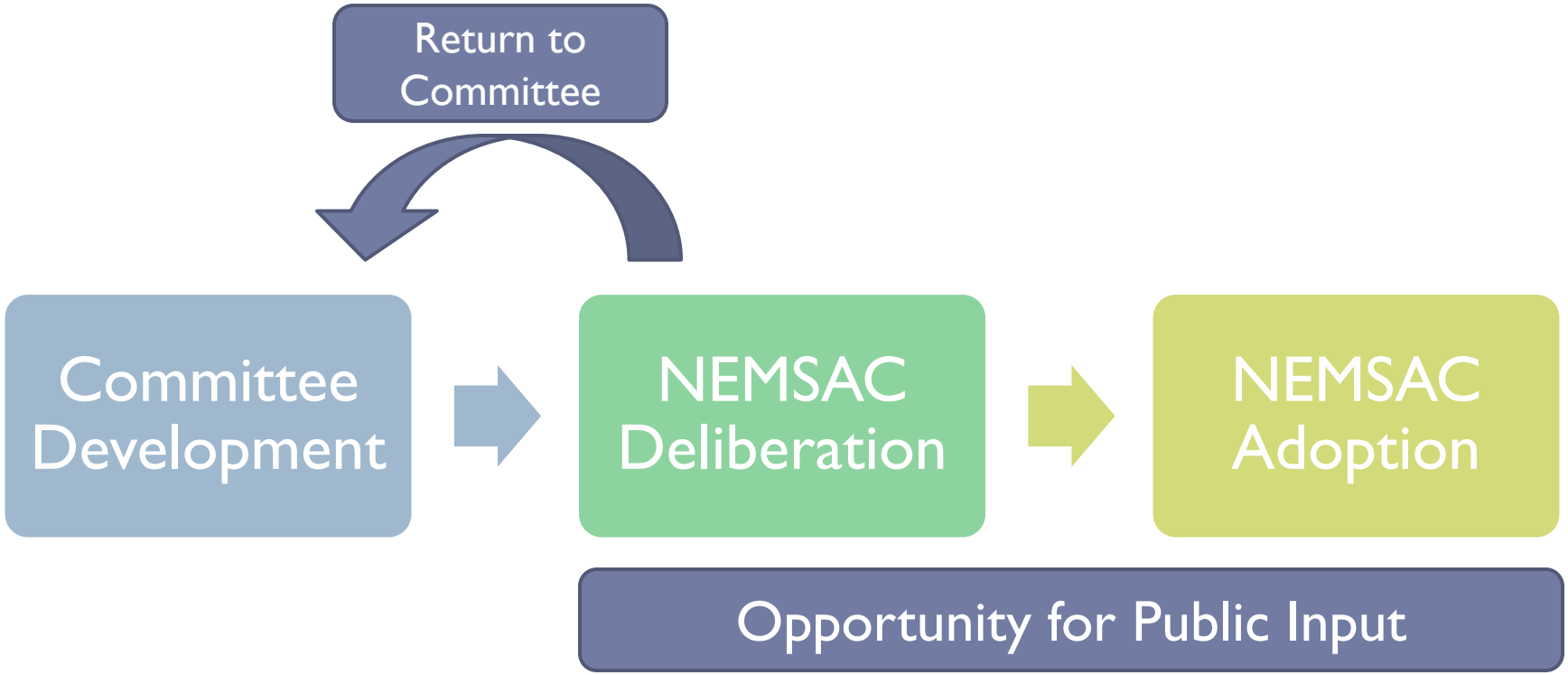
NEMSAC Committee Operations

August 29, 2012

Three types of Committee Reports

- Advisories
- Position Statements
- Letters

NEMSAC Adoption Process



Types of Committee Reports

The National EMS Advisory Council

Final Advisory

Approved on December 13, 2011

Committee: Safety
Title: Emergency Vehicle Operator Education, Training, and Safety

Issue Synopsis

A: Problem Statement

Driving ambulances and other emergency vehicles is a necessary element of day-to-day Emergency Medical Services (EMS) care delivery. EMS agencies need to assure safe handling of ambulance vehicles that are by nature substantially different than personal automobiles. Crashes of emergency vehicles can occur at all speeds but risk is increased when driving at high-speeds, with lights and sirens, when overly fatigued, or while proceeding through an intersection against a red light, driving into oncoming lanes.[1] These are several examples of behaviors or actions by EMS vehicle operators that may lead to severe morbidity and mortality for patients and providers.

Recent data suggest that operator error accounts for a large proportion of ambulance crashes.[2] These data raise questions and concern for the type, amount, and format of emergency vehicle operator training and education and whether formal emergency vehicle operator education programs or other strategies might mitigate the risks to patients, medical staff, and the public. A comprehensive analysis of these issues is not easily identified. Safety of patients and providers may be threatened by a poor understanding of variation in operations and driver education requirements across EMS organizations and the relationship between operator training, vehicle operations, and crashes.

Existing and widely used Emergency Vehicle Operator Courses (EVOC) are an efficient method to expose future and current operators of emergency vehicles to the challenges associated with emergency vehicle operations and threats to safety. There is limited data that describes the common characteristics and variation in programs nationally. Our understanding of program effectiveness is incomplete. Research is needed to identify deficits in existing courses and determine the cost and effectiveness of EVOC on safety and performance outcomes.

B: References

1. Brice JH, Studnek JR, Bigham BL, et al. EMS provider and patient safety during response and transport: Proceedings of an Ambulance Safety Conference. *Prehosp Emerg Care*. 2012;16(1):3-19.

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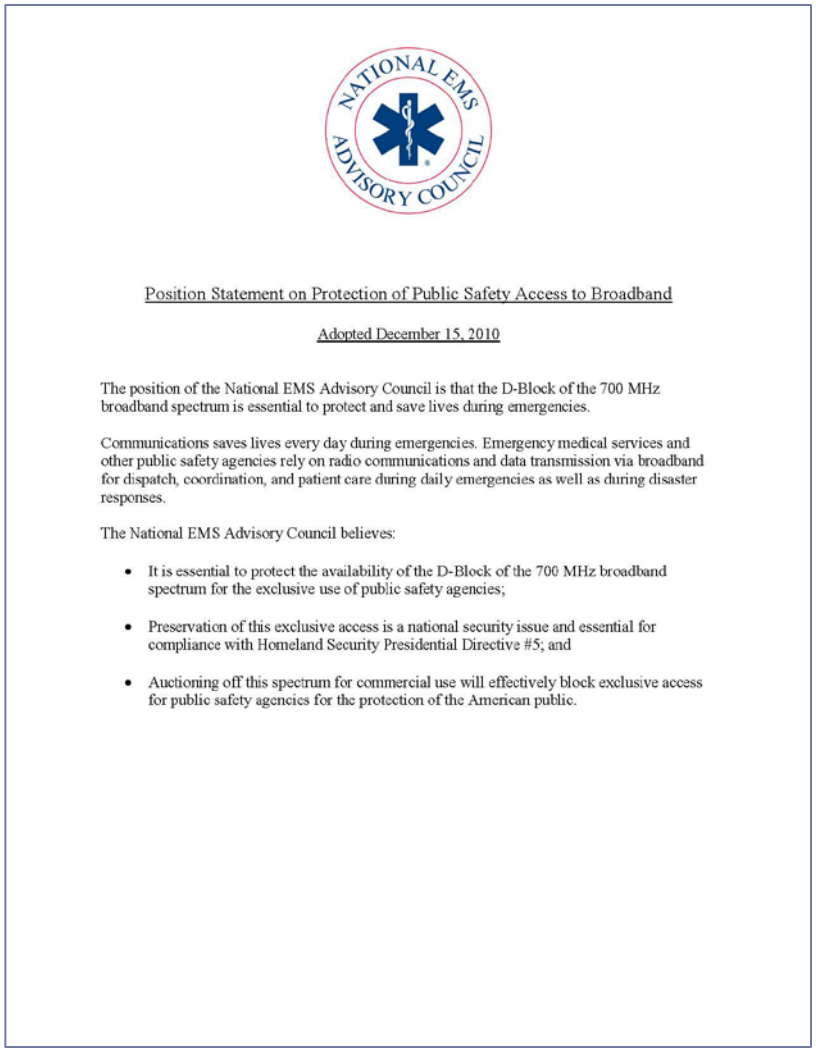
- <u>Advisories</u>
  - Formal document that respond to a specific policy issue of national significance
  - Recommendations to
    - NHTSA
    - DOT
    - FICEMS
  - Draft → Interim → Final

The Committee Advisory Template

- **A. Problem statement**
- **B. Resources/references related to the issue**
- **C. Crosswalk with other standards documents or past recommendations**
- **D. Analysis**
- **E. Committee Conclusions**
- **Recommendations**

Types of Committee Reports



Position Statement on Protection of Public Safety Access to Broadband

Adopted December 15, 2010

The position of the National EMS Advisory Council is that the D-Block of the 700 MHz broadband spectrum is essential to protect and save lives during emergencies.

Communications saves lives every day during emergencies. Emergency medical services and other public safety agencies rely on radio communications and data transmission via broadband for dispatch, coordination, and patient care during daily emergencies as well as during disaster responses.

The National EMS Advisory Council believes:

- It is essential to protect the availability of the D-Block of the 700 MHz broadband spectrum for the exclusive use of public safety agencies;
- Preservation of this exclusive access is a national security issue and essential for compliance with Homeland Security Presidential Directive #5; and
- Auctioning off this spectrum for commercial use will effectively block exclusive access for public safety agencies for the protection of the American public.

- Position Statements
  - Express the sense of the Council at a point in time
  - Usually do not originate in committees
  - Usually in response to a time sensitive request on a particular topic
  - One step approval process

Types of Committee Reports

National Emergency Medical Services Advisory Council
United States Department of Transportation

June 4, 2012

Aarron Reinert
Chair

David Strickland, Chair
Federal Interagency Committee on Emergency Medical Services
Administrator, National Highway Traffic Safety Administration
1200 New Jersey Avenue, SE
Washington, DC 20590

Dear Mr. Strickland:

At the May 30-31, 2012 meeting of the National Emergency Medical Services Advisory Council (NEMSAC), the NEMSAC considered the March 29, 2012 FICEMS request for answers to "Questions for the NEMSAC on the FICEMS Role in Implementation of the Model Uniform Core Criteria [MUCC] for Mass Casualty Incident Triage".

Developed by the Centers for Disease Control and Prevention (CDC) National Expert Panel on Mass Casualty Triage, the MUCC were published in the June 2011 edition of the journal *Disaster Medicine and Public Health Preparedness*, and were later endorsed by numerous national professional stakeholder organizations in EMS, disaster management, and public health preparedness.

The NEMSAC's responses to the FICEMS' questions are itemized below.

1) Should FICEMS support the national adoption of MUCC?

Yes. FICEMS should support the national adoption of MUCC through a guidance process. After more than a decade since the events of September 11, 2001, the United States still does not have a nationally-recognized triage standard. It is only via a nationally consistent guideline for mass casualty triage tools that the interoperability of multiple EMS agencies and personnel can be facilitated and assured. As the MUCC are based on the best currently available direct scientific evidence, indirect scientific evidence, expert consensus, and are used in multiple existing triage systems, the MUCC are the ideal benchmarks by which to develop consistency among current and future triage tools.

a) What reasonable national metrics could be used by FICEMS to measure adoption of MUCC principles by the national EMS community over time?

As published, MUCC incorporates a series of criteria for the following four main categories: general considerations, global sorting, lifesaving interventions, and individual assessment of triage category. Within each of these four categories is a

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- Letters
  - Respond to specific questions from DOT or FICEMS
  - Time sensitive
  - Develop in committees
  - One step approval process
  - Approved by NEMSAC and signed by the Chair

Questions?