



Washington Update

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June 30, 2013

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1. Pew Charitable Trusts Spotlights EMS Challenges

NASEMSO Executive Director, Dia Gainor is quoted in a new article by The Pew Charitable Trusts that highlights issues confronting EMS. In a recent profile, *Stateline* characterizes the nation's emergency medical services system as one subject to public budget cuts, a lack of a lead federal agency, differing state laws and requirements, and varying pay rates for pre-hospital providers, all of which creates a fragmented and underfunded system of care. The authors note that the relative "newness" of emergency medical services as a public service further hinders its funding and operations. Advocates, however, hope that large-scale disasters and emergencies, like the Boston Marathon bombing, will increase both the focus on and finances for this critical public benefit. Read [Front-Line Heroes Subject to Budget Cuts, Pay Disparity](#).

2. NASEMSO Provides Revised Talking Points on Model Interstate Compact Project

The Model Interstate Compact for EMS Personnel Licensure for State Adoption Project is one example of how EMS is able to evolve and emerge as a health care discipline that parallels other allied health professions. NASEMSO continues to lead the effort to establish a Model Interstate Compact and has revised a description of the project through Talking Points featured on the NASEMSO web site. [For more information...](#)

3. AVL Committee Provides KKK-A-1822F Ambulance Specs Change Notice

The US General Services Administration has just issued a change notice to the KKK specs. The change notice affects the language in sections related to:

- Payload capacity, calculation and documentation
- Doors
- Oxygen system and suction
- Type II ambulance body

These changes are effective July 2, 2013. You can download the [change notice](#) at the NASEMSO Agency & Vehicle Committee ["Current Resources"](#) web page.

4. ASTHO Legal Barriers Project Provides Toolkits for State Health Officials

The Association of State and Territorial Health Officials (ASTHO) has developed a series of toolkits that address the key information needs of public health officials in understanding and using legal authorities to prepare for and respond to public health emergencies. The toolkits and their component documents are designed to be used as a resource to assist in education, training, and planning activities to prepare for emergencies, as well as to serve as a quick reference resource during an emergency response to an event. These documents are specifically designed to address the different needs of discrete audiences within a state health agency. For example, the Scope of Practice

Toolkit reviews key issues regarding the allowable scope of practice of various health care professionals and expanding that scope during emergencies. [For more information...](#)

5. RWJF and UM Report Characterizations of Public Health Nurse Workforce

Public health nurses comprise the largest occupational group of public health workers and play a central role in the delivery of essential public health services to communities. Despite the importance of the work of nurses in assuring population health, little is known about the size, composition, and educational/training background of the public health nurse workforce. The University of Michigan (UM) Center of Excellence in Public Health Workforce Studies conducted a national survey of public health nurses at the organizational-level and individual-level to collect information on workforce size, educational background, job titles, program areas, job functions, recruitment, retention and retirement intention of public health nurses working in state and local health departments. Read the report, [Enumeration and Characterization of the Public Health Nurse Workforce Findings of the 2012 Public Health Nurse Workforce Surveys](#), on the Robert Wood Johnson Foundation (RWJF) web site.

6. FirstNet to Issue RFIs in Near Future

The First Responder Network Authority (FirstNet) plans to issue multiple requests for information (RFIs) within the next few weeks. The RFIs will request detailed information regarding potential deployment options for two crucial portions of the Long-Term Evolution (LTE) network: the radio access network (RAN) and core network. The RFIs will be posted on www.fedbizopps.gov. “The upcoming RFIs are an important step in the FirstNet information gathering process, which will enable us to continue toward our mission of delivering a nationwide network dedicated to public safety,” said Bill D’Agostino, FirstNet General Manager. “I encourage all those interested in responding to be creative and detailed in their comments. As I have said in the past, achieving our mission will require an unprecedented amount of public and private partnership, and these RFIs will help lay the foundation for that to happen.” All RFI responses, as well as information provided by stakeholders participating in the FirstNet ongoing series of regional workshops and the results of state consultations planned this fall, will be used to inform the development of FirstNet’s nationwide deployment plan. This plan, in turn, will be presented to the states for their review and decisions.

7. ICD-10 Deadline is October 1, 2014

The compliance deadline for ICD-10 is October 1, 2014. CMS Administrator Marilyn Tavenner has affirmed the ICD-10 deadline and encourages providers, payers, and vendors across the health care industry to prepare to use the new codes for services provided on or after October 1, 2014. The [CMS website](#) offers a variety of resources targeted to [payers](#), [providers](#), [vendors](#), and others to help you with your transition to ICD-10. Timelines, checklists, fact sheets, and in-depth guides are all available to help you and your organization plan for a smooth transition.

Keep Up to Date on ICD-10 Visit the CMS [ICD-10 website](#) for the latest news and resources to help you prepare for the October 1, 2014, deadline.

8. NIOSH to Host Webinar on Respirator Fit Test Panels

The National Institute for Occupational Safety and Health (NIOSH) is holding an interactive webinar to provide a description and results of a recent NIOSH study to assess the fluctuation between bivariate panels used in respirator fit testing. Employers rely on NIOSH-approved respirators to protect employees from airborne toxic contaminants. The study that will be discussed consisted of testing five N95 filtering facepiece and five elastomeric respirators with N95 filters on three different 40-member even subject distribution panels and 3 different 35-member U.S. respirator user population-based panels. Two ambient aerosol inward leakage tests on each respirator were performed on the subjects while performing the following exercises: Normal Breathing, Deep

Breathing, Turning Head Side to Side, Moving Head Up and Down, Reciting the Rainbow Passage, Reaching for the Floor and Ceiling, Grimacing, and Normal Breathing.

Variability of Respirator Fit Test Panels: NIOSH Study Results

Tuesday, July 23, 2013

1:00 to 3:00 EDT

[Additional information](#) and

<http://www.cdc.gov/niosh/nppt/resources/pressrel/letters/ltr-07232013.html>

9. WISER for Android 2.0 Now Available

The National Library of Medicine's Wireless Info System for Emergency Responders (**WISER**) for Android 2.0 is now available. WISER now fully integrates content from the **Chemical Hazards Emergency Medical Management** (CHEMM) website. This integration includes:

- New hospital provider and preparedness planner profiles
- Acute care guidelines for 6 known mass casualty agents/agent classes
- The addition of a wealth of CHEMM reference material
- CHEMM Intelligent Syndrome Tool (CHEMM-IST), a new help identify tool designed to diagnose the type of chemical exposure after a mass casualty incident
- Emergency Response Guidebook data is now updated to the ERG 2012; WISER for Android includes a custom ERG 2012 tool

WISER for Android can be downloaded and installed directly from the [Google Play Store](#).

10. New GAO Report Highlights the Needs of Kids in CBRN Incidents

In a new report to the House Committee on Energy and Commerce, the Government Accountability Office (GAO) was asked about efforts to address the needs of children in the event of a CBRN incident. This report examines (1) the percentage of CBRN medical countermeasures in the SNS that are approved for pediatric use; (2) the challenges HHS faces in developing and acquiring CBRN medical countermeasures for the pediatric population, and the steps it is taking to address them; and (3) the ways that HHS has addressed the dispensing of pediatric medical countermeasures in its emergency response plans and guidance, and ways that state and local governments have addressed this issue. View [GAO-13-438](#).

11. CDC Releases Updated West Nile Virus Guidelines

On June 14, CDC released updated guidelines, [West Nile Virus in the United States: Guidelines for Surveillance, Prevention, and Control](#). This is the first update to the Guidelines since 2003 and provides guidance for communities and public health agencies. In addition to the new Guidelines, CDC's West Nile virus [website](#) was updated, providing [prevention information](#), [resources for healthcare providers](#), and [resources for vector control professionals](#). The website also includes the most recent WNV [surveillance data](#).

12. IOM Focuses on Children and Families Needs Following Disaster

The Institute of Medicine's (IOM) Forum on Medical and Public Health Preparedness for Catastrophic Events recently hosted a workshop entitled "Preparedness, Response and Recovery Considerations for Children and Families after a Disaster". The public workshop assembled representatives from federal, state, local, public health and health care sectors, as well as schools, community organizations, and other non-traditional partners that have an interest in better preparing communities, especially children, for emergencies. The event focused on past highlighted gaps and recommendations and their progress, best practices, and emerging resilience strategies and

recovery measures. The workshop also highlighted opportunities to improve partnerships and coalitions with a focus on the needs of children and families. Audio presentations and slides are now available on the Forum's [web site](#).

13. WHO Posts Revised Guidance for Pandemic Influenza

The World Health Organization (WHO) has published [Pandemic Influenza Risk Management: WHO Interim Guidance](#). The interim guidance replaces the 2009 guidance, taking into account lessons learned from H1N1. The document recommends Member States develop flexible pandemic plans that account for the local situation. It also makes changes in how global pandemic phases are determined and communicated. Click for [Slide show summary](#) of the interim guidance from *Infection Control Today* (registration required).

14. NOAA Predicts Active 2013 Atlantic Hurricane Season

NOAA's Climate Prediction Center is forecasting an active or extremely active Atlantic hurricane season this year. For the six-month hurricane season, which began June 1, NOAA's Atlantic Hurricane Season Outlook says there is a 70 percent likelihood of 13 to 20 named storms (winds of 39 mph or higher), of which 7 to 11 could become hurricanes (winds of 74 mph or higher), including 3 to 6 major hurricanes (Category 3, 4 or 5; winds of 111 mph or higher). These ranges are well above the seasonal average of 12 named storms, 6 hurricanes and 3 major hurricanes. NOAA's seasonal hurricane outlook is not a hurricane landfall forecast; it does not predict how many storms will hit land or where a storm will strike. Forecasts for individual storms and their impacts will be provided throughout the season by NOAA's [National Hurricane Center](#).

15. Communicating with the Public in a Radiological Disaster

The National Alliance for Radiation Readiness, is hosting a webinar on Tuesday, July 30, 2013 2:00-3:00 pm EST to discuss the ways to communicate with the public during a radiological disaster. Our presenter will be Leeanna Allen, MPH, MSCHES a Health Education Specialist with the Oak Ridge Institute for Science and Education who has been working with the CDC Radiation Studies Branch on radiological and nuclear terrorism preparedness communication and training initiatives. Learn more and register for the webinar on the [NARR clearinghouse](#).

16. Senate Hearing Focuses on Effectiveness of Preparedness Grants

Since September 11, 2001, the nation has invested almost \$40 billion in equipment, training, and exercising and in order to enhance and sustain essential capabilities, assessments must be done to determine our current level of preparedness and identify gaps that will inform future investment of tax-payer dollars. A recent Senate hearing focused on measuring of the impact of FEMA grants since 9/11 and the role Federal, state, and local governments play in developing metrics to assess preparedness for natural and manmade events. FEMA Deputy Administrator Tim Manning, describes the Department's efforts to establish a National Preparedness Grant Program (NPGP) consolidate current State and local preparedness grant programs into one overarching program (excluding EMPG and Assistance to Firefighters Grants programs) to enable grantees to collaboratively build and sustain core capabilities towards achieving the National Preparedness Goal. The consolidated NPGP grant program would fund specific resources to meet 31 core capabilities described in the National Preparedness Goal and help FEMA measure progress toward achieving overall preparedness, and these core capabilities were developed against specific threats and hazards. The Department of Homeland Security (DHS) soon will send a formal legislative proposal to the House and Senate for implementation of the NPGP program. View the archived event and download individual testimonies for *Are We Prepared? Measuring the Impact of Preparedness Grants Since 9/11*, by clicking [here](#).

17. CDC Warns of Novel Coronavirus—MERS-CoV

The Centers for Disease Control and Prevention (CDC) has issued a warning about Middle East Respiratory Syndrome (MERS) is a viral respiratory illness caused by a coronavirus called “Middle East Respiratory Syndrome Coronavirus” (MERS-CoV) first reported in Saudi Arabia in 2012. The virus has caused severe illness in most infected people, and about half of them have died. It spreads from person to person and has spread between countries. MERS-CoV is not the same coronavirus that caused severe acute respiratory syndrome (SARS) in 2003. A Patient Under Investigation (PUI) for MERS-CoV is a person with-

- an acute respiratory infection, which may include fever ($\geq 38^{\circ}\text{C}$, 100.4°F) and cough; AND
- suspicion of pulmonary parenchymal disease (e.g., pneumonia or acute respiratory distress syndrome based on clinical or radiological evidence of consolidation); AND
- history of travel from the [Arabian Peninsula or neighboring countries*](#) within 14 days; AND
- not already explained by any other infection or etiology, including all clinically indicated tests for [community-acquired pneumonia**](#) according to local management guidelines.

The CDC has requested assistance from the EMS community to look for travelers from the Middle East and the Arabian Peninsula who are ill with fever plus cough or difficulty breathing. [For more information...](#)

In related news, the World Health Organization (WHO) has updated its guidance for surveillance for Middle East respiratory syndrome coronavirus (MERS- CoV) that were first published in late 2012. WHO will continue to update these recommendations as new information becomes available. The *Interim Revised Surveillance Recommendations* can be found [here](#).

18. GAO Suggests Performance Measures and Targets to Monitor Preparedness Goals

The US Department of Health and Human Services (HHS) provides funding to the 50 states and 12 municipalities, territories, and freely associated states, primarily through ASPR’s Hospital Preparedness Programs (HPP) and CDC’s PHEP cooperative agreements, to help build capabilities to respond to emergencies such as hurricanes, pandemics, or terrorist events. The 62 awardees are to use this funding to help achieve the HPP goals of strengthening hospital preparedness and medical surge capacity and the PHEP goal of strengthening public health preparedness, and they must meet certain application, financial, and reporting requirements. The Government Accountability Office (GAO) was asked about the effects of federal support on state and local response capabilities. GAO (1) assessed awardee progress in meeting HPP goals and how ASPR measures that progress, (2) assessed awardee progress in meeting the PHEP goal and how CDC measures that progress, and (3) identified the mechanisms HHS uses to ensure that awardees are meeting application, financial, and reporting requirements. GAO reviewed HPP and PHEP guidance, performance measures, and other documents; interviewed HHS officials; and analyzed HPP and PHEP data for fiscal years 2007 through 2011. The results of the study are now available in *Improvements Needed for Measuring Awardee Performance in Meeting Medical and Public Health Preparedness Goals GAO-13-278*. [For more information...](#)

19. Provide Direct Feedbacks to FEMA on NIMS Doctrine Through IdeaScale Campaign

As an integral component of the process to update NIMS doctrine, FEMA’s National Integration Center (NIC) is soliciting public feedback from the whole community on proposed changes to the NIMS doctrine. To accomplish this, the NIC will engage in a multi-stage, robust stakeholder engagement webinars, and two distinct national and public comment periods. The NIC has initiated an IdeaScale campaign specific to the NIMS doctrinal review and update. If you are not familiar, IdeaScale provides a forum for all stakeholders to like or dislike current ideas. Stakeholders can provide suggestions and feedback regarding major issues or concerns. Inputs on this website

will help shape the public engagement topics moving forward, and will be incorporated, as appropriate, in updated drafts of NIMS. At present, the NIC have organized potential areas of change into the following seven themes:

1. NIMS Review and Update
2. NIMS Relationship to the National Preparedness System
3. Inclusion of Whole Community concepts in the NIMS
4. Expanding the discussion on national mutual aid in the NIMS
5. Expanding the discussion on incident support, coordination, and management in the NIMS
6. Inclusion of language discussing the use of decision support tools and technology into the NIMS
7. Expanding the discussion on emergency communications

The IdeaScale NIMS Update Campaign is now active and the NIC requests comments on identified themes, topic areas and suggestions in order to inform the review and refinement effort. Please submit feedback and comments within 30 days of the publication of proposed areas of change via IdeaScale. [For more information...](#)

20. AANS Publishes Revised Guidelines for Acute Spinal Cord Injury

The American Association of Neurological Surgeons (AANS) has published updated *Guidelines for the Management of Acute Cervical Spine and Spinal Cord Injury*. This work describes the “state of the literature” with regard to the treatment of patients with cervical spine and spinal cord injuries and is a useful guide to help clinicians make important decisions in the care of these patients. The entire set of guidelines is included as a free supplement to the March 2013 issue of *Neurosurgery*. [For more information...](#)

21. Interactive Map: State Laws Concerning Sport-Related Concussions among Youth

By the beginning of 2013, a total of 49 states and the District of Columbia had legislation to prevent concussions and to limit further injury to student athletes who sustain concussions, with most of these laws mandating that student athletes who experience a concussion be removed from play and obtain a health care provider’s permission before returning to play. [For more information...](#) Please note: To see the components of your state’s law, hover over it with your cursor. To read the law itself, click on the state to view the state’s legislation page.

22. 2014 EMSC Meeting Marks Program's 30th Anniversary

Mark your calendars! The dates for next year's EMS for Children Program Meeting have been finalized. The meeting will be held Tuesday, July 28 through Friday, August 1, 2014, at the Renaissance Arlington Capital View Hotel. More information about the meeting and how to make hotel reservations will be released in the spring of 2014.

23. KidsAndCars.org Offers Practical Advice on Preventing Childhood Emergencies in Vehicles

According to the National Highway Traffic Safety Administration, heatstroke is the leading cause of non-crash-related vehicle fatalities of children younger than 14. Summer hasn't even arrived, and yet already this year seven children have died of heat stroke after being left in vehicles. Through the "Look Before You Lock" educational campaign, the first of its kind, KidsAndCars.org has distributed more than 300,000 [information cards](#) to birthing hospitals nationwide. KidAndCars.org promotes awareness among parents, caregivers and the general public about the dangers to children, including backover and frontover incidents, and heat stroke from being inadvertently left in a vehicle. The organization works to prevent tragedies through data collection, education and public awareness, policy change, product redesign and survivor advocacy.

24. Motorcycle Deaths Climb as States Repeal Helmet Laws

The number of motorcyclists killed in traffic accidents jumped 9 percent last year, a disturbing increase in a 15-year trend. Warm weather in the spring of 2012 and a stronger economy likely prompted motorcyclists to hit the road more often, but the trend has seen motorcyclist deaths increase almost every year, wrote Dr. James Hedlund for the Governors Highway Safety Association, a group of state traffic safety agencies. To read the full article, please click [here](#).

25. IOM Research Agenda to Reduce the Threat of Firearm-Related Violence

In 2010, more than 105,000 people were injured or killed in the United States as the result of a firearm-related incident. Recent, highly publicized, tragic mass shootings in Newtown, CT; Aurora, CO; Oak Creek, WI; and Tucson, AZ, have sharpened the American public’s interest in protecting our children and communities from the harmful effects of firearm violence. While many Americans legally use firearms for a variety of activities, fatal and nonfatal firearm violence poses a serious threat to public safety and welfare. In January 2013, President Barack Obama issued 23 executive orders directing federal agencies to improve knowledge of the causes of firearm violence, what might help prevent it, and how to minimize its burden on public health. One of these orders directed the Centers for Disease Control and Prevention (CDC) to, along with other federal agencies, immediately begin identifying the most pressing problems in firearm violence research. The CDC and the CDC Foundation asked the Institute of Medicine (IOM), in collaboration with the National Research Council, to convene a committee tasked with developing a potential research agenda that focuses on the causes of, possible interventions to, and strategies to minimize the burden of firearm-related violence. The committee’s proposed research agenda focuses on the characteristics of firearm violence, risk and protective factors, interventions and strategies, the impact of gun safety technology, and the influence of video games and other media. [For more information...](#) (Workshop presentations are available [here](#).)

26. Foxx to Serve as Next Transportation Secretary

Charlotte (NC) Mayor Anthony Foxx has been unanimously approved by the US Senate to serve as the Transportation Secretary to replace Ray LaHood. Safety will be his top priority, Foxx told the Senate Commerce, Science and Transportation Committee at a nomination hearing a month ago. As an attorney, he previously worked for the US Department of Justice and worked as an aide to the House Judiciary Committee. [Read more...](#)

In related news, the U.S. Senate and House Appropriations Committees both voted to approve their Fiscal Year 2014 transportation spending bills. However, differences between the [House](#) and [Senate](#) versions of the legislation have already dimmed hopes across much of the transportation community that Congress will be able to reach agreement on a final bill. Without an agreement between the two bodies, Congress would likely pass another continuing resolution, funding programs at current or similar levels next fiscal year.

27. CFR Celebrates 75th Anniversary

June, 2013 marks the 75th anniversary of the Code of Federal Regulations (CFR). The Code of Federal Regulations (CFR) is an annual codification of the general and permanent rules published in the Federal Register by the executive departments and agencies of the Federal Government. The purpose of the CFR is to present the official and complete text of agency regulations in one organized publication and to provide a comprehensive and convenient reference for all those who may need to know the text of general and permanent Federal regulations. The CFR is divided into 50 titles representing broad areas subject to Federal regulation. For example, to locate the current regulations pertaining to CFR Title 42, Public Health, click [here](#), Title 44, Emergency Management and Assistance, click [here](#), or Title 49, Transportation, click [here](#). Several interesting book titles from the US

Government Bookstore are currently on sale at 50% off. Check out Healthcare and Medical overstock [here](#) or Emergency Response overstock [here](#).

28. New GAO Report Highlights Grantee Compliance with CDC Policies on Lobbying

Language included in Section 503 of Division F, Title V, of the FY12 Consolidated Appropriations Act (P.L. 112-74) reinforces and (in selected respects) expands long-standing provisions governing the use of appropriated funds by CDC and its grantees for advocacy, lobbying, and related activities. A new report from the Government Accountability Office (GAO) explains grantee compliance within the Communities Putting Prevention to Work (CPPW) program using funds appropriated to the Department of Health and Human Services (HHS) by the American Recovery and Reinvestment Act of 2009 (Recovery Act). The CDC AR-12 policy memo is available [here](#). It is important to note that this guidance addresses the legal aspects of policy work. Even when operating within what could be argued are legal limits, grantees (such as state health department recipients) should pay continuing attention to the policy positions they adopt, to Congressional intent regarding the use of appropriations, and the appropriateness of activities paid for using federal funds. The GAO Report is an informational document that may be applicable to other CDC grantee award programs as it describes the process for auditing compliance applied to the CPPW program. [For more information...](#)

29. CRS Offers Clarification of Potential Employer Penalties Under ACA

The Patient Protection and Affordable Care Act (ACA, P.L. 111-148), as amended, increases access to health insurance coverage, expands federal private health insurance market requirements, and requires the creation of health insurance exchanges to provide individuals and small employers with access to insurance. To ensure that employers continue to provide some degree of coverage, ACA includes a “shared responsibility” provision. In a recent report to members of Congress, the Congressional Research Service (CRS) offers an explanation on employer-related obligations and potential penalties under the ACA. The fire and EMS communities continue to monitor proposed rules as they relate to part-time employees and volunteer services. Click [here](#) to download the report, *Potential Employer Penalties Under the Patient Protection and Affordable Care Act (ACA)*.

30. 2014 Federal Budget Proposal Shifts Priorities at CDC

According to the American Association for the Advancement of Science (AAAS), President Obama’s 2014 budget request offers a mixed picture for the Centers for Disease Control and Prevention (CDC). CDC’s budget continues to trend downward, as it has over the last several years, but not every program will suffer. The President is requesting \$6.6 billion for CDC, a drop of \$270 million from 2012. In particular, the administration touted extra money for emerging and zoonotic infectious disease initiatives, with a respectable increase of \$70 million to \$432 million. Forty million dollars would go to an “Advanced Molecular Detection Initiative,” which aims to do a better and quicker job of detecting and responding to threatening pathogens. An increase of \$35 million for injury prevention and control includes money for gun violence prevention research, which was touted by the President in January. None of these dollars are new, however. Losers in CDC’s budget include chronic disease prevention efforts and public health preparedness and response. The preparedness cuts would reduce funding to local and state health departments. The 2014 Proposed Federal Budget can be found [here](#).

In related news, the Department of Homeland Security (DHS) would receive \$38.9 billion in discretionary funding in fiscal 2014 under a bill recently approved by the House Appropriations Committee. The funding would come in at \$617.6 million below the fiscal 2013 enacted level but about \$981 million above the post-sequestration level as estimated by the Congressional Budget Office. The President’s fiscal 2014 request for DHS would provide \$34.9 million more in discretionary funds to the department than the bill would. View the House Bill [here](#).

31. New GAO Reports Focus on Federal Performance Management Activities

The federal government faces significant and long-standing fiscal, management, and performance challenges. A new report from the Government Accountability Office (GAO) is the latest in a series in which the GAO reviews implementation of the Government Performance and Results Modernization Act (GPRM). In the report, GAO assesses the executive branch’s progress and effectiveness to address key governance challenges. To address these objectives, GAO reviewed the act, related OMB guidance, and past and recent GAO work related to federal performance management and the act; and interviewed OMB staff. In addition, to determine the extent to which agencies are using performance information and several of the act’s requirements to improve agency results, GAO surveyed a stratified random sample of 4,391 federal managers from 24 agencies, with a 69 percent response rate which allows GAO to generalize the results. The survey reveals that the majority of government managers have difficulty determining performance measures, in part, because different parties use different definitions to measure performance. For 54.4 percent of workers, there was a very great, great or moderate hindrance in the difficulty it take to obtain valid and reliable data and 48.8 percent said there was a difficulty in obtaining data in time for it to be useful. For 41.2 percent of workers, there was difficulty in determining how to use performance information to improve the program in which they were working. And 33.3 percent surveyed had concern that performance information could be used against their program or agency. Click [here](#) to read GAO-13-518 and [here](#) to read the supplement (GAO-13-519SP), which includes the results of the survey. State officials are also encouraged to visit performance.gov to find more information on using goals to improve performance and accountability, measure and analyze performance, and use data-driven reviews to improve results.

32. New CDC Toolkit Addresses Patient Notification Issues Following Unsafe Medical Practices

The Centers for Disease Control and Prevention (CDC) recently released a new toolkit to assist health departments and healthcare facilities with notifying patients after an infection control lapse or potential disease transmission during medical care. The toolkit includes the key steps a healthcare facility or public health department should take to initiate a patient notification and provides resources to assist with creating notification documents, planning media and communication strategies, establishing communication resources to support patient notification, and releasing notification letters. [For more information...](#)

33. NTSB Targets Impaired Driving

The National Transportation Safety Board (NTSB) recently released a set of targeted interventions to put the country on a course to eliminate alcohol-impaired driving crashes. The 19 recommendations call for stronger laws, swifter enforcement and expanded use of technology. Each year in the United States, nearly 10,000 people are killed in crashes involving alcohol-impaired drivers and more than 173,000 are injured, with 27,000 suffer incapacitating injuries. Since the mid-1990s, even as total highway fatalities have fallen, the proportion of deaths from accidents involving an alcohol-impaired driver has remained constant at around 30 percent. In the last 30 years, nearly 440,000 people have died in alcohol related crashes. The report, “Reaching Zero: Actions to Reduce Alcohol-Impaired Driving,” is available at <http://go.usa.gov/TeQe>.

34. Register Now for Free July 10 AHRQ TeamSTEPPS® Webinar on Use of Simulation

AHRQ will host a free 1-hour Web conference on the use of the Agency’s teamwork training program, TeamSTEPPS® and medical simulation on July 10 from 1:00 p.m. to 2:00 p.m. ET. James Korndorffer, M.D., Medical Director at the Tulane Center for Advanced Medical Simulation and a TeamSTEPPS master trainer, will discuss Tulane’s approach to implementing TeamSTEPPS with the use of simulation and how high-fidelity simulation training can reduce medical errors and increase patient safety.

[Registration](#) is now open.

35. DOJ Accepting Public Safety Award Nominations

The U.S. Department of Justice (DOJ), Office of Justice Programs, Bureau of Justice Assistance (BJA) is now accepting nominations for the Public Safety Officer Medal of Valor (MOV). MOV is the highest national award that can be bestowed on civilian public safety officers and is awarded by the President of the United States to officers who have exhibited extraordinary valor above and beyond the call of duty. Under the provisions of the Public Safety Officer Medal of Valor Act, a total of five individual and/or team awards are presented each year. To be considered for the 2012–2013 MOV, an officer must be nominated for actions that occurred between June 1, 2012 and May 31, 2013. Nominations must be submitted online by the agency head of the officer’s employing department and must be received by DOJ no later than 11:59 p.m. eastern time on July 31, 2013. For additional information about MOV, and to complete and submit an application, please visit www.medalofvalor.gov.

36. Healthcare Workers: Protect Yourselves!

Healthcare workers (HCWs) are at risk for exposure to serious, and sometimes deadly, diseases. If you work directly with patients or handle material that could spread infection, you should get appropriate vaccines to reduce the chance that you will get or spread vaccine-preventable diseases. Protect yourself, your patients, and your family members. Make sure you are up-to-date with recommended vaccines. The term "healthcare workers" includes physicians, nurses, **emergency medical personnel**, dental professionals and students, medical and nursing students, laboratory technicians, pharmacists, hospital volunteers, and administrative staff. The CDC has recently updated its website on the topic and recommends the following vaccines for HCWs: Hepatitis B, Influenza, Measles Mumps and Rubella (MMR), Varicella, Tetanus, Diphtheria, and Pertussis, and Meningococcal (if routinely exposed to N. meningitides). [For more information...](#)

37. MedicalDaily Reflects on Adult Vaccination Rates

The CDC and U.S. Department of Health and Human Services assemble a yearly schedule recommending when people should get vaccinated, and the CDC has recently made data available for six of the illnesses on that schedule. Falling well below the herd immunity threshold — that is, the vaccination rate at which mass contagion ceases to pose a threat — adults abstaining from getting their shots end up putting everyone at risk. The six illnesses include Tdap (*tetanus*, *diphtheria*, and *acellular pertussis*), HPV (human papillomavirus), varicella-zoster (chicken pox), and the PPSV23 vaccine, which protects against *streptococcus pneumoniae*, also known as pneumococcus. Tdap puts up the most alarming numbers. Only 13 percent of adults ages 19-64 received a Tdap vaccine. [For more information...](#)

38. Proposals Invited for Kentucky EMS Summit

The 2014 Emergency Medical Services Leaders in Kentucky Summit (EMS LINKS) is looking for presentations for their annual conference to be held March 13-14, 2014 in Bowling Green, KY. We are requesting proposals for innovative and unique topics for the following four conference tracks: Director, Educator, General, and Supervisor. The deadline for submission is August 1, 2013. [For more information...](#)

39. CP Survey Deadline Extended to July 1

Community Paramedic (CP) programs utilize EMS practitioners in an expanded role to increase patient access to primary and preventative care within the medical home model. CP programs work to decrease emergency department utilization, save healthcare dollars and improve patient outcomes. The introduction of CP programs within EMS agencies is a top trend in emergency medical care. To better understand the extent and characteristics

of Community Paramedicine programs across the country, 16 national EMS organizations are conducting a survey to collect information about these programs. The information gathered will be vital in helping all to understand this trend and possibly to develop strategies and policies to support it. Readers are encouraged to complete this brief survey at your earliest possible convenience. It should take no more than 20 minutes to complete. Here is the link to the survey: <http://www.surveymonkey.com/s/communityparamedicine1>.

40. NFPA 1710 Standard Open for Public Comment

NFPA Standard 1710 *Standard for the Organization and Deployment of Fire Suppression Operations, Emergency Medical Operations, and Special Operations to the Public by Career Fire Departments* is open for public comment until 7/8/2013. The Scope of the document includes: 1.1* Scope. This standard contains minimum requirements relating to the organization and deployment of fire suppression operations, emergency medical operations, and special operations to the public by substantially all career fire departments. 1.1.1 The requirements address functions and objectives of fire department emergency service delivery, response capabilities, and resources. 1.1.2 This standard also contains general requirements for managing resources and systems, such as health and safety, incident management, training, communications, and pre-incident planning. 1.1.3 This standard addresses the strategic and system issues involving the organization, operation, and deployment of a fire department and does not address tactical operations at a specific emergency incident. [For more information...](#) Note: To submit comments, click on the “Next Edition” tab.

41. Alaska Seeks Qualified Candidates for EMSC Position

The EMS Unit of the Section of Emergency Programs, Division of Public Health, is recruiting for an Emergency Medical Service for Children (EMSC) Program Manager (Public Health Specialist II) in our Juneau office. This position manages the EMSC State Partnership (SP) grant and provides reporting support for the EMSC State Partnership Regionalization of Care (SPROC) grant from the Health Resources and Services Administration (HRSA). This person is responsible for coordinating technical and educational enhancements that cover the spectrum of emergency pediatric care from prevention to rehabilitation, and is responsible for assisting with the provision of pediatric continuing education needs/requirements of healthcare providers. [For more information...](#)

42. Westfall M et al. **Mechanical versus manual chest compressions in out-of-hospital cardiac arrest: A meta-analysis.** *Crit Care Med* 2013 May 8. The objective of this study was to conduct a meta-analysis of literature examining rates of return of spontaneous circulation from load-distributing band and piston-driven chest compression devices as compared with manual cardiopulmonary resuscitation. [Medline abstract.](#)

43. Hirschl MM, et al. **Benefit of Immediate Beta-Blocker Therapy on Mortality in Patients With ST-Segment Elevation Myocardial Infarction.** *Crit Care Med.* 2013 Mar 29. A new study published in a recent edition of *Critical Care Medicine* by researchers in the Lower Austrian MI Network (including the out-of-hospital emergency services, five primary-care hospitals and a percutaneous coronary intervention-capable hospital in the western part of Lower Austria) suggests the timing of immediate β -blocker administration in the emergency setting is associated with a reduction of all-cause and cardiovascular mortality in patients with ST-segment elevation myocardial infarction and seems to be superior to a delayed β -blockade. [Medline abstract.](#)

44. Delgado M, et al. **Cost-Effectiveness of Helicopter Versus Ground Emergency Medical Services for Trauma Scene Transport in the United States.** *Ann Emerg Med* – 2013. Apr 9. Helicopter EMS needs to provide at least a 17% mortality reduction or a measurable improvement in long-term disability to compare favorably with other interventions considered cost-effective. Given current evidence, it is not

clear that helicopter EMS achieves this mortality or disability reduction. Reducing overtriage of patients with minor injury to helicopter EMS would improve its cost-effectiveness. [Medline abstract](#).

UPCOMING EVENTS

*****STATEWIDE EMS CONFERENCES*****

*43rd Annual Wyoming Trauma Conference. August 15-18, 2013. Cheyenne, Wyoming. [For more information...](#)

Pennsylvania 36th Annual Statewide EMS Conference. 1 Curriculum~2 Locations! Lancaster ~ August 15-16, 2013. Altoona ~ September 26-27, 2013. [Click here for more information.](#)

*Colorado State EMS Conference November 7-10, 2013. Keystone, CO. [For more information...](#)

*****National Conferences and Special Meetings*****

*The Federal Interagency Committee on EMS (FICEMS) will hold a public meeting on Monday July 8, 2013 from 1:00 to 4:00 p.m. in Washington, DC. Registration will be required and a link to an online registration form, the agenda, and related materials will be posted when available at www.EMS.gov.

NAEMSE Instructor Course Level I. July 12-14, 2013 Fairmont, WV. [For more information...](#)

NAEMSE Instructor Course Level I. July 19-21, 2013 Orrville, CA. [For more information...](#)

*Pinnacle 2013: Inspiring EMS Leadership. August 5-9, 2013. Jacksonville, FL. [For more information...](#)

*NAEMSE 2013 Symposium. August 5-10, 2013. Washington, DC. [For more information...](#)

*World Trauma Symposium. September 9, 2013. Las Vegas, NV [For more information...](#)

*EMS World Expo 2013. September 9-13, 2013. Las Vegas, NV [For more information...](#)

*NASEMSO 2013 Annual Meeting September 16-20, 2013. Nashville, TN. [For more information...](#)

*ENA 2013 Annual Conference September 17-21, 2013. Nashville, TN [For more information...](#)

*ACEP 2013 Scientific Assembly October 14-17, 2013. Seattle, WA. [For more information...](#)

*Air Medical Transport Conference. October 21-23, 2013. Virginia Beach, VA [For more information...](#)

*IAEM-USA Annual Conference & EMEX 2013. October 25-30, 2013 Reno, NV [For more information...](#)

SAVE THE DATE! National Organization for State Offices of Rural Health Annual Meeting. October 28 - 30, 2013. Asheville, NC. Information to follow.

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

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