

Mission:

To protect, promote & improve the health of all people in Florida through integrated state, county & community efforts.



Ron DeSantis
Governor

Joseph A. Ladapo, MD, PhD
State Surgeon General

Vision: To be the **Healthiest State** in the Nation

Florida EMS for Children Advisory Committee Meeting Summary

Wednesday, September 14, 2022, 1300 - 1500 EST

Online and in person hybrid meeting held at OMNI ChampionsGate Orlando, FL

Please see accompanying presentation slides and related materials

Welcome & Call to Order

Attendees:

Committee Members and Liaisons

Dr. Marshall Frank, Michael Rushing, Nichole Shimko, Tracey Vause, Dr. Phyllis Hendry, Dr. Jennifer Fische, Ernest Weishaupt, Barbara Tripp, Lauren Young Work, Lisa Nichols, Sandra Nasca, Dr. Tricia Swan, Kevin Meade

State Office Personnel:

Christina Parmer, Lorrianna Jean-Jacques, Jane Bedford, Jennifer McManus, Kimberly Moore, Mike Hall, Dr. Angus Jameson

Other attendees:

Amii Kennedy, Bari Conte, Brian Angelson, CG Stephens, Christopher Sorrell, Cory Bessette, Dan Moran, Danielle Nelski, Derrick Burrus, Elijah Virgin, Geoff Miller, Greg Williams, James Hammon, Jennifer Lautre, Joseph Blackwelder, Julie Long, Keith Hernandez, Kenneth Wannan, Kimberly Engeman, , Kozette Hubbard, Latrell Goodson, Laura Boghos, Lew Steinberg, Mathew Goodson, Megan Curtis Gonzalez, Michael Anderson, Michelle Damron, Nicole Smith, Dr. Peter Antevy, Richard Nettles, Samantha League, Dr. Sara Cortez, Sean Dwyer, Sean Gibson, Shelly Cavender, Steven Carter, Trevor Nelson, Trisha Rhea, Tony Hayes, William Hall, other unidentified callers and attendees

EMSC Advisory Committee Announcements and Liaisons

New committee appointments and liaison update:

New Appointment- Tricia Swan, MD, M.ED, FAAP, FACEP (Physician with pediatric experience)

All other appointments renewed for a two-year term ending 08/25/2024

Dr. Fische transitioned to Research and Data Liaison

Committee liaisons will remain in current positions and are considered vital members of the advisory committee. Dr. Hendry expressed her gratitude for all the committee applicants. Applicants not appointed are being contacted to participate in other capacities such as PECC liaisons or work groups. The June 2022 meeting summary was emailed and posted on the FL PEDReady website. Please email corrections to pedready@jax.ufl.edu.

Dr. Hendry congratulated Florida on having 2 pediatric EM researchers working with the national PECARN program: Dr. Fische, UF Jacksonville and Dr. Gutman, UF Gainesville are now PECARN affiliate researchers with the WPEMR node. Dr. Fische is researching prehospital steroids in pediatric asthma and Dr. Gutman is studying health equity in the management of febrile infants.

Opening Announcements and Key Updates from Other Committees and Constituency Groups

Florida EMSC is currently in the last year of HRSA EMSC State Partnership Grant. The new grant performance measures will be discussed and were emailed to meeting invitees in advance.

Bureau update and regional coordinators:

New DOH BEMO positions were announced including Bobby Bailey – Preparedness, Jeff Guadiana – Workforce, Health Safety & Wellness, Regions 1 & 2, and Ty Carhart – EMS Operations Manager. EMLRC is working with BEMO on meeting technology, enhancements, dissemination, and focus groups.

The bureau is continuing to fill positions for the EMS Regional Coordinator program. Coordinators are assigned to regions in addition to another key area of focus. See slides for coordinator map.

Jeff Guadiana - Regions 1 & 2 – Health, Safety & Wellness, Workforce

TBD - Region 3 – Quality Improvement Coordinator

Ina Leinas – Regions 4 & 5 – Education Coordinator

Jennifer McManus – Region 6 – Rural EMS Coordinator

Tom DiBernardo – Region 7 – Special Projects/CARES

All coordinators are given orientation materials about the EMSC and PEDReady programs with accompanying educational materials. Regional coordinators also conduct agency site visits and are asked to inquire if the agency has a PECC, if they are familiar with PedReady materials and the website, what pediatric challenges are they having, best pediatric practices or protocols they would like to share, etc. Coordinators have been helping the program disseminate Communication Cards and JumpSTART Badge Buddies. EMSC will continue to support and work with coordinators as new resources and training become available.

Mike Hall, EMS Administrator spoke about the new BEMO Quality First concept and initiative which would incorporate the FAIR measures. Dr. Hendry proposed the inclusion of pediatric components as an ideal way to meet the new EMSC State Partnership goals of increasing EMS pediatric readiness and PECCs while recognizing best practices.

National EMSC Related Updates

Survey Reports:

2021 NPRP Assessment focuses on *ED Pediatric Readiness*, completed every 4-5 years.

No national score yet for comparison. Average FL score 75/100, median 76. Florida EMSC only has access to aggregate data. Only individual EDs or hospitals can see their own score.

NEDARC EMSC 2022 EMS Agency Survey - <https://www.emscsurveys.org/>

FL response rate 81%! The survey focused on current Performance Measures 2 and 3 (PECC and pediatric equipment). These measures will continue in the new grant cycle.

National score PECC: 35.8%; Florida score: 44.7%

National score use of pediatric equipment: 26.1%; Florida score 32.6%

Details of the FL survey report were reviewed (see presentation slides)

- New EIIC PEAKs (Pediatric Education and Advocacy Kit) on Pain and Agitation/de-escalation were reviewed. These include great EMS and ED educational materials and tip sheets.

<https://emscimprovement.center/education-and-resources/peak/peak-pediatric-pain/>

<https://emscimprovement.center/education-and-resources/peak/pediatric-agitation/>

New EMSC State Partnership Performance Measures

The new HRSA state grant application is due Nov 7th with a proposed budget of \$205,000/yr to include a full-time program manager plus fringe benefits. This amount may be decreased depending on federal authorization. The number of in person committee versus online or hybrid meetings in the future will be dependent on final grant funding. The University of Florida COM in Jacksonville will submit the grant in collaboration with BEMO. Programs must be housed in the state EMS office or a college of medicine.

https://media.emscimprovement.center/documents/SP_Program_Location.pdf

The following new EMSC State Partnership grant requirements, goals and performance measures were discussed by the committee in preparation for new grant submission.

EMSC SP Program recipients are required to:

- 1) Establish an EMSC Advisory Committee
- 2) Ensure sufficient oversight of the EMSC grant program
- 3) Support data collection, analysis, and continuous quality improvement
- 4) Expand the uptake of Pediatric Readiness in Emergency Departments
- 5) Improve Pediatric Readiness in EMS Systems
- 6) Increase pediatric disaster readiness in hospital EDs and prehospital EMS agencies
- 7) Prioritize and advance family partnerships and leadership
- 8) Attend HRSA EMSC Grantee Meetings in FY2023 and FY2025

2023-2027 Performance Measures:

- States/jurisdictions have a standardized pediatric readiness recognition program for EDs
- States/jurisdictions have a standardized pediatric readiness recognition program for prehospital EMS agencies
- States/jurisdictions have a family representative on their EMSC state advisory committee who represents the emergency needs of children in their community
- Prehospital EMS agencies have a designated PECC
- Prehospital EMS agencies have a process for pediatric skills-check on the use of pediatric equipment
- Prehospital EMS agencies have disaster plans that address the needs of children
- Hospital EDs have a designated PECC
- Hospital EDs weigh and record children's weight in kilograms
- Hospital EDs have disaster plans that address the needs of children

Attendees discussed the different measures. Dr. Antevy raised the issue of transporting pediatric patients to the most appropriate pediatric destination to avoid secondary transfers and delays in care when pediatric specialists or services are not available. Dr. Hendry discussed the increasing number of free standing EDs and delays in interfacility transports. All agreed it is important for EMS agencies and medical directors to know the pediatric capabilities of the different facilities in their jurisdiction and surrounding areas. Identifying ED pediatric readiness capabilities will be a large focus in the next 4-year grant cycle. The national ED pediatric checklist and the PedReady survey questions are a great starting place for EDs to assess and improve their pediatric readiness.

Dr. Fishe mentioned the PDTree Project, an EMSC Targeted Issues grant led by Dr. Jennifer Anders in Maryland. Dr. Fishe was also an investigator on the project. The PDTree was developed with levels of pediatric care that are operative and guide EMS transport destination for children in Maryland. <https://www.pdtree.org/blog/> . How PDTree was developed: <https://pubmed.ncbi.nlm.nih.gov/34438548/> . Pilot test results of PDTree: <https://pubmed.ncbi.nlm.nih.gov/33039231/>

Dr. Hendry will use meeting discussion points to guide the grant application work plan.

Feature Presentation: Sensory Comfort Kits by Lauren Young Work, LCSW (see meeting slides)

Medical Social Work Coordinator, Mobile Integrated Health Program, Medical Services Division
Palm Beach County Fire Rescue
Ldyoung@pbcgov.com

Sensory Sensitivity Comfort Kit Informational Video - <https://www.youtube.com/watch?v=mz3KGTjKUEI>

- Anyone can have sensory overload in an emergency
- Kits can be used for anyone – but focus is for children and teens and those with autism spectrum disorders
 - o Clear backpack
 - o Sound reducing adjustable earmuffs
 - o FL PEDReady Communication Cards (adapted for IPADS)

- Fidget spinner
 - Fire helmet squeeze toy
 - 211 Special Needs Brochure & Drowning Prevention Brochure
 - Use safe items without small parts or a choking risk
- Two kits stocked on every rescue and two kits available for engines at every station

Discussion: Dr. Antevy and Dan Moran (Davie Fire Rescue) thanked Lauren Work and mentioned that Davie FR created their sensory kit model funded by a Broward County Healthcare Collation grant for agencies and hospitals. Dr. Antevy shared a presentation “Autism Interaction for First Responders” by Lieutenant Ryan Woodward of Oklahoma City Fire Rescue recorded on 5/31/2022 for the FL Association of EMS Medical Directors/Florida NAEMSP Chapter: <https://www.youtube.com/watch?v=UKC9uXR-p1o&t=124s>. This is an excellent resource that helps explain the concepts of the sensory comfort kits. Dr. Hendry recommended agencies and EDs partner with their local coalitions to expand this model across the state. Sonny Weishaupt (APH-Orlando) found that their referral hospitals did not have comfort or distraction kits. His organization began including materials and kits with their pediatric readiness equipment and replacing items when necessary. Everyone agree that this is big need.

Florida EMSC/PEDReady Updates

- Safe transport working group report (Dr. Marshall Frank and team)
Current materials include a slide set, recording, policy statement, and sample SOP. The NASEMSO is updating their product document:
<https://nasemso.org/wp-content/uploads/Pediatric-Transport-Products-for-Ground-Ambulances.pdf>
The NASEMSO 2017 Interim Guidance states, “safe transport for children should be considered standard of care equivalent to EMS airway, breathing, and circulation maintenance”.
Discussion: Lisa Nichols (Trauma Program Manager liaison) asked if this is a state standard and is there is any obligation to provide financial support for the safety devices? Dr. Jameson (Florida EMS Medical Director) supports the need and agrees that agency medical directors should take action to ensure safe transport. He is sensitive to the cost to the departments but asked agencies to consider the alternative. Ty Carhart (BEMO) mentioned that he and others are awaiting the new NASEMSO / NTSHA recommendations. Mike Hall is looking into issue of creating a rule to require pediatric restraints on ambulances and the cost. If it costs more than \$250,000 it needs to be done through a legislative process to make it happen but will need Crash Study data before any recommendations are made. Dr. Hendry will investigate grant or foundation funding to assist with the need. Niki Shimko volunteered to assist with a statute change write up. Materials will be added to the PEDReady website once NASEMSO report is updated and materials approved.
- PEDReady website: <https://emlrc.org/flpedready/>
PEDReady and FL EMSC news contained in weekly FCEP news briefs and monthly FAEMSMD newsletters
Includes pediatric related announcements, resources, literature, news from national, state, and local organizations, PECC updates, and champions. Email pedready@jax.ufl.edu or sleague@emlrc.org to sign up for free weekly news briefs

Communication Cards have been reordered and are available for shipping (Spanish and Creole)

EMSC Day is May 24, 2023

Liaison and constituency group reports

Rural update (Vause and McManus):

In visiting rural EDs and agencies many are aware of EMSC and FL PEDReady resources. Jennifer McManus has found that there is confusion that using the Handtevy system is the same as having a PECC and having pediatric protocols. There was discussion about the function of a PECC. This will be a focus for the new grant. Dr Antevy offered to host a webcast or presentation with EMSC and Dr. Hendry

about the important role of a PECC and the need for PECCs in addition to the Handtevy system. The issue of newborn deliveries in rural settings deferred to new business. Tracy Vause brought up new \$15 minimum wage effecting any person providing healthcare for agencies that bill Medicaid/Medicare.

Florida FAN Report (Nasca):

Sandy Nasca gave a report on the Pediatric Pandemic network and the 18 committees she serves on nationally. The new grant will focus on family partnerships and family centered organizations.

Trauma: Program Managers (Nichols), FTSAC, FCOT:

Work is being done on updating the state trauma standards. Safe Imaging Guidelines for pediatric trauma are being worked on with EIIC (Dr. Yorkgitis and others in Florida involved) to roll out to all centers. Nationally and at a state level there is discussion about the use of prehospital TXA in children and the use of whole blood. This will be flagged for a future discussion topic.

Disaster:

Florida EMSC and the Disaster Committee are disseminating the new revised JumpSTART cards.

<https://emlrc.org/wp-content/uploads/JumpSTART-badge-buddy-2021-v2.pdf>

Dr. Hendry thanked Michael Ung, Captain, EMS Training and Education OIC, Miami-Dade Fire Rescue who used JumpSTART and START badge buddies to train > 1500 operations personnel including a new recruit class! In the new grant there will be on focus on pediatrics to be included in all Emergency Disaster plans.

There is a new documentary, Katrina Babies, that addresses disparities, mental health, and disaster impacts on the black population. <https://www.hbo.com/movies/katrina-babies>;

<https://www.youtube.com/watch?v=NjteP4qBqn4>; Katrina Babies Discussion Guide:

https://static.hbo.com/2022-08/Katrina%20Babies%20-%20Discussion%20Guide%20-%20Designed_08232022SGJ_0.pdf

Mental Health:

Lauren Work stated she has a presentation on Social Work for Paramedics that she will bring to the next meeting and will be creating one for pediatrics. Many EMS agencies are now adding social workers and chaplains to their ranks.

Data Committee, Biospatial (EMSC dashboard):

Will table for November meeting and request a demonstration of a Biospatial EMSC dashboard.

Community Paramedicine/MIH/H.A.R.T. (Health-Access-Resiliency and Telehealth) Section (Bedford)

FL ENA (Rushing)

Free training opportunities are available for rural EDs. Reach out to Jane Bedford for information.

EMS Educators

PECCs (Rabish, Weed, Weishaupt)

PECC liaisons reported on their activities. Dr. Hendry asked PECCs to share their pediatric TXA guidelines.

Pediatric and neonatal transport

Florida Neonatal Pediatric Transport Network Association (FNPTNA) is discussing the development of neonatal broadcasts, podcasts or training videos for agencies and EDs to use for education (see new business)

Injury prevention (Summers)

New Business

1. Acetaminophen and ibuprofen liquid pediatric dosing table and magnets for parents -

A draft of the dosing magnet was discussed. Magnets will be made available to FL EDs to give parents to place on refrigerator door or other surface to encourage weight-based dosing, especially for children under 2 years. The magnet contains a QR code for easy referencing and printing. Email pedready@jax.ufl.edu to request.

<https://pami.emergency.med.jax.ufl.edu/wordpress/files/2022/10/Ped-Ready-Dosing-for-Website-1.pdf>

2. BLS Pediatric training courses

Agencies have requested ideas for BLS pediatric training. Different courses with BLS options were discussed.

3. Rural newborn deliveries: The closure of OB units in rural hospitals across the US and Florida is increasing the number of newborns cared for by EMS and in general EDs. Additionally, our rural partners report seeing an increase in mothers not receiving prenatal care due to transportation and other issues. This is a national hot topic. The pros and cons of NRP versus PALS algorithms for EMS and EDs were discussed, and Dr. Hendry provided literature. The STABLE program was also discussed. The updated NRP algorithm has been added to the PEDReady website under the resuscitation tab: https://emlrc.org/wp-content/uploads/NRP-8th-ed-ITK_Algorithm.pdf. The committee will continue to work on initiatives to improved neonatal training with other partners and organizations.

<https://aacnjournals.org/ccnonline/article/41/6/22/31618/NRP-Versus-PALS-for-Infants-Outside-the-Delivery>

4. Button Batteries: this topic was discussed in a past meeting. There are several new reports out indicating a significant increase in Pediatric Battery Related Injuries and Ingestions (disc/button batteries). A new law was passed to protect children and other consumers against hazards associated with the accidental ingestion of button cell or coin batteries by requiring the Consumer Product Safety Commission to promulgate a consumer product safety standard to require child-resistant closures on consumer products that use such batteries. Reese's Law is named after a child who lost her life after ingesting a button cell battery.

<https://www.govtrack.us/congress/bills/117/hr5313>.

This topic will be tabled for a future meeting; however, everyone was encouraged to have a policy to address this issue with immediate triage and transport to a facility that can remove the battery ASAP. Dr. Jameson discussed the importance of this topic for dispatch centers and the possible need for a manual override for button battery ingestion. The management of coin ingestions versus disc/button battery ingestion is very different. It is important to clearly state the nature of the swallowed item.

Upcoming Meetings and Conferences

The next EMSCAC meeting will be held in conjunction with Fire-Rescue EAST, January 18-20, 2023, Daytona Beach

Upcoming conferences:

NAEMSP (Tampa, FL) January 23-28, 2023

First There First Care and Gathering of Eagles (Hollywood, FL) June 12-16, 2023

NASEMSO (Reno, NV) June 11-15, 2023

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<https://emlrc.org/flpedready/>

