

Emergency Medical Services at Health Resources and Services Administration (HRSA)

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Office of Special Health Affairs



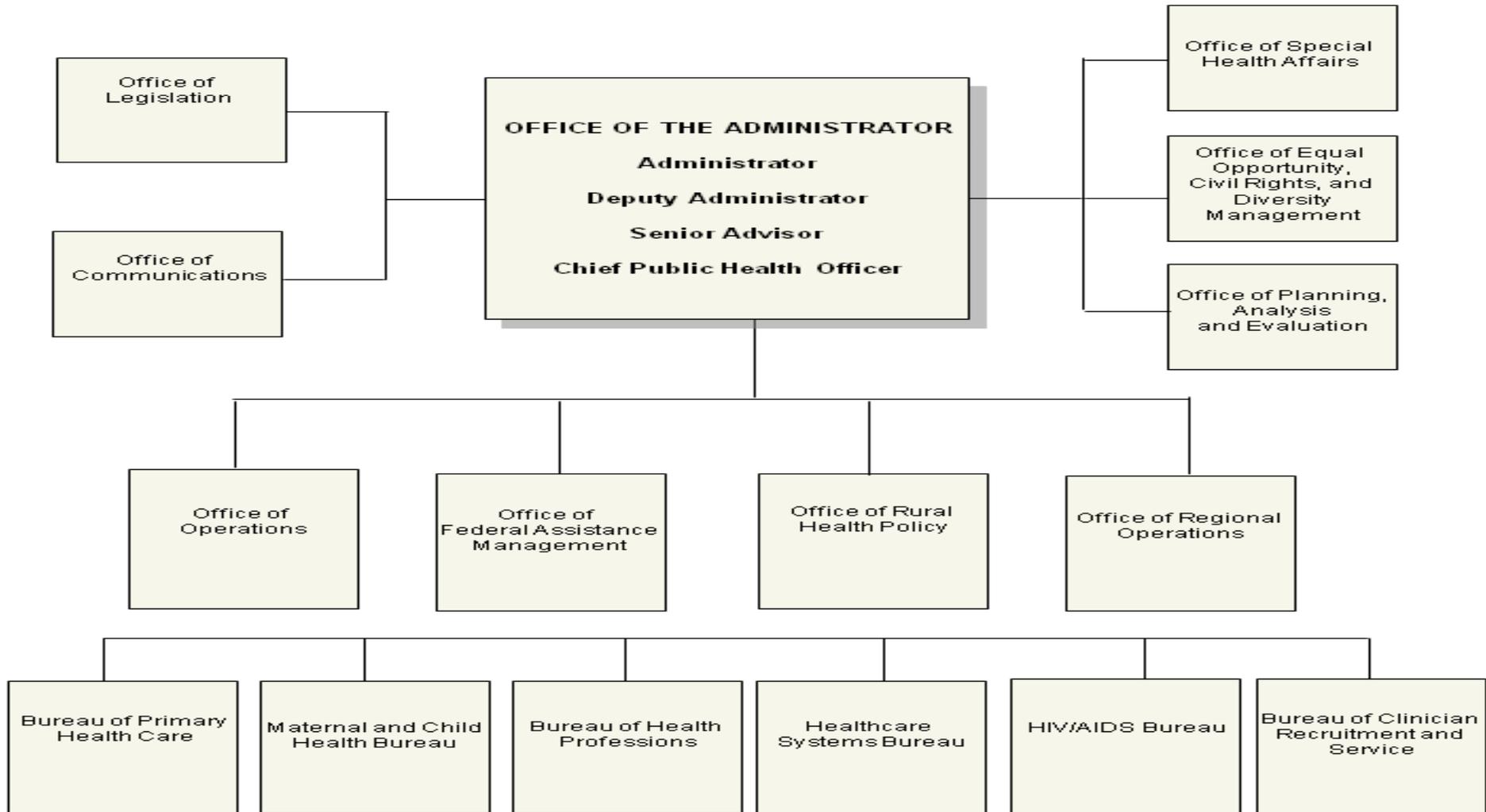
HRSA - America's Health Care Safety Net

- Health Centers
- Maternal and Child Health
- HIV/AIDS – Ryan White Program
- Health Workforce Training and Scholarships
- State Health Access
- 340B Drugs
- Vaccine Injury Compensation
- Organ and Tissue donation
- Rural Health



HRSA- The Agency

Health Resources and Services Administration



EMS at HRSA

- HRSA recognizes importance of EMS to health care system, particularly rural/frontier areas and to vulnerable populations.
 - At least \$73 million per year spent on EMS programs and initiatives
- EMS supported throughout HRSA
 - Office of Rural Health Policy, Maternal Child Health Bureau, Healthcare Systems Bureau, Office of Special Health Affairs
- Founding member of FICEMS with statutory authority for providing administrative support for FICEMS



EMS at HRSA

- System Development
- Research
- Training
- Workforce
- Programmatic Support
- Coordination



EMS for Children

- The Emergency Medical Services for Children (EMSC) Program in the Maternal and Child Health Bureau
 - Only federal program focusing specifically on improving pediatric emergency medical care
 - State Partnership Grants, Targeted Issues Grants
 - Pediatric Emergency Care Applied Research Network-PECARN
 - Supports 2 Resource Centers



EMS for Children

- Supports targeted issues (TI):
 - Funds 3 TI grants focusing on improving care to children during disasters
 - Reunification program
 - Disaster training curriculum.
 - Disaster triage curriculum with module for children with special health care needs.
 - Provides funds to NHTSA to support the National EMS Information System (NEMSIS).



EMS for Children

- The EMSC funds the Pediatric Emergency Care Applied Research Network (PECARN)
- PECARN is the only network dedicated to conducting multicenter emergency medicine research
 - Successful in obtaining NIH and other funding to conduct high priority trials



EMS for Children

- The EMSC National Resource Center has free resources accessible by public.
 - Online trainings
 - Searchable resources
 - Fact sheets
 - Educational curricula on pediatrics
 - Podcasts on patient safety
 - Print ready materials that are used for trauma month
- Also supports a Data Analysis Resource Center



Office of Rural Health Policy

- The HRSA Medicare Rural Hospital Flexibility Program (referred to as the Flex Program)
 - Improves and sustains access to appropriate healthcare services of high quality in rural America,
 - Supports conversion of small rural hospitals to critical access status,
 - Helps develop rural health care networks, and
 - **Strengthens and integrates rural Emergency Medical Services (EMS).**



Office of Rural Health Policy

- Critical Access Hospital EMS Bypass for Rural Trauma
 - Supports the establishment of guidelines for rural medical directors and EMS personnel relative to decisions to stop at the critical access hospital or continue treatment and transport to a more sophisticated trauma facility.



Office of Rural Health Policy

- Measures for Community Paramedicine
 - HRSA Office of Rural Health Policy is supporting the development of an evaluation framework for community paramedicine programs, including quality measurements to help further evaluate the impact of community paramedicine.



Office of Rural Health Policy

- Rural Access to Emergency Devices Program - provides funding to rural community partnerships to purchase AEDs.
 - Current RAED grantees are located in 19 States across the Nation (Alaska, Alabama, Arizona, Colorado, Delaware, Florida, Iowa, Illinois, Louisiana, Maine, Missouri, Nebraska, Nevada, New Jersey, North Carolina, Pennsylvania, Texas, Utah, Washington and Wisconsin).
 - Funding history:
 - 2007 = \$1.2 million (675 AEDs purchased, 2,000 people trained)
 - 2008 = \$1.2 million (633 AEDs purchased, 2,565 people trained)
 - 2009/10 = \$2.1 million (2193 AEDs purchased, 6873 people trained)



Office of Rural Health Policy

- Outreach Grant Program
 - Encourages development of new and innovative health care delivery systems in rural communities that lack essential health care services.
 - Emphasis is on service delivery through collaboration, requiring lead applicant organization to form a consortium with at least two additional partners.
 - Examples of past EMS Outreach projects have included EMT and Paramedic training programs, and one past EMS grantee used the funding to have homes in the community re-numbered so that it was easier for emergency personnel to find homes quickly in an emergency.
 - It is anticipated that this program will be competed for 2012, so check grants.gov for more information.



Poison Control Centers

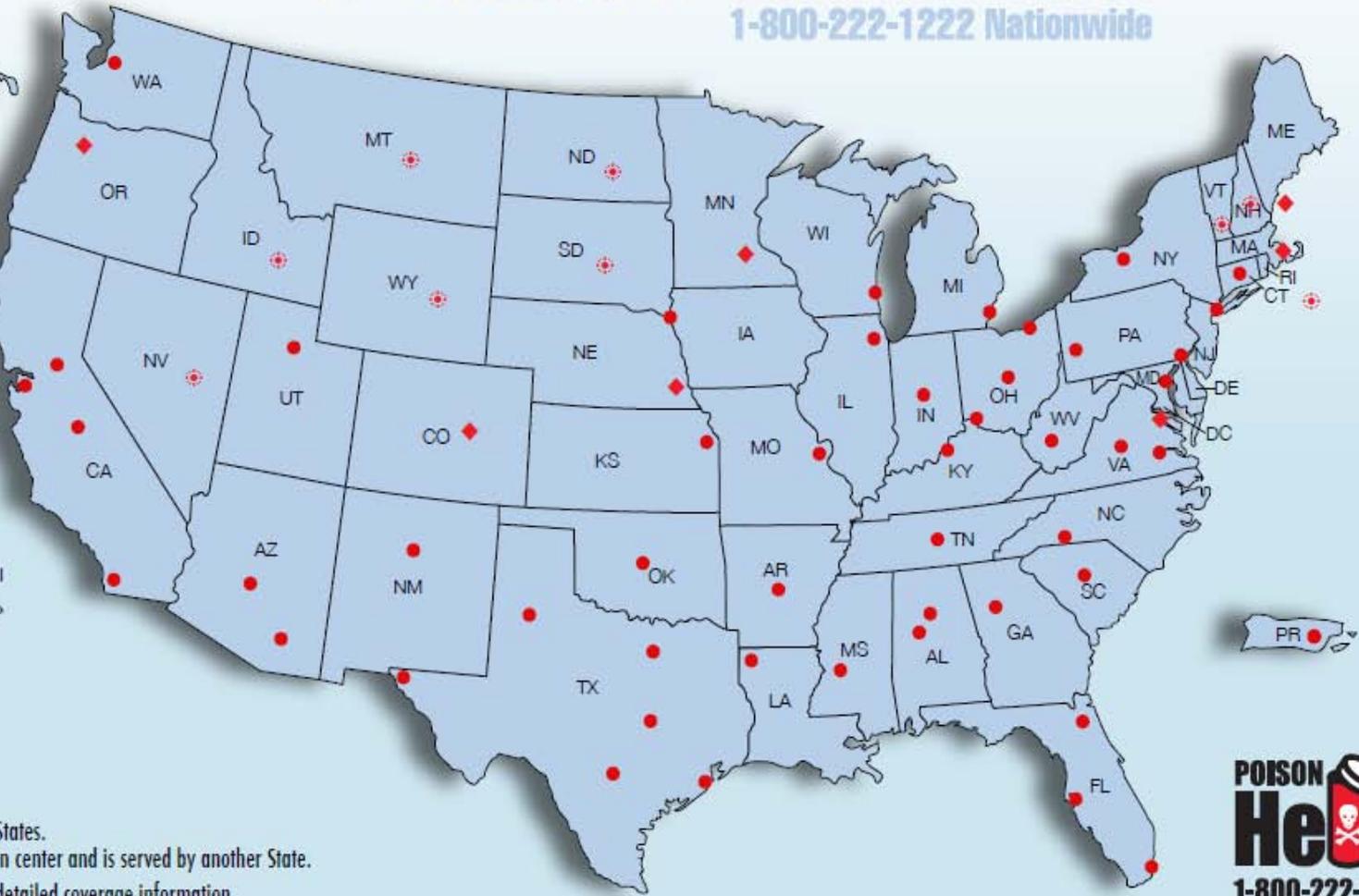
**57 poison control centers in the US supported by HRSA
Handle over 4 million calls a year**

- National Poison Help toll-free number, 1-800-222-1222, translation in 161 languages from trained pharmacists, nurses and doctors 24/7.
- Offer treatment, surveillance and education on poisoning prevention
- Patients whose health care provider consulted a poison center have shorter hospitalizations – 3.5 days versus 6.5 days, which results in savings of > \$2,100 per patient.
- Centers are local – EMS can call poison control for direction – poison control will even contact the hospital where EMS is transporting to provide information directly to the ER



POISON CENTERS

1-800-222-1222 Nationwide



- Poison center.
- ◆ Poison center that serves other States.
- ⊙ State that does not have a poison center and is served by another State.

Refer to the information below for detailed coverage information.



Health Care Reform

- Under PPACA Section 3505, HRSA maintains two trauma grant programs, reauthorized at \$100 million per year per program (but not appropriated).
 - Trauma care center grants
 - Trauma service availability grants



Coordination

Office of Special Health Affairs

- Develops, coordinates, and supports policies, strategies and initiatives that foster collaboration across HRSA, HHS and the Federal Interagency
- Coordinates HRSA activities related to emergency preparedness planning, policy, and continuity of operations and government.



Coordination

- By law, the Administrator of HRSA is a member of FICEMS and HRSA, in conjunction with the DOT and DHS, is responsible for providing administrative support for FICEMS.
- Due to HRSA's interest and support of EMS, HRSA is represented on the Technical Working Group by staff from the Maternal and Child Health Bureau, the Office of Special Health Affairs and the Office of Rural Health Policy.



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