on 'FICEMS' or contact Noah Smith.

NHTSA-NIOSH: Workforce Safety Project

Improving the safety, health, and wellness of EMS workers nationwide is an ongoing effort at NHTSA. NHTSA has partnered with the National Institute of Occupational Safety and Health (NIOSH) to improve injury surveillance and ambulance safety using NEISS-WORK, an expansion of the Consumer Product Safety Commission's National Electronic Injury Surveillance System.

NEISS-WORK collects data on work-related nonfatal injuries and illness treated in U.S. hospital emergency departments, and together, NIOSH and NHTSA are using the system to collect nationally representative data about line-of-duty injuries within EMS.

NIOSH and NHTSA are working together to make this data available to researchers. For more information about EMS workforce publications, projects, and issues please contact Gamunu Wijetunge.

EMS Cost Analysis Project

The EMS Cost Analysis Project (EMSCAP) was undertaken to provide a tool for local EMS systems to calculate the benefits and cost of their EMS program—and as a way to help EMS leaders justify, develop and enhance their EMS programs. This project was completed under a cooperative agreement with the National Association of State EMS Officials (NASEMSO).

An expert panel led by E. Brooke Lerner, PhD, was contracted by NASEMSO to develop a methodology for calculating the cost of an EMS system to its community.

The EMSCAP products include The "Emergency Medical Services Cost Analysis Workbook" for calculating the cost of EMS, and the "EMS Cost Analysis Workbook Guide," which provides detailed directions for determining the costs.

The 12-step process is consistent with current theories of health economics, applicable to pre-hospital care, flexible enough to be used in varying sizes and types of EMS systems, and comprehensive enough to provide meaningful conclusions. The project included pilot testing in three diverse communities—Richmond, Va, Livingston County, N.Y., and the Oshkosh Region of Wisconsin. Until the documents/tools are available at ems.gov, they can be found at: http://www.mcw.edu/emergencymedicine/FacultyResearch/SelectedResearch/EmergencyMedicalServicesCostAnalaysisProject.htm or by contacting Susan McHenry.

NEMSAC Announces New Chair

Reinert Assumes Leadership of National EMS Advisory Council

Aarron Reinert has been appointed as the new chair of the National EMS Advisory Council (NEMSAC) by NHTSA Administrator David Strickland. Reinert, a NEMSAC member since the council's 2007 inception, is the executive director for Lakes Region EMS in Minnesota. This rural ambulance service, which services a 450-square-mile service area, is composed of 40 full-time staff with a Paramedic/EMT staffing pattern.

Reinert is considered a national expert in EMS data collection and leadership training. He has served as a subject matter expert for numerous states, including Georgia, Nebraska, and New Hampshire as they began to develop statewide EMS data collection systems.

"I look forward to my new role within NEMSAC," said Reinert. "Five subcommittees within NEMSAC have been assigned a dozen topics to consider this year. We'll be using the upcoming meetings of the full council to deliberate the committee's findings and make recommendations."

A practicing paramedic for more than 20 years, Reinert has a B.A. in organizational leadership. He is also a member of the board of directors of the National EMS Management Association.

News from the National EMS Advisory Council

NEMSAC was created in 2007 to formalize the DOT's long-standing collaborative approach to working with members of the EMS community, EMS consumers, and other EMS stake-holders. The Council, under the authorization of the Secretary of Transportation, meets three to four times a year in Washington, D.C. to deliberate EMS issues of national significance. Recommendations are then provided to the NHTSA Office of EMS and its federal partners.

The Council met in April for two days in Washington, D.C., following a February teleconference call which provided council members background information about the 2010 health care reform law. During the same meeting, NEMSAC's subcommittees had the opportunity to discuss new priority areas assigned in December 2010. Finally, the committee was presented with an overview of EMS programs at the Health Resources and Services Administration. The Director of HRSA's Office of Special Health Affairs, Dr. Terry Adirim, spoke on the numerous EMS-related projects underway at HRSA.

Dia Gainor, then Council Chair, focused a majority of the public meeting on deliberations regarding the role of a lead federal office for EMS. NEMSAC was responding to request for comment from the Federal Interagency Committee on EMS (FICEMS), which was developing an options paper for the White House National Security Staff regarding the potential designation of a lead federal office for EMS. FICEMS solicited input from a number of national organizations and members of the public and considered NEMSAC's comments for the paper.

NEMSAC's position statement calls for the creation of a lead federal agency for EMS that, among other things, focuses on model standards for EMS systems, comprehensive data collections and the alignment of priorities among all Federal agencies with a role in EMS. Though NEMSAC did not recommend which existing Department or Agency should assume the lead role, it did caution that "During any potential transition to a lead federal agency, great care must be taken to not compromise EMS-related programs currently administered or in development by federal agencies without sufficient stakeholder input." Find the final position statement online at www. ems.gov.

NEMSAC met September 7 and 8, and the next in-person meeting is scheduled for December 13th and 14th. For more information, meeting minutes, and member biographies, please visit www.ems.gov and click on NEMSAC or contact Noah Smith.

NHTSA OFFICE OF EMS

Drew Dawson, Director 202-366-9966 drew.dawson@dot.gov

David Bryson, EMT 202-366-4302 dave.bryson@dot.gov

Laurie Flaherty, RN, MS 202-366-2705 laurie.flaherty@dot.gov

Cathy Gotshall, ScD 202-493-0143 cathy.gotschall@dot.gov

Susan McHenry, MS 202-366-6540 susan.mchenry@dot.gov

Cynthia McNair 202-366-5440 cynthia.mcnair@dot.gov Gamunu Wijetunge, NREMT-P 202-493-2793 gamunu.wijetunge@dot.gov

Noah Smith, EMT 202-366-5030 noah.smith@dot.gov

Hector Williams 202-366-0446 hector.williams@dot.gov

Ellen Schenk, MPH 202-366-1512 ellen.schenk.ctr@dot.gov

Bernice Boursiquet, MPH 202-366-5598 bernice.boursiquet@dot.gov

ADDRESS

National Highway Traffic Safety Administration Office of Emergency Medical Services 1200 New Jersey Avenue SE., NTI-140, W44-325 Washington, DC 20590

Phone: 202-366-5440 Fax: 202-366-7149 E-mail: nhtsa.ems@dot.gov Web: www.ems.gov

To order EMS publications, click on "Order Materials" on the homepage of EMS.gov.



