

**Oregon Emergency Medical Services for Children Advisory Committee Meeting Summary**

2025 Quarter 4 | November 2025



Slides and recording available upon request.

<b>Appointed Committee Members</b>		
<b>Name</b>	<b>Position</b>	<b>Attendance</b>
Tamara Bakewell	Family representative	Present
Sabrina Ballew	Patient equity organization representative or academic professional specializing in health equity	Present
Eric Blankenship	Trauma nurse coordinator or trauma program manager	Present
Carl Eriksson	Pediatric disaster/emergency preparedness representative	Arrived @ 0935
Jennifer Eskridge	Injury prevention representative	Present
Rachel Ford	Oregon EMSC program manager	Present
Davi Hughes	Emergency medical services provider	Present
Josh Marks	Emergency medical services provider	Present
David Lehrfeld	EMS Program representative	Arrived @ 0915
Rebecca Marshall	Behavioral health representative	Absent w/ notice
Tiffany Peterson	Emergency care educator	Present
Justin Sales (Chairperson)	Physician specializing in the treatment of pediatric emergency patients	Present
Christa Schulz (Chairperson Elect)	Physician with pediatric experience	Present
Dana Selover	Oregon EMSC statewide project director	Present
Jacey Teeter	School-based health center representative or school nurse	Present
Misty Wadzeck (EMSAB Liaison)	Nurse with pediatric emergency experience	Present
Omar Washington	Physician specializing in the treatment of pediatric emergency patients	Present
	Family representative	Vacant

**1. Call to Order (Timestamp: 0902)**

- a. Justin Sales gave a brief introduction, and reviewed group expectations and the public comment process.
- b. Committee members shared their names, committee positions, and favorite winter activities.

**2. Approve August 2025 Meeting Summary (Timestamp: 0911)**

- a. Draft summary was reviewed; no modifications were requested.
- b. Motion to approve: Christa Schulz
- c. Second: Sabrina Ballew

d. None opposed; motion carried.

### 3. EMSC Program Priorities (Rachel Ford) (Timestamp: 0913)

a. At the August meeting, Rachel shared that the EMS Program had reviewed the EMSC section of Oregon Laws 2024 Chapter 32 and placed the requirements into three categories: 1) continue; 2) paused with potential for phased rollout; and 3) on hold until necessary funding and staffing are available.

The committee reviewed each requirement individually, talked through current actions being taken, and solicited member feedback on potential next steps.

b. Discussion points included:

- Ideas for virtual engagement were icebreakers, breaking into smaller groups to discuss a topic, sharing a mission moment (a brief story of what motivates the work).
- Members requested that presenters include the ask, the purpose of the information, and next steps for the project. Staff were asked think through the flow of the meeting, fatigue with screen time, sharing of information ahead of time, and more accountability to bring ideas to the meetings instead of all presentations.
- Members suggested coordinating with the Oregon chapter of the School Nurses Association and national organizations that work on injury prevention.
- Carl Eriksson raised the prehospital pediatric patient care guide developed by the Portland metro tri-county protocol group as an example resource. The group briefly discussed its applicability in rural areas and how it might be adapted for different regions of the state.
- To raise awareness of, and interest in, the Peds Ready EMS recognition program, members mentioned several outreach strategies (posting on social media, making announcements at meetings, using a learning collaborative, creating a shared Basecamp site).
- Suggested topics for continuing education included substance use in adolescents, different presentations of pain in pediatric patients, review of respiratory distress assessment and management, and use of sensory kits in the prehospital setting.
- Tami Bakewell recommended [Reach Out Oregon](#) as a resource for families of children/youth experiencing behavioral health crises.
- Omar Washington mentioned that it may be worth creating a short presentation on use of AI for translation services in the field, as removing some of the language barrier may allow EMS providers to gather more accurate information quickly.

### 4. Committee Member Roundtable (Timestamp: 1030)

a. Members shared updates relevant to their committee positions.

- Tamara Bakewell: [House Bill 3007](#) requires schools to provide temporary accommodations for students with head injuries. Christa, Rachel, and Tami met with a group from Illinois regarding bereavement kits for families.
- Sabrina Ballew: Mercy Flights has been recognized as a Peds Ready EMS agency! The agency has pushed Health Emergency Ready Oregon (HERO) Kids at events and local hospitals; the registry is in all cell phones for ground, mobile integrated health (MIH), and flight staff. MIH team also recently ran vaccination clinics.
- Eric Blankenship: St. Charles Bend completed its OHA trauma survey, and staff participated in a large tri-county MCI drill at the Redmond airport. The Oregon

- Trauma Registry is transitioning for all trauma hospitals. Redmond Fire is now a Peds Ready EMS agency, and Eric is working with Bend Fire to get recognized.
- Carl Eriksson: Within the next few months, research team will be publishing the statewide 2022 respiratory syncytial virus (RSV) surge experience. It describes how effectively other people in the state worked to take care of a huge number of children, with surge volume details. Providence St. Vincent's pediatric intensive care unit (PICU) has recently closed, which reduces the number of PICUs in the state from 3 to 2. This reduces Oregon's disaster resilience. Over the 15 or so years before the pandemic, about 30% of PICUs closed.
  - Jennifer Eskridge: A few coalitions previously under the Safe Kids umbrella are trying to regroup after dissolution. [National Injury Prevention Day](#) is on November 18. Fall 2025, have seen some scaling back and cancelation of events geared toward Spanish-speaking and Latino communities due to safety concerns.
  - Rachel Ford: This committee still has a family representative vacancy; Rachel hopes to have an update on this position in February.
  - David Lehrfeld: No report.
  - Josh Marks: All EMS providers at agency in Scappoose have access to the HERO Kids Registry and the agency is pushing to get patients who would benefit onto the registry. Community paramedics and ambulances have flyers available to share this information. Preparing for Share and Care event; handing out helmets.
  - Tiffany Peterson: Working on HERO Kids access for agency personnel.
  - Justin Sales: Randall Children's is working to make ultrasound-guided peripheral IVs the standard for initial placement, prioritizing patient-centered care.
  - Christa Schulz: Provided education for ED providers regarding bronchiolitis and the upcoming respiratory surge season. Some patients have already required transfers to Portland for BiPAP. Team has pushed out videos regarding vaccines and vitamin K administration. High flow workgroup (Christa, Davi, Omar, and Rachel) met to gather information (volume, complications, and ground ambulance transport needs).
  - Dana Selover: There may be a bill around EMS Modernization technical, housekeeping, and sunrise/sunset date fixes in 2026. The Rural Health Transformation Program, created by House Resolution 1 earlier this year, has the potential to provide substantial funding for initiatives in rural areas.
  - Jacey Teeter: In partnership with Healthy Schools and OHA, LaGrande School District developed and rolled out new protocols. Corinna Brower headed up the project. The protocols cover many types of events and emergencies and were given to school staff to identify what to do and when to call 911.
  - Davi Van Winkle: Working to build "kids corner" into every Mercy Flights training. November is the annual Labor and Delivery training with neonatal resuscitation. Also working on a cardiac arrest training event with content about coping with death and communicating with families on scene, including collaboration with chaplains.
  - Misty Wadzeck: No report.
  - Omar Washington: The big news is Providence St. Vincent's PICU closure. The emergency department will have the hospital's only pediatric critical care capacity. Omar sees some synergy with the high flow workgroup in trying to figure out how to treat at originating facilities and avoid unnecessary transfers.

## 5. EMSC Program Update (Rachel Ford) (Timestamp: 1106)

- a. As of 9/30/2025, Oregon's Peds Ready EMS program had recognized four agencies: Sherman County Ambulance, Polk County Fire District No. 1, Mercy Flights Inc., Redmond Fire and Rescue. Special thanks to the recognized agencies for sharing social media posts and photos.
  - Rachel thanked her teammate Justin Hardwick for sharing an article from his local newspaper that talked about Redmond Fire and Rescue being recognized.
  - Polk County Fire District No. 1 also produced a [video](#).
- b. The Pediatric Readiness Project has an upcoming session on Pediatric Behavioral Health in the ED, scheduled for 1200-1300 on November 20, presented by Ajit Jetmalani and Liz Marx.
- c. The Pediatric Readiness Project conducted a post-session evaluation following their August training. Suggested topics for future sessions were trauma and drowning. Two participants requested outreach from the program team.
- d. A new round of the [National Pediatric Readiness Project assessment](#) is scheduled for March-May 2026. This assessment is every five years.
  - In 2021, 50/59 Oregon hospitals completed, with a state median score of 68/100 points (national median 70/100; high readiness  $\geq 88$ ). The state's [2021 summary report](#) is available online.
  - To prepare for the upcoming assessment, hospitals are encouraged to use the [checklist](#), take the [open assessment](#), and address gaps through the [toolkit](#).

## 6. HERO Kids Registry (Tami Bakewell) (Timestamp: 1117)

- a. Tami provided an overview of recent HERO Kids data and outreach efforts.
- b. Based on the ideas the EMSC Advisory Committee shared in a previous meeting, HERO Kids has developed new resources focused on emergency preparedness (rack card, flyer, interactive digital poster) and planned individual outreach to EMS/ED contacts in the 8 counties with no registrants.
- c. At a recent event, a parent reported that HERO Kids worked when their child needed it! The parent has been invited to share at the next HERO Kids leadership meeting. The HERO Kids team does not have access to much outcome information given the system's confidentiality, so appreciated the story.

## 7. Pediatric EMS Data Update: Medications Administered Without Documented Weight (Peter Geissert, OHA EMS Program) (Timestamp: 1128)

- a. Accurate weight documentation is essential for safe, effective pediatric medication dosing by EMS. Recording weight in kilograms significantly reduces dosing errors.
  - Challenge: In 2021, Oregon EMS data showed 20.3% of pediatric patients receiving weight-based meds lacked documented weight.
  - Quality improvement initiative: Increase documentation of pediatric weights in kilograms, using the National EMS Quality Alliance (NEMSQA) Pediatric-03b metric as a key performance indicator.
  - Methods: Targeted education, feedback loops, audits, and data sharing.
  - Goal achieved and exceeded:  $\geq 90\%$  compliance in patient care report documentation by the end of 2023. Data sharing continues quarterly.
- b. Older data indicated many different medications were administered without documented weight. Newer data (January-October 2025) had a similar distribution of medication

types, but much lower counts overall.

- Metric change in “old” versus “new” calculation: In 2021, there was an update to the measure to operate on the route of administration (excluding inhalation), rather than a specified list of medications.

**8. EMS Program Update (Adam Wagner, OHA EMS Program) (Timestamp: 1137)**

- a. Adam provided brief updates across different portions of the program and deferred to the [EMS Program Report](#) for details.

**9. Key Takeaways (Timestamp: 1140)**

- a. In reviewing committee updates for EMS Advisory Board, Misty Wadzeck stated that she will share about the 2026 National Pediatric Readiness Project assessment, Peds Ready EMS, and closure of the PICU at Providence St. Vincent. Christa Schulz suggested highlighting the success of the weight-based medication administration quality improvement project.
- b. 2026 meeting dates (all virtual): February 12, May 7, August 13, November 5

**10. Public Comment (Timestamp: 1145)**

- a. No requests for public comment were received.

Meeting adjourned at 1147.

**Next Meeting:**

February 12, 2026, 0900-1200

Virtual only on Zoom