

Education Division: Pediatric Emergency Care Coordinator 2018 Strategic Plan

Agency Mission:

It is the purpose of [REDACTED] County Emergency Medical Services to provide pre-hospital care to the residents and visitors of [REDACTED] County. With teamwork and training, we shall strive to maintain our professionalism and enhance our ability to provide the highest standard of care. These values shall be continuously provided through dedicated service to our community.

Education Division:

[REDACTED] County EMS is fully committed to the cognitive, psychomotor and affective preparation of the employees of [REDACTED] County EMS. We are committed to the development of leaders who value quality improvement and best practices. We strive to ensure that our providers are knowledgeable of and able to thoughtfully consider the educational, legal, social, economic, and political implications of their duties; and are engaged, reflective, and influential decision makers in the field of emergency medical care.

Purpose Statement:

Effective July 27th 2016, the executive director gave notice to the education division instructing the division to create the position of pediatric emergency care coordinator. Whose responsibilities would be the continual assessment and improvement of pediatric emergency care at [REDACTED] County EMS. Within this document you will find the strategic plan for implementing a quality pediatric emergency care system.

Strategic Objectives:

Objective 1: State Regulation Compliance

Ensure that all state regulations are met regarding pediatric required items. Coordinate with the assistant director to acquire items that are not in stock.

Objective 2: KYEMSC Participation

Attend at minimum 50% of the KYEMSC advisory committee meetings, and ensure participation in KYEMSC service assessments.

Objective 3: Community Outreach

Expand the annual kids safety day to include car seat inspections. Currently we only offer fire safety and hands only CPR at the event.

Objective 4: Education Requirements

Provided 8 hours of pediatric related continuing education, and expand new employee orientation to include an online pediatric component. Education can be obtained from any source approved by KBEMS. Content developed by [REDACTED] EMS will be evidenced based and align with NREMT NCCR content or CQI workgroup data (see objective 6).

We will track continuing education with our online learning management system Medic-CE. A biannual review of each staff member to ensure compliance will be performed. If not compliant, the individual will be required to attend an online or in person session with the PECC/Education Coordinator.

Objective 5: Competency Evaluation

Using a combination of skill stations and integrated scenarios competency will be assessed annually. Providers will need to clearly articulate the procedure while demonstrating appropriate psychomotor ability as well.

A. Competency source

- a. Procedural policies outlined in the [REDACTED] County EMS Clinical Operating Guidelines.
- b. Some procedures are not relevant to pediatric care; therefore, not all procedures will be assessed.

B. Competency Schedule

- a. Q1
 - i. Medication administration
 - ii. BLS/ALS Airway

- b. Q2
 - i. Spinal Immobilization
 - ii. Medical/Trauma Assessment
 - iii. Childbirth
 - iv. Diagnostic tools: pulse oximetry, capnography, blood glucose
 - c. Q3
 - i. Safe transport of the pediatric patient
 - ii. Injections
 - d. Q4
 - i. Venous Access
 - ii. Cardiac Monitor: Pacing, Cardioversion, Defibrillation
 - iii. ALS/BLS Airway
- C. Competency Tracking
- a. Competency will be tracked using our online learning management system Medic-CE. December is termed a “just in time” month, so that employees that have missed some education might have time to catch up before the end of year.

Objective 6: Continuous Quality Improvement

A workgroup consisting of [REDACTED] County EMS employees will be formed. They will be tasked with researching evidence based or best practice quality metrics, and developing a strategy of implementation. These metrics will be adopted and reported at the quarterly data review.

Objective 7: Equipment Compliance

Obtain funding for pediatric transport devices that meet specification under *Safe Transport of Children by EMS: Interim Guidance (2017 NASEMSO)* and the *Working Group Best-Practice Recommendations for the Safe Transport of Children in Ground Ambulances (2012 NHTSA)*. Currently we have one pediatric transport device available in our supervisor's vehicle.

Objectives 1-7 will be reviewed in June of 2018 for compliance/completion.

Workgroup Action Plans:

Actions plans will be developed by the specified workgroups or the PECC. These action plans will be continually reviewed to ensure that they are achieving the specified objective.

EDUCATION BLUEPRINT 2018

* All training dates and content are subject to change upon schedule conflicts.

*All **Competencies** are combined adult and pediatric competencies, come prepared to prove both.

QUARTER 1

JAN	JAN 10	Monthly: New Protocol Training (Flipped) Medic-CE: New Protocol Training 2018 Critical Care Class Begins	2017 DATA
FEB	FEB 7	Monthly: Pediatric Cardiac Arrest & Handtevy Medic-CE: Cardiovascular Emergencies (Flipped)	
MAR	MAR 7	Monthly: Cardiovascular Emergencies, Competencies Medic-CE: Trauma (Flipped)	

QUARTER 2

APR	APR 11	Monthly: Trauma Scenarios Medic-CE: Obstetric Emergencies (Flipped) 2018 Critical Care Class Ends	Q1 DATA
MAY	MAY 9	Monthly: Obstetric Scenarios Medic-CE: Pediatric Emergencies (Flipped)	
JUN	JUN 6	Monthly: Pediatric Emergencies Scenarios Medic-CE: Neurovascular Emergencies (Flipped)	

QUARTER 3

JUL	JUL 11	Monthly: Neuro Emergencies Scenarios, Competencies Medic-CE: EMS Safety (Flipped)	Q2 DATA
AUG	AUG 1	Monthly: EMS Safety Scenarios, Mode of Transport Competencies Medic-CE: TBD	
SEP	SEP 5	Monthly: ACLS Medic-CE: TBD	

QUARTER 4

OCT	OCT 3	Monthly: PALS Medic-CE: Pediatric Abusive Head Trauma	Q3 DATA
NOV	NOV 7	Monthly: BLS Medic-CE: TBD	