



IDAHO DEPARTMENT OF
HEALTH & WELFARE

Bureau of EMS & Preparedness
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From the Chief

Greetings!

The weather is cooling off and the leaves are changing colors. It is hard to believe that the summer of 2013 is behind us. I hope your summer was good; ours has been busy which means I have several things to share with you.

I introduced the On-Line Rural Training Initiative (ORTI) in a previous newsletter. I am excited to announce that the ORTI pilot started on October 1st. We had a great deal of interest in ORTI with 11 agencies and over 125 EMT students participating in the pilot. The pilot will run until April of 2014 at which time we will look at the information collected during the pilot and get the program ready to fully field. I hope to have ORTI ready for all volunteer EMS agencies to use by mid-summer, 2014. We hope to continue to grow the program and offer an EMR ORTI course and then explore adding an AEMT offering at some point in the future. Our vision is for a volunteer agency to be able to start someone in ORTI at the EMR level and have them progress through the EMT and AEMT levels.

We have also made tremendous progress in our work on developing a system of care for Time Sensitive Emergencies (TSE). The TSE system concept was borne out of the work of the Healthcare Quality Planning Committee that resulted in House Concurrent Resolution 010 (HCR010) being approved by the 2013 legislature. HCR010 directs our department to form a workgroup to explore a system of care that addresses trauma, stroke and cardiac arrest. The TSE workgroup has met every month since June. The group has about 40 members from a diverse group of stakeholders. In the interest of space, I won't get into the details of the work of the group, but I would encourage you to visit the informational website that has been established to keep you informed about the group's work. The address to the website is: www.tse.idaho.gov. You can also email questions to tse@dhw.idaho.gov.

Before I close, I would like to thank the EMS agencies who hosted Chris and I during our "Chat with the Chief" tour in September. We visited Grandview, Kendrick, Bonner's Ferry, Mud Lake and Montpelier. We plan to do a similar trip every summer, so if we didn't get to your community in the past two years and you'd like to host, let me know and we'll try to get to you next summer.

Thanks again for all you do. Stay safe and hope to see you soon!

Wayne



You can submit your renewal application up to six months prior to the expiration date of your license.

Keeping you in the know is important to the Bureau of EMS & Preparedness! That is why this newsletter has been developed. The Bureau wants to keep you, the EMS providers of Idaho, up-to-date with some of the goings-on at the Bureau and with over-all EMS in the state. With the launch of this newsletter, we invite you to offer suggestions, contributions, stories, photos, recognitions, newspaper articles, or general comments about our newsletter or anything else you would like to see in it.

Send us an email at idaheems@dhw.idaho.gov

For an online version of the newsletter, visit us at www.idahoems.org

In The kNOW

FALL 2013

Idaho's EMS Quarterly Newsletter

Issue 4

AEMT NREMT Written Exam Results

The NREMT recently formed a workgroup to analyze the cognitive exam results of I-85s that are transitioning to the new Advanced EMT (AEMT). Currently the pass rate for the National AEMT written exam is hovering around 50%. The workgroup set out to find out why. This is what they reported:

- 1) Most I-85's were very close to passing. Had the majority answered 4-5 more questions correctly the pass rate would be 70% instead of 50%.
- 2) Many were acing the new material but missing the basic questions. Questions on basic skills make up 80% of the exam. The solution: review the basics during transition education.
- 3) Don't be a sucker for the AEMT answer. Many testers were selecting the answer that was obviously in the AEMT scope but was not the correct answer. Again, remember the basics.
- 4) Many missed the sequence for hemorrhage control using tourniquets. This could be because it may not have been in their initial education.
- 5) Testers would get caught up with local system or state specific nuances. Keep in mind that this is a national exam so it is based on national standards, not local protocols.
- 6) More pathophysiology. Many members of the workgroup recalled that in the early years EMS education included extensive pathophysiology but that it was stripped out in the mid-1980s. It is back now. The AEMT includes not only additional skills but a broader and deeper knowledge base.

This report was provided at the 2013 National Association of State EMS Officials annual meeting.

IDAHO VITALS

QUARTERLY PROVIDER LICENSES

	Initial	Renewal	Transition	State Total
EMR	28	9	3	336
EMT	133	77	261	2,492
AEMT	11	46	11	901
PARAMEDIC	17	21	27	721

QUARTERLY AGENCY LICENSES

New: Bannock County Sheriff, ALS-5 NT
Payette Fire, BLS NT
Playing Buffalo EMS, ALS-5 Ambulance

Clinical Downgrade:
Pritchard Murray Ambulance, ILS to BLS

Clinical Upgrade:
Gem County ILS & ALS-4 Amb. to ALS-1 Ambulance

QUARTERLY WRITTEN EXAM NUMBERS

	Tested	First-Time Pass
EMR	44	40
EMT	305	214
AEMT	4	4
PARAMEDIC	6	6

INVESTIGATION TOTALS

	Agency	Provider	Education	New Cases: 10
Open Cases:	8	12	5	
Cases Closed:	2			

TRAIN Idaho The Landing Zone Officer (LZO) course in TRAIN Idaho hasn't always been the easiest to navigate. The Bureau heard from our providers and has been working on an updated version. The new LZO course was launched in TRAIN Idaho on August 22. The new version streamlines the course content and the assessment into one training module. No more searching for the assessment! The feedback for the new LZO course has been very positive. So far, we have not received any questions about how to navigate the course, with over 140 people taking it since the new version was released. Log on today and tell us what YOU think! [TRAIN Idaho](http://www.idahoems.org)

Safe
Transportation
of Children
in
Emergency
Ground
Ambulances



In September of last year, the National Highway Traffic Safety Administration (NHTSA) published Working Group Best-Practice Recommendations for the Safe Transportation of Children in Emergency Ground Ambulances. In this document, NHTSA puts forth five situations seen by EMS transport teams when dealing with children and suggested methods for safely transporting them. These situations range from uninjured children needing transport all the way to multiple patient transports including children. This document is NHTSA's first effort to provide consistent national recommendations regarding pediatric transport.

To view the entire document, go to www.EMS.gov/safety.htm.

For more information contact Erin Shumard at shumarde@dhw.idaho.gov

TIME SENSITIVE EMERGENCY (TSE) WORKGROUP

Blunt trauma injuries, strokes and cardiac arrests are typically three of the top five causes of deaths in Idaho. It is generally accepted that organized systems of care for trauma, stroke and STEMI result in improved patient outcomes. While cooperative efforts exist throughout Idaho, we remain one of only a few states with no recognized system of care for trauma, stroke or cardiac arrest.

Recognizing the value of an organized system of care for trauma, stroke and cardiac arrest, the Idaho Legislature directed that a workgroup be formed to create the framework and enabling legislation for a system of care for time sensitive emergencies (trauma, stroke and cardiac arrest). The workgroup has met several times and is on target to have enabling legislative language ready for the upcoming legislative session.

As you can imagine, emergency medical services will be a vital component of the proposed system of care. One of the more exciting attributes of the proposed system are the local regional advisory groups that will serve as a venue for education, collaboration, quality assurance and system improvement.

The Frequently Asked Questions (FAQ) document regarding the proposed time sensitive emergency system of care can be found at:

[Idaho TSE FAQs](http://www.idahoems.org)

If you have questions that are not addressed in the FAQ or would like additional information, please let us know.

In The kNOW

Credentialing - What You Need to Know

Earlier this year the EMS Physician Commission (EMSPC) asked us to explore the personnel credentialing practices used by EMS agencies during our annual site visit. Our Field Coordinators discovered during their site visits that credentialing is a sometimes misunderstood topic. In that light, we would like to offer a brief description of credentialing.

In order for someone to legally provide EMS in Idaho, the person must:

- 1) Hold a current EMS license issued by the State of Idaho;
- 2) Be affiliated with and authorized to act by an Idaho licensed EMS agency; and
- 3) Be **Credentialed** and supervised by an Idaho licensed physician medical director.

The first two elements (licensing and affiliation) are well understood, but credentialing deserves further exploration. Credentialing is the EMS agency process where the individual is permitted (credentialed) by the medical director. Credentialing includes verifying licensure, affiliation, qualifications, proficiencies, and completion of the agency orientation. Credentialing is not "all or nothing" as a medical director can limit or remove an individual provider's permission (credential) to practice specific skills, or interventions under the medical director's supervision.

Given the diversity that exists in EMS agencies, the credentialing process tends to vary between agencies. The credentialing process used for each agency should be described in the agency's medical supervision plan (MSP). Typically, the agency administrator and medical director will collaborate to establish an agency's credentialing process. One process that is commonly used includes the agency administrator facilitating the credentialing process with the medical director maintaining oversight and ultimately authorizing the provider to practice.

The following are some of the questions about credentialing that we have encountered:

Isn't the letter I get from the state with my renewed license considered credentialing?

No. The agency and/or medical director should verify the license issued by the Bureau as a part of the credentialing process but it does not take the place of reviewing the qualifications and proficiencies of a provider.

How do I know if I've been credentialed by my medical director?

Ask your agency administrator or medical director to learn more about your agency's credentialing process. Some agencies use a formal process to credential their providers; others use a less formal approach so it may be taking place behind the scenes.

How often should I be credentialed by my medical director?

The EMSPC recommends that each provider be credentialed annually, but there is no frequency specified in rule.

In order to credential me, does my medical director have to watch me do each individual skill in my scope of practice?

Your agency and medical director will determine the specific process they will use to verify the skill competencies of their affiliated EMS personnel. The process used to verify skill competencies should be described in your agency's MSP.

Who can we contact to answer questions or find resources regarding credentialing?

The EMSPC's Standards Manual and Medical Supervision Development Guide provide further detail about credentialing and provide sample forms. These can be found on their website at www.emspc.dhw.idaho.gov. If you have questions please call us at (208)-334-4000.

So Many OPTIONS!

Optional Module Information:

On July 1, 2013, the EMS Physician Commission adopted IV Therapy, Supraglottic Airways, and Intraosseous Infusion as optional modules (OMs) for the EMT-2011. Because these skills are testable at the AEMT-2011 level, they require a formal psychomotor test before an EMT can utilize them in the field.

The Bureau has recently published guidelines for agencies and medical directors that would like to adopt these particular OMs. The *BLS User's Guide Optional Module Addendum* can be found at www.idahoems.org on the Education page, under Resources. This same guide and process must be utilized for EMRs adopting the Supine and Seated Immobilization & Joint or Long Bone Injury OMs.

If you have any questions regarding optional modules or the optional module testing process please contact the Bureau at (208)334-4000.

The Idaho Jurisdictional Risk Assessment (JRA)

The Idaho Public Health JRA is a tool that assists agencies in estimating the probability of hazards and models the impacts on the population, infrastructure, and systems. The JRA also accounts for mitigation efforts as well as assessing the risk that may remain after mitigation efforts have been put in place. Our Preparedness Program has partnered with the seven Public Health Districts (PHDs), the University of Idaho (UI) Department of Geography, and the Idaho Geospatial Office to "map" as many of the potential hazards as possible.

We recently sponsored a planning meeting with staff from the UI and the seven PHDs to explore the role that the JRA might play in preparedness planning. We have also met independently with each of the PHDs to ensure the JRA is customized to meet specific local needs. We are optimistic that the JRA will improve the preparedness in Idaho by identifying specific gaps in planning and by promoting the targeted use of limited resources to mitigate the most likely hazards.

COMING SOON: Letters to the Editor

Beginning with the next edition (5th edition), In The kNOW will feature a regular, "Letters to the Editor" section. The purpose of this column will be to provide a forum where folks can bring forth issues and concerns in a positive and productive manner, share information, find answers to questions or just share an inspirational story! Submissions can be sent via fax, regular mail or by email to: IdahoEMS@dhw.idaho.gov

Resources & Websites

Bureau of EMS and Preparedness www.idahoems.org
Public Health Emergency Preparedness www.READYidaho.org
TRAIN Idaho—Learning Management System <https://id.train.org>
EMS for Children www.idahoems.org (click on EMS for Children)



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