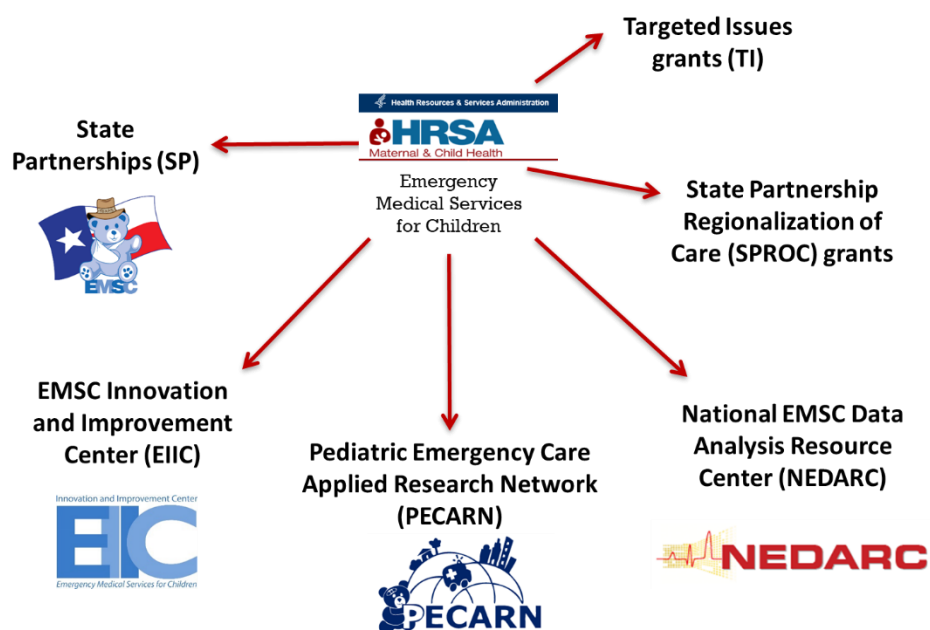




## Announcing EMSC Scholars and Fellows Programs

The Emergency Medical Services for Children (EMSC) Program was initially authorized by Congress in 1984. Since then, the HRSA-EMSC Program has grown awareness, tools and partnerships to drive improvements in pediatric emergency care delivery across the nation. Each of the six arms of HRSA-EMSC plays a distinct role within and across the emergency care landscape; together they have led to a significant transformation in pediatric emergency care. The pillars of HRSA-EMSC include: 1) Workforce Infrastructure, 2) Improvement Science, 3) Evidence Generation, 4) Accountability, 5) Systems Integration, and 6) Innovation.



Within the EMSC space, the EMSC Innovation and Improvement Center (EIIC) provides other EMSC grantees and the larger emergency care community with training, support and tools to improve pediatric readiness of emergency care systems across the continuum of care. The EIIC curates evidenced-based pediatric emergency care resources, leverages quality improvement methodology to minimize morbidity and mortality in children, and utilizes a systems-based approach to align priorities and efforts across diverse organizations.

#55 | November 25, 2020

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### IN EVERY ISSUE

- ✓ SAVE THE DATES
- ✓ WELCOME TO EMSC
- ✓ EMSC PUBLICATIONS
- ✓ SHARING GOOD RESOURCES

The EMS for Children Innovation and Improvement Center is supported by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) as part of an award (U07MC37471) totaling \$3M with 0 percent financed with nongovernmental sources. The contents are those of the author(s) and do not necessarily represent the official views of, nor an endorsement, by HRSA, HHS or the U.S. Government.

### Follow us on social media!

- @EMSCImprovement
- Facebook
- LinkedIn
- @emsciic

In an effort to grow future leaders within the EMSC space, the EIIC offers two opportunities to engage early career clinicians and health systems trainees. All clinicians (i.e., emergency medical technicians, paramedics, nurse, advanced practice providers, physicians) and graduate students or early career faculty within related fields (e.g., health policy, healthcare administration, and public health) are encouraged to apply now until January 15, 2021. The opportunities offered are the following:

- 1) **EMSC Scholars Program:** designed to support early career (<5yrs post-training) clinicians and health-systems professionals to become future leaders in the EMSC space. During this 1-2 year program, EMSC Scholars will work alongside EIIC leaders to develop and implement a unique project focused on a key area(s) of interest. EMSC Scholars' projects cross two or more domains of interest including advocacy, knowledge translation, knowledge dissemination, marketing and communications, prehospital pediatric readiness, pediatric readiness of emergency departments, quality improvement methodology, analytics, workforce development, health policy, healthcare administration, research, and value-based care. Appointments: 1-2 years, Time commitment: 2-4 hours/week.
- 2) **EMSC Fellows Program:** designed to support trainees and early career professionals with an opportunity to engage in EIIC-led efforts to better understand systems-based strategies for improvement. Fellows are invited to serve on national steering committees to better understand the work of EMSC stakeholders. Fellows will be assigned to a single domain of focus and one or more EIIC mentors who will provide ongoing support and opportunities for participation. Appointments: 1-2 years, Time commitment: 2-4 hours per month, participation in steering committee meetings and associated activities.

For more information about the EMSC Scholars and Fellows Programs and to apply, please visit the EIIC website [here](#).

## NEDARC



### EMS Survey Opens in January 2021

The EMS survey to collect EMSC 02 and 03 data will open Jan 6, 2020. In preparation to help promote the data collection, the Program has created an official name for the survey. Check out the new OFFICIAL survey title by watching this 30 second video:

[https://youtu.be/cMbT\\_BdR6IU](https://youtu.be/cMbT_BdR6IU)

### NPRP Pilot Continues in Colorado and Louisiana

The pilot for the National Pediatric Readiness Project (NPRP) is still in progress. EMSC programs are working hard to promote the assessment among hospitals in their state. More information about the upcoming NPRP assessment will be forthcoming to all grantees in the coming months.



## Prehospital Domain Update!

The EIIIC Prehospital Domain supports all prehospital care-related activities within EMSC. Currently, the primary focus of the Prehospital Domain is supporting the national Prehospital Pediatric Readiness Project (PPRP).



In anticipation of the publication of a joint policy statement on pediatric readiness in Emergency Medical Services Systems, the EIIIC convened the PPRP Steering Committee, comprised of representatives from federal partners (HRSA/MCHB, NHTSA Office of EMS, Indian Health Services, ASPR Office of Emergency Management and Medical Operations), EMSC State Partnership Programs (Program Managers and FAN), and 20 national organizations. The purpose of the PPRP Steering Committee is to ensure emergency care for all children by improving the pediatric emergency care outcomes and patient safety at the local, regional, and state levels within the prehospital environment.

In July 2020, the Steering Committee approved an EMS Agency Pediatric Readiness Checklist, which is based on the Pediatric Readiness in Emergency Medical Services Systems Policy Statement. The purpose of the Checklist is to foster the self-assessment of EMS agency pediatric readiness. Earlier this year, the PPRP Steering Committee formed three work groups to accomplish different key processes to reach the Steering Committee's goals, which can be found in the Charter. The objectives of these work groups include: creation of a Frequently Asked Questions document (to support EMS agency use of the Checklist), development of a toolkit for EMS agencies to use, and development of an EMS agency national assessment of prehospital pediatric readiness (based on the Checklist).

The steering committee recently met in October 2020 to collaborate and share the progress being made by each work group. The feedback on a recent pilot of the PPRP Checklist was presented and work is underway to finalize a Frequently Asked Questions document. It is anticipated that there will be a nationwide rollout in late 2020. The PPRP Toolkit content has been developed and will be made available in a user-centric platform housed on the EIIIC webpage. The availability of the PPRP Toolkit will coincide with the launch of the PPRP Checklist and is projected to go live in 2021. The Steering Committee also reviewed draft questions for the national PPRP assessment of EMS Agencies. The official launch date of the national EMS assessment is yet to be determined.

To learn more about the PPRP Steering Committee and the work happening in the EIIIC Prehospital Domain, please visit our page on the EIIIC website here. For questions, email <mailto:pprp@emscimprovement.center>.

## Provide Your Input on the Final Draft of the National EMS Education Standards

The final draft of the proposed revisions to the National EMS Education Standards is now available for public comment. Members of the EMS community and the public are invited to review the document and provide feedback to the team leading the effort by Monday, December 14, using this [online form](#).

The revision of the National EMS Education Standards is spearheaded by a team of experienced EMS professionals convened by the National Association of EMS Educators (NAEMSE), with support from the NHTSA Office of EMS and the Health Resources and Services Administration (HRSA), Maternal and Child Health Bureau's EMSC program. The team has engaged with stakeholders across EMS and healthcare to create this final draft of the standards, and a final publication of the revised National EMS Education Standards is anticipated in early 2021. The revision effort follows on the heels of last year's publication of an updated National EMS Scope of Practice Model.

Please contact the project team with questions or additional input on this project at [educationstandards@redflashgroup.com](mailto:educationstandards@redflashgroup.com).



## National Association of State EMS Officials

### Organizational Activities

NASEMSO has recently been awarded various new federal contracts, including the following from the National Highway Traffic Safety Administration (NHTSA) Office of EMS (OEMS):

- Support for People-Centered State EMS Systems (implementation of [EMS Workforce Guidelines](#))
  - EIIIC representation on the Technical Advisory Panel = Dr. Kathleen Adelgais
- Model Clinical Guidelines, 3rd Revision
  - AAP-COPEM will be invited to the Technical Advisory Panel
- Evidence-Based Guideline for Prehospital Pain Management
  - Dr. Manish Shah has replaced Dr. Harry Sibold as the Co-Investigator from NAEMSP

### Pediatric Core Outcome Set After Cardiac Arrest (P-COSCA) Advisory Seeks to Improve Peds Resuscitation

In 2018, the International Liaison Committee on Resuscitation (ILCOR) sponsored the COSCA initiative (Core Outcome Set After Cardiac Arrest) to improve consistency in reported outcomes of clinical trials of adult cardiac arrest survivors and has since supported a new P-COSCA initiative (Pediatric COSCA). The P-COSCA includes assessment of survival, brain function, cognitive function, physical function, and basic daily life skills. Survival and brain function are assessed at discharge or 30 days (or both if possible) and between 6 and 12 months after arrest. Cognitive function, physical function, and basic daily life skills are assessed between 6 and 12 months after cardiac arrest. Because many children have prearrest comorbidities, the P-COSCA also includes documentation of baseline (i.e., prearrest) brain function and calculation of changes after cardiac arrest. Supplementary outcomes of survival, brain function, cognitive function, physical function, and basic daily life skills are assessed at 3 months and beyond 1 year after cardiac arrest if resources are available. To access *P-COSCA (Pediatric Core Outcome Set for Cardiac Arrest) in Children: An Advisory Statement From the International Liaison Committee on Resuscitation*, go [here](#).

## ElIC Strengthens Our Commitment to Social Justice, Equity and Equality

The mission of the Emergency Medical Service for Children Innovation and Improvement Center (ElIC) is to reduce child and youth morbidity and mortality resulting from severe illness or injury in ALL children. We recognize that advocating for social justice, equity and equality is essential for improving quality and safety.

Each month, we will devote a section of this newsletter to this topic that will highlight diverse voices from our stakeholders and include resources from our partners and collaborating national organizations. This month's segment has been submitted by Robin Suzor, Montana EMS for Children Program Manager.

## Culture of Care Toolkit

The Montana EMSC developed a Cultural of Care Toolkit to provide resources and training to facilitate the development of cultural competence and humility in one's self, colleagues, the work environment and its application to practice.

Cultural competence is the ability of health organizations and practitioners to recognize the cultural beliefs, values, attitudes, traditions, language preferences, and health practices of diverse populations and to apply the knowledge to produce a positive health outcome.

Cultural Competence is possessing knowledge-based understanding and skills with which to provide culturally acceptable and relevant care with diverse cultures. Cultural Humility is:

- A life-long process of self-reflection that includes being aware of one's personal beliefs and biases,
- Understanding and recognizing the inherent power imbalances in patient provider communication, and
- Using patient focused care to demonstrate mutual respect and partnership with patients, families, and co-workers.

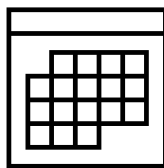
Cultural competence is grounded in a set of ethical principles that guide continual cultivation of self-awareness, respectful behaviors, and the pursuit of knowledge. The culturally competent health care professional should be a positive role model and provide training to others on cultural competency, as well as open to listening and learning from all. This action creates a collaborative, respectful work environment and a responsive culture of care.

An understanding of cultural diversity, health disparities, health literacy, and cultural competence is vital in providing the best possible interactions with those of which you serve.

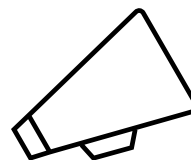
This Culture of Care Toolkit provides information and activities that will help increase knowledge on:

- How population data presented by race and ethnicity has contributed to making health disparities a priority in our state and the nation.
- How cultural competence begins with the individual.
- How language and culture influence how we approach health and provide care.
- How Providers and patients/clients bring their unique cultural backgrounds and expectations to the medical encounter.
- How there must be effective communication between patients and providers for quality care to result.

This Culture of Care Toolkit is organized into specific training modules that can be utilized in one-hour segments or in any training time frame that fits the organizations' specific needs. Each training component, along with a short activity, help to enhance knowledge of providing culturally appropriate care in a practice, service and or facility. A genuine understanding of cultural and patient centered care concepts is critical in treating unique patient populations. Learn more about the toolkit by following this [link](#).



Mark your Calendar!



### EMSC Town Halls Occur Quarterly: Block your calendar now!

The next EMSC Town Hall call is on Wednesday February 10<sup>th</sup> from 3:00 pm to 4:30 pm eastern time. Join here: [https://hrsa.connectsolutions.com/emsc\\_town\\_hall/](https://hrsa.connectsolutions.com/emsc_town_hall/)

**Shriners Hospitals for Children® - Honolulu** presents The SEARCH 'Aha – Thursday December 3, 2020 7:30 am – 4:00 pm. This is a virtual event with free CME. Click [here](#) for more details and registration.

### American College of Surgeons (ACS) Trauma Quality Improvement Program (TQIP) Scientific Meeting and Training - December 7–10, 2020.

We are excited to bring you the first virtual edition of the Trauma Quality Improvement Program (TQIP) Annual Scientific Meeting and Training. This meeting brings together trauma medical directors, program managers, coordinators, PI clinicians, and registrars from participating and prospective TQIP hospitals and provides an online venue in which to interact with key leaders from trauma centers around the country. [Register](#) today to take advantage of this opportunity to network with your fellow trauma professionals and share best practices.

**PEM Fellows Conference** - The 2021 PEM Fellows Conference will be held virtually on February 10th and 11th 2021. We have an exciting lineup of presenters, as well as opportunities to network and collaborate with prestigious PEM faculty from across the country. Fellows will also have the opportunity to present their research and receive feedback from experts in the field.

#### Telehealth Collaborative:

Who: State Partnership Teams

What: Implement telehealth programs to support Children and Youth with Special Health Care Needs (CYSHCN) and children with behavioral health emergencies

When: January 2021 – June 2021

#### PECC Workforce Development Collaborative:

Who: Emergency care providers across the continuum of care, State Partnership Program Managers

What: Support pediatric champions to become Pediatric Emergency Care Coordinators

When: June 2021 – June 2022

#### Behavioral Health Collaborative:

Who: Emergency care providers across the continuum of care, State Partnership Program Managers

What: Improve emergency care systems to meet the behavioral health needs of children

When: June 2022 – June 2023

#### Pediatric Readiness Quality Collaborative v2:

Who: Emergency department providers, PECCs, State Partnership Program Managers

What: Implement local efforts to assess and improve quality of emergency care delivery for children

When: June 2023 – June 2024





## Request for Information (RFI): Fostering Innovative Research to Improve Mental Health Outcomes Among Minority and Health Disparities Populations

The National Institute of Mental Health (NIMH) is interested in hearing from all interested parties about the next generation of innovative research priorities to improve mental health outcomes among minority and health disparities populations in the U.S. The NIMH is deeply committed to improving minority health outcomes and addressing mental health disparities through cutting-edge research.

The deadline to respond has been extended to **December 11, 2020**. All comments must be submitted via email as text or as an attached electronic document. Your responses should be addressed to: [nimhodwd@nih.gov](mailto:nimhodwd@nih.gov). Please include the Notice number ([NOT-MH-20-073](#)) in the subject line. Responses to this RFI are voluntary. The submitted information will be reviewed by NIH staff.

[Read the RFI](#)



## Maternal and Child Health Bureau Strategic Plan

We are developing a new Strategic Plan to provide a roadmap for MCHB's future. The strategic plan will guide MCHB's efforts to advance the health and well-being of mothers, children and families in the United States. We seek your innovative ideas, experience, and feedback to ensure the strategic plan positions MCHB to:

- Respond effectively to future needs of maternal and child health (MCH) populations
- Accelerate improvement in equitable MCH health and well-being outcomes
- Incorporate public health advancements
- Leverage new technologies
- Translate emerging MCH evidence into practice

Please review our [request for information](#) and share your comments. We encourage input from a broad range of stakeholders.

Please submit comments to [MCHStrategy.hrsa@hrsa.gov](mailto:MCHStrategy.hrsa@hrsa.gov) by Friday, December 18, 2020 by 11:59 p.m. Eastern Time.



## NEW!! NQF Rural Telehealth and Healthcare System Readiness Committee

The National Quality Forum (NQF) is convening a multi-stakeholder committee to create a measurement framework linking quality of care delivered by telehealth, healthcare system readiness, and health outcomes in a disaster. The new Rural Telehealth and Healthcare System Readiness Committee will build on the [2016-2017 Framework to Support Measure Development for Telehealth](#) and the [2019 Healthcare System Readiness Measurement Framework](#). The Committee will focus on quality of care provided in rural areas and will

discuss, update, and enhance the previously developed telehealth framework to ensure its relevance for person-centered measurement, patient safety, and value-based measurement and to ensure it addresses new as well as ongoing opportunities and challenges, in part due to the COVID-19 pandemic. For more info on the committee or to sign up for project updates, click this [link](#).

## HRSA's National Survey of Children's Health

Each year the Maternal and Child Health Bureau at the Health Resources and Services Administration (HRSA) collects information from parents and caregivers on the physical, emotional, and behavioral health of children ages 0-17 years old in the United States. The survey is meant to be a tool with reliable data for researchers and policymakers on a wide range of factors that can influence children's health – from the prevalence and impact of special health care needs, to adverse childhood experiences and [mental and behavioral health](#). HRSA also released a new brief on [Rural/Urban Differences in Children's Health](#) using the combined data of the 2017-2018 surveys. Find more [here](#).

## New CDC Report Provides Insight to Teen Vaping

A new report posted in the Morbidity and Mortality Weekly Report recently published by the Centers for Disease Control and Prevention evaluated electronic vaping devices used among high school students. While the study was somewhat limited in number, the CDC observes that "School-based efforts to reduce and prevent tobacco product use are most effective when they are part of a comprehensive approach along with other evidence-based population-level strategies. School-level efforts could include adopting tobacco-free policies (including e-cigarettes) with enforcement measures that include access to resources and treatment for students, rather than punishment; implementing evidence-based curricula not sponsored by tobacco companies; and educating school staff members and parents about the changing product marketplace and known health risks of youth tobacco product use, including e-cigarettes." [Read more](#).





## American Academy of Pediatrics



DEDICATED TO THE HEALTH OF ALL CHILDREN®

## BLUEPRINT FOR CHILDREN

Following a period of uncertainty marked by a global pandemic and a national moment of racial reckoning, we are facing potential transitions in leadership: from the White House, to Congress, to the Supreme Court, and to the states. Children, families and communities are counting on our nation's leaders to act and advance policies that keep them healthy and safe.

We can and must do more for children.

That is why the American Academy of Pediatrics (AAP) has updated its [Blueprint for Children](#), which outlines a **comprehensive child health policy agenda for 2020 and beyond**.

This *Blueprint for Children* makes clear how much is at stake. It reflects on the State of Children in 2020 and recommends policies to promote healthy children, support secure families, build strong communities, and reclaim America's role as a leading nation for youth.

History shows us that when we invest in children, we invest in our country's future. To read the Blueprint for Children, please visit [AAP.org/Blueprint](https://AAP.org/Blueprint).

## Family Advisory Network (FAN) Mail!

What is FAN Mail? In each issue of the EMSC Pulse, you will find a "FAN Mail" section with information specific to our Family Advisory Network (FAN) members. Each issue will contain announcements, links to resources and highlights of the work being accomplished by the FAN members across the country.

### Help Us Update the FAN Roster!

We're working on ensuring that we have an up-to-date FAN Roster. If you have not already confirmed your membership in the FAN, please reach out to our new FAN Project Manager, Jennifer Talley, at [Jennifer.Talley@uhhospitals.org](mailto:Jennifer.Talley@uhhospitals.org) If you're a State Partner in need of a FAN, please let us know that, too!



### Help Us Make a Plan for FAN 2020-2024

We are beginning our Strategic Planning process, and we need your input! How do you feel FAN would be most effectively used with in the EIIC? What projects would you like to see FAN work towards? What strengths and opportunities for growth do you think the FAN has? We will be distributing a formal feedback instrument, but if you have feedback or thoughts on a FAN Strategic Plan that you'd like to share, please e-mail Jennifer at [Jennifer.Talley@uhhospitals.org](mailto:Jennifer.Talley@uhhospitals.org)

Particularly as we approach the festive season when focus is placed on family and quality time, it is important that we show our appreciation for those who work tirelessly to provide care; whether it be financial, medical, domestic or emotional support. We must never underestimate the strength that caregivers have for providing this support to those people who need it the most, nor the toll that it can take both emotionally and physically upon them.

