



EMSC

Update

**New York State Department of Health
Bureau of Emergency Medical Services**

Emergency Medical Services for Children Update

Vol. 3, Issue 2 2001

A message from the Bureau of Emergency Medical Services

Every one of us was affected by the tragic events of September 11, 2001 whether we were watching the events unfold on t.v. or were called to action. As the events unfolded, the New York State Department of Health, the New York City Health Department, and many other agencies took immediate steps necessary for a coordinated response to the emergency situation. The New York State Department of Health, Bureau of Emergency Medical Services staffed and continues to dedicate staff to work at the State's Emergency Management Office and at the New York City Emergency

Management Office to coordinate emergency medical services response from all corners of the state. The central office fielded a tremendous number of calls from all types of health care providers wanting to assist. The Bureau coordinated deployment of over 500 ambulance vehicles to New York City. All EMS services that were called to the site, as well as those who remained at home to maintain service to their communities, are commended for their exemplary call to duty.

Our hearts go out to all emergency workers who lost their lives in the disaster along with the thousands of victims of the tragedy. We are reminded that the emergency workers who lost their lives that day lost their

lives doing what they were trained to do. All are heroes.

As we all struggle to cope with this enormous tragedy and prepare for whatever challenges may lie ahead, may we take a moment to remember and honor those emergency medical services providers who lost their lives responding to the call on September 11, 2001. Six emergency medical services lost a total of eight providers. Those services are: Cabrini Medical Center, Forest Hills Volunteer Ambulance Corps, the Fire Department of New York, Hunter Ambulance Service, Metrocare Ambulance, and New York Presbyterian Medical Center.

The Bureau of Emergency Medical Services would also like to

thank all those who called or e-mailed our office to inquire as to our well being. Your concern and support was much appreciated.

One last note, but certainly not least in light of those we are striving to serve in EMSC – the children – it is our hope that the children orphaned or having lost at least one parent in this tragedy, upwards of 10,000, may find the help and hope they need to heal their lives and carry on.

The New York City Regional EMS Council and the Greater New York Hospital Association have established a fund to support the families of those EMS providers who lost their lives in the World Trade Center disaster.

If you would like to make a donation to this fund, please make checks payable to the Greater New York Hospital Foundation, Inc. and send it to:

EMS Fund
Greater New York
Hospital Foundation
PO Box 32422
Hartford, CT 06150-2422

Communicating with Children about Disasters

Many of us who have contact with children have had to face their questions and fears regarding the events of September 11, 2001. Experts agree that being honest with children to the degree that is developmentally appropriate, while assuring them that they will be safe and taken care of, is an appropriate response. Keeping the lines of communication open is equally important. The following resources are available to provide assistance.

The American Academy of Pediatrics (AAP) has provided some advice on how to communicate with children and adolescents during times of crisis. To summarize, the AAP recommends that parents/caregivers communicate to children that they are safe – that they have taken steps to ensure their safety.

For additional advice, consult the AAP's web site at

www.aap.org/advocacy/relieves/disastercomm.htm.

Additional web sites that may help children to cope with disaster are:

American Academy of Child and Adolescent Psychiatry -----
www.aacap.org/publications/DisasterResponse/index.htm

“Helping Children After a Disaster”:
www.aacap.org/publications/factsfam/disaster.htm

National Center for PTSD
www.ncptsd.org/facts/disasters/fs_children_disaster.html



Help for Prehospital Providers: Training in Emergency Care for Children with Special Health Care Needs

The New York State Department of Health, Bureau of Emergency Medical Services, EMSC Program has recently taken steps to provide EMS providers with information to help them assess and treat the emergency care needs of children with special health care needs whom they may encounter in their communities. The Department has provided an interactive, educational CD-ROM entitled, **“Meeting the Challenge: Improving Emergency Medical Care for Children with Special Health Care Needs”**, to the training officers of every certified EMS agency in the state. This educational tool was developed by the Arizona Board of Regents on behalf of The University of Arizona.

The term, *children with special health care needs*, is defined by the American Academy of Pediatrics as those children who have, or are at risk for, chronic physical, developmental, behavioral, or emotional conditions and who also

require health and related services of a type or amount not usually required by typically developing children. Approximately 12 million children have special health care needs - 18% of U.S. children. Advances in medical technology have enabled many more children who have special health care needs than ever before to live at home in their communities. Therefore, it is imperative that prehospital care providers be prepared to provide care to this special population and understand what needs to differ in their general approach, assessment, treatment, and transport.



Each certified EMS agency now has the opportunity to provide their prehospital care providers with information on what some of the unique needs of these children are such as what

kinds of assistive-technology they may encounter upon being called to a medical emergency. What makes this training tool unique is that it can be used by an individual prehospital care provider at a personal computer at his/her own pace and when it is convenient for them. Topics covered in this CD-ROM include general considerations such as approach to assessment, respiratory issues such as tracheotomies, circulatory issues, and neuromuscular considerations. At the end of each of these sections, there are case scenarios which enable the student to view a situation on video, and then to test his or her knowledge by answering questions.

The Department of Health intends that this CD-ROM will be used for general educational purposes – to familiarize providers with various aspects of prehospital care of children with special health care needs. It is not intended to replace current medical protocols. If a prehospital care provider has any concerns or questions regarding what specific procedures and protocols are to be used, he/she is encouraged to consult with the agency’s Medical Director or refer

the matter to the appropriate regional emergency medical advisory committee for consideration.

To get more copies of "Meeting the Challenge: Improving Emergency Medical Care for Children with Special Health Care Needs", contact the EMSC National Resource Center Clearinghouse at (703) 902-1203 or order directly from their web site: www.ems-c.org.

EMSC Spreads the Word on Child Injury Prevention

On July 30, 2001, the EMSC Program completed its series of presentations for EMS providers entitled, "How to Get Involved in Preventing Pediatric Injuries." The EMSC Program teamed up with Albany Medical Center to present the seminar at the facility.



Sharon Chiumento, RN, EMT-P, of the Office of Prehospital Care at the University of Rochester and Lt. David Walker, Community Educator at the North Greece Fire Department, provided participants with information on how to put together a community-based child injury prevention program. Specific examples were given of how fire/ems agencies could get involved and how to partner with other health professionals and organizations to help manage and share in the project's activities. In addition, Sharon and Dave used concrete examples of how to conduct a needs assessment, identify project partners, implement activities, and evaluate the project based on their involvement in a child injury prevention project in Monroe and Livingston Counties.

The EMSC Program had a unique opportunity to reach EMS providers and other health care professionals outside the Capital District area through videoconferencing of this workshop. Five additional facilities participated through the Adirondack Area Network which enabled real-time, interactive

videoconferencing. Participating facilities were Mary McClellan Hospital, Moses Ludington Hospital, Iroquois Healthcare Alliance, and Adirondack Community College. Over 50 fire/ems professionals and other health care providers attended the one and a half-hour session.

Would you like your own video copy? If

yes, contact the Adirondack Area Network at 479-1226. There is a nominal fee for copies.

Vital Signs 2001 and EMSC Day

This year's statewide EMS Conference, "Vital Signs 2001", took place October 26-28, ²⁰⁰¹ at the Empire State Plaza Convention Center in Albany, New York. The conference brought together some of the best known EMS leaders and teachers in the country. Pediatric-related workshops included a preconference session entitled, "Prehospital Pediatric Trauma Treatment, Hot Tips for Hurt Kids", a regular workshop entitled, "Pediatric Trauma – Pearls for the Pre-hospital Provider", and "Cry

Baby...Please! Neonatal Resuscitation.”

The half-day preconference on pediatric trauma focused on concepts and controversies in prehospital treatment of pediatric trauma patients. A panel of seven speakers, most of who sit on the state’s EMSC Advisory Committee, provided participants with descriptions and analyses of actual case scenarios.

The workshop on serious pediatric trauma provided essential information on assessment and treatment, particularly in regard to victims of shootings and child abuse. Lastly, “Cry Baby...Please” identified the priorities of neonatal management in an emergency situation.

A special meeting on EMSC was conducted this year in conjunction with “Vital Signs 2001”. Termed the EMSC Forum, this meeting assembled a variety of stakeholders working to improve emergency care for children to review accomplishments over the past four years and to discuss plans for the future. The meeting, held in the afternoon on Friday, October 26th at the Crowne Plaza Hotel in Albany, New York drew over forty participants. Prehospital

care providers and instructors, youth advocates, family representatives, pediatric critical care specialists, pediatric emergency physicians, emergency nurses, and flight nurses were among those in attendance.

Ms. Shulamit Lewin, MHS, from the National EMSC Resource Center provided an overview of program priorities of the federal EMSC program of the Health Resources and Services Administration. Ms. Gloria Hale, EMSC Coordinator for the NYS EMSC Program, then presented a review of program accomplishments of the previous four years in the areas of data, education, and policy.

Next, Charles Schleien, M.D., Director of Pediatric Critical Care Medicine, Children’s Hospital of New York-Presbyterian, provided an overview of the rationale for and description of the components of a regionalized system for pediatric critical care. This description was based on a consensus report of the American Academy of Pediatrics Committee on Pediatric Emergency Medicine and the American College of Critical Care Medicine

Society of Critical Care Medicine Pediatric Section, Task Force on Regionalization of Pediatric Critical Care, released in January 2000 in Pediatrics.



Following Dr. Schleien’s presentation, participants discussed issues pertaining to a regionalized system of pediatric critical care and listed a number of priority areas to be addressed in EMSC in New York State for the next few years. The New York State EMSC Advisory Committee will follow up on the EMSC Forum’s discussions and make a determination on what the highest priorities should be for EMSC in the state for the next few years.

The Abandoned Infant Protection Act

A new New York State law, The Abandoned Infant Protection Act, went into effect in July 2000. The

Act is intended to prevent infants from being abandoned in an unsafe manner that could result in physical harm to the child.

This law creates an *affirmative defense** to criminal charges of Abandonment of a Child when a parent, guardian or other legally responsible person abandons an infant under the following three conditions:

- 1) The abandoned infant is five days old or less;
- 2) The person who abandons the infant intends that the infant be safe from physical injury and be cared for appropriately;
- 3) The infant is left with an appropriate person or in a suitable location.

If the infant is left in a suitable location, the person who abandons the infant must immediately notify an appropriate person of the infant's location.

What is a "suitable location?" A suitable location is not defined in the law, however district attorneys will consider hospitals, staffed police stations and staffed fire stations to be suitable

locations so long as the child is left with a responsible member of the staff at the location.

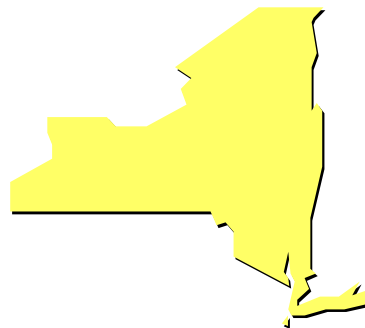
Contact your county district attorney for further information on what other places he/she might consider suitable locations in your area.

If someone leaves an infant with you, what should you do?

- If the infant is in distress or otherwise in need of medical care, secure medical attention immediately.
- If there are no medical problems contact your county department of social services during normal business hours (in NYC, the Administration for Children's Services) and advise them that you have received the abandoned infant.
- Outside of normal business hours where there is no after-hours staff, contact the New York State Child Abuse and Maltreatment hotline at 1-800-342-3720. Hotline staff will take a report and notify the child protective services of the local social services district, which will take custody of the infant.

**Affirmative defense is a term from criminal law meaning the person accused of a crime did commit the criminal act (in this case, abandoning an infant), but the person will not be subject to conviction for the crime if the conditions of the affirmative defense are met.*

For information and referral regarding The Abandoned Infant Act, call 1-866-505-SAFE (7233).



NYS Pilot Re-certification Program Renewed

The New York State Legislature has recently approved the continuation of the state's pilot re-certification program for emergency medical providers. The program allows a current NYS-certified emergency medical services agency to participate upon filing an

“Agency Participation Agreement” with the New York State Health Department, Bureau of EMS.

Providers at the BLS or ALS level, whose agency participates in the program, can waive the 3-year written examination requirement for re-certification if they meet the program’s continuing education requirements. To renew certification, an EMT/AEMT must complete at least 72 hours of appropriate continuing education that includes: 1) Refresher training (review of core content); 2) CPR Certification; 3) ACLS Certification for paramedics; 4) Additional EMS related continuing education; and 5) Verification of skill maintenance.

EMT, EMT-I, EMT-CC, and Paramedic levels each have specific requirements for completing the 72 hours of continuing education.

For more information and to obtain a Pilot Re-certification packet, please contact the Bureau of EMS at (518) 402-0996, ext. 1,4 or send an e-mail to ems@health.state.ny.us.

SAVE THE DATE! Third National Congress on Childhood Emergencies slated for April 15 - 17, 2002

The Emergency Medical Services for Children Program of the Health Resources and Services Administration Maternal and Child Health Bureau, in cooperation with the National Highway Traffic Safety Administration, will present the Third National Congress on Childhood Emergencies on April 15-17, 2002 in Dallas, Texas. The conference will be held at the Adam’s Mark Hotel. Education and training will be provided to professionals on how to improve the entire spectrum of pediatric medical care. The theme, "Taking Action, Saving Lives", reflects EMSC's all-encompassing focus. Remember to Mark Your Calendars!

“EMS Workers Are My Friends” Activity Book Available

The New York State Bureau of EMS, EMSC Program has received a limited supply of activity books for children entitled, “EMS Workers Are My Friends.” The booklets contain pictures of fire and EMS providers helping people, some vehicles or equipment that are used in emergencies, and provide safety messages geared to children.

If your agency will be providing a service or activity for grade school children and you would like to provide these activity books, please contact the NYS Bureau of EMS, EMSC Program at (518) 402-0996, ext. 1,4. We reserve the right to limit quantities provided.



For any questions regarding the NYS EMSC Program, or for article submissions on EMSC-related topics, please contact Gloria Hale, MPH, EMSC Coordinator, New York State Department of Health, Bureau of Emergency Medical Services, 433 River Street, Suite 303, Troy, New York 12180. Phone: (518) 402-0996, ext. 1,4. E-mail: ghc08@health.state.ny.us

EMSC Update is made possible through funding provided from project grant 6H33 MC 00036, EMSC Program, HRSA, USDHHS, and NHTSA and from in-kind contributions from the New York State Department of Health.

