

Washington Update November 30, 2004

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1. EMS Funding is Finalized in Appropriations Bill

Congress combined all of the remaining nine appropriations bills into a one omnibus bill and passed it prior to the holiday recess. Most EMS-related programs were level funded, with a slight decline in the Rural AED funding and a reduction in NHTSA's EMS Division (from 3.2 million to 2.52 million). The bill included \$250,000 to fund the NEMSIS national data repository project. The PHHS block grant funding was not cut even though the President had zeroed it in his budget. EMSC received a slight increase. FICEMS bill did not pass. Learn more about budget issues at <http://www.advocatesforems.org>.

2. Secretary Ridge Resigns

On Nov. 30, 2004, Secretary Tom Ridge submitted his letter of resignation as the first Secretary of the Department of Homeland Security. In the letter, Ridge indicates that he will continue to serve as Secretary until Feb. 1, 2005, or until the Senate confirms his successor. Secretary Ridge's resignation letter is attached to this Washington Update.

3. Indiana Joins NEMSIS Initiative

Indiana is the 51st member to join the NEMSIS Initiative. There are now 47 states and four territories that have agreed to support and promote the use of the NEMSIS dataset in their state data initiatives. For more information, visit <http://www.nemsis.org>.

4. Children's Health Care Conference Call Scheduled for Dec. 10

The National Initiative for Children's Healthcare Quality invites interested parties to participate in a virtual "roundtable" discussion with authors of the report, "Keeping the Focus on Children's Health Care Quality: Six Months After the Release of the Chartbook," and acclaimed authorities on children's health care quality. The Chartbook has been touted as a groundbreaking report that alerted to the enormous need for drastic improvements in health care for America's children. The report challenged the providers, insurers, government and the public to insist upon more vigorous research and reporting of quality of care for children and adolescents. The meeting is a 90-minute conference call. The first 60 minutes will be a moderated discussion among panelists, followed by a 30-minute question-and-answer session. For more information, visit <http://www.nichq.org>.

5. Public Safety Special Interest Group Seeks Input by Dec. 15

The Software Defined Radio (SDR) Forum has mainly focused on commercial and military applications, but is now being aimed at public safety. The SDR Forum is located at <http://www.sdrforum.org>. The SDR Forum's Public Safety Special Interest Group is seeking information about SDR requirements and capabilities related to public safety activities. The document is available at http://www.sdrforum.org/public/approved/04_a_0008_v0_00_pub_safety_fri_10_15_04.pdf. There is a response deadline of Dec. 15, 2004.

6. ASTHO Commenting on Federal Guidelines Regarding Potassium Iodide and People Living Near Nuclear Reactors

ASTHO, of which NASEMSD is an affiliate organization, is preparing comments on draft "Federal Guidelines for Requesting Potassium Iodide from the Strategic National Stockpile." Anyone with thoughts on the issue should contact Joshua Bobrowsky (jbobrowsky@astho.org) by Dec. 9, 2004.

7. Homeland Security Foundation Seeks Board Member Nominations

The Homeland Security Foundation, a not-for-profit corporation whose primary purpose is to promote public understanding of the Homeland Security Department and its mission, is seeking board nominations. The foundation was incorporated in 2003 and is governed by an eight member volunteer board. Board members are elected to serve a two-year term. The foundation seeks nominations to fill three board member positions by Dec. 3, 2004. For more information, contact Chris Armstrong at chris.armstrong@dhs.gov.

8. National EMS Survey Now Available

The 2003 National EMS Survey is now available on the Internet. Visit <http://www.emspi.org> and follow the link to the information.

9. Patients Who Receive A Breathing Tube Prior to Hospital Arrival Fare Worse, According to Study at University of Pittsburgh

Emergency medicine researchers at the University of Pittsburgh School of Medicine have found that patients with similar traumatic brain injuries who receive an emergency breathing tube at the scene of an accident fare worse than those intubated after arrival at the hospital. The researchers also found that these patients' neurological and functional outcome was nearly twice as bad. These findings are reported in the lead article in the November issue of "Annals of Emergency Medicine."

10. New Course Prepares EMS to Respond to Multiple Casualty Incidents

There is a new online course available to assist EMS personnel to respond more effectively when faced with a Multiple Casualty Incident (MCI). The independent study course, "EMS Operations at Multi-Casualty Incidents," is a 4-hour, Web-based course that addresses preparedness planning; management of the incident; safe and efficient triage, treatment, and transportation of patients; and the de-escalation of the response. The course includes information on safely and effectively dealing with a MCI resulting from an attack involving chemical, biological, radiological, nuclear, or explosive agents. The course is available on the U.S. Fire Administration's Virtual Campus at <http://www.training.fema.gov>.

11. Medical Surge Capacity and Capability Handbook Available from HHS

The U.S. Department of Health and Human Services (HHS) recently reported that medical and health systems in the nation face the increasing probability of major emergencies or disasters involving human casualties. According to the report, "such events will severely challenge the ability to adequately care for large numbers of patients (surge capacity) with those patients having unusual or highly specialized medical needs (surge capability)." HHS officials stated that "the first step to address medical surge is

using management systems for medical and health response to major emergencies and disasters, along with developing and maintaining preparedness programs.” HHS recommends the Medical Surge Capacity and Capability Handbook, which is based on valid principles of emergency management and the Incident Management System. The handbook is available at http://www.hhs.gov/asphep/mscc_sept2004.pdf.

12. Call for Abstracts – Injury and Violence in America: Meeting Challenges, Sharing Solutions

The 2005 Injury Prevention and Control Conference will be held in Denver, Colo., May 9-11, 2005. The theme is “Injury and Violence in America: Meeting Challenges, Sharing Solutions.” The Planning Committee welcomes the submission of original research that addresses injury and violence prevention and control. Of particular interest are abstracts that address the latest research findings, program successes, lessons learned, or problems solved that consider the three phases of injury and violence prevention and control – prevention, acute care, and rehabilitation. Abstracts may be submitted for either oral or poster presentations. Abstract submission for the 2005 Injury Prevention and Control Conference will be handled via the Internet. All abstracts must be submitted by Jan. 18, 2005. Visit <http://www.cdc.gov/ncipc/2005conference> for more information and to submit abstracts.

13. Latest CAAS Accreditations Include First in Canada

At the Sept. 28, 2004, meeting, the CAAS Panel of Commissioners granted accreditation to EMC Emergency Medical Care Inc. of Dartmouth, Nova Scotia, Canada. This is the first accreditation for a Canadian service. East Baton Rouge Parish Department of EMS, of Baton Rouge, La., also received CAAS accreditation in September. Receiving three-year accreditations were Medshore Ambulance Service of Anderson, S.C.; Rural/Metro, MedStar of Ft. Worth, Texas; Medical Transport of Virginia Beach, Va.; and Oak Park Fire Department of Oak Park, Ill. The latest accreditations bring the total number of CAAS-accredited agencies in North America to 94 and more than 130 additional agencies currently are working on applications.

14. Private Organization Needs EMS Tech Assistance

NAEMSD has received a request from Professor Samir Banoob. A private organization in Egypt is looking for a partner and technical assistance to establish a private EMS to serve remote resorts in the Red Sea tourist area. To learn more about Prof. Samir Banoob visit <http://www.banoob.faresinsights.com>. For information on the opportunity, call (813) 245-7808.

15. Upcoming Events (denotes event is newly added)**

NAEMSP Annual Meeting, Jan. 13-15, 2005, Registry Resort, Naples, Fla. Information is available at <http://www.naemsp.org>.

2005 National Health Policy Conference: Post-Election 2004, What’s in Store for Health Policy, Feb. 2-3, 2005, Renaissance Washington, D.C. Hotel. Information is available at <http://www.academyhealth.org/nhpc/>.

2005 Trauma-EMS Systems Program Leadership Meeting, Feb. 2-4, 2005, Key Bridge Marriott, Arlington, Va. Information will be provided closer to the meeting date.

“Delivering Results: Improving Pregnancy & Birth,” 2005 Association of Maternal and Child Health Programs Annual Conference, Feb. 19-23, 2005, Grand Hyatt Washington Hotel, Washington, D.C. Information is available at <http://www.amchp.org/conference>.

Homeland Defense Training Conference®: Medical Planning and Operations in Support of Consequence Management: “Managing the Un-thinkable in the Era of Asymmetrical Threats” – Preparing Healthcare Professionals for New Challenges in the Medical Arena, Feb. 24-25, 2005, Omni Shoreham Hotel, Washington, D.C. Information is available at http://www.marketaccess.org/event_consmgmt.asp.

**Emergency Medical Services Response to Hazardous Material Incidents or Acts of Terrorism, March 18, 2005, Harvard School of Public Health, Boston, Mass. Information is available at <http://www.hsph.harvard.edu/ccpe/programs/EMSR.shtml>.

EMS Today Conference and Exposition, March 18-22, 2005, Philadelphia, Pa. Information is available at <http://www.emstodayconference.com>.

**Injury and Violence in America: Meeting Challenges, Sharing Solutions, May 9-11, 2005, Denver, Colo. Information is available at <http://www.cdc.gov/ncipc/2005conference>.

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