



Division of EMS and Trauma

April 2015

The Importance of Accurate and Immediate Prehospital Care Reports in EMS

By: Kelli Sears, EMS Education and Training Coordinator

Of all those who become EMS professionals, none would say they got into the profession just for the opportunity to write compelling prehospital care reports (PCRs). The PCR is usually not the item of primary importance during an emergency call, and for many providers, it may be the least favorite part of their job. However, PCRs serve important functions regarding continuity of care, legal requirements, education and research, quality improvement and administration, making them one of the most important pieces within the EMS system.

Because PCRs are vital to so many aspects of the care system, they should be completed as soon as possible after an EMS call. The PCR should be a well-written, clean, concise document. If you are not confident about your writing skills, take a course on technical writing or ask someone within your EMS system to review your PCRs for spelling and grammar. Completion of your PCR immediately after patient care helps to keep your report accurate, as memory can fade over time. PCRs provide the receiving facility with a documented picture of what role EMS played in the care of the patient prior to their hospitalization. If the PCR is completed immediately after care of the patient has ended the receiving facility will have an accurate document to rely upon when providing further treatment for the patient. The record should include the initial assessment of the patient, including chief complaint and level of consciousness, any history provided to you by the patient or family members, treatments and response to treatments, and changes in patient condition. Failing to provide the receiving facility with an accurate picture of the progression of a patient's condition and/or treatments and medications received prior to arrival at the facility could compromise patient safety. EMS professionals are often the first point of contact for a patient, and they play a vital role in the continuum of care.

If a law suit or criminal action results from medical treatment that started with EMS, the PCR can provide evidence concerning the patient. Often the author of the PCR will also be called to testify about the document. Because human memory can fade over time, having an accurate PCR is important within legal proceedings. EMS providers should therefore be as detailed and descriptive as possible when documenting every aspect of an emergency call. The PCRs also allow the state to collect EMS data, which is then used to help services make important decisions relating to staffing, peak-response times, ambulance deployment and staging, and disaster response. PCRs also provide information that can be used to answer questions about funding and allocation of available equipment and resources.

Information provided by PCRs can help identify a caregiver's experience and skills, and can help recognize skills not commonly practiced by EMS personnel. If it appears there are gaps in training, continuing education can be scheduled in these topic areas to ensure competency in all areas of EMS.

PCRs are a valuable tool for internal EMS assessments. Every EMS agency should routinely review their calls to look at conformity to current national standards or local protocols; this process usually involves an examination of PCRs.

Administrators use PCRs for billing and statistical information. Accurate documentation of patient demographics, as well as assessment and treatment, can provide information necessary for reimbursement benefits for patients.

PCRs may not be a provider's favorite part of EMS, but they are an essential part of EMS. Whether paid or volunteer, EMS providers are an essential part of the healthcare industry, and EMS documentation is as important to patient treatment as responding to the call. And when it comes to preparing the PCR, remember: the sooner, the better!



EMSC Is Getting Out Again!

By: Elizabeth Pihlaja, EMS for Children Coordinator

The North Dakota EMS for Children (EMSC) program is gearing up for a summer of community outreach. EMSC's first event will be Summer Fun & Safety Day on May 7 at the University of Mary in Bismarck. Summer Fun & Safety Day is an annual event sponsored by Kohl's Healthy Communities and CHI St. Alexius Health. This year EMSC has a fun new activity for the visiting first and third grade classes – Plinko! Children can answer injury prevention and summer safety questions and win educational prizes.

On May 20, which is EMS for Children Day (mark your calendars), EMSC will be at Missouri Valley Montessori (MVM) School in Bismarck, with special guests Metro Area Ambulance. EMSC is looking forward to giving the preschoolers at MVM some safety tips, talking with them about emergencies, and showing them what the inside of an ambulance looks like.

EMSC has participated in the North Dakota State Fair's Xcel Energy Family Day for the past several years. This year's Family Day is scheduled for Tuesday, July 21, and EMSC will be there with the very popular "Build Your Own First Aid Kit" booth. EMSC always gets very positive feedback on this activity and staff can't wait to share injury prevention and first aid tips with the families who visit the booth. EMSC will also be hosting this booth at the Kohl's and CHI St. Alexius Back to School event in Mandan this August (date TBA).

If your ambulance service is hosting an outreach event for families and children in your community, please let the North Dakota EMSC program know – staff would love to help get the word out. Additionally, if you'd like ideas or assistance for putting on an event or doing community outreach, please contact Elizabeth at 701.328.2953.



Bioterrorism Wide Area Network (BTWAN) Usage

By: Ruth Hursman, State Trauma Coordinator

The hospital bioterrorism wide area network (BTWAN) was developed and continues to be funded with federal grant dollars through the North Dakota Department of Health (NDDoH) Hospital Preparedness Program. BTWAN is a system of video and telephone systems that can be linked to facilitate communication between various health care partners. The primary purpose of the BTWAN network and equipment is to facilitate emergency communications between hospitals and emergency response partners, and this use takes priority over other uses. Health providers can use the system for non-emergencies as well. In the event of an emergency, NDDoH may interrupt and disconnect any meeting in progress on the network.

The network and equipment connected to the network may not be altered in any way without coordination and permission from NDDoH Emergency Preparedness and Response Section. This is to assure compatibility and preservation of quality of service



for the purpose of the network. BTWAN grant funded equipment may not be disposed of by the facility. Equipment that has reached the end of its life or is no longer used according to the above purposes must be returned to NDDoH.

Hospitals are encouraged to use the network for the following types of activities:

- Participation in emergency preparedness planning meetings
- Training and exercising
- Inter-hospital meetings that enhance the ability of the health care system to provide quality service, surge capacity, and to build collaborative relationships
- Emergency communications, such as reaching out to another hospital when other forms of communication are non-functional
- Participation in regular health and medical briefings during activation of the NDDoH operations center
- Transmission of patient tracking data
- Emergency internet protocol phone service to others on the network

Technical support is provided by NDDoH Emergency Preparedness and Response Section at 1.888.813.5344.

Getting Credit for Your EMS Work with Children

By: Elizabeth Pihlaja, EMSC Coordinator

You and your EMS agency work hard to help the youngest people in your community safe, including getting appropriate training, maintaining an inventory of pediatric equipment, and getting into your communities to meet with children and families. All of these things may be just part of your routine, but EMSC thinks your dedicated service to children should receive some recognition at the state level.

EMSC and the EMS for Children Advisory Committee have developed a recognition system for North Dakota's ground ambulances that is expected to launch in the near future. EMSC will administer the recognition program. Participation will be entirely voluntary, and there will be no penalties for not becoming recognized. This is just a way to receive some credit for what you and your colleagues are doing in your community for the benefit of children. And your service is probably already doing the things that would qualify for recognition, so you might as well get some credit for your efforts!

To participate, your agency will have to verify:

- that your service carries essential pediatric equipment,
- that your members are receiving training in pediatric/maternal/child health, and
- that your agency is engaging with children and families in your community.

EMSC will assess your service's application and work with you to make sure it is complete. Once you have been approved, EMSC will provide you with a draft news release that you can send to your local press. EMSC will send out news releases every quarter that identify the services that have achieved recognition. EMSC will also send your agency a certificate verifying your status and decals to place in the back window of your ambulance to tell your community that you work hard to take care of children.



When the program is ready to launch, EMSC will send an application to your service. Applications and program guidelines will also be available on our website (<http://www.ndhealth.gov/EMS/EMSC.html>).

EMSC will be honored to acknowledge North Dakota's EMS community for all their work and hope your agency will take this opportunity to receive recognition.

If you have any questions, please contact Elizabeth at 701.328.2953 or epihlaja@nd.gov.

Upcoming Dates to Remember:

ND State Trauma Meetings

SW Region; April 8, 2015

NW Region; April 9, 2015

NE and SE Regions; April 21, 2015

*All are scheduled for 12:00 CST.

EMS Leadership Academy - Level I

April 18 - 19, 2015

EMS Advisory Council Meeting

April 23, 2015

10:00AM - 4:00PM CST

National Rural EMS Conference

May 5 - 6, 2015

ND Stroke and Cardiac System Conference

May 18 - 19, 2015

EMS Week

May 17 - 23, 2015

EMSC Day - May 20, 2015

EMSC Advisory Committee Meetings

June 4, 2015; 12:00 CST



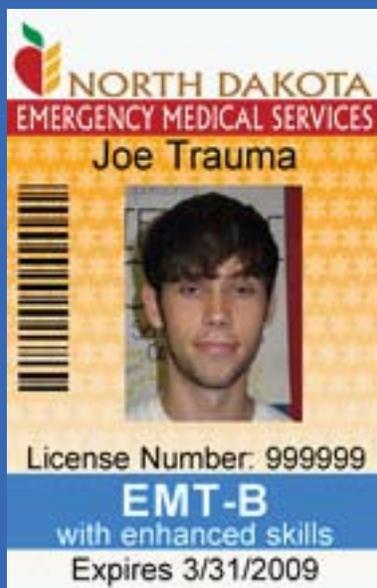
WHO'S INVITED: Rural EMS Directors, State EMS Officials, State Offices of Rural Health, Flex Program Managers, hospital administrators, elected officials, medical directors & other interested EMS partners.

LEARN ABOUT: The future of rural EMS, community paramedicine, systems of care, performance improvement, ambulance service sustainability, rural EMS education, simulation in motion, and more.

DRAFT AGENDA: <http://nosorh.org/wp-content/uploads/2014/12/National-Rural-EMS-Conference-Draft-Agenda.pdf>

REGISTRATION: <https://www.regonline.com/EMS15>

Now that you have recertified with the National Registry, Don't forget to renew your state license by June 30!
<http://ndhealth.gov/EMS/>



Daily Conference Focus

- May 18 - Stroke
- May 19 - Cardiac

Objectives

- Discuss best practice models from across North Dakota
- Learn how to use pre-hospital stroke and cardiac assessment to help rural and urban hospital clinicians
- Collaborate and share knowledge from regionally and nationally recognized stroke and cardiac programs
- Use data and feedback to improve stroke and cardiac system of care in North Dakota
- Identify treatment strategies for the complex stroke patient

Who Should Attend

- Providers
- Cardiologists
- Nurses
- Physician's assistants
- Nurse practitioners
- Emergency Department physicians
- Administrators
- Medical directors
- Nursing leadership
- EMS providers
- At-a-Glance Agenda (PDF)
- Registration Form All health care providers interested in improving STEMI and Stroke Systems of Care in North Dakota

Agenda: <http://ruralhealth.und.edu/projects/stroke/files/at-a-glance-agenda-2015.pdf>

Registration: <http://ruralhealth.und.edu/projects/stroke/files/stroke-cardiac-conference-registration-form-2015>

Find links to these conferences as well as other education opportunities on the DEMST website:
<http://ndhealth.gov/EMS/>

Rural EMS Assistance Fund

By: **Amanda Roehrich,**

The last quarter of the Rural EMS Assistance Fund cycle ends June 30, 2015, and as of March 31, 10 of the 69 fund recipients have not used any of their awarded dollars. The total that remains to be spent is \$336,485. If yours is one of the EMS services that has not received your grant funding, please submit your expenses as soon as possible via the Program Reporting System. Ideally, these expenses should be reported monthly, because reimbursement requests must be made within 90 days of the expense unless approved by DEMST. If unspent funds remain at the end of the fund cycle, the grant award amount will be reduced by amendment and those recovered funds shall be reallocated to other funding areas.

If you need assistance with submitting your requests for reimbursement, please contact me.

The grant guidance for the upcoming cycle of the Rural EMS Assistance Fund was mailed March 18, 2015.

There are minimal changes from last cycle, but please note that there will be a significant reduction in the number of funding areas for the 2016 grant cycle. If you have questions after reviewing the grant guidance, please contact me at the DEMST office, 701.328.3215 or by email: arroehrich@nd.gov.

GRANT FUNDING REMINDER!

Just a reminder to utilize the training grants that are offered through DEMST. These include the EMS Agency Training Grant, the Continuing Education Grant, the Paramedic Training Assistance Grant, and the EMS Personnel Initial Training Grant. The biennium ends June 30, 2015, and we would like to see as much of this fund utilized as possible. The policies and applications can be found on our website under the Grants section.

http://ndhealth.gov/EMS/grant_applications.htm



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