

[Forward to a friend](#)



## [December 2016](#)

---

Download: [nasemso.org/WashingtonUpdate/](http://nasemso.org/WashingtonUpdate/)

If links are not working or content is not displaying correctly, please [view this email in your browser](#).

### [CONTENTS](#)

#### [The 4-1-1 on NASEMSO Projects](#)

#### [NASEMSO News](#)

1. NASEMSO to Host Town Hall at EMS Today 2017
2. Expert Panel Sought to Revise EMS Scope of Practice Model
3. Gainor Featured in Pew Report on Ambulance Crashes
4. EMS Compass Measures Out for Public Testing
5. Discount PEC Rate Now Available to NASEMSO Members
6. Fatigue Management in EMS Project Highlighted in PEC

#### [For the States](#)

7. PHF to Preview New TRAIN Platform
8. "Trigger Tools" More Effective to Prevent Errors Than Voluntary Reporting
9. CDC: Cigarette Use Declines, Sustained State Efforts Needed
10. TCF Highlights Participants in Federal Health Marketplace by Zip Code
11. Cures Legislation Passes the House, Headed to Senate
12. New Report Compares State Health Data
13. Public Health 3.0: A Challenge for the Nation, a Charge for Public Health
14. Surgeon General Strategy Seeks to End Opioid Epidemic

#### [Domestic Preparedness](#)

15. HHS Highlights Federal Patient Movement System
16. OIG Reviews Reforms in Secret Service Operations Testimony
17. New Issue of The Exchange Highlights No Notice Events
18. Public Health Impact of Wildfire Emissions Available to States
19. Free CBRNE Course Available from NIH

20. HHS Offers Healthcare Preparedness and Response Guidance
21. WA DOSH Offers SCBA Bulletin
22. DHS Fellows Program Available to Improve State Partnerships
23. NHSPI Shows Improvement in Nation's Preparedness

#### [EMS Education](#)

24. NASEM Reflects on Value of Program Accreditation in New Report

#### [Highway Safety](#)

25. NTSB Announces "Most Wanted" List for 2017-2018
26. FHA Offers New Technical Report on Safety

#### [Pediatric Emergency Care](#)

27. AHRQ Focuses on Pediatric QI

#### [Trauma](#)

28. Using GCS in Predicting Severe Injury in Trauma Patients

#### [Federal Partners](#)

29. NACOSH to Hear Recommendations from ERP Workgroup
30. CDC Offers Carfentanil Exposure Strategies for First Responders
31. AHRQ Offers Strategies to De-escalate Aggressive Behavior in Psych Patients
32. New System to Update Patient Safety Monitoring
33. Panel Offers Guidance in Updating Systematic Reviews
34. ONC Offers Fact Sheet on EMS and Health Information Exchanges

#### [Industry News](#)

35. TX Judge Issues Temporary Injunction on New Overtime Rule
36. Why Sleep Matters...
37. ILCOR Accepting Applications for Task Force Positions
38. Health Transportation Focus of New NASEM Report

#### [Interesting Abstracts](#)

39. Validation of SIRS, SOFA, and qSOFA in Predicting Sepsis Mortality
40. New from NASEM: Pain Management and Opioid Related Harms

#### [Upcoming Events](#)

#### [Contact NASEMSO](#)

---

## [The 4-1-1, Your Update on NASEMSO Projects and Activities](#)

- [Fatigue in EMS](#)- As a result of the expert panel meeting in April 2016, 7 PICO questions have been finalized and registered. The systematic reviews have been initiated. The Research Team has received training on using GRADEPro software and the Expert Panel is scheduled to meet in February 2017 to review the evidence and begin to formulate recommendations.
- [EMS Compass](#)- several candidate measures have been released for public

testing to assure their reliability and validity with the newly implemented NEMSIS version 3 standard data. The measures are available in PDF format from this [v10.3 PDF LINK](#) or as a spreadsheet from this: [v10.3 XLSX LINK](#).

- [Ground Ambulance Vehicle Standards](#) and EMS Safety Resource- NASEMSO's microsite, [SafeAmbulances.org](#), maintains live reports from national news media on ambulance safety. Key features of the site include a guide on state ambulance regulations and ambulance crash test videos.
- [National Model EMS Clinical Guidelines](#)- Fifteen potential new clinical guidelines are being considered by the work team. The "Resuscitation" chapter is being revised to reflect current ECC guidelines.
- [REPLICA](#)- REPLICA Advocate [Sue Prentiss](#) is available to work with states that are supportive of or filing compact legislation to provide resources and informational needs. Only 3 more states are needed to enact legislation that would enable implementation of the EMS licensure compact. The NASEMSO Board of Directors has established an interim committee to help build the foundation of the REPLICA Commission.

[Return to top ^](#)

---

## [NASEMSO NEWS](#)

### **1. NASEMSO to Host Town Hall at EMS Today 2017**

If you are planning to attend EMS Today 2017 in Salt Lake City, you won't want to miss our conference pre-session on Wednesday, February 22, 2017 from 5:30 pm to 8:30 pm: "High Performing EMS: National Initiatives to Enhance the Profession." In a world full of acronyms, terms like FRM, COMPASS, REPLICA, and EMS 3.0 adds new value and meaning to the EMS profession but what does it mean for you? Whether you are an EMS agency administrator or front line practitioner, this "Town Hall" session presented by the National Association of State EMS Officials (NASEMSO) will provide the most up-to-date information on the evidence-based process used to develop new national Fatigue Risk Management Guidelines for EMS, engage participants in a discussion on proposed EMS performance measures, describe the need and rationale for providing the legal ability for appropriately credentialed individuals to practice across state lines via an EMS licensure compact among states, preview proposed new EMS clinical guidelines with a focus on updates in prehospital resuscitation, describe the depth and breadth of ground ambulance vehicle standards and how they impact EMS provider safety, outline how emergency medical response and intervention has changed in a medically sophisticated world, and more. Learn directly from today's industry leaders in the session uniquely developed for

EMS Today! Open to all registered EMS Today attendees. There is no charge to attend this workshop, but registration is required. To register, click [here](#).

## **2. Expert Panel Sought to Revise EMS Scope of Practice Model**

Health professional practice acts are statutory laws that establish licensing or regulatory agencies or boards to generate rules that regulate medical practice. State licensing statutes establish the minimum level of education and experience required to practice, define the functions of the profession and limit the performance of these functions to licensed persons. In response to a Request for Proposal by the National Highway Traffic Safety Administration's Office of EMS, NASEMSO has been awarded a contract to revise the National EMS Scope of Practice Model (SoPM). The SoPM promotes consistency among the states and serves as a national foundation for EMS practice. Newer scientific evidence is currently available that demonstrates improved patient outcomes with implementation of new skills and interventions that exceed the current SoPM. Some states are prohibited from implementing new interventions (e.g. therapeutic hypothermia in cardiac arrest, naloxone administration, hemorrhage control, etc.) until these new skills are added to the SoPM and/or otherwise adopted through an Evidence-Based Guideline or consensus-based process. NASEMSO announces the launch of a national revision to the SoPM through a Subject Matter Expert Panel (SMEP) to include a combination of licensed physicians with current experience in EMS medical direction, agency administrators, and EMS practitioners that will be charged with using a combination of clinical evidence, clinical expertise, and research to achieve a consensus on recommended changes to the existing Scope Model. Practitioner members will be recruited from national associations comprised of EMS agency leadership and practicing EMS professionals. Read more: [www.emsscopeofpractice.org](http://www.emsscopeofpractice.org)

## **3. Gainor Featured in Pew Report on Ambulance Crashes**

NASEMSO Executive Director, Dia Gainor is abundantly quoted in a Stateline article now available from the Pew Charitable Trusts. In "Lax Ambulance Rules Put Paramedics, Patients at Risk," Gainor supports the need for better data and compliance with standards related to ambulance safety. The National Highway Traffic Safety Administration (NHTSA) has found that 84 percent of EMS workers in the patient compartments of ambulances that crashed were not using their own restraints. [Read more...](#)

## **4. EMS Compass Measures Out for Public Testing**

The EMS Compass Initiative is proud to announce the release of candidate measures for public testing. After much deliberation and national collaboration through an NQF-modeled

measure development process, we are asking EMS agencies help us refine these candidate measures before they receive final approval. They've been through the "lab testing" phase, but now it's time to put them to the test in the real world. What's in it for you? Using EMS Compass measures to monitor your performance over time enables you to improve patient care directly in your system. You'll learn a lot about the measures and provide EMS Compass with feedback that will improve patient care nationwide by testing the measures in your system. We urge you to participate in this important phase of the evolution of these measures. Read more: [www.emscompass.org](http://www.emscompass.org)

## **5. Discount PEC Rate Now Available to NASEMSO Members**

As the official journal of the National Association of State EMS Officials, Prehospital Emergency Care is an authoritative resource delivering up-to-date clinical and research information on advances in medical care in the out-of-hospital setting. It provides cutting-edge articles on all facets of the EMS field. NASEMSO members are now eligible to receive PEC at \$56, a 50% discount to the regular subscription rate!! Access podcasts and more. [Read more...](#)

## **6. Fatigue Management in EMS Project Highlighted in PEC**

Fatigue risk management guidelines and resources tailored to the EMS occupation is a collaborative project between NHTSA, NASEMSO, and content experts from multiple institutions, including the University of Pittsburgh Department of Emergency Medicine. The evidence based approach that is being utilized by the research team and expert panel to review the literature is now available online in a new article published in Prehospital Emergency Care. Patterson et al. Evidence-Based Guidelines for Fatigue Risk Management in EMS: Formulating Research Questions and Selecting Outcomes. [Read more...](#)

In related news, NASEMSO is pleased to support the 10th International Conference on Managing Fatigue, March 20-23, 2017 in San Diego, CA. Currently, there are 100 abstracts representing 66 organizations. An audience of approximately 325-350 from both academic and industry is anticipated. [Sign up for updates and read more...](#)

[Return to top ^](#)

---

[FOR THE STATES](#)

## 7. PHF to Preview New TRAIN Platform

Please join the Public Health Foundation (PHF) on Thursday, January 26, 2017 at 2 pm EST for a webinar to introduce the TRAIN Learning Network's new platform and look. The webinar will demonstrate new features that will be available to learners on the national [TRAIN website](#) starting on Monday, January 30, 2017, including a mobile-friendly platform, modern design, simplified account creation, improved advanced course search, streamlined learning records, and more. [Register for the webinar and read more...](#)

## 8. “Trigger Tools” More Effective to Prevent Errors Than Voluntary Reporting

The Institute for Healthcare Improvement (IHI) states, “The use of ‘triggers,’ or clues, to identify adverse events (AEs) is an effective method for measuring the overall level of harm in a health care organization. Traditional efforts to detect AEs have focused on voluntary reporting and tracking of errors. However, public health researchers have established that only 10 to 20 percent of errors are ever reported and, of those, 90 to 95 percent cause no harm to patients.” The IHI Global Trigger Tool for Measuring Adverse Events provides an easy-to-use method for accurately identifying adverse events (harm) and measuring the rate of adverse events over time. Tracking adverse events over time is a useful way to tell if changes being made are improving the safety of the care processes. The Trigger Tool methodology includes a retrospective review of a random sample of patient records using “triggers” (or clues) to identify possible adverse events. To address the clear need to quantify adverse patient outcomes, the IHI Global Trigger Tool focuses on the identification of harm or injury to the patient, rather than error reporting and could serve as the basis for state evaluation using EMS patient care reports and hospital discharge data. [Read more and download resources...](#)

In related news, readers are reminded of the Global Assessment of Pediatric Patient Safety (GAPPS) Trigger Tool developed by Boston Children's Hospital to help evaluate pediatric care in, among other parameters, medications, fluids, healthcare associated infections, and hospital transfers. The project encourages agencies and practitioners to focus on unintended results and the potential to cause patient harm. [Read more...](#)

## 9. CDC: Cigarette Use Declines, Sustained State Efforts Needed

The Centers for Disease Control and Prevention (CDC) assessed the most recent national estimates of cigarette smoking prevalence among adults aged 18 years using data from the 2015 National Health Interview Survey (NHIS). The proportion of U.S. adults who smoke cigarettes declined from 20.9% in 2005 to 15.1% in 2015, and the proportion of daily smokers declined from 16.9% to 11.4%. ) However, there were differences in smoking prevalence by sex, age group, race/ethnicity, educational attainment, economic status, U.S. region, insurance and disability status, sexual orientation, and serious

psychological distress status. The Surgeon General has concluded that the burden of death and disease from tobacco use in the United States is overwhelmingly caused by cigarettes and other combusted tobacco products. Accordingly, enhanced and sustained implementation of proven population-level interventions, including tobacco price increases, anti-tobacco mass media campaigns, comprehensive smoke-free laws, and enhanced access to help in quitting tobacco use, are critical to reducing smoking-related disease and death in the United States. Sustained comprehensive state tobacco control programs funded at CDC-recommended levels could accelerate progress in reducing adult smoking prevalence and smoking-related disease, death, and economic costs. However, during 2016, despite combined revenues of \$25.8 billion from settlement payments and tobacco taxes in all states, state spending on tobacco control programs is projected to be \$468 million (1.8% of revenues), representing <15% of the CDC-recommended level of funding for all states combined. [Read more...](#)

## **10. TCF Highlights Participants in Federal Health Marketplace by Zip Code**

The Century Foundation, a progressive nonpartisan think-tank highlights participation in the federal health marketplace by zip code in a new graphic available on its website. As of early 2016, there are over 8 million people across the United States enrolled through Healthcare.gov. These 8 million people would be most immediately affected by a repeal. The group notes that action against the health law seems imminent with a new administration. [Read more...](#)

## **11. Cures Legislation Passes the House, Headed to Senate**

The US House of Representatives has passed the 21st Century Cures/Opioid/Mental Health package by a vote of 392-26. The bill now heads to the Senate. The nearly 1,000-page bill includes several provisions that may be of interest, including related to antibiotic drug development and medical countermeasures. The good news is the Bill would commit billions of dollars to medical research while sending \$1 billion to states to help combat heroin and painkiller addiction and recovery. The bad news is the expense would be offset by \$3.25 billion from future years from the Prevention and Public Health Fund. This Fund is essential to CDC's budget and the nation's health security, including the 317 immunization program, epidemiology & laboratory capacity, and preventive services block grants. [Read more...](#)

## **12. New Report Compares State Health Data**

The newly-released Health of the States project is a detailed analysis of state rankings on 39 health outcomes and correlations between those health outcomes and 123 determinants of health spanning five domains: health care, health behaviors, social and economic factors, the physical and social environment, and public policies and spending. The series of reports examine a wide range of drivers of health, looking extensively at



health care conditions and health behaviors—such as tobacco use and physical activity—while also studying physical and social conditions in neighborhoods that influence behaviors and health (such as walkability or residential segregation), socioeconomic factors ranging from education and income to incarceration and food insecurity, and per capita spending by states on income support, education, and infrastructure. [Read more...](#)

## **13. Public Health 3.0: A Challenge for the Nation, a Charge for Public Health**

In 2016, the U.S. Department of Health and Human Services (HHS) Office of the Assistant Secretary for Health (OASH) launched an initiative to lay out the vision for this new model of public health, to characterize its key components, and to identify what actions would be necessary to better support the emergence of this transformed approach to public health, with particular attention to the efforts needed to strengthen the local governmental public health infrastructure as a critical and unique leader in advancing community health and well-being. To learn more, OASH visited five communities that are aligned with the PH3.0 vision. In these regional listening sessions, local leaders shared their strategies and exchanged ideas for moving PH3.0 forward. Attendees represented a diverse group of people working in public health and other fields, including philanthropy and nonprofit organizations, businesses, social services, academia, the medical community, state and local government agencies, transportation, and environmental services. The resulting report, “Public Health 3.0: A Call to Action to Create a 21<sup>st</sup> Century Public Health Infrastructure” is now available. [Read more...](#)

## **14. Surgeon General Strategy Seeks to End Opioid Epidemic**

The U.S. Surgeon General, Vice Admiral Vivek H. Murthy, recently released a groundbreaking report, [Facing Addiction in America: The Surgeon General's Report on Alcohol, Drugs, and Health](#). This report identifies drug and alcohol addiction as a significant public health concern in the United States. In 2015, 48 million Americans used an illicit drug or misused a prescription medication, and 67 million Americans reported binge drinking in the past month. Yet, only a few individuals with a substance misuse problem or addiction find their way into treatment. Although the report describes alcohol and drugs as a public health concern, the report also provides a way forward to reduce the impact of alcohol and drugs. This landmark report provides information and actionable recommendations aimed at strengthening and improving the health of communities and families.

[Return to top ^](#)



## **15. HHS Highlights Federal Patient Movement System**

When a state requests federal support to move patients, the U.S. Department of Health and Human Services (HHS), as the lead federal agency for Emergency Support Function #8, Public Health and Medical Services, will implement the patient movement system. In a new fact sheet available from the agency, HHS outlines levels of movement involved including what Federal Assistance is available. The five functions defined in the fact sheet are: patient evacuation (to include patient reception and management), medical regulating, en-route medical care, patient tracking, and re-entry. [Read more...](#)

## **16. OIG Reviews Reforms in Secret Service Operations Testimony**

The Office of the Inspector General (OIG) has recently outlined several recommendations to the House Committee on Oversight and Government Reform regarding operations within the US Secret Service (USSS.) The OIG suggests that many suggested improvements have been implemented by the administration but that the agency needs to reprioritize handling of critical data and improve related management systems. The OIG advised the USSS of 2017 reviews of the Secret Service, including a review of DHS components' use of force; a DHS-wide review of employee conduct and discipline; an audit to determine the effectiveness of polygraph examinations used by DHS; and a review of DHS controls over firearms and other sensitive assets. [Read more...](#)

## **17. New Issue of The Exchange Highlights No Notice Events**

The third issue of the ASPR TRACIE newsletter, The Exchange, focuses on healthcare facility preparedness for—and response to—no-notice events. Active shooter rumors and actual mass shootings have increased in frequency (e.g., at the Pulse nightclub in Orlando, a county facility in San Bernardino, and during a protest in Dallas) and have emphasized the need for healthcare facilities to make no-notice events a substantive part of their all-hazards planning. [Read more...](#)

## **18. Public Health Impact of Wildfire Emissions Available to States**

In the shadow of massive wildfires in Tennessee, South Carolina, and elsewhere, readers are advised of a 38-page file of webinar presentation slides that provides an overview of wildfire smoke and its health effects, along with tools available to provide public health

guidance during wildfire events. (A transcript of the webinar is also provided.) The overview includes the Wildfire Smoke Guide for Public Health Officials and an effort that is underway, led by the Environmental Protection Agency in partnership with the U.S. Forest Service and Centers for Disease Control and Prevention, to update the wildfire smoke guide and provide the draft updated version for use by the states during the 2016 wildfire season. [Read more...](#)

## 19. Free CBRNE Course Available from NIH

The Disaster Information Management Research Center (DIMRC), an entity of the National Library of Medicine at the National Institutes of Health (NIH) offers free training for state health officials and the public on a range of disaster-related topics. *Health Information Resources for CBRNE (Chemical, Biological, Radiological, Nuclear and Explosives)* provides an overview of the concepts of CBRNE, and the types of health-related information that support planning, response, and recovery in CBRNE incidents. This self-paced course includes a review of related tools and resources from the National Library of Medicine:

- CHEMM (Chemical Hazards Emergency Medical Management)
- REMM (Radiation Emergency Medical Management)
- WISER (Wireless Information System for Emergency Responders)

This course is also listed in the Public Health Foundation TRAIN Learning Management System. Logging in through TRAIN allows participating TRAIN affiliate members to track their personal online training transcripts.

Search Course ID: 106487. [Read more...](#)

In related news, check out updated [Disaster Health Information Sources: The Basics](#) and [A Seat at the Table: Working with Local Responders](#).

## 20. HHS Offers Healthcare Preparedness and Response Guidance

The 2017-2022 Health Care Preparedness and Response Capabilities document outlines the high-level objectives the nation's health care delivery system, including health care coalitions (HCCs) and individual health care organizations, should undertake to prepare for, respond to, and recover from emergencies. These capabilities illustrate the range of preparedness and response activities that, if conducted, represent the ideal state of readiness in the United States. The 2017-2022 Health Care Preparedness and Response Capabilities document improves upon the 2012 version titled *Healthcare Preparedness Capabilities: National Guidance for Healthcare System Preparedness*, streamlining eight capabilities down to four. The Assistant Secretary for Preparedness and Response (ASPR) posted the final *2017-2022 Health Care Preparedness and Response Capabilities* document on the [phe.gov website](#). ASPR will issue clear expectations and priorities for

Hospital Preparedness Program (HPP) awardees and their sub-recipient HCCs for the upcoming five-year project period in January with the release of the 2017-2022 Funding Opportunity Announcement and the *2017 HPP Performance Measures*.

## **21. WA DOSH Offers SCBA Bulletin**

A recent live-fire training event in Washington State caused an unexpected exposure to a firefighter when a sizing dot became dislodged. As a result, smoke entered the facepiece and colleagues were kind enough to share a description of the incident that has been posted for educational purposes. [Read more...](#)

## **22. DHS Fellows Program Available to Improve State Partnerships**

The DHS Office of Intelligence and Analysis (I&A) Fellows Program is designed to integrate state, local, tribal, and territorial (SLTT) partners into the intelligence and information sharing processes resident across the federal government and the Intelligence Community (IC). This program provides a unique opportunity for SLTT partners to collaborate with the IC in order to ensure that threat information is most effectively shared between all levels of government. Fellows will be expected to collaborate with their federal counterparts and SLTT customers through participation in a variety of intelligence functions, including, but not limited to, joint analysis and production, collection and reporting, and/or watchlisting. Through these engagements, Fellows will collaborate with DHS and IC partners to develop and execute strategies for sharing information and intelligence across all levels of government. [Read more...](#)

## **23. NHSPI Shows Improvement in Nation's Preparedness**

An annual assessment of health security and preparedness shows the nation is relatively well-prepared for managing an emergency, although performance on some measures in specific states can be improved. The Robert Wood Johnson Foundation released results of the 2016 National Health Security Preparedness Index, which show the United States scoring 6.7 on a 10-point scale for preparedness—an improvement of 3.6 percent since the Index began three years ago. [Read more...](#)

[Return to top ^](#)

## **[EMS EDUCATION](#)**

## **24. NASEM Reflects on Value of Program Accreditation in New Report**

Given the rapid changes in society, health, and health care, members of the National Academies Global Forum on Innovation in Health Professional Education recently elected to take on the topic of accreditation and to explore the effect of societal shifts on new and evolving health professional learning opportunities to best ensure quality education is offered by institutions regardless of the program or delivery platform. Program accreditation was identified as the primary tool for monitoring and ensuring such quality. “Exploring the Role of Accreditation in Enhancing Quality and Innovation in Health Professions Education: Proceedings of a Workshop” is now available. [Read more...](#)

[Return to top ^](#)

---

## [HIGHWAY SAFETY](#)

### **25. NTSB Announces “Most Wanted” List for 2017-2018**

The National Transportation Safety Board (NTSB) is an independent federal agency that investigates accidents, determines their probable cause, and recommends ways to prevent them from happening again. The MOST WANTED LIST, organized by topic area, is the NTSB’s premier advocacy tool. It identifies the top safety improvements that can be made across all modes to prevent accidents and save lives in the future. The NTSB abandoned ranking the improvements a few years ago and advocates for them as equal importance. The following list is further described on the agency’s web site:

- Reduce Fatigue Related Accidents
- Eliminate Distractions
- Increase Implementation of Collision Avoidance Technologies
- Prevent Loss of Control in Flight and General Aviation
- End Alcohol and Other Drug Impairment in Transportation
- Require Medical Fitness
- Strengthen Occupant Protection
- Ensure the Safe Shipment of Hazardous Materials
- Improve Rail Transit Safety Oversight
- Expand Recorder Use to Enhance Safety

[Read more...](#)

### **26. FHA Offers New Technical Report on Safety**

Multimodal transportation networks provide access to jobs, education, health care,

recreation, transit, and other essential services in urban, suburban, and rural areas throughout the United States. Interconnected pedestrian and bicycle infrastructure makes walking and bicycling a viable transportation choice for everyone and this contributes to the health, equity, and quality of life of our communities. A new publication from the Federal Highway Administration (FHA) is a great resource for practitioners seeking to build multimodal transportation networks. The publication highlights ways that planners and designers can apply the design flexibility found in current national design guidance to address common roadway design challenges and barriers. It focuses on reducing multimodal conflicts and achieving connected networks so that walking and bicycling are safe, comfortable, and attractive options for people of all ages and abilities. This resource includes 24 design topics, organized into two themes. The 12 design topics in Part 1 focus on design flexibility. The 12 topics in Part 2 focus on measures to reduce conflicts between modes. Each design topic is four pages in length and includes relevant case studies and references to appropriate design guidelines. [Read more...](#)

[Return to top ^](#)

---

## [PEDIATRIC EMERGENCY CARE](#)

### **27. AHRQ Focuses on Pediatric QI**

Looking for guidance on measuring the quality of care in pediatric populations? The Agency for Healthcare Research and Quality (AHRQ) has produced a Pediatric Toolkit for Using the AHRQ Quality Indicators. The Pediatric QI Toolkit contains tools for the same six steps (A through F) as the QI Toolkit, including materials that improvement teams can use to identify and catalogue quality and patient safety concerns, educate clinical leaders and staff, and hone in on priorities. It also includes 13 indicator-specific best practices for improving performance on the AHRQ Pediatric Quality Indicators (PDIs) and a case study of a Toolkit user in a pediatric setting. This new Pediatric QI Toolkit can be used to improve performance on the PDIs as well as other measures of inpatient pediatric quality. [Read more...](#)

[Return to top ^](#)

---

## [TRAUMA](#)

### **28. Using GCS in Predicting Severe Injury in**

## Trauma Patients

Rapid and accurate assessment of a patient's condition is essential for trauma triage in the field. Emergency medical services (EMS) providers of all levels must be able to quickly evaluate and classify patients for appropriate transport destination while providing medical care. Avoiding undertriage by transporting patients with potentially serious injuries to an appropriate trauma center reduces mortality, but overtriage causes a strain on resources and is inconvenient for patients. In a new study, researchers find "Replacement of the total GCS score with a simple binary decision point of GCS-m score less than 6, or a patient who "does not follow commands," predicts serious injury, as well as the total GCS score, and would simplify out-of-hospital trauma triage." Free access to Kupas, Douglas F. et al. Glasgow Coma Scale Motor Component ("Patient Does Not Follow Commands") Performs Similarly to Total Glasgow Coma Scale in Predicting Severe Injury in Trauma Patients. Ann Emer Med, Volume 68 , Issue 6 , 744 - 750.e3 is available. (Editor's Note: Congratulations, Doug!) [Read more...](#)

[Return to top ^](#)

---

## [FEDERAL PARTNERS](#)

### **29. NACOSH to Hear Recommendations from ERP Workgroup**

The National Advisory Committee on Occupational Safety and Health (NACOSH) will meet on December 14, 2016 at the US Department of Labor in Washington, DC. NACOSH will consider draft regulatory text that the NACOSH Emergency Response and Preparedness Subcommittee developed. (To read or download subcommittee documents in the NACOSH docket, go to Docket No. OSHA-2015-0019 at <http://www.regulations.gov>) *Interested persons are invited to participate and/or submit comments.* [Read more...](#)

### **30. CDC Offers Carfentanil Exposure Strategies for First Responders**

The Centers for Disease Control and Prevention (CDC) and NIOSH have responded to the potential hazard for first responders who could unknowingly come in contact with fentanyl and its analog carfentanil with a new web site for preventing occupational exposures. Information includes the role of risk assessments, personal protective equipment, respiratory protection, gloves, eye protection, coveralls, bootcovers, and protective sleeves. [Read more...](#)

## **31. AHRQ Offers Strategies to De-escalate Aggressive Behavior in Psych Patients**

Aggressive behavior connotes using actual physical violence toward self, others, or property or making specific imminent verbal threats. In health care settings, approaches for actively aggressive patients have historically involved using either seclusion (involuntary placement of a patient in a locked room or area from which the patient is not allowed to leave) or restraints (involuntary administration of mechanical, pharmacologic, or physical interventions, which is seen as more restrictive than seclusion); these practices continue today. Since the late 1990s, the U.S. Centers for Medicaid & Medicare Services (CMS) and the Joint Commission have required using seclusion and restraints only for a behavior that "jeopardizes the immediate physical safety of the patient, a staff member, or others" (including other patients) and when less restrictive measures have failed. Despite practice guidelines advocating limitations of seclusion or restraints as much as possible, data in the United States and Europe show that 10 percent to 30 percent of patients (adolescents, adults, and elderly persons) admitted to acute psychiatric units receive these interventions. Evidence grading related to various prevention strategies are now available on the agency's web site. [Read more...](#)

## **32. New System to Update Patient Safety Monitoring**

A new online patient safety tool AHRQ is developing is intended to track adverse events in hospitals by capturing data from Medicare patients' electronic health records. Johns Hopkins University and MedStar Health Research Institute will test the [Quality and Safety Review System](#) as a replacement for the current Medicare Patient Safety Monitoring System. Although substantial progress has been made in monitoring and measuring patient harms, the Medicare Patient Safety Monitoring System has approached its useful limits because it relies on outdated software, can't identify rare or unusual events, and is unable to measure adverse events not currently defined by one of the system's 21 measures, according to a recent article in the *Journal of Patient Safety*. The AHRQ-funded article, "Measuring Patient Safety: The Medicare Patient Safety Monitoring System (Past, Present, and Future)," reviewed the strengths and limitations of the Medicare Patient Safety Monitoring System and other methods for measuring patient safety. To learn more about the Quality and Safety Review System, read the new AHRQ Views blog post, "[New System Aims To Improve Patient Safety Monitoring](#)."

## **33. Panel Offers Guidance in Updating Systematic Reviews**

The question of updating systematic reviews, which synthesize relevant research around a particular question, was the subject of an expert panel organized by the Cochrane network, proceedings of which were published in BMJ. The panel deliberated questions regarding



the resources needed to update a review and ways resources must be balanced by the benefits of the new information provided. Finding the right balance is important because making health care decisions requires access to summaries of the most current evidence, but there are limited resources and many questions. The panel developed a decision framework to determine the currency of a review or whether review needs to be updated. The panel provided guidance for updating reviews. The expert panel included Stephanie Chang, M.D., director of AHRQ's Evidence-based Practice Center program, which sponsors numerous systematic reviews and updates. [Read more...](#)

## 34. ONC Offers Fact Sheet on EMS and Health Information Exchanges

Health Information Exchange (HIE) refers to the secure and timely sharing of electronic health data across the boundaries of health care institutions. An HIE organization is an entity that oversees or facilitates the exchange of health information among a diverse group of healthcare stakeholders within and across regions, according to nationally recognized standards. The exchange of health information has the potential to transform the way care is delivered by improving physician workflow, fostering increased communication among providers and patients, improving the ability to access and analyze data, and reducing healthcare costs. A recent fact sheet from the Office of the National Coordinator for Health Information Technology, *Health Information Exchange: What is it and How is it Useful?* provides a useful EMS overview of this important topic. Read more [here](#) and [here](#).

[Return to top ^](#)

---

## [INDUSTRY NEWS](#)

### 35. TX Judge Issues Temporary Injunction on New Overtime Rule

A federal judge recently issued a preliminary injunction against a **Department of Labor** (DOL) [final rule](#) that would have extended overtime pay to approximately 4.2 million workers in the United States, affecting hundreds of thousands of health care workers, including EMS. Under the rule, workers with annual salaries up to \$47,476 would be eligible for overtime pay for work more than 40 hours in one week—almost double the \$23,660 overtime income threshold currently in place. Simply stated, the threshold that hasn't been updated since 2004 would require employers to pay qualifying employees 1.5 times a worker's usual salary for any work that is done over the 40-hour limit. The lawsuits behind the injunction argued that the Obama administration exceeded its authority by mandating an automatic salary threshold update every three years. The rule was

scheduled to take effect Dec. 1. [Read more...](#)

## 36. Why Sleep Matters...

According to researchers at the not-for-profit research organization RAND Europe, sleep deprivation leads to a higher mortality risk and lower productivity levels among the workforce, which, when combined, has a significant impact on a nation's economy. A new study, *Why Sleep Matters – The Economic Costs of Insufficient Sleep*, is the first of its kind to quantify the economic losses due to lack of sleep among workers in five different countries—the U.S., UK, Canada, Germany, and Japan. The study uses a large employer-employee dataset and data on sleep duration from the five countries to quantify the predicted economic effects from a lack of sleep among its workforce. [Read more...](#)

## 37. ILCOR Accepting Applications for Task Force Positions

The International Liaison Committee on Resuscitation (ILCOR) is pleased to announce that Task Force Member positions are now open for application! The International Liaison Committee on Resuscitation (ILCOR) was formed in 1992 to create a forum for collaboration among principal resuscitation councils worldwide. ILCOR's vision is to save more lives globally through resuscitation. ILCOR's mission is promoting, disseminating and advocating for the international implementation of evidence-informed resuscitation and first aid, using transparent evaluation and consensus summary of scientific data. Individual ILCOR Task Forces are listed below.

- Advanced Life Support (ALS)
- Basic Life Support (BLS)
- Education, Implementation & Teams (EIT)
- First Aid (FA)
- Neonatal Life Support (NLS)
- Pediatric Life Support (PLS)

The deadline for applications and letters of recommendation is December 16, 2016. [Read more...](#)

## 38. Health Transportation Focus of New NASEM Report

The National Academies of Sciences, Engineering, and Medicine (NASEM) recently convened a workshop on the impact of transportation as a contributing factor to the public's health. In summary, the workshop identified transportation as a significant factor in healthcare access. There are many ways that individuals access health care and other health supportive services, including walking, bicycling, riding fixed route transit (e.g., bus or subway), using a taxi cab or shared ride service, or calling an ambulance. While some individuals have financial, physical, and cultural access to these transportation options and more, others have few to no transportation options to help them access health care. As a

direct result they may delay or miss preventive or primary care appointments, not make it for follow-up care, or may be unable to fill prescriptions or access other health supports. Exploring Data and Metrics of Value at the Intersection of Health Care and Transportation: Proceedings of a Workshop is now available. [Read more...](#)

[Return to top ^](#)

---

## [INTERESTING ABSTRACTS](#)

### **39. Validation of SIRS, SOFA, and qSOFA in Predicting Sepsis Mortality**

The European Society of Intensive Care Medicine (ESICM) featured a validation study of the new Sepsis 3.0 criteria in the Australasian ICU population at its recent meeting in Milan, Italy. Watch Dr. Eamon Raith explain their findings in an interesting 12 min video.

[Watch now...](#)

### **40. New from NASEM: Pain Management and Opioid Related Harms**

The Committee on Pain Management and Regulatory Strategies to Address Prescription Opioid Abuse was tasked with preparing a report that will identify actions that the U.S. Food and Drug Administration (FDA) and others can take to address the opioid epidemic while taking into account individual need for pain control, including FDA's development of a formal method to incorporate the broader public health impact of prescription opioids into its future approval decisions regarding opioids. The committee held a workshop that was designed to bring the committee and the public together to hear presentations and hold discussions on issues that are relevant to this task and to inform the committee's deliberations. Specifically, the purpose of this workshop was to gather information about the state of the science and potential best practices in pain management, including the evolving role of opioids in pain management; to understand the epidemiology of the prescription opioid epidemic and discuss possible strategies to address it; and to identify potential areas for future research in the field. This Proceedings of a Workshop—in Brief highlights the dialogue that emerged from the individual speakers' presentations and the discussions that followed. [Read more...](#)

[Return to top ^](#)

---

## [UPCOMING EVENTS](#)

Send calendar events to [krobinson@asmii.net](mailto:krobinson@asmii.net)

## Statewide EMS Conferences

**17th Annual Templeton Pediatric Trauma Symposium.** March 3-4, 2017. Pittsburgh, PA. A one-of-a-kind educational event focused on the continuum of pediatric trauma care. The conference provides a comprehensive program on the care of injured children and their families, featuring nationally-recognized presenters, a pediatric-focused TOPIC course and the keynote Templeton Lecture. [For more information...](#)

## National Conferences and Special Meetings

Use these links to access monthly course schedules and registration info related to:

[NAEMSE Instructor Course Level 1](#)

[NAEMSE Instructor Course Level 2](#)

[CAAHEP Accreditation Update & Evaluating Student Competency Workshops](#)

[NAEMSE/NREMT Regional Scenario Development Workshops](#)

### **National Association of EMS Physicians Annual Meeting**

January 24-26, 2017. New Orleans, LA. [www.naemsp.org/](http://www.naemsp.org/)

### **EMS Today 2017**

February 23-25, 2017. Salt Lake City, UT <http://www.emstoday.com/index.html>

### **National Association of State EMS Officials Spring Meeting**

March 5-9, 2017. New Orleans, LA. [www.nasemso.org](http://www.nasemso.org)

### **American Academy of Emergency Medicine Annual Meeting**

March 16-20, 2017. Orlando, FL. [www.aaem.org](http://www.aaem.org)

### **\*Tenth International Conference on Managing Fatigue**

San Diego, California, from March 20–23, 2017, at the Westin San Diego Gaslamp Quarter. <http://fatigueconference2017.com/program.html>.

### **Critical Care Transport Medicine Conference**

April 10-12, 2017. San Antonio, TX. <http://www.iafccp.org/event/id/177507/Critical-Care-Transport-Medicine-Conference-CCTMC.htm>

### **National Rural EMS Leadership Conference**

April 25-26, 2017. Fargo, ND.

### **\*Preparedness Summit**

April 25-28, 2017. Atlanta, GA. <http://preparednesssummit.org/>

**Society for Academic Emergency Medicine Annual Meeting**

May 16-19, 2017. Orlando, FL. <http://saem.org/annual-meeting>

**EMS Week**

May 21-27, 2017

**Fire Rescue Med (IAFC EMS Section Annual Meeting)**

May 20-24, 2017. Henderson, NV <http://www.iafc.org/micrositeFRMconf/FRMhome.cfm?ItemNumber=8046>

**IAFC Annual Conference - Fire-Rescue International**

July 26-29, 2017. Charlotte, NC. [www.iafc.org/fri](http://www.iafc.org/fri)

**Pinnacle 2017**

August 7-11, 2017. Boca Raton, FL. <http://pinnacle-ems.com/>

**National Association of EMS Educators Annual Meeting**

August 7-12, 2017. Washington, DC. [www.naemse.org](http://www.naemse.org)

**National EMS Safety Summit**

August 21-23, 2017. Denver, CO. <http://nationalemssafetysummit.org/>

**National EMS Advisory Council**

TBA, 2017. Washington DC. [www.ems.gov](http://www.ems.gov)

**Emergency Nurses Association Annual Meeting**

September 13-16, 2017. St. Louis, MO. [www.ena.org](http://www.ena.org)

**Air Medical Transport Conference**

October 16-18, 2017. Fort Worth, TX. <http://aams.org/education-meetings/>

**National Association of State EMS Officials Fall Meeting**

October 9-12, 2017. Oklahoma City, OK. [www.nasemso.org](http://www.nasemso.org)

**EMS World Expo**

October 16-20, 2017. Las Vegas, NV <http://www.emsworldexpo.com/>

**American College of Emergency Physicians Annual Meeting**

October 30 - November 2, 2017. Washington, DC. [www.acep.org](http://www.acep.org)

**International Association of Emergency Management Annual Meeting**

November 10-16, 2017. Long Beach, CA. [www.iaemconference.info](http://www.iaemconference.info)

---

See more EMS Events on NASEMSO's web site at  
<http://www.nasemso.org/Resources/Calendar/index.asp>

[Return to top ^](#)

# Download PDF



# Subscribe here



Website



Facebook



Twitter



Email



Store

**Your input to Washington Update is welcome  
and can be sent directly to our Editor:**

**Kathy Robinson, RN, EMT-P, QAS**

National Association of State EMS Officials  
201 Park Washington Court  
Falls Church, VA 22046  
Email: [robinson@nasemso.org](mailto:robinson@nasemso.org)  
Phone: 703.538.1799 Ext. 1894

## [CONTACT NASEMSO STAFF](#)

**Elizabeth Armstrong, CAE, MAM /**  
Executive VP  
(703) 538-1799 ext. 8  
[armstrong@nasemso.org](mailto:armstrong@nasemso.org)

**Dia Gainor / Executive Director**  
(703) 538-1799 ext. 7

**Leslee Stein-Spencer / Program**  
Manager  
[stein-spencer@nasemso.org](mailto:stein-spencer@nasemso.org)

**Mary Hedges / Program Manager**  
[hedges@nasemso.org](mailto:hedges@nasemso.org)

[dia@nasemso.org](mailto:dia@nasemso.org)

**Sharon Kelly** / Executive Assistant  
(703) 538-1799 ext. 2  
[kelly@nasemso.org](mailto:kelly@nasemso.org)

**Kathy Robinson** / Program Manager  
(703) 538-1799 ext. 1894  
[robinson@nasemso.org](mailto:robinson@nasemso.org)

**Kevin McGinnis** / Program Manager  
(571) 749-7217  
[mcginnis@nasemso.org](mailto:mcginnis@nasemso.org)

**Rachael Alter** / Program Manager  
[alter@nasemso.org](mailto:alter@nasemso.org)

**Sue Prentiss** / Program Manager  
[prentiss@emsreplica.org](mailto:prentiss@emsreplica.org)

**Karen Thompson** / Website Manager  
[thompson@nasemso.org](mailto:thompson@nasemso.org)

**Zoe Renfro** / Project Coordinator  
[zoe@nasemso.org](mailto:zoe@nasemso.org)

**The material contained in this newsletter is for informational purposes only. NASEMSO does not support, endorse, or recommend any position, product, or service unless explicitly stated.**

The Washington Update is produced by the National Association of State EMS Officials. Feel free to [share](#) this publication with your colleagues. To subscribe to receive the *Washington Update* by e-mail, please click [here](#). View archived issues [here](#).

[Return to top ^](#)