

Kentucky EMSC PECC Learning Collaborative Quality Improvement Storyboard

1. WHO IS YOUR CORE TEAM?

1. **Morgan Scaggs, BHS, NRP – KY EMSC Project Director, KY Board of EMS**
2. **Mary Fallat, MD – Division Director of Pediatric Surgery, University of Louisville; Surgeon-in-Chief, Norton Children's Hospital, KYEMSC Program Director**
3. **Chad Wheet – PEC Coordinator, Adair County Ambulance Service; Flight Medic, Air-Evac; EMS Educator and Critical Care Credentials**

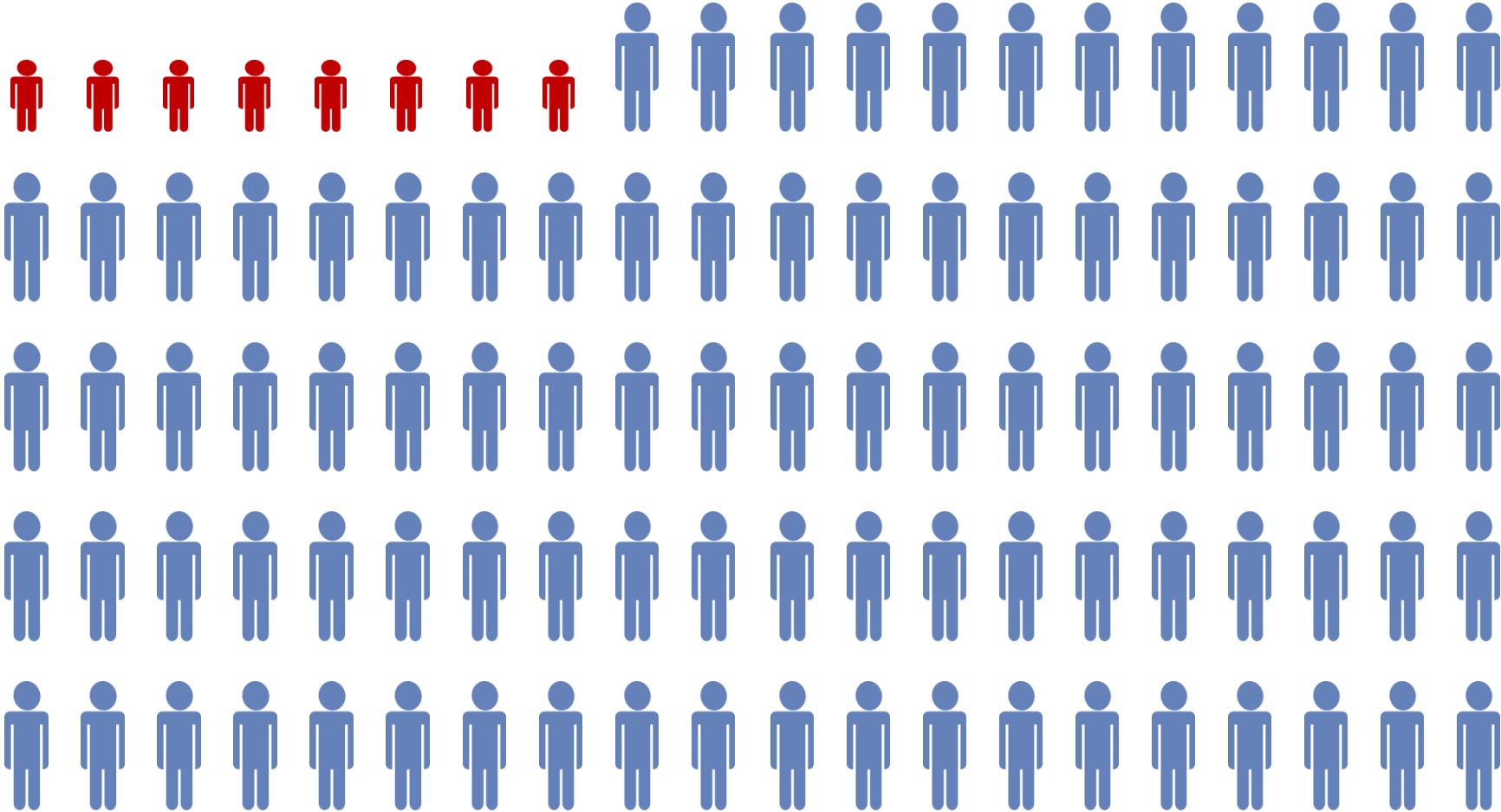
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WHY ARE PREHOSPITAL PEDIATRIC EMERGENCY CARE COORDINATORS IMPORTANT TO THE CHILDREN IN YOUR STATE?

- **Kentucky statistics**
 - Ranks 37th in size, 26th in population
 - Population 4,436,974 with 22.8% being children <18 years old
 - Median income less than national average (\$45K vs \$52K), percentage of population living below the poverty line is higher than national average (18.5% vs 13.8%)
 - 54 of 120 counties are in Appalachia
- **EMS System**
 - One of the few states that requires a CON for EMS Agencies
 - 220 “licensed” agencies
 - 165 participants in the 2017 EMS Agency Assessment
 - Most provide ALS care, 81% fully staffed with paid employees, only 2% fully volunteer
 - Government or Community based (39%), Private (28%), Fire (23%), Hospital (10%)
 - 9 aeromedical services with 71 helicopters serving the state
- **Medical Direction at the local level**
 - Each agency contacts with a medical director
 - Statewide protocols are available but may be adopted in whole or in part, with or without modifications

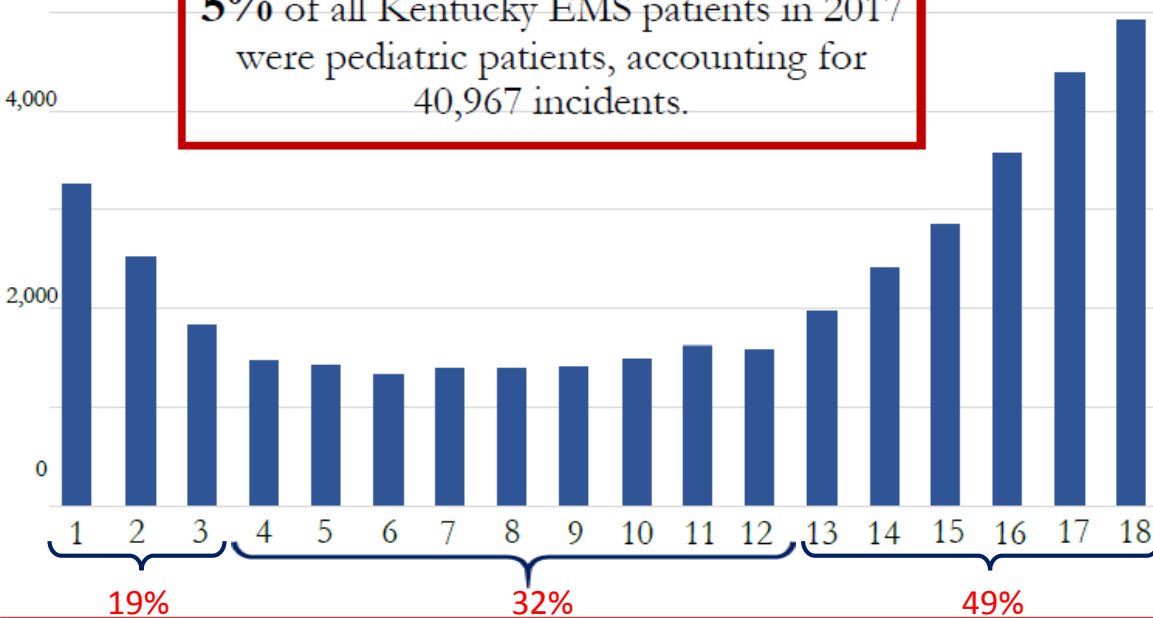
EMS - Chances of Treating a CHILD:



From the 2012 NEMSIS Database - <http://www.nemsis.org/reportingTools/reports/nationalReports/createAReport.html>

2017 Pediatric Incidents Reported to KSTARS (Birth - 18 Years of Age)

5% of all Kentucky EMS patients in 2017 were pediatric patients, accounting for 40,967 incidents.



Age	Patients		
1	3,272	10	1,496
2	2,538	11	1,622
3	1,833	12	1,583
4	1,477	13	1,971
5	1,434	14	2,428
6	1,320	15	2,851
7	1,405	16	3,575
8	1,405	17	4,405
9	1,424	18	4,928

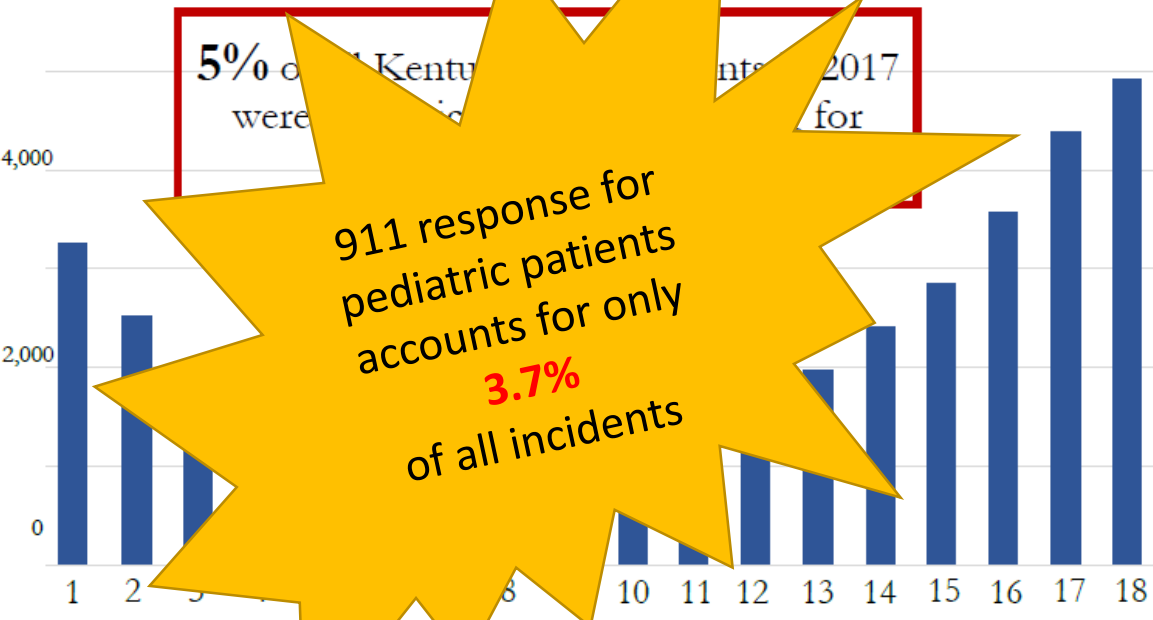
Top 3 Types of Service Requested for Pediatric Incidents:

911 Response (Scene) =
29,214 Incidents

Interfacility Transport =
6,919 Incidents

Medical Transport =
4,533 Incidents

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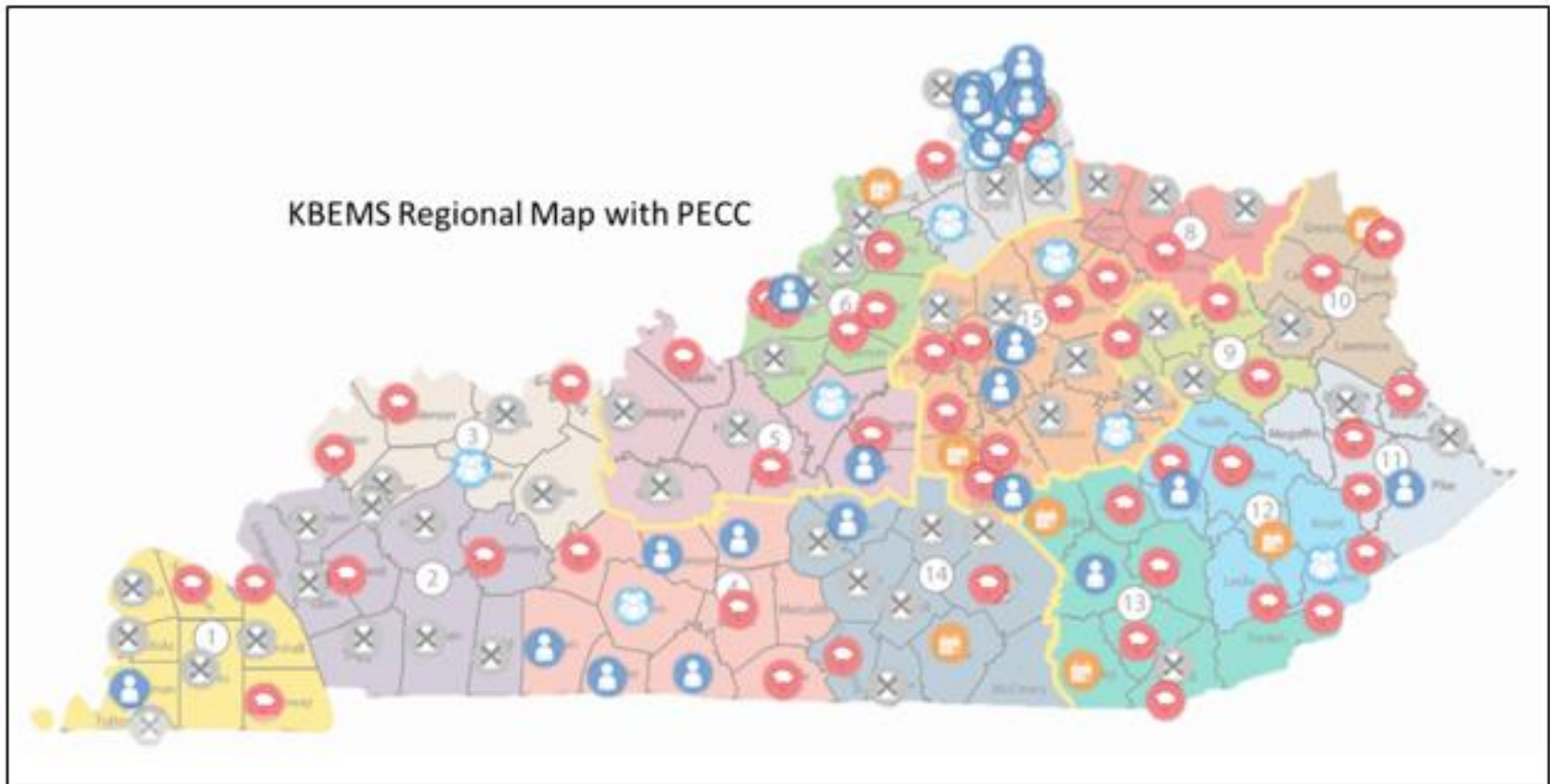
WHAT DOES THE PREHOSPITAL PECC SYSTEM IN YOUR STATE CURRENTLY LOOK LIKE?
WHERE ARE YOU NOW?

- EMS Agencies that have a PECC: 35 (21%)
- EMS Agencies that plan to add a PECC: 8 (5%)
- EMS Agencies interested in adding a PECC: 57 (35%)
- EMS Agencies that do not have a PECC: 65 (39%)
- n=165

	KENTUCKY	NATIONAL
% of EMS agencies with access to a Pediatric Emergency Care Coordinator	21% of EMS Agencies	23% of EMS Agencies
Of the 21% who have a Pediatric Emergency Care Coordinator, what are the top five duties performed?		
Promotes pediatric continuing education opportunities		100%
Ensures that fellow providers follow pediatric clinical practice guidelines and/or protocols		97%
Ensures the availability of pediatric medications, equipment, and supplies		91%
Ensures that the pediatric perspective is included in the development of EMS protocols		89%
Promotes agency participation in pediatric prevention programs		83%

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WHAT DOES THE PREHOSPITAL PECC SYSTEM IN YOUR STATE CURRENTLY LOOK LIKE?
WHERE ARE YOU NOW?



● PECC ● Plans to add a PECC ● Interested in a PECC ● No PECC

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WHERE DO YOU WANT TO BE?
WHERE ARE YOU GOING?

By March 31, 2019, the KYEMSC State PECC Team will have increased the percentage of EMS agencies with a PECC from 21% to 50%.

- 35 agencies claim to currently have a PECC
- Add 48 additional PECCs from the-
 - 8 agencies with a plan to add a PECC
 - 57 agencies interested in adding a PECC
 - 65 agencies answering “no” PECC
- Total of 83 EMS agencies with a PECC

PECCLC Progress Chart						
2017 Survey	Recognition Program	PECCLC State Team	1st Email	2nd Email	Current Total Confirmed	
Has PECC	35	3	2	8	5	18
Plan to add PECC	8	1	0	0	0	1
Interested in PECC	57	2	7	2	1	12
No PECC	66	1	7	7	9	24
Total	166					55

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WHERE DO YOU WANT TO BE?
WHERE ARE YOU GOING?

Initial Steps

- **Participate in PECC Learning Collaborative activities**
- **Designation within state licensing database**
- **Email outreach to agencies to encourage PECC designation**
 - November – sent emails targeting each category (PECC, plan, interested, no)
 - December – follow-up emails
- **Build State PECC Team of regional/district PECCs**
 - Still working on finalizing MOAs
- **First briefing of state team members – January 16, 2019**
 - Slide set presented via GoToMeeting
 - Recorded for the few unable to attend
 - Divided list of agencies and assigned team members
 - Summary report of progress and challenges due Feb. 6 via email
 - Online “check in” Feb. 8 – 1 hour for group discussion

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WHO ARE OTHER POTENTIAL PARTNERS TO CONSIDER FOR YOUR IMPROVEMENT TEAM?

State Team

- 17 EMS Agency PECCs
- Additional outreach by 4 state inspectors

Potential Partners

- DPH Healthcare Preparedness Coordinators
- Regional Healthcare Coalitions
- Nursing PECCs
- Children's hospital ED leadership
- KY - ENA, AAP, ACEP
- KY Ambulance Providers Association
- KY EMS Training & Educational Institutions

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HOW DO YOU GET THERE?

- **Engage KBEMS Inspectors**
- **Plan regional/district outreach meetings to be held May-August**
- **Develop PECC learning and networking opportunities**
 - **2 hour PECC Outreach every other month**
 - **before EMSC Advisory Meetings**
 - **clinical content, methodology of instruction training, and peer-to-peer sharing**
 - **In-person and online access**
 - **Annual PECC Symposium**
- **Promote participation in the Voluntary EMS Pediatric Recognition Program**
- **Clarify scope and streamline interaction of:**
 - **EMSC Advisory Committee**
 - **KPECC Steering Committee**
 - **PECCLC State Team**
 - **Other subcommittees, liaisons, or workgroups**

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CHALLENGES

- **120 counties**
 - Small rural services with limited funding
 - Paramedic “shortage” in many areas
 - One or two people do everything
- **Other medical system issues**
 - Long transport times
 - 40 counties do not have a hospital
 - Only 2 children’s hospitals in state
 - Lack of expertise at the local level
 - Difficulty finding EMS Medical Directors with or without pediatric expertise
 - 61 counties are designated as Health Professional Shortage Areas
- **Limited EMSC funding and personnel**
- **Lack of incentive for Prehospital PECC**