

The Pony Express

Improving emergency medical care for children all across Texas



EMSC State Partnership, TX



EMSC

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Headline News

New MCHB Performance Measures Aimed at Closing the Gaps

The Health Resources and Services Administration's [Maternal and Child Health Bureau](#) recently added five new performance measures for their EMSC grant programs. Along with existing measures, these additions aim to ensure that every child in Texas has equal access to a complete continuum of high quality, family and patient focused emergency medical services including primary care and prevention, prehospital emergency response and acute care, timely and appropriate interfacility transfer, and rehabilitation. In addition, MCHB emphasizes healthcare infrastructure development and sustainability for EMSC programs and initiatives.

For the Texas EMSC State Partnership, the introduction of the new performance measures compelled a review of the overall program and projects implemented over the past two years in order to assess the current status of the program related to each measure and to begin planning for their incorporation in the current 2011-2012 grant year.

Performance measure 7 is the degree to which MCHB-funded programs ensure family, youth, and consumer participation in program and policy activities. This measure involves eight elements that demonstrate family participation, including an emphasis on family-professional partnerships and building leadership opportunities for families and consumers in MCHB programs. While there is some work to do to meet all eight elements, the Texas EMSC State Partnership is well positioned to meet this performance measure with strong partnerships with family advocacy groups such as [Project DOCC Houston](#) and [Texas Parent to Parent](#) and the state-wide [Family Advocate's Network](#).

Performance Measure 10 is the degree to which MCHB-funded programs have incorporated cultural and linguistic competence elements into their policies, guidelines, contracts and training. This measure includes 10 elements that demonstrate cultural and linguistic competency as a set of congruent behaviors, attitudes, and policies that come together in a system, agency, or among professionals that enables effective work in cross-cultural situations. The State Partnership is currently reaching out to state and federal agencies, organizations, and associations to form partnerships and collaboratives to provide guidance and training to the EMSC Advisory Committee and staff in the development and implementation of programs and policies that will ensure cultural and linguistic competence in all aspects of the EMSC program in Texas.

Performance Measure 24 is the degree to which MCHB-funded initiatives contribute to infrastructure development through core public health assessment, policy development and assurance functions. The 10 elements of this measure are aimed (See Performance Measures on Page 2)

Best Practices

Congratulations to Houston Fire Department: 2011 EMSC Crew of the Year

The Texas EMSC State Partnership is proud to present the 2011 EMSC Crew of the Year Award to Houston Fire Department's Xavier Moreno and Jason Sorn on Squad 18-A, Roman Montoya and Daniel Martinez on Ambulance 36-A, Captain Roland Hernandez, Robert Miley, Kevin Camarata, Eleazar Flores, and Marcus Jamison on Engine 23-A, and Captain-EMS Supervisor Jim Tremble on AS 29-B. The following is the letter of nomination submitted by Dr. Manish Shah, one of the attending physicians at Texas Children's Hospital.

I nominate Squad 18, Ambulance 36, Engine 23, and Supervisor 29, A-Shift, for EMSC Crew of the Year for the teamwork and initiative they displayed in taking care of a 3 year old boy who choked on a hot dog. The child's family noted that he was having difficulty breathing while eating a hot dog, and they were unable to relieve his distress with back blows and abdominal thrusts. They called 911 and on EMS arrival, his level of alertness had declined. The crew acted quickly to successfully remove a hot dog segment from his airway with pediatric Magill forceps. Despite this, the child remained altered with respiratory depression.

Recognizing the possibility of ongoing airway obstruction, the crew attempted to intubate the patient to support his breathing. The child's clenched jaw made the intubation difficult, but the crew promptly intervened and successfully provided bag mask ventilation en route to the hospital.

The crew communicated effectively when handing off the patient to the emergency department team, and subsequent evaluation in the operating room showed that he had no retained foreign body in his airway.

The patient spent the night in the intensive care unit and was breathing comfortably upon discharge the following afternoon.

Empowered with the right equipment, the right training, and the right protocols, this team's dedication and commitment to high quality pediatric emergency care manifested in the quick and decisive action that saved the life of a child.



[Mail Pouch](#)

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Performance Measures (continued)

at building analytic capacity for assessment planning and evaluation, using the best available evidence to develop and promote guidelines and practices that improve services and systems of care, planning and developing integrated health service systems, assuring that services and systems of care reach targeted populations, and addressing selected issues with targeted populations. The State Partnership already meets several of these goals through EMS and hospital surveys, programs and projects aimed at developing pediatric emergency care infrastructures, public and professional education and primary research.

Performance Measure 33 is the degree to which MCHB-funded initiatives work to promote sustainability of their programs or initiatives beyond the life of MCHB funding. This measure involves nine actions or strategies that build toward program sustainability, including the development of partnerships with consumers and stakeholders in the community, identifying and seeking additional sources of funding from within and outside of the parent organization, and forming an advisory board that includes family, community and state partners and other stakeholders who can leverage resources to sustain successful aspects of the program. EMSC Partners and collaborators across Texas have stepped up to provide resources, expertise, and support for EMSC programs making it possible to provide educational programs, awareness and prevention initiatives, data collection and research projects, and more. In the coming year, the EMSC Advisory Committee, with stakeholder input, will begin the process of developing a formal sustainability plan for the Texas EMSC State Partnership.

Performance Measure 41 is the degree to which grantees have assisted in developing, supporting and promoting [medical homes](#) for MCH populations. There are five categories consisting of 24 elements that contribute to a family/patient-centered, accessible, continuous, and compassionate system of care for MCH populations. The MCHB states, "Providing primary care to children in a 'medical home' is the standard of practice." While this measure may seem to fall outside the scope of prehospital emergency care, the reality is that the medical home concept is an integral part of the continuum of high quality, family- and patient-centered emergency medical services. The medical home and patient/family-centered care concepts are fully supported by the Texas EMSC State Partnership and have been central themes in the joint EMSC-Texas P2P Assessment and Management of Children with Special Healthcare Needs continuing education program.

The EMSC State Partnership is well positioned to meet the challenges presented in the new MCHB performance measures while continuing to maintain current efforts to assure the capacity of EMS agencies and hospitals to provide high-quality emergency care for all children in Texas through existing measures aimed at continuing education and training, availability of on-line and off-line medical direction, appropriate equipment on ambulances, hospital transfer guidelines and agreements, and designation of hospitals prepared to provide pediatric emergency care for trauma and medical emergencies.

EMSC State Partnership Update

Texas Welcomes HRSA-MCHB and NEDARC to May GETAC/EAC

The Texas EMSC State Partnership welcomes Jocelyn Hulbert, Public Health Analyst from the Health Resources and Services Administration's Maternal and Child Health Bureau, Mike Ely, Director of the [National EMSC Data Analysis Resource Center](#), and NEDARC statistician Kent Page to the [Governor's EMS and Trauma Advisory Council](#). They will be presenting the National EMSC EMS and hospital survey data for the Pediatric Committee meeting Thursday, May 12, 2011 at 1:00 pm and showing how we measure up in Texas. They will also make a brief presentation for the RAC Chairs meeting on May 11, at 5:30 pm and will be meeting with the EMSC Advisory Council at 5:30 pm on May 12.

Pediatric CE Opportunities

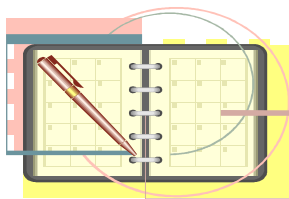
The EMSC State Partnership, Texas Parent to Parent, and Houston Community College EMS present Assessment and Management of Children with Special Health Care Needs in Houston, May 19, 2011. This popular class offers an opportunity to learn from children with special needs and their families about the unique challenges of communication, unfamiliar technology, and family-centered assessment and management of CSHCN in a variety of emergency situations. The course is free and offers up to 6.5 hours CE for EMS personnel. Space is limited; area EMS instructors are preferred and a thumb-drive with training materials and lesson plans will be provided. For information, contact EMSC Program Manager Tony Gilchrest at 832-824-6028, adgilchr@texaschildrens.org, or drop a note in the [Mail Pouch](#).

Final Thought

By failing to prepare, you are preparing to fail.

Benjamin Franklin

Upcoming Events



Mark Your Calendar

- May 11-13, 2011: GETAC quarterly meetings in Austin.
- **May 12, 2011: EMSC Advisory Committee Meeting Austin Airport Hilton, 5:30 - 7:00 pm.**
- May 18, 2011: National EMSC Day
- May 15-21, 2011: National EMS Week