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UPCOMING EVENTS

Statewide EMS Conferences

National Conferences and Special Meetings

1. NASEMSO Invites President Obama to Deliver Keynote Address at 2010 Annual Meeting

NASEMSO President Steve Blessing has issued an invitation to President Barack Obama to deliver the Keynote Message at the 2010 NASEMSO Annual Meeting in Norfolk, VA. Acknowledging Mr. Obama's leadership and support for EMS and trauma systems in the recent health care reform legislation, Blessing provided background information about NASEMSO and its role in emergency operations and the healthcare system. (Please note: The invitation does not ensure the President will attend. NASEMSO members will be advised of any updates received from the White House.) A copy of the President's recent <u>EMS Week Proclamation</u> is available online.

In related news, activities are gearing up for NASEMSO's Annual Meeting in Norfolk, VA. A preliminary schedule and preregistration forms have been <u>posted</u>. **New for 2010:** NASEMSO goes **GREEN**!! Registrants can expect to receive a program schedule, exhibitor listing, and attendee list on-site but all other documents including handouts and flyers will be pre-loaded onto a flash drive and the binders (that most of you have been leaving in your hotel room anyway) will become a thing of the past! Note to Committee and Council Chairs: the deadline for receiving materials for the flash drive will be COB, September 3!

2. NASEMSO Convenes Successful Mid-Year Meeting

An enthusiastic crowd attended the recent 2010 NASEMSO Mid-Year Meeting in Bethesda, MD, where various Councils and committees convened prior to the joint program in conjunction with the EMSC grantee meeting. The powerpoint of the <u>legislative update</u> by Lisa Tofil as well as sessions on <u>Education Agenda implementation</u> have been posted. PPT files of other sessions will become available in the upcoming weeks.

3. NASEMSO Leadership Meets with ACS Committee on Trauma

Key leadership from the NASEMSO Executive Committee and American College of Surgeons Committee on Trauma convened prior to the NASEMSO Mid-Year Meeting to discuss potential areas of collaboration. The two organizations discussed mutual goals involving state COT committees, model systems, regionalization and systems of care, patient safety, systems benchmarking, standards for definitive care centers, emergency preparedness and surge capacity, air transport of trauma patients, rural trauma and EMS, transportation, federal advocacy, and a culture of safety for EMS providers. NASEMSO appreciates the opportunity to meet with our COT partners and looks forward to exciting future opportunities!

4. NASEMSO Releases Education Agenda Implementation Report to NEMSAC

At its 2010 Mid-Year meeting, NASEMSO provided a rollout of its latest report on implementation of the EMS Education Agenda. The <u>Report to the National EMS Advisory Committee (NEMSAC) on Statewide Implementation of the Education Agenda</u> is based on results of the 2009 NASEMSO annual implementation survey. This document is intended to provide an overview of statewide implementation of the Education Agenda. Data was collected in 2009, and state EMS directors were given an opportunity to revise their information in April 2010. The report is merely a "snapshot in time" and should not be received or interpreted as a strict policy decision by any state. States retain the authority to implement the Education Agenda in a way that best meets their needs. NASEMSO expresses its deep appreciation to all 50 states and the territories of the District of Columbia (DC), the US Virgin Islands (VI), and the Northern Mariana Islands (MP) for their contributions to this survey.

5. NASEMSO Comments on Proposed EMS Medical Director Qualifications

NASEMSO recently participated as a member of the Review Group that provided input to *NIMS EMS Medical Director/EMS Medical Oversight Physician Qualifications*. NASEMSO, with input from its Medical Directors Council, supported the document as written. Once all comments have been adjudicated, the document will become part of the NIMS guidance. Current EMS job titles and resource typing definitions are available <u>here.</u>

6. NASEMSO Training Coordinators Council Votes to Change Name to Reflect Broader Mission

The National Council of State EMS Training Coordinators affiliated with NASEMSO in 2006, becoming the Association's fourth official Council. Through a recent survey, the Council recognized that the scope of EMS education and related functions at the state EMS office level for the position generically referred to as the "state EMS training coordinator" has expanded to include functions such as certification and licensure, examination and testing, compliance, quality improvement, program accreditation, and investigation of complaints. At its recent meeting, the Council voted to change its name to the "Education and Professional Standards" Council to better reflect the current responsibilities of its members. The name change will become official upon ratification by NASEMSO's Executive Committee later this month.

7. NASEMSO Comments at IOM Forum on PPE for Healthcare Workers

Conflicting information promulgated by national organizations, the scientific community, and the news media about the use of masks, respirators, and the utility of fit-testing diminishes the ability of the health care community, including Emergency Medical Services (EMS) to promote consistent practice among its practitioners. During the recent *Institute of Medicine Workshop on Current Research Issues—Personal Protective Equipment for Healthcare Workers to Prevent Transmission of Pandemic Influenza and Other Viral Respiratory Infections,* NASEMSO strongly encouraged greater collaboration among IOM's many partners to provide a consistent message regarding the role(s) and efficacy of fit-testing, surgical masks, and N-95 respirators in the transmission of disease. The NASEMSO statement is available on the <u>NASEMSO web site</u> under "Advocacy." Proceedings (including the agenda and presentations from the meeting) are now available <u>here</u>.

8. NASEMSO Congratulates NEMSIS Colleagues on Recent HL7 Success!!

In 2009, several EMS stakeholders described a <u>Project Charter</u> for the NEMSIS Data Standardization. This charter outlines the direction of the project to develop Health Level Seven (HL7) standards based on the National EMS Information System (NEMSIS) data set following the *HL7 Development Framework* (HDF). The first activity was to create a Domain Analysis Model (DAM) that can then be used to create a variety of interoperability standards. To obtain full HL7 approval and NEMSIS integration, a total of 3 components must be developed and successfully balloted. During a recent meeting of the HL7 partnership, the NEMSIS DAM was unanimously approved with zero negative comments. This is an incredible achievement and the first major step to integrate EMS into Health IT initiatives. NASEMSO congratulates the entire NEMSIS team on this outstanding accomplishment!!!

9. DHS Announces Nearly \$790 Million in 2010 Preparedness Grants

Department of Homeland Security (DHS) Secretary Janet Napolitano announced the fiscal year 2010 Preparedness Grants for nine federal programs--including critical infrastructure-related grants--totaling nearly \$790 million to assist state, local and tribal governments, and the private sector in strengthening preparedness for acts of terrorism, major disasters and other emergencies. Of particular interest to EMS—

• Emergency Operations Centers (EOC) Grant Program - \$57.6 million to support the construction or renovation of Emergency Operations Centers to improve state, local or tribal emergency management and preparedness capabilities to ensure continuity of operations during disasters.

• Interoperable Emergency Communications Grant Program (IECGP) - \$48 million to assist governments in carrying out initiatives identified in Statewide Communication Interoperability Plans and improve interoperable emergency communications used to respond to natural disasters and acts of terrorism.

For more information on DHS Preparedness Grants...

10. NTSB Offers New Course in Rotorcraft Accident Investigation

The National Transportation Safety Board has developed a five-day course in rotorcraft accident investigation that will be delivered at its training center near Washington in August. The course, which has been in development for more than a year, was designed to provide investigators from regulatory authorities, investigative agencies, private industry, and potential parties to an NTSB investigation, an overview of the procedures, methods and skills required to perform a comprehensive rotorcraft accident investigation. The training will be offered August 16-20, 2010, at the NTSB Training Center in Ashburn, Virginia. Those interested in learning more should see the complete description of the training, registration information, and cost to attend at http://www.ntsb.gov/TC/CourseInfo/AS102_2010.htm

11. Technology Needs Focus of New Telecommunications Survey

In 1996, the Public Safety Wireless Advisory Committee (PSWAC) published its report on public safety's needs through the year 2010. That groundbreaking report eventually led to public safety spectrum assignments in the 700 MHz and 4.9 GHz bands. The National Public Safety Telecommunications Council (NPSTC) created the PSWAC Followup: Assessment of Future Spectrum and Technology (AFST) Working Group to update the PSWAC Report. The Working Group will identify the public safety user communications requirements for the next 10 years, from 2010 to 2020. In a new online questionnaire, PSWAC hopes to collect the public safety operational requirements through the year 2020 in order to determine spectrum, technology, and other needs to accommodate public safety's communication needs to policymakers. Interested persons are encouraged to participate in the survey to make sure that EMS needs are reflected. The survey can be accessed <u>here</u>. The deadline to participate is June 30.

12. FCC Requests Public Comments on Public Safety Band for First Responders

Federal regulators are trying again to allocate unused wireless frequency spectrum for a national public safety broadband network, and are seeking stakeholder input on how to establish a reliable, secure, and interoperable system. The Federal Communications Commission (FCC) recently issued a public notice on the matter. The deadline for comments is June 17. For more information...

13. MMWR Reports Public Health Surveillance Using Emergency Medical Service Logs

In 2008, 206 million travelers to the United States arrived via the U.S.–Mexico border. Notifications of infectious diseases among travelers are made primarily by U.S. Customs and Border Protection officers to CDC quarantine stations. To evaluate the utility of using emergency medical service (EMS) dispatch and response logs for travelers with symptoms or signs suggestive of infectious diseases, CDC screened medical records of patients transported by EMS during 2009 from the four ports of entry in El Paso, Texas. Although the use of EMS data in the early detection of reportable infectious diseases has not been studied previously, EMS data have been found to be a useful means for real-time syndromic surveillance for early detection of outbreaks and specific health conditions. This new report summarizes the results of the evaluation.

14. Federal Mobile Medical Unit Arrives in Louisiana

A federal mobile medical unit arrived in Venice, La., recently to provide additional basic medical care for responders and residents of coastal communities affected by the oil spill. The mobile medical unit, provided by the U.S. Department of Health and Human Services in coordination with the Louisiana Department of Health and Hospitals, will integrate with the local medical community to triage and provide basic care for responders and residents concerned about health effects of the oil spill. Patients then can be referred to local healthcare providers or hospitals. The mobile unit will be staffed by a medical team from the HHS National Disaster Medical System – a doctor, two nurses, two emergency medical technician paramedics (EMT-P) and a pharmacist. HHS activated the National Disaster Medical System as a precaution should Gulf States need additional medical support as a result of the oil spill. For more information...

15. Louisiana Announces EMS Reciprocity Process Related to the Gulf Oil Spill Cleanup

An Executive Order (EO) [BJ 2010 –9] has been issued by Louisiana Governor Bobby Jindal that describes the process of reciprocity for temporary EMS workers to assist in medical aid efforts related to the Gulf Oil Spill cleanup. Individuals who are "duly licensed and in good standing in another state" may apply for temporary reciprocity. The EO outlines the steps that will enable EMS workers to respond to mutual aid requests, EMAC deployments, and/or employment offers from British Petroleum for direct assistance. This information is NOT a call for volunteers. Individuals should NOT respond to Louisiana to provide EMS care nor should they contact the Louisiana Dept of Health or EMS Office to request information about volunteering with the oil spill cleanup. The required application form for EMS reciprocity in Louisiana is available <u>online</u>.

16. GAO Issues Letter Report on Tsunami Preparedness

The Tsunami Warning and Education Act of 2006 directed improvements in NOAA's warning and mitigation efforts and mandated GAO to report on its progress. A new letter report from the Government Accounting Office (GAO) addresses (1) the extent to which NOAA developed effective strategic plans for its tsunami programs and (2) the status of NOAA's efforts to strengthen and expand the programs and move tsunami research to application. GAO analyzed NOAA documents and interviewed federal, state, and local officials responsible for tsunami planning and preparedness efforts. *U.S. Tsunami Preparedness: NOAA Has Expanded Its Tsunami Programs, but Improved Planning Could Enhance Effectiveness.* Read GAO-10-490 or get highlights.

17. New Hospital Evacuation Guidance Available from AHRQ

AHRQ has released a new hospital evacuation decision guide. This *Hospital Evacuation Decision Guide* is designed to provide hospital evacuation decision teams with organized and systematic guidance on how to consider the many factors that bear on the decision to order an evacuation, and assist decision teams in identifying some of the special situations, often overlooked, that may exist in their facility or geographic area that could affect the decision to evacuate. A companion guide is designed to help organize the initial assessment of a hospital upon return after an evacuation/closure due to an emergency event. Download the <u>Hospital Evacuation Decision Guide</u> and <u>Hospital Rehabilitation Checklist</u>.

18. New NLM Releases Highlighted

The National Library of Medicine is providing a free iPhone Application for Family Reunification in Disaster Situations. "Reunite", advances capabilities of the iPhone app, "Found in Haiti", developed by NLM during the Haiti earthquake crisis. The app is primarily intended for medical aid and relief workers that are assisting in family reunification efforts after a disaster, but may also be used by the general public to report missing and/or found people to the site. "Reunite" is available in the iTunes Store at this link: <u>http://itunes.apple.com/us/app/reunite/id368052994?mt=8#</u>

The National Library of Medicine's Radiation Emergency Medical Management (REMM) is now available as a free iPhone/iPod touch App (<u>http://www.remm.nlm.gov/downloadmremm.htm#iphone</u>). You can download it from iTunes, or search for "radiation emergency" at the iTunes Store. Mobile REMM can also be downloaded to other mobile platforms (Blackberry, Windows Mobile, & Palm): <u>http://www.remm.nlm.gov/downloadmremm.htm</u>

19. FCC and FEMA Announce Workshop on 21st Century Emergency Alerting

The Federal Communications Commission's (FCC's) Public Safety and Homeland Security Bureau (PSHSB) and the Federal Emergency Management Agency's (FEMA's) National Continuity Programs (NCP) recently announced they will hold a workshop on 21st Century Emergency Alerting: Leveraging Multiple Technologies to Bring Alerts and Warnings to the Public. The workshop will be held on Thursday, June 10, 2010, from 9:00 a.m. to 1:00 p.m. in the Commission Meeting Room (TW-C305). The workshop will highlight the status of and relevant details related to the Integrated Public Alert and Warning System, including the Next Generation Emergency Alert System (EAS) and the Commercial Mobile Alert System. This public meeting will also provide FEMA, the FCC and other Federal partners an opportunity to gather feedback on outstanding issues related to these systems, the upcoming National EAS test, and the FCC's upcoming inquiry proceeding on next generation alerting. Audio/Video coverage of the meeting will be broadcast live with open captioning over the Internet from the FCC's web page at www.fcc.gov/live. The FCC's web cast is free to the public and does not require pre-registration.

20. AHRQ Tools and Resources to Help Communities Prepare for Hurricane Season

June 1 marks the beginning of Hurricane Season. The Agency for Healthcare Research and Quality has added new resources to its Web page to help communities prepare for and respond to hurricane events and other natural disasters. New additions include: Disaster Alternate Care Facilities, Hospital Evacuation Decision Guide, Hospital Assessment and Recovery Guide, and The Essentials: Mass Medical Care with Scarce Resources. Other tools featured on the Web page offer assistance with issues such as caring for children, transporting patients from one facility to another, nursing home needs, reopening shuttered hospitals to meet surge demand and using community call centers for crisis support. http://www.ahrq.gov/prep/hurricane.htm

21. CDC Provides Resources on 2010 Gulf of Mexico Oil Spill

CDC and ATSDR responders are in close communication with other federal agencies and with state health departments, and will work together to recommend measures to protect the public's health. The agencies are working with the states, emergency responders, and medical professionals to track any health concerns that may be related to the oil spill. CDC and ATSDR recommend that residents continue to pay attention to local and state health officials' specific health and safety recommendations for their areas.

- More About the Public Health Role in Disaster Response
- Deep Horizon Fact Sheets
- <u>CDC 2010 Gulf of Mexico Oil Spill Resources</u>

22. H1N1 and Seasonal Influenza Resources and Updates

Preliminary Results: Surveillance for Guillain – Barré Syndrome After Receipt of Influenza A (H1N1) 2009 Monovalent Vaccine – United States, 2009 – 2010 – CDC/MMWR – Jun 04. To monitor influenza A (H1N1) 2009 monovalent vaccine safety, several federal surveillance systems, including CDC's Emerging Infections Program (EIP), are being used. In October 2009, EIP began active surveillance to assess the risk for GBS after 2009 H1N1 vaccination. Preliminary results from an analysis in EIP comparing GBS patients hospitalized through March 31, 2010, who did and did not receive 2009 H1N1 vaccination showed an estimated age-adjusted rate ratio of 1.77 (GBS incidence of 1.92 per 100,000 person-years among vaccinated persons and 1.21 per 100,000 person-years among unvaccinated persons). For more information...

23. WHO Updates International H1N1 Situation

As of 30 May 2010, worldwide more than 214 countries and overseas territories or communities have reported laboratory confirmed cases of pandemic influenza H1N1 2009, including over 18,138 deaths. For more information...

24. NACCHO Launches Emergency Dark Site Toolkit

Emergency Dark Site Toolkit: A Toolkit on How to Build, Use and Maintain an Emergency Dark Site for Public Health Emergencies was created by the Santa Clara County Public Health Department Advanced Practice Center (APC) for the National Association of County and City Health Officials (NACCHO). This toolkit is intended to serve as a guide to set up a public health department emergency "dark site," or Web site which can be created ahead of time, then activated and made visible in times of emergency. <u>For more information...</u>

25. CoAEMSP Releases Revised Accreditation Policies and Procedures

The revised Policies and Procedures Manual was approved at the February Board meeting by the CoAEMSP Board of Directors. Included for the first time is the new Accreditation Glossary. The CoAEMSP Policies & Procedures Manual is available <u>here</u>.

As a reminder, the CoA has approved a Bachelors Degree Plan for Program Directors to assist programs meet this requirement by 2013. The plan provides an extended period of time for the program director of a program seeking Initial Accreditation to obtain his/her Bachelors degree. To be eligible for this plan, the program must submit its Initial Accreditation Self Study Report (ISSR) and fees to the CoAEMSP for evaluation prior to January 1, 2011. Doing so will allow the program director to demonstrate that qualification by current enrollment and continual satisfactory academic progress (defined as a minimum of 15 semester hours per year) toward a Bachelors degree until successfully completed. More information is available at www.coaemsp.org.

26. EMS Accreditation Fact Sheet Now Available

The CoAEMSP is making available an EMS accreditation fact sheet that contains valuable history, facts, and research regarding EMS accreditation. The CoAEMSP believes state officials, program directors, educators and others in the EMS community will find this document valuable in moving the EMS accreditation initiative forward. The EMS Accreditation Fact Sheet can serve as an excellent resource for educating legislators, college deans, students, state representatives and others. <u>Download the fact sheet...</u>

27. New NIOSH Report: Preventing Exposures to Bloodborne Pathogens among Paramedics

Patient care puts paramedics at risk of exposure to blood. These exposures carry the risk of infection from bloodborne pathogens such as hepatitis B virus (HBV), hepatitis C virus (HCV), and human immunodeficiency virus (HIV), which causes AIDS. A national survey of 2,664 paramedics contributed new information about their risk of exposure to blood and identified opportunities to control exposures and prevent infections. <u>For more information...</u>

28. NIOSH Provides Fast Facts to Prevent Worker Illness and Injury

The National Institute for Occupational Safety and Health (NIOSH) has published 6 new fact sheets aimed at promoting worker safety, which are applicable to EMS personnel:

- NIOSH Fast Facts: Protecting Yourself from Heat Stress (Pub. No. 2010-114, April 2010)
- NIOSH Fast Facts: Protecting Yourself from Cold Stress (Pub. No. 2010-115, April 2010)
- NIOSH Fast Facts: Protecting Yourself from Sun Exposure (Pub. No. 2010-116, April 2010)
- NIOSH Fast Facts: Protecting Yourself from Stinging Insects (Pub. No. 2010-117, April 2010)
- NIOSH Fast Facts: Protecting Yourself from Poisonous Plants (Pub. No. 2010-118, April 2010)
- NIOSH Fast Facts: Protecting Yourself from Ticks and Mosquitoes (Pub. No. 2010-119, April 2010)

29. CDC and OSHA Provides Information to Emergency Workers on Effects of Gulf Oil Spill

Worker (including volunteer) exposures are being reported in conjunction with the recent Gulf Oil Spill. The Centers for Disease Control and Prevention (CDC) warns chemical exposures may include benzene and other volatile organic compounds, oil mist, polycyclic aromatic hydrocarbons, and diesel fumes. Physical hazards may include ergonomic hazards, excessive noise levels, sun exposure and heat stress. Injuries may occur due to slips, trips, and falls on slippery or uneven walking and working surfaces. Other safety hazards are associated with the use of tools, equipment, machinery, and vehicles. Biological hazards include possible exposure to biting or venomous insects or other animals. Psychological hazards may include witnessing traumatic injuries or death, inability to help affected wildlife, and fatigue. Fatigue may result from working in a fast-paced environment, working extended shifts, and doing heavy labor or demanding cognitive tasks such as problem-solving and decision-making. Employers should train oil spill response workers about their potential hazards and safe work practices to prevent and control these hazards. All workers should be provided with the appropriate tools, equipment, personal protective equipment (PPE) and protective clothing needed to perform their job tasks. Workers should be trained in the appropriate care and use of this equipment. PPE should be selected based on identification of the hazards, protective qualities (such as oil resistance) and suitability for the tasks performed. An occupational health and injury surveillance system should be put in place as soon as possible. The prompt reporting of injuries and illnesses should be emphasized. Click here, For more information on Keeping Workers Safe During Oil Spill Response and Cleanup Operations... Readers are also reminded of OSHA's web site regarding "The Application of HAZWOPER to Worksite Response and Cleanup Activities" available here.

30. New Screening Tool to Protect Workers from Skin Allergies

NIOSH Scientists and colleagues reported the development of a simple, rapid, inexpensive test for chemicals that can cause allergic contact dermatitis. The new test has potential for use as a preliminary screening tool to determine whether chemicals used in consumer products and at workplaces might cause skin allergies in people. The full article is available at http://pubs.acs.org/doi/abs/10.1021/tx100003w

31. Protecting Healthcare Staff From Risks Associated With Disinfectants and Cleaners

Disinfectants and cleaners are essential products for preventing disease transmission in healthcare facilities, but they pose risks for work-related eye and respiratory irritation, sensitization, asthma-like symptoms, and respiratory distress for workers. A NIOSH study published in the May 14 Morbidity & Mortality Weekly Report provides the first multistate report on work-related symptoms among healthcare staff in three states, with recommendations for preventing illness and injury. For more information...

32. Three More States Pass Texting Ban for All Drivers

Raising the national compliance above 50%, governors of Wisconsin, Vermont, and Georgia have signed anti-

texting-while-driving bill into law for all drivers. NHTSA developed sample legislation that states can use as a starting point to craft measures to ban texting. The sample bill is patterned after President Obama's October 1, 2009, Executive Order prohibiting federal employees from texting while operating government-owned vehicles and equipment. Last year, more than 200 distracted driving bills were under consideration by state legislatures, and the pace is expected to increase this year. Research compiled by the National Highway Traffic Safety Administration attributed an estimated 6,000 deaths and half-a-million injuries to distracted driving in 2008 alone. Recently, Department of Transportation Secretary Ray LaHood launched pilot programs in New York and Connecticut as part of a "Phone in One Hand. Ticket in the Other" campaign to study whether increased enforcement and public awareness can reduce distracted driving behavior. For more information on distracted driving and the Department of Transportation's work, visit www.distraction.gov.

33. APHA Releases New Report on Hidden Health Costs of Transportation

The American Public Health Association (APHA) recently released "<u>The Hidden Health Costs of Transportation</u>," a new publication that addresses how our nation's current transportation system contributes to today's soaring health costs and impedes progress toward improving public health. In addition, APHA has developed a <u>longer</u> <u>background document</u> that offers more detail for those who may be interested.

34. TZD Provides Vision for Highway Safety

Toward Zero Deaths: A National Strategy on Highway Safety is a data-driven effort to identify and create opportunities for changing American culture as it relates to highway safety. It focuses on developing champions in organizations that directly impact highway safety through engineering, enforcement, education, emergency medical service (EMS), policy, public health, and communications. The TZD Steering Committee is comprised of 10 highway safety stakeholders and includes NASEMSO representation. The TZD initiative is sponsored by the USDOT Federal Highway Administration (FHWA) and the American Association of State Transportation Officials (AASHTO). Several related upcoming webinars have been posted in the Calendar of Events listed below. A Stakeholder Summit will be held in Washington, D.C, August 25-26, 2010, by invitation only. NASEMSO members should contact Mary Hedges at hedges@nasemso.org, if interested in participating.

35. NHTSA Announces RFP for Safety Initiative

NHTSA's Office of EMS is pleased to announce a Request for Proposals (RFP) to develop a Culture of Safety in EMS. This effort will include planning for and facilitating a National EMS "Culture of Safety" National Conference and development and dissemination of a National EMS "Culture of Safety" Strategy. This strategy will include information about "where we are" and "where we want to be" with both patient and EMS personnel safety. Interested parties can view the announcement <u>here</u>.

Current Closing Date for	Jul 09, 2010	Extended approximately three weeks, due to substantive
Applications:	changes to Statement of Work document.	

36. HRSA Announces Plans to Establish FACA Committee to Address Rural Health Designations

The Health Resources and Services Administration (HRSA) has announced plans to establish a comprehensive methodology and criteria for Designation of Medically Underserved Populations (MUPs) and Primary Care Health Professions Shortage Areas (HPSAs) [under sections 330(b)(3) and 332 of the Public Health Service (PHS) Act, respectively], using a Negotiated Rulemaking process. Comments, including requests to participate on the committee, will be considered if received at the address provided in the Federal Register Notice no later than 5 p.m. June 10, 2010. A full description, including includes a listing of proposed organizations and entities that would be represented on the rulemaking committee, is available <u>here</u>.

37. CDC Surveillance for Violent Deaths Now Available

An estimated 50,000 persons in the United State die each year from violence-related injuries. Surveillance of such deaths is necessary to better understand and prevent the occurrence of violent deaths. The National Violent Death Reporting System currently collects data on violent deaths from numerous sources in 19 states. This <u>report</u> presents NVDRS data for 2007 (reflects most recent data available.)

38. HRSA Conducts Customer Satisfaction Survey of EMSC Resource Centers

The Health Resources and Services Administration's Maternal and Child Health Bureau is conducting a Customer Satisfaction Survey of its Resource Centers. The Maternal and Child Health Bureau provides funding for the EMSC National Resource Center and National EMSC Data Analysis Resource Center. The goal is to use the feedback received to help improve the quality of our Resource Centers' services and learn how to improve customer satisfaction. To complete the anonymous survey via the internet, click <u>here</u>.

39. US Fire Administration Launches New Research Website

The page contains descriptions of USFA initiatives currently underway in the areas of fire detection, suppression and notification systems; EMS; first responder health and safety; home electrical wiring; and others. For more information...

EMS topics include:

- <u>Funding Alternatives for EMS and Fire Departments</u>
- EMS Medical Directors Handbook
- EMS Responder Safety Study
- Model Policies and Protocols for EMS Mass Care
- <u>Ambulance and EMS Vehicle Occupant Safety</u>
- EMS Recruitment and Retention
- Emergency Medical Services/Rescue

40. Chief Medical Officer Designation Supported by NEMSMA and IAFC-EMS Section

The National EMS Management Association (NEMSMA) and the International Association of Fire Chiefs –EMS Section (IAFC-EMS Section) express their support of the Chief Medical Officer (CMO) designation offered through the Commission on Professional Credentialing. The program specifies minimum academic achievements and a competency required for designation, and assesses contributions to the emergency medical services field through professional articles, public speaking, teaching, and research, as well as professional memberships and community and civic involvement. Members of both the NEMSMA Board of Directors and IAFC-EMS Section Executive Board hold the CMO credential and are available to assist prospective CMOs in answering questions about the program, determining eligibility, and facilitating portfolio review. For more information...

41. 2009 National EMS Practice Analysis Now Available

The 2009 National EMS Practice Analysis has been completed and is currently being printed. You may purchase a copy for only \$5.00 via the <u>NREMT website</u>. The primary purpose of a practice analysis is to develop a clear and accurate picture of the current practice of a job or profession, in this case the provision of emergency medical care in the out-of-hospital environment. The results of the practice analysis are used throughout the entire National Registry of Emergency Medical Technicians (NREMT) examination development process, which helps to ensure a connection between the examination content and actual practice. The practice analysis helps to answer the

questions, "What are the most important aspects of practice?" and "What constitutes safe and effective care?" It also enables the NREMT to develop examinations that reflect contemporary, real-life practice of out-of-hospital emergency medical care.

42. NRC and George Washington University Release Interfacility Transfer Issue Brief

The National Resource Center and the George Washington University, School of Public Health and Health Services, Department of Health Policy have completed a second legal issue brief related to interfacility transfer issues. These briefs are intended to educate EMSC grantees about the complexity of legal issues to be considered when effecting interfacility transfer guidelines and agreements. The new brief touches on liability issues for both a sending and receiving hospital involved in a transfer, specifically looking at who has legal responsibility for a patient at any given point during a transfer. The brief also presents an overview of the law regarding the point at which liability can attach in the case of health care providers involved in inter-facility transfers, reviews issues of liability related to medical direction provided during interfacility transfer, looks at the liability of a sending hospital for the actions of a receiving hospital's transport team personnel who initiate treatment in the sending hospital prior to the transport, and closes with a brief discussion of Emergency Medical Treatment and Active Labor Act (EMTALA) liability issues that can arise in the case of an interfacility transfer. <u>For more information...</u>

43. NRC Releases New Public Policy Guide

At this year's EMSC Grantee Meeting, the NRC distributed its newest guide within the colorful Rainbow Series. "Public Policy Primer: A Guide on the Legislative Process and Impacting Change at the Federal, State, and Local Levels" is designed to help grantees navigate the world of public policymaking. Grantees will learn how to directly affect change, including how to communicate with elected officials. Although this guide primarily focuses on the federal legislative process, much of the information, tools, and tips are applicable to the state and local policymaking processes. For more information...

44. AHA Announces Strategic Partnership with Nintendo

The American Heart Association (AHA) has announced a strategic relationship with Nintendo of America (NOA) and selected Wii games. The AHA/NOA relationship is focused only on the "active gaming" products of Nintendo. In addition, the American Heart Association and Nintendo will also jointly launch an online information center at <u>www.activeplaynow.com</u>, where visitors can read about the benefits of physically active play, conduct personal assessments and learn more about living a more physically active lifestyle. Nintendo contributed \$1.5 million to the American Heart Association, the majority of the funds for AHA's prevention platform, aimed at educating Americans about heart disease and stroke prevention. A portion of the money funds Nintendo's presence at local Start! Heart Walk events across the country. Additionally, Nintendo is contributing \$350,000 for a multidisciplinary forum of representatives from areas such as health care, research, physical activity, fitness and video gaming. The goal will be to bring together thought leaders, each with a unique perspective, to take a closer look at the synergies and potential benefits of active-play video games and physically active lifestyles, as well as to suggest urgent areas for research in the future. For more information...

45. Nominations Sought for National EMS Awards of Excellence

EMS Magazine and the National Association of Emergency Medical Technicians (NAEMT) have established the National EMS Awards of Excellence program to recognize outstanding achievement in the EMS profession. Other organizations participating include the National Association of EMS Educators (NAEMSE) and the National EMS Management Association (NEMSMA). Award recipients will receive a monetary award, three core program registrations, plus \$900 for travel and lodging at the EMS EXPO/NAEMT Annual Meeting in Dallas, TX, September

28-October 1, and will be recognized by all of the participating organizations. For more information on EMS EXPO, visit <u>www.emsexpo2010.com</u>. Nominations for the 2010 awards will be available on all of the participating organizations' websites, or visit <u>EMSResponder.com/awards</u>. Nomination Deadline: July 1, 2010.

46. Americans May Give Health Care Law a Chance

An AP article was published recently which provides a positive message that "the public seems willing to listen to candidates who would give the overhaul a chance and fix or improve it as needed." According to one Harvard analyst, "Though most Americans still do not favor the law, they tend to be leaning toward candidates who would give it a chance and make some changes, rather than those who would repeal it and start over again." http://news.yahoo.com/s/ap/20100601/ap on go co/us health overhaul repeal

47. The Potential for Airborne Dispersal of *Clostridium difficile* from Symptomatic Patients. Clinical Infectious Diseases 2010;50:1450–1457. Best EL, Fawley WN, Parnell P, Wilcox MH. The high transmissibility and widespread environmental contamination by *Clostridium difficile* suggests the possibility of airborne dissemination of spores. Authors measured airborne and environmental *C. difficile* adjacent to patients with symptomatic *C. difficile* infection (CDI). Among the first 50 patients, who were examined for 1 hour each, 12% had air samples that tested positive for *C. diff;* patients with active symptoms were more likely to test positive. In a more intensive study of 10 patients with active CDI over a 10-hour period, *C. diff* was detected in the air near 7 of the 10 patients and on surfaces near 9 of the 10. 60% of patients had air and surface environments that were positive for *C. difficile*. For more information...

48. The LA story: What happened after a new policy allowing paramedics to forgo resuscitation attempts in prehospital cardiac arrest. Resuscitation. Volume 81, Issue 6, Pages 685-690 (June 2010) Grudzen CR, Hoffman JR, Koenig WJ, Boscardin J, Lorenz KA, Asch SM. Background: Despite potential harm to patients, families, and emergency personnel, a low survival rate, and high costs and intensity of care, attempting resuscitation after prehospital cardiac arrest is the norm, unless there are signs of irreversible death or the presence of a valid, stateissued DNR. Objective: To determine whether there was a change in the rate of forgoing resuscitation attempts in prehospital cardiac arrest after implementation of a new policy allowing paramedics to forgo resuscitation based on a verbal family request or the presence of certain arrest characteristics. Methods and results: All prehospital run sheets for cardiac arrest in Los Angeles County were reviewed for the first seven days of each month August 2006–January 2007 (pre-policy) and January–June 2008 (post-policy). Paramedics were more likely to forgo resuscitation attempts after the policy change (13.3% vs. 8.5%, p < 0.01). In addition, the percentage of patients with documented signs of irreversible death decreased post-policy, from 50.4% to 35.8%, p < 0.01. After adjustment for potential confounders (patient demographics, clinical characteristics and EMS factors), as well as exclusion of patients with signs of irreversible death, paramedics are significantly more likely to forgo a resuscitation, and less likely to attempt resuscitation, after the policy change (OR 1.67 [95% CI 1.07, 2.61], p = 0.024). Conclusions: Paramedics are more likely to forgo, and less likely to attempt, resuscitation in victims of cardiac arrest after implementation of a new policy. There was also an associated decrease in the percentage of patients who had signs of irreversible death, which might reflect a change in paramedic behavior. For more information...

UPCOMING EVENTS

STATEWIDE EMS CONFERENCES

Symposium by the Sea 2010. Sponsored by EMLRC and FCEP. .July 29 - August 1, 2010 Boca Raton, FL The Boca Raton Resort & Club. Go to <u>http://www.emlrc.org/sbs2010.htm</u> for more information.

Pennsylvania State EMS Conference. September 17-18 (with preconference sessions on September 15-16), 2010 at the Lancaster County Convention Center in Lancaster, PA. More information can be found at <u>www.pehsc.org</u>.

TN 9th Annual Update in Acute & Emergency Care Pediatrics Conference. October 1-2, 2010. Wilderness At the Smokies Resort, Sevierville, Tennessee For more info go to: <u>www.tnemsc.org</u>

PULSE CHECK 2010, the 55th Annual Educational Conference & Trade Show of the NYS Volunteer Ambulance & Rescue Association, will be held Thursday evening September 30, 2010 to Sunday morning October 3, 2010 at the Holiday Inn Albany on Wolf Road. Information is posted on the Association's web site at <u>www.nysvara.org</u>.

New Jersey Statewide Conference on EMS, Atlantic City November 11th - 13th 2010. For more information visit: www.njemsconference.com

New Jersey METI Games. November 11th - 12th, 2010. For more information visit <u>www.njemsconference.com</u>.

National Conferences and Special Meetings

Institute of Medicine Forum on Medical and Public Health Preparedness for Catastrophic Events. June 9-10, 2010. Washington, DC. See <u>http://www.iom.edu/en/Activities/PublicHealth/MedPrep.aspx</u> for more information.

*Safer Infrastructure Webinar: How can we assure safer infrastructure on public roads in the United States? June 10, 12:30 – 2 PM ET

https://www.nhi.fhwa.dot.gov/resources/webconference/web_conf_learner_reg.aspx?webconfid=20432

*Safer Vehicles Webinar: How can we develop and implement new vehicle safety initiatives in the U.S.? June 21, 1:30 - 3:00 PM ET

https://www.nhi.fhwa.dot.gov/resources/webconference/web_conf_learner_reg.aspx?webconfid=20433

EMS Education Implementation Webinar. June 23, 2010 @ 3 pm. "**Developing Standards Based Instruction**" More info including registration link at <u>www.nasemso.org</u> as speakers and topics are confirmed.

*Road User Safety Webinar: How can we promote new road user safety efforts in the United States? *June 30,* 1:30 - 3:00 PM ET https://www.nhi.fhwa.dot.gov/resources/webconference/web_conf_learner_reg.aspx?webconfid=20434

*"Accreditation is not a Four Letter Word." EMS Program Accreditation Workshops presented by NAEMSE/CoAEMSP. June 25-26, 2010 in Philadelphia, PA. For more information, go to <u>http://www.naemse.org/accreditation/</u>.

NAEMSE EMS Instructor Course. June 25 - 27, 2010, Sweetwater, TX. This course addresses foundations of the EMS classroom and is designed to help instructors become more effective and efficient educators. For more information, or to register for the May course, visit: <u>http://www.naemse.org/instructor-course/</u>

EMSC Town Hall Conference Calls 3:30 pm to 5:00 pm (eastern) July 14, 2010. The local number is (202) 476-6338 or call toll-free dial (877) 355-6338 and enter EMSC (3672) for the meeting ID#.

EMS Education Implementation Webinar. July 21, 2010 @ 3 pm. "How Does Program Accreditation Improve the Quality of EMS Education?" More info including registration link at <u>www.nasemso.org</u> as speakers and topics are confirmed.

Pinnacle 2010. July 26-30, 2010. Sheraton San Diego Hotel and Marina. San Diego, CA For more information, go to <u>www.pinnacle-ems.com</u>.

*6th International Roundtable on Community Paramedicine. August 9-13, 2010, Vail CO. For more information, go to <u>http://www.ircp.info/</u>. CALL FOR ABSTRACTS STILL OPEN!! Deadline for submission is June 15, 2010 at 5 pm MDT. For more information, please click <u>here</u>.

Rural and Frontier EMS and Trauma Summit at the Divide. August 11-13, 2010. Vail, Colorado. Join us for the fourth installment in the Summit Series. This Summit will have something for everyone, from federal and state policy makers to local EMS managers and hospital administrators to individual EMTs. This year's theme will be Beyond Old Boundaries – Exploring New Frontiers. With the co-location of the Summit at the Divide with the International Roundtable on Community Paramedicine (www.ircp.info), we will have the opportunity to stretch our imaginations about what could be for rural EMS and trauma systems. Building on last years' discussions of lessons learned from the theaters of conflict, regionalization and the use of telemedicine to overcome barriers of distance, we will explore additional options for improving access to emergency care in rural and frontier areas. A strong roster of speakers from the U.S. will be augmented by international experts both at the podium and in the audience. Attendees of the International Roundtable on Community Paramedicine for the Summit at the Divide complimentary attendance at the International Roundtable on Community Paramedicine morning sessions on Wednesday, August 11. Register at http://eu.montana.edu/summit

*5th Annual Disaster Planning for Hospitals Conference. August 12-12, 2010 in Washington DC. To view the complete agenda, please visit <u>http://www.worldrg.com/disaster</u>. Use promotional code "GPN752" and priority code "HW10075-82329" to receive an additional \$300 discount by calling 800-647-7600, e-mailing <u>info@worldrg.com</u> or visiting <u>http://www.worldrg.com/disaster</u>. To view the complete agenda, please visit our website <u>http://www.worldrg.com/disaster</u>.

*"Accreditation is not a Four Letter Word." EMS Program Accreditation Workshops presented by NAEMSE/CoAEMSP. August 20-21, 2010 in San Antonio, TX. For more information, go to http://www.naemse.org/accreditation/.

EMS Education Implementation Webinar. August 25, 2010 @ 3 pm. "Identifying Methods to Measure Cognitive, Psychomotor, and Affective Competency" More info including registration link at <u>www.nasemso.org</u> as speakers and topics are confirmed.

15th Annual NAEMSE Symposium. September 7-12, 2010. Renaissance Hotel & Convention Center in Schaumburg, IL. For more information, go to <u>http://www.naemse.org/symposium</u>.

EMS Education Implementation Webinar. September 15, 2010 @ 3 pm. "Progression/Regression Strategies: Models of Success." More info including registration link at <u>www.nasemso.org</u> as speakers and topics are confirmed.

ENA Annual Meeting. San Antonio Convention Center, San Antonio, TX. General Assembly September 22-34, Scientfic Assembly September 23-25, 2010. Go to <u>www.ena.org</u> for more information.

NAEMT Annual Meeting at EMS EXPO 2010 - Sept. 27 – Oct. 1, 2010. Dallas Convention Center, Dallas, TX. For more information, go to <u>http://www.firehouseevents.com/</u>.

ACEP Scientific Assembly 2010. September 28 - October 1, 2010. Mandalay Bay, Las Vegas, NV. For more information, go to <u>www.acep.org</u>.

Institute of Medicine Forum on Medical and Public Health Preparedness for Catastrophic Events. October 6-7, 2010. Washington, DC. See <u>http://www.iom.edu/en/Activities/PublicHealth/MedPrep.aspx</u> for more information.

NASEMSO Annual Meeting. October 10-15, 2010, Norfolk Marriott Waterside/Waterside Convention Center Norfolk, Virginia. More info available at <u>www.nasemso.org</u>. Sponsorship and exhibitor information <u>now available</u>.

2010 Air Medical Transport Conference October 11-13, 2010. Ft. Lauderdale, FL. For more information, go to www.aams.org.

EMS Education Implementation Webinar. October 20, 2010 @ 3 pm. "System Update: 2010 NASEMSO Survey Results." More info including registration link at <u>www.nasemso.org</u> as speakers and topics are confirmed.

EMS Education Implementation Webinar. November 22, 2010 @ 3 pm. "The Role of National Certification in Implementing the EMS Education Agenda." More info including registration link at <u>www.nasemso.org</u> as speakers and topics are confirmed.

ECCU 2010. Emergency Cardiac Care Update, December 8-11, 2010. San Diego, CA. Sponsored by the Citizen CPR Foundation. For more information, go to <u>http://eccu2010.com/</u>.

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

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