# Minutes

**Oregon Emergency Medical Services for Children Advisory Committee Meeting** *Thursday, July 11, 2019, 9:04 a.m. – 11:17 a.m.* Portland State Office Building 800 NE Oregon Street, Room 1B Portland, OR 97232



<u>Committee Member In-Person Attendance</u>: Tamara Bakewell, Jacqueline DeSilva, Dr. Carl Eriksson, Matthew House, Kelly Kapri, Todd Luther, Danielle Meyer, Dr. Robert Moore, Matthew Philbrick, Troy Thom

Committee Member Phone Attendance: Erik Kola, Dr. Christa Schulz, Lesley Zimkas

**<u>EMS & Trauma Systems Staff</u>**: Robbie Edwards, Rachel Ford, Dr. David Lehrfeld, Julie Miller, Candace Toyama (phone)

Absent: Tyson Botts, Marisa Marquez, Dr. Justin Sales, Dr. Dana Selover, Anna Stiefvater

**Public/Guest**: Angela Graves (phone), Katrina Doughty, 211 Info-Maternal and Child Health Coordinator(in-person), Paul Rostykus (phone)

Meeting called to order: 9:04 a.m. by Committee Chair Jacqueline DeSilva

Discussion and conclusion of each agenda item:

#### 1. Confirmed Attendance (in-person and phone) and Introductions: Jacqueline DeSilva, Chair

2. Review and Approve April 11, 2019 Minutes: Committee

Minutes were reviewed.

Changes: None

Matt Philbrick motioned to accept minutes and Dr. Robert Moore seconded. None opposed. Motion passed.

## 3. State EMS and Trauma Program Updates: Candace Toyama

- Recruiting for an Administrative Support 2 high-level support position. The recruitment closes on Monday, July 15<sup>th</sup> and hope to conduct interviews in about a week.
- Working on contracts with 4 regional EMS instructors. These will be instructors that are in the various regions that will support the Mobile Training Unit with continuing education for rural EMS providers, support to the smaller schools with EMS programs and help these schools with EMT exams.
- Housekeeping Bill passed and takes effect in January 2020.
  - Definition of a "patient" has been slightly adjusted. Have removed the term "transport" so that our own definition of an EMS patient no longer requires them to be transported by an ambulance.
  - "Exception to licensing": Improved our statute to licensing. People coming to Oregon from out of state to fight wildland fires, who are contracted with the United States Forestry Service, are now exempt from our rules. This applies to the people who are coming into our state without ambulances.

- Adjustments for the State EMS Committee: At least one appointed member must specialize in pediatric emergency care. Added an EMS Provider position and removed a Physician position. The purpose is to have more providers to staff our licensing and disciplinary committee.
- We cleaned up the Vehicle rules. None of the content changed, just the way it was stated.
- Transition for Candace: Submitted letter of resignation and last day will be October 4, 2019. Relocating to Henderson, NV. The EMS and Trauma Systems Program Manager recruitment will post at the end of July. Dr. Dana Selover is actively recruiting. Current focus includes prioritizing internal policies, staff performance reviews and budget updates. The EMS and Trauma Systems program has an intern from Oregon Institute of Technology that is working on finding additional funding for our program. West Region NASEMSO meeting will be hosted by Oregon EMS and Trauma Systems program October 1-3, 2019.

## AmeriCorps VISTA Member Project Update: Robbie Edwards

- 2<sup>nd</sup> year VISTA. Will be working with EMS and Trauma Systems program until April 2020.
   The plan is to get a 3<sup>rd</sup> year Vista to complete the project after Robbie's term ends.
- Becoming familiar with the rural agency needs. Have done ride-along with agencies and attended the Office of Rural Health Listening Tours in Tillamook and Douglas Counties. Attending stakeholder meetings and the EMS Section of the Oregon Fire Chiefs meeting.
- Maps: 1<sup>st</sup> year VISTA conducted a survey that brought awareness of the health of the agencies. This resulted in giving each agency a score. Red = high risk, Orange = lower risk than Red, Yellow = lower risk than Orange, Green = agency is doing well. Robbie is adding more data to this project, contacting agencies and filling out demographic information, laying out factors that have been gathered and drawing lines to see what draws an agency into each category. Will bring analysis to stakeholders. The goal will be to take advice to county commissioners: Tools, resources and strategies that can be used to make counties sustainable.

# 4. ATAB 5 Sleep Safety Project Update: Chair

- Direct On-Scene Education (DOSE) and Sweet Dreams Trainings: Did four trainings in Medford area. Two trainings each day and each was two hours long. The DOSE program was geared for emergency medical services (EMS), fire and police agencies. In between the DOSE program was a session called Sweet Dreams. Sweet Dreams was geared for medical professionals within the hospital, medical offices, labor and delivery units, etc. The training was well received. Medical providers give the education and then it is up to the families to use the info.
  - Region 5: Will be having a disaster preparation fair that will cover many topics.
  - Paul Rostykus sent out a Doodle poll to gather information. He is also leading an optional EMSC Advisory Committee Workgroup on Safe Sleep.
- Stop the Bleed Updates: Stop the Bleed is in the Medford School District! Asante is partnering with Mercy Flights to provide training to schools. Some schools want us to train from class to class and some schools want the training at a staff meeting. There is a Stop the Bleed website that has videos: 8 minutes each (two presentations). When schools watch these ahead of time, they are more open to the training. There are two dates scheduled in August and September and working on getting the other three dates scheduled. Cascade Christian now wants training too and more schools coming onboard.

## Questions/Comments:

 Matthew House: Will there be an ALICE (Alert, Lockdown, Inform, Counter, Evacuate) or similar training in Jackson County? Yes, in Eugene at Peace Health. The new training is to be moving during an active shooter incident and not duck and hide. Outdated training may cause more people to be injured. ALICE does a big Stop the Bleed promotion with their training.

- Dr. Robert Moore: How many school districts are you working with? Medford, Phoenix/Talent, Central Point, and Josephine County. Legacy Emanuel contacted us to get the distributer name to purchase kits.
- Matt Philbrick: It is hard to get in the schools. ATAB 5 provided kits to go with a person who went to Guam and presented training.
- Tamara Bakewell: Consider changing the messaging for ABC so 'A' stands for "Away" instead of "Alone." One parent's response was that "Alone" sounds awful. Away is a better word to use. Keeping unsafe things away from your baby. Jacqueline will talk to Captain Carroll about changing the A to "Away" since it his program.
- Rachel Ford: Rebecca Long, one of our EMS and Trauma Systems program Mobile Training Unit Coordinators, worked with the Health Security, Preparedness and Response program distributing Stop the Bleed kits. Almost \$40,000 in equipment was distributed. Rebecca will be listing the training kits information on the EMS and Trauma Systems program website. The following was distributed:
  - 22 stop the bleed training kits, sent to rural law enforcement, tribal areas and Medical Reserve Corp agencies.
  - 12 5 pack response kits
  - 359 individual response kits.
- Jacqueline DeSilva: Spoke to Asante and they purchased two training kits. These will be available for loan in their area. Instructor/student ratio is now 1/10 for training. Medford Airport agreed to put up two wall-mounted kits in the airport (8 kits in each wall mount), if the kits were purchased for the airport. These will go up in the airport August 2019, one on the secure side and one on the non-secure side.

# 5. Safe and Secure Symposium: Tamara Bakewell

Handouts: Oregon Family to Family Health Information Center

- $\circ$   $\;$  Raising a Child with Special Needs? Be prepared for a trip to the Emergency Room!
- More Emergency Tips from the Oregon Family to Family Health Information Center
  - Checklist for Parents
  - Checklist from Parents
- Sample Emergency Protocol Letter
- Emergency Information Form for Children with Special Needs

Six family organizations put together a symposium for children with disabilities. Rachel Ford and Tamara Bakewell presented these handouts at the symposium. Tips for staying calm: Breathe. Parents are the best resource for child. Know who can communicate well for them and who will support during an emergency. Practice what this looks like during a calm time. Also suggest the TED talk: Perspective Hindsight. Practice looking back at a stressful time and learn from it. Working on making these handouts into a poster for the Annual EMSC Grantee meeting conference in DC. Useful information and something different that other Family representatives have not seen before.

# Questions/Comments:

 Dr. Carl Eriksson: Some chronically ill kids end up having reems and reems of information and the Sample Emergency Protocol Letter will narrow it down to the basics of what is needed when they go to the emergency room. Please send the handouts to the Committee electronically. Would like to share this with those who are responsible for discharge planning.

- Jacqueline DeSilva: Might be good to send out to the trauma coordinators to share with their discharge planners.
- Dr. David Lehrfeld: We can put this information in front of State Trauma Advisory Board (STAB), State EMS Committee other venues (Oregon State Ambulance Association, EMS Section of Oregon Fire Chiefs, Oregon College of Emergency Physicians (or you can come and present at the next board meeting). Tamara Bakewell and Dr. Carl Eriksson will present at the next Oregon College of Emergency Physicians Board Meeting. Is there an EMSC liaison between EMS Committee and STAB? We can add a seat for the official liaison to take on the official duties. It is usually the chair of EMSC Committee. Jacqueline DeSilva deferred to Matt Philbrick to go in her stead.
- Matt Philbrick: Agreed that he will speak as the EMSC Chair designee at the State EMS Committee meeting.
- **Tamara Bakewell**: Would like to get the parent who gave all the parent tips to come to one of our meetings. Her name is Tammy.

**Action Item:** Stella to have an official Liaison from the EMSC Committee to the STAB: Do a 15 minutes dual presentation. David Lehrfeld will email Katie King at OCEP and ask for 15 minutes for a dual presentation from EMSC at the next board meeting. Jacqueline is happy to be the Liaison for STAB.

Action Item: Tamara Bakewell will follow up with sending the resources to Jacqueline DeSilva, Rachel Ford and Dr. Carl Eriksson. Rachel Ford will send them to the Committee. Dr. Carl Eriksson will work on getting this information into the children's hospitals.

Action Item: Jacqueline DeSilva: Invite Tami (parent) to attend next quarter meeting. If she is not comfortable being public, we could put up a picture of her. Rachel Ford would like to send a note to Tami. Tamara Bakewell will get Tami's contact information to Jacqueline DeSilva and Rachel Ford.

## 6. Pediatric Summit: Dr. Carl Eriksson, Vice Chair

Public/private partnership with Northwest Oregon Healthcare Preparedness Organization and Portland-are children's hospitals to develop a northwest Oregon Surge Plan to use in the event of a public health emergency. Will deploy in this region and then statewide. First couple of years have been dedicated to determining where we are in the children's hospitals, our level of preparedness and our ability to handle disaster, putting together resources for pediatric hospitals to augment their disaster and care plans for public health emergencies.

June 6, 2019 Pediatric Summit we introduced this concept. Reviewed children and disasters, and how to be prepared to treat injured children. Preparing for the next child will help with disaster preparedness. The goal is that every hospital will be prepared to treat critically injured children in the case of public health emergency. The Northwest Oregon Healthcare Preparedness Organization worked hard to put this together. It was a several year project.

## **Questions/Comments:**

- Todd Luther: Thought it was fantastic. Toolkits that were provided were fantastic to take back to
  our hospital. Much needed information. Went into it not knowing what it would be about and
  would not miss another one.
- 7. EMSC Program Updates: Rachel Ford

- Not on the Agenda:
  - **New Reimbursements Process**: Will be creating a new account for each Committee member that receives travel reimbursement.
  - **Centers for Disease Control and Prevention (CDC):** Has an emergency kit checklist they just pushed out for families with children and youth with special healthcare needs. The information is on the CDC website and on the Family to Family Facebook page.
  - New Committee/Board Member Process: For all persons interested in serving as a member of an EMS and Trauma Systems Committee or Board, you will need to fill out an application, submit a resume, answer questions and express interest in the position(s) you are interested in filling. Applicant will be contacted when an opening is available. This will help with Committee and Board member diversity. Existing Committee/Board members may still recommend a new individual, but the new individual will need to go through the application process.
- Simulation Resource Team Training: Had one training this quarter at Samaritan North Lincoln. Tomorrow will be at Blue Mountain Hospital for their training exercise. Oregon Office of Rural Health is also funding simulations. Starting to look at 2020 and how many we can support moving forward.
- Pediatric Emergency Preparedness Workshop: Working closely with Matt House on preparing for workshop.
  - Matt House: Have about 20 registered for each workshop, not including any Fire or EMS, just regional employees currently. 45 attendees per day would be a good cap. Geographic area so far is Florence. Have had some email correspondence in the valley.
     There will be some attrition. If 50-55 sign up there will be some that do not show up. Rachel has been working with PeaceHealth to provide Continuing Medical Education hours for attending.
- EMSC Grant Administration: Just submitted the EMSC Performance Report for 2019. We spent \$130,000 (full grant amount) and \$38,000 EMSC general fund. Working to complete the Federal Financial Report by July 30, 2019.
- Pediatric Patient Care Equipment: Have been able to distribute some pediatric patient care equipment to Crook County Fire & Rescue, Douglas County Fire District #2 and Glide Rural Fire Protection District. Most of the requests have been for backboards, restraint systems and Interosseous (IO) needles.
- Grant Status: The Pediatric Emergency Care Applied Research Network proposal for "The Charlotte, Houston, and Milwaukie Prehospital (CHaMP) Research Node" was accepted. Will be connecting with them throughout the grant cycle. Have not heard if the two OHSU-based grant applications were accepted.
- Pediatric Assessment Resource: Quick reference Pediatric Reference Resource sheets are ready to be sent. Waited to mail until after the end of renewal to get the accurate number of vehicles for each agency. These are laminated and are to be reused.
- National Association of State EMS Officials (NASEMSO): Attended the Pediatric Emergency Care Council. The work done outside the council was productive. The resolution that Rachel Ford helped craft passed. The resolution recommends EMS agencies designate a Pediatric Emergency Care Coordinator. The Pediatric Emergency Care Coordinator is being pushed forward on the pre-hospital side.
- National EMSC Data Analysis Resource Center (NEDARC): The staff at NEDARC gather survey data for the EMSC program. Rachel Ford attended her first in-person board meeting. They know how to run a seamless, productive meeting and it was a good experience. They look to attendees to gather information on what information they need to gather and how to approach their survey work.

Action Item: Rachel Ford will send out the link for the new Committee/Board Member Process.

#### 8. Pediatric Readiness Quality Collaborative Updates: Angela Graves and Rachel Ford

Pediatric Readiness Quality Collaborative is a nationwide collaborative. The goal is to ensure quality pediatric care throughout all the emergency departments in the country. Oregon has two teams.

**Angela Graves:** Working with the WranglER 4 Kids team, which is made up of the eight Oregon Providence emergency departments. Working on getting all data entered for each bundle. The regional quality person pulled data and it took 1.5-2 hours per ED. The quality bundle selected is that each pediatric patient is weighed in kilograms and not pounds. Baseline data is complete.

- Wins and Opportunities:
  - Findings were better that expected. Any weight but needed actual weight.
  - Change in leadership, loss of momentum.
  - Not using the Chrome navigator was a problem. Use Chrome when entering data.
  - Wrangler: Dog that goes to pediatric patients for comfort.

**Rachel Ford**: Speaking for the Oregon Pediatric Readiness Program team, there have been struggles with keeping up momentum and enthusiasm. Half (5 out of the 10) have entered their baseline data. Some have started their first quality cycle. At the last monthly call, we had Dr. Beech Burns speak on pediatric head trauma and the use of CT scans. His presentation encouraged conversation. It was good to have a 10-minute specific topic at our monthly call.

#### **Questions/Comments:**

Dr. Carl Eriksson: This Collaborative took a while to get off the ground. Not much to do for a
period of months. Once we are no longer being supported by the National Group (EMSC
Innovation and Improvement Center), it will be good to have a discussion with the other
collaborative to learn from each other's successes and create a lasting program.

## 9. Discussion: Injury Prevention Outreach: Chair

We are looking for injury prevention outreach ideas. This is a big function of this Committee and we can have an impact. Have not jumped behind anything like this for a while and believe it would be a good thing to do. Do we want to look for specific topics that we can push to EMS and hospitals?

#### **Questions/Comments:**

- Troy Thom: Large issue right now called a Pharm Party, where kids open the medicine cabinet and take 1-2 pills and take them at a party. Kids discovered that if you drink a bottle of Benadryl you will hallucinate, resulting in overdoses. Over the Counter Drugs (OTC) is a huge problem; Dextromethorphan, Triple C, Afrin and many more.
- Tamara Bakewell: There are 6 strong family organizations that will partner with this.
- Dr. David Lehrfeld: The Violence Injury Protection Section (OHA) was heavily involved in the Pediatric Fall Initiative and was very successful. Suicide among our teens is still a huge problem, as well as rural traumatic brain injury and overdose (alcohol, narcotics, dust-off, huffing, opioids, polypharmacy). There is also good poison center data available. There is an increase in polypharmacy and cannabinoids overdoses and drinking and driving deaths.
- **Rachel Ford**: Previous EMSC Program Coordinator used to partner with Safe Kids. This may be a good place get information. They have nice packaged prevention information.
- Jacqueline DeSilva: Michelle Haun-Hood is involved in the "Trauma Nurses Talk Tough" that
  instructs helmet and seatbelt safety. Asked Committee members to come back in October with
  ideas that we can talk about and support. There are so many topics, it is hard to pick even one
  and bring it to awareness. If we start with one topic and say that EMSC supports this product, it
  will help.

- **Dr. Carl Eriksson**: There is a huge area of behavioral health problems with pediatrics that we are failing our kids. Capabilities and needs variance are huge.
- Erik Kola: Trends with development, social media, You Tube, fear, cinnamon challenge, etc.
  - Tamara Bakewell: Are there any tools to help to educate the families?
  - **Eric Kola**: Do not think there are tools to educate. Kids are moving faster than we are with the OTC misuse.
  - **Tamara Bakewel**: Will send Jacqueline DeSilva a 2017 collection of data on disabilities and injuries with kids with disabilities.

## **10.** Committee Member Roundtable & Public Comments:

- **Todd Luther**: Having their 4<sup>th</sup> Annual Safety Day for Kids in Roseburg this weekend (7/14/19).
- Troy Thom: Good to be back. Currently the reservation is doing Stop the Bleed training in the K-8 Academy. There is a push on pediatric issues from Indian Health Services. Example, tying kids up in a traditional style, kids slide down and have had bad outcomes. This is a cultural thing we are working with too.
- Dr. David Lehrfeld: Stop the Bleed in K-12, the adult tourniquets do not work and there are no approved pediatric tourniquets. Elastic tourniquets add to the kits where they are used on kids. David Lehrfeld and Stella Rausch-Scott are working on a State Stroke Report and the first ever Oregon Cardiac Arrest Report. Please let Dr. Lehrfeld know if you have any information you would like to add to this report on pediatric cardiac arrest.
  - **Dr. Carl Eriksson:** Have some information to add to the report. Dr. David Lehrfeld and Dr. Carl Eriksson will sit down and work on this info.
- Jacqueline DeSilva: Stay for Safe Sleep Workgroup with Dr. Paul Rostykus.
- Tamara Bakewell: Are any Committee members going to be at the at the Rural Health Conference in Bend in October? Tamara is hearing that there is not much of a pediatric presence at this meeting. Tamara will be speaking. Will have a table and would love to share. Tamara is speaking at the last hour on the last day.
  - **Rachel Ford**: Will give Tamara some resources for her table.
  - **Danielle Meyer**: Has a cohort that will be presenting.
- **Christa Schulz**: Agree with the previous comments about the Injury Prevention Outreach. Is there a place to post information?
  - Can post on Family to Family Health Information Center (Tamara Bakewell) and Jacqueline DeSilva's Facebook pages. Check with National EMSC and NEDARC.
- **Erik Kola**: Is there data that looks at behavioral, developmental or lifestyle and what percentage of calls are coming from one side or the other?
- Dr. Paul Rostykus (public comment): Injury Prevention potential topics: Drowning, life jackets and infant safe sleep.
- Katrina Doughty (public comment 211 Info-Maternal and Child Health Coordinator): 211 takes calls statewide and shares information for resources. It is resource driven, covering maternal health, housing, transportation and it is a good platform to share information. Facebook page is called 211info. You can share your information with 211, tag us or fill out form on website.

#### 11. Meeting Adjourned 11:17 a.m.

#### NEXT MEETING: October 10, 2019 9:00 a.m. - 12:00 p.m., PSOB Room 1D