

The Pony Express

Improving emergency medical care for children all across Texas



EMSC State Partnership, TX

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EMSC

Headline News

Texas Medical Director Surveys In Results Mirror 2010 EMS Agency Survey

The *Texas Medical Director Survey* closed at midnight on March 30, 2012 with 144 SurveyMonkey® responses for a response rate of 45%. All identified medical directors of 911-responding ground transport EMS agencies in Texas were surveyed. Complete analysis of the survey, along with the companion survey, *Medical Direction from the Providers' Perspective*, is currently underway and a full presentation will be made for the Pediatric Committee of GETAC in August.

In preliminary analyses of the data, results included in the medical director survey mirror responses from the 2010 EMSC survey of EMS agencies in Texas on questions about online and offline medical direction. In 2010, 76% EMS agency leaders (non-physicians) reported that they would consider utilizing online medical control services for pediatric patients provided through a base station at a regional children's hospital. In the Texas Medical Director Survey, 72% reported that they would consider utilizing regional pediatric medical control centers, and 73% agreed that pediatric online medical control or consultation from a pediatric emergency physician for critically ill or injured children has the potential to improve quality of prehospital care.

Likewise, the 2010 EMS agency survey showed that 75% of agencies would consider using Texas EMSC-created evidence-based pediatric protocols. Of the respondents to the Texas Medical Director Survey, 82% agreed that they would consider using Texas EMSC-created evidence-based pediatric protocols, and 79% agreed that having standardized regional pediatric protocols that are evidence or consensus-based would improve the quality of prehospital care.

EMS providers and medical directors both report that poor radio or cell phone reception is a common barrier to accessing online medical control. However, of the EMS providers reporting online access problems, 35% reported that causes included either that there was no physician available for consultation or that there was no answer at all to their call. Similarly, 44% of medical directors who reported that online communications failures were investigated cited no physician available or no answer to call. This is an important finding because, while communications technology may be a more difficult problem to resolve in many of the rural areas of Texas, assuring that someone is available to answer a call and that there is access to an emergency physician 24 hours a day, 7 days a week is an issue we can begin to address now.

It should be emphasized that these are preliminary results and that no definitive conclusions have yet been made. Other data to be analyzed include EMS providers' perspectives on medical direction in Texas, differences in medical direction preferences and barriers between rural and urban regions, and estimates of current pediatric online medical control utilization. Look for a detailed report at www.bcm.edu/pediatrics/emsc this summer.

Best Practices

Congratulations to North Channel EMS: 2012 EMSC Crew of the Year

Each year the EMSC State Partnership puts out a call for nominations for an EMS crew in Texas who has demonstrated outstanding care for a child in an emergency medical or trauma event, displayed exceptional effort in the development of pediatric training or quality improvement programs, or was instrumental in planning or conducting pediatric injury or illness prevention projects. We are proud to announce that a crew from North Channel EMS was nominated by Dr. Andrea Cruz, an attending pediatric emergency physician at Texas Children's Hospital, and has been selected to receive the 2012 EMSC Crew of the Year Award for outstanding care for a child in an emergency medical event. Crew members include Roland Hobbs, Jeremy Smith, Brandon Glenn, Doug Castleberry, and Kelly Chamberlain.

Following is the nomination letter from Dr. Cruz:

5 mo F found down at home by mother after she had been fed. North Channel EMS responded, noted PEA on the monitor on arrival. They intubated the baby, performed CPR, and administered 2 doses of epinephrine before the child regained a perfusing rhythm. Following this, they gave dopamine, a saline bolus, and continued to closely monitor the child. They called us twice, both to let us know the child was en-route, and also called to update us on the child's clinical improvement after their interventions. The crew did an amazing job taking care of a very sick baby.

EMSC Texas and all of its partners wish to express our sincere gratitude to the 2012 EMSC Crew of the Year for their outstanding dedication and commitment to providing excellent pediatric emergency medical care in Texas.



[Mail Pouch](#)

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Check out the EMSC State Partnership website at www.bcm.edu/pediatrics/emsc

To remove your name from our mailing list, please [click here](#).

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EMSC State Partnership Update

Team Headed to Bethesda for Annual EMSC Program Meeting

Each year the EMSC Program holds an Annual Program Meeting in late spring or early summer in connection with the National Association of State EMS Officials (NASEMSO) Mid-year Meeting. This year's meeting is May 9-11 in Bethesda, MD. and is headlined as *The Power of Collaboration: The future of EMSC*.

Texas EMSC Program Director, Dr. Manish Shah, will be joined in attendance by Program Manager Tony Gilchrest and Family Representative Jeanine Pinner. Mr. Gilchrest will also represent Texas on the NASEMSO Pediatric Emergency Care Council (PECC) on May 8. The annual meeting provides State Partnership grantees with program updates, targeted training, and opportunities to network with other grantees around the country to share ideas, challenges and successes.

The event includes a pre-conference seminar on utilizing National EMS Information System (NEMSIS) data to improve pediatric emergency care and plenary sessions discussing the power of collaboration, quality improvement, and simulation models for training. There will also be a presentation of the National EMSC Performance Measures data as well as State EMSC updates. Additionally, there will be a variety of instructional and informational breakout sessions covering topics such as the Pediatric Emergency Care Applied Research Network (PECARN) and their relationship to EMSC, the Federal Interagency Committee on Emergency Medical Service (FICEMS) National EMS Assessment, identifying funding opportunities, and taking advantage of social media.

Dr. Shah and Mr. Gilchrest will be leading a session titled *Bridging the Gaps between the EMSC Community and Pediatric Emergency Medicine* aimed at discussing ways to develop effective partnership networks within academia, hospital and EMS systems, advocacy organizations, and regulatory agencies to impact the delivery of emergency medical care provided to children. They will also be presenting three posters at this year's meeting, including *Breaking Down Barriers to Pediatric Medical Direction in Texas: A Tale of Two Surveys* and *Pediatric Continuing Education Needs Assessment for Emergency Medical Technicians in Texas* from the State Partnership Grant and *Development of an Evidence-based Pediatric Prehospital Protocol for Respiratory Distress* from the Targeted Issues (TI) Grant.

Pediatric CE Opportunities

State Partnership Teaming Up with State Office of Rural Health

Texas EMSC Program Manager Tony Gilchrest met with Linda Jones, Director of the State Office of Rural Health (SORH), to discuss opportunities to take continuing education in pediatric emergency care to rural areas throughout Texas. Providing high-quality, hands-on CE to emergency nurses and EMS personnel in the rural and remote regions of the state can be challenging, and because incidents involving critically ill and injured children are relatively rare, ongoing training and practice are essential to maintain the knowledge and skills needed when that call does come in. EMSC will work with SORH to identify those areas with the most need for CE programs and to coordinate training events with the state's 78 critical access hospitals and surrounding Regional Advisory Councils (RACs) and EMS agencies.

Planning is now underway for the first class, in partnership with Rankin County Hospital District, to be held in early July. CAHs and EMS personnel in Upton and surrounding counties will be invited to participate in this free pediatric CE event. Each CE offering will be customized to meet local need in collaboration with CAH and EMS representatives and local pediatric/emergency medical experts will be encouraged to participate in event planning, lectures, and/or practical training.

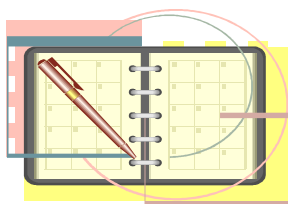
For more information or to schedule a class in your area, contact Program Manager Tony Gilchrest at 832-824-6028, or drop a note in the [Mail Pouch](#).

Final Thought

The measure of success is not whether you have a tough problem to deal with, but whether it is the same problem you had last year.

[John Foster Dulles](#)

Upcoming Events



- [NASEMSO Mid-Year Meeting](#)—May 7-8, 2012 Bethesda, MD.
 - [Annual EMSC Program Meeting](#)—May 9-11, 2012 Bethesda, MD.
 - GETAC Committee Meetings—May 9-11, 2012 Austin, TX
 - EMSC Advisory Committee—May 18, 2012 Web Conference.
- For information, drop a note in the [Mail Pouch](#).

Mark Your Calendar