

Welcome!

You are being asked to participate in a nationwide assessment to help us better understand how pediatric emergency care is integrated in your EMS agency. This paper version of the assessment was developed to assist you in collecting the data necessary to officially submit your response online.

Some things you might want to know:

- We anticipate that the assessment will take approximately 5-10 minutes to complete.
- Results from the assessment will be used to track ongoing success in integrating the needs of children into our overall emergency care systems.
- Questions with an asterisk (*) are required for completing the assessment online.

Before you get started, please tell us about your EMS agency....

1. *Name of your EMS Agency: _____

2. *Address: _____

3. *City: _____

4. *Zip Code: _____

5. *Does your EMS agency respond to 911 emergency medical calls (or emergency medical calls placed through other emergency access numbers if used in your region)?

☐ Yes → **Go to 6**

☐ No
↓

If your EMS agency DOES NOT respond to 911 calls, you are finished with the assessment. Thank you for your time.

6. Approximately how many 911 calls (both adult and pediatric) did your EMS agency respond to in the last year?

(Numeric data only, e.g., 5000, not “five thousand”)

7. Which one of the categories below approximates the number of 911 calls your EMS agency responded to for *PEDIATRIC PATIENTS* (as defined by your agency) in the last year?

(Choose one)

- ☐ a. Twelve (12) or fewer pediatric calls in the last year (1 or fewer pediatric calls per month)
- ☐ b. Between 13-100 pediatric calls in the last year (1 - 8 pediatric calls per month)
- ☐ c. Between 101-600 pediatric calls in the last year (8 - 50 pediatric calls per month)
- ☐ d. More than 600 pediatric calls in the last year (more than 50 pediatric calls per month)
- ☐ e. None

8. *What is the *HIGHEST* level of certification or licensure for your EMS *AGENCY*?

(Choose one) *While we realize that your agency may have other levels of certification, we ask that you only provide a response for the choices listed below.*

- ☐ a. Basic Life Support (BLS)
- ☐ b. Intermediate Life Support (ILS)
- ☐ c. Advanced Life Support (ALS)

9. Approximately, how many *EMS PROVIDERS* currently work at your agency for each of the following level(s) of licensure?

(If no providers for a licensure level, enter 0) *Your agency may employ other types of providers than those listed here. For purposes of this assessment, we only need you to provide responses for these four types.*

Provider Level	Number of Providers Full & part-time, volunteer & paid
Emergency Medical Responder (EMR)	
Emergency Medical Technician (EMT)	
Advanced EMT (AEMT)	
Paramedic	

Evaluating EMS Providers' Skills Using Pediatric-Specific Equipment

In the next set of questions, we are asking about the process that your agency uses to evaluate your EMS providers' skills using pediatric-specific equipment (i.e. airway adjunct use/ventilation, child safety restraint vehicle installation for pediatric patient restraint, IV/IO insertion and administration of fluids, etc.).

While individual providers in your agency may take PEPP or PALS or other national training courses in pediatric emergency care, we are interested in learning more about the process that your agency uses to evaluate provider skills on pediatric equipment.


We realize that there are multiple processes that might be used to assess the correct use of pediatric equipment; we are interested in the following three processes:

- At a skill station
- Within a simulated event
- During an actual pediatric patient encounter

10. *At a **SKILL STATION** (not part of a simulated event), does your agency have a process which **REQUIRES** your EMS providers to **PHYSICALLY DEMONSTRATE** the correct use of **PEDIATRIC- SPECIFIC** equipment?

(This is an isolated skill check rather than part of a simulated event.)

☐ Yes
☐ No



→ Skip to 12

Do all providers practice using pediatric equipment and document the training?


11. *How often is this process required for your EMS providers?

(Choose one)

- ☐ a. Two or more times a year
- ☐ b. At least once a year
- ☐ c. At least once every two years
- ☐ d. Less frequently than once every two years

12. *Within a **SIMULATED EVENT** (such as a case scenario or a mock incident), does your agency have a process which **REQUIRES** your EMS providers to **PHYSICALLY DEMONSTRATE** the correct use of **PEDIATRIC- SPECIFIC** equipment?

☐ Yes
☐ No



→ Skip to 14

Does your service participate in pediatric scenarios or mock incidents such as alcohol awareness mock crashes? If so, the answer would be yes!


13. *How often is this process required for your EMS providers?

(Choose one)

- ☐ a. Two or more times a year
- ☐ b. At least once a year
- ☐ c. At least once every two years
- ☐ d. Less frequently than once every two years

14. *During an actual **PEDIATRIC PATIENT ENCOUNTER**, does your agency have a process which **REQUIRES** your EMS providers to be observed by a **FIELD TRAINING OFFICER, MEDICAL DIRECTOR, or SUPERVISOR** to ensure the correct use of **PEDIATRIC-SPECIFIC** equipment?

☐ Yes
☐ No



→ Skip to 16

This question may only pertain to the larger paid services.

15. ***How often is this process required for your EMS providers?** (Choose one)

- ☐ Two or more times a year
- ☐ At least once a year
- ☐ At least once every two years
- ☐ Less frequently than once every two years

16. **If you have any additional thoughts about skill checking, please share them here:**

Coordination of Pediatric Emergency Care

Now we are interested in hearing about how pediatric emergency care is coordinated at your EMS agency. This is an emerging issue within emergency care and we want to gather information on what is happening across the country within EMS agencies.

One way that an agency can coordinate pediatric emergency care is by DESIGNATING AN INDIVIDUAL who is responsible for coordinating pediatric-specific activities that could include: **This individual is your designated Pediatric Emergency Care Coordinator (PECC)!**

- Ensuring that the pediatric perspective is included in the development of EMS protocols.
- Ensuring that fellow providers follow pediatric clinical-practice guidelines and protocols.
- Promoting pediatric continuing-education opportunities.
- Overseeing pediatric-process improvement.
- Ensuring the availability of pediatric medications, equipment, and supplies.
- Promoting agency participation in pediatric-prevention programs.
- Promoting agency participation in pediatric-research efforts.
- Interacting with the ED pediatric emergency care coordinator.
- Promoting family-centered care at the agency.

A DESIGNATED INDIVIDUAL who coordinates pediatric emergency care need not be dedicated solely to this role; it can be an individual already in place who assumes this role as part of their existing duties. The individual may be a member of your agency, or work at a county or region level and serve more than one agency.

Your service may already have someone who does this task, but does not have a title. If you have such a person or have a PECC, the answer would be a.

17. *Which one of the following statements best describes your EMS agency?

(Choose one)

- ☐ a. Our EMS agency **HAS** a designated INDIVIDUAL who coordinates pediatric emergency care —————> **Go to 18**
- ☐ b. Our EMS agency does **NOT HAVE** a designated INDIVIDUAL who coordinates pediatric emergency care at this time —————> **Go to 31**
- ☐ c. Our EMS agency does **NOT CURRENTLY** have a designated INDIVIDUAL who coordinates pediatric emergency care but we **HAVE A PLAN TO ADD** this role within the next year —————> **Go to 31**
- ☐ d. Our EMS agency does **NOT CURRENTLY** have a designated INDIVIDUAL who coordinates pediatric emergency care but we would be **INTERESTED IN ADDING** this role —————> **Go to 31**

18. *You indicated that you have a designated individual who coordinates pediatric emergency care at your EMS agency. Is this individual:

(Choose one)

- ☐ a. A person who coordinates care only for your agency
- ☐ b. A person who coordinates care for your agency as well as other agencies

We are interested in understanding a little bit more about what this individual does for your agency in the coordination of pediatric emergency care.

Does this individual...

(Check Yes or No for each of the following questions)

19. *Ensure that the pediatric perspective is included in the development of EMS protocols?

☐ Yes

☐ No

If your services follow the state model protocols, the answer would be yes. If you do not use the state protocols but follow protocols approved by your Physician Medical Director, does it include pediatric protocols. If it does the answer would be Yes.

20. *Ensure that fellow providers follow pediatric clinical practice guidelines and/or protocols?

☐ Yes

☐ No

Are your providers familiar with written protocols and do they follow them?

21. *Promote pediatric continuing education opportunities?

☐ Yes

☐ No

Do you encourage your providers to attend or host pediatric education? If you do, the answer would be Yes!

22. *Oversee pediatric process improvement initiatives?

☐ Yes

☐ No

Does your service participate in run reviews or analyze your patient data to improve your patient outcomes?

23. *Ensure the availability of pediatric medications, equipment, and supplies?

☐ Yes

☐ No

Does your service complete an inventory of medications (if the service carries), pediatric equipment and supplies and replace as needed?

24. *Promote agency participation in pediatric prevention programs?

☐ Yes

☐ No

Does your service participate in pediatric prevention programs in your community, such as, but not limited to health fairs, bike rodeos or EMS week activities?

25. *Coordinate with the emergency department pediatric emergency care coordinator?

☐ Yes

☐ No

Does your service communicate with the hospital regarding pediatric runs or questions that may arise regarding the pediatrics?

26. *Promote family-centered care?

☐ Yes

☐ No

Do your providers involve parents/caregivers in the treatment of a pediatric patient or special needs child?

27. *Promote agency participation in pediatric research efforts?

☐ Yes

☐ No

Does your service read articles published regarding pediatric patients such as: safe transport, new equipment, evidence based medicine? Collect data through patient care reports (PCR's)/Image Trend or participating in this national survey is considered research efforts. If you service does any of the above the answer is Yes.

28. *Other activities?

☐ Yes

☐ No

→ **Go to 30**

29. *You marked 'other' to the previous question. Please describe the 'other' activity/activities performed by the designated individual who coordinates pediatric emergency care at your agency.

30. If you have any additional thoughts about pediatric emergency care coordination, please share them here:

In case we have follow-up questions, please tell us...

31. *First and last name of the person completing this assessment:

32. *Job title of the person completing this assessment:

33. *Email address of the person completing this assessment:

34. Phone number for your EMS agency:_____

35. If you have any other additional thoughts about this assessment, please share them here:

You are now finished with the assessment. Please officially submit your response online.

This online assessment will begin on January 7th, 2020. Participation allows us to collect data as we look for ways to improve pediatric care in our state and at the national level. This survey is a requirement for the EMS for Children performance measures and continued grant funding.

This grant has provided your agency with pediatric equipment through partnerships with DOH/HCC and has provided resources to include: Pediatric training, emoji communication and peds resource cards, pediatric scenario/skills manuals, safe transport guidelines/protocol template and Emergency Care Guidelines for Schools.

Thank you for your time.