



EMS

**Pediatric Emergency Care
Strategic Goals 2017-2018**



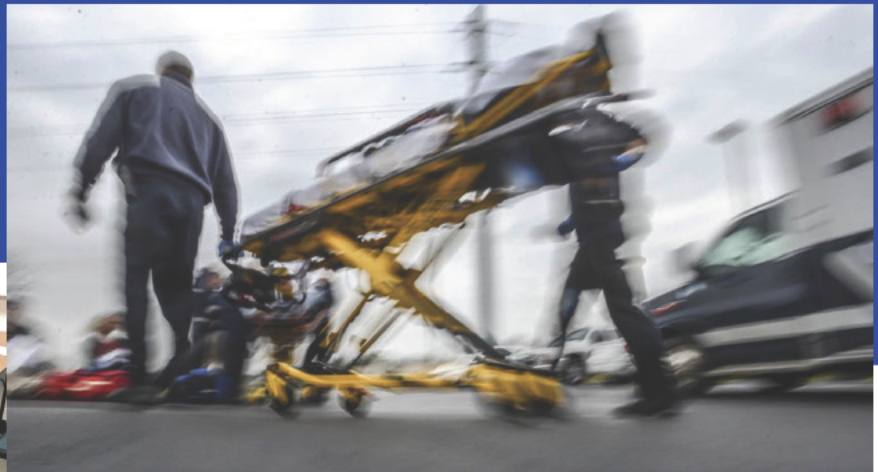
**SERVICE
TRAINING DIVISION**

Agency Mission Statement:

At [REDACTED] EMS, our mission is to provide the highest quality, evidence-based prehospital care to all who live and visit [REDACTED] County. We are committed public servants and patient advocates.

The professionals of this organization will strive to meet the ever-changing nature of healthcare, emergency services, and public safety arenas through continuous training, incorporation of new technologies, and interagency cooperation.

Through planning, staffing, and resourcing, we will provide the leadership, EMS management, and services necessary to fulfill our commitment to the community we serve.



2016
MISSION:
LIFELINE



Strategic Goal 1: State Regulation Compliance

Ensure that ██████████ EMS is compliant with all applicable KBEMS statutes and regulations.

Strategic Goal 2: Continuous Quality Improvement

Expand our current CQI process to focus on all pediatric transports for data collections and quality improvement. The data collection will be shared quarterly to highlight any weaknesses and successes.

Strategic Goal 3: KYEMSC Participation

Captain ██████████ has been designated the PECC for ██████████ EMS. It is the goal of the PECC to attend as many KYEMSC advisory committee meetings as possible or to find an alternate to fill his place if unable to attend. Other duties of the PECC are listed below:

- Ensuring that the pediatric perspective is included in the development of EMS protocols.
- Ensuring that fellow providers follow pediatric clinical-practice guidelines.
- Promoting pediatric continuing-education opportunities.
- Overseeing pediatric-process improvement.
- Ensuring the availability of pediatric medications, equipment, and supplies.
- Promoting agency participation in pediatric-prevention programs.
- Promoting agency participation in pediatric-research efforts.
- Liaises with the emergency department pediatric emergency care coordinator.
- Promoting family-centered care at the agency.

Strategic Goal 4: Education Requirements

It is the goal of the Education Division to provide six hours of annual continuing education on pediatric-specific subject matter. All training and skills competencies will be documented and tracked by the Education Coordinator. Verification will be completed in the form of a statement signed by the Deputy Director and maintenance of training records demonstrating 90% compliance.

Strategic Goal 5: Pediatric Competency Skills Evaluation

Skills competencies will be assessed quarterly to keep up skills proficiency. Competencies will include skill stations and scenarios based assessments. In addition all providers will be required to physical demonstrate the correct use of pediatric specific equipment.

PALS will also be required yearly to keep up skill proficiency.

Competency evaluations will be scheduled at the beginning of each calendar year. Each year the competencies will include all the following:

- ALS/BLS Airway
- Medications administration/injections
- Spinal immobilization
- medical/trauma assessment
- childbirth
- Pulse oximetry, capnography, blood glucose
- Safe transport of the pediatric patients
- Venous access
- Cardiac Monitor: pacing, cardioversion, Defibrillation

Strategic Goal 6: Community Outreach

██████████ EMS will hold at minimum two community out reach programs per calendar year. The focus will be on pediatric injury prevention, wellness, and care seat inspections. These events will require all participants in the community outreach program be tracked by a sign in sheet or number of participants.

Strategic Goal 7: Pediatric Equipment standards

To provide highest level of care for all pediatric patients, ██████████ EMS will equip and maintain all ALS/BLS equipment on the The joint policy statement “ Equipment for Ground Ambulance”. It is also our goal to budget for pediatric transport devices for every truck that meet specification under safe 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)*. We currently only have one pediatric transport device in the quick response vehicle.