The National Prehospital Pediatric Readiness (PPRP) Assessment is based on the 2020 Policy Statement: <u>Pediatric Readiness in the</u> <u>Emergency Medical Services Systems</u> and was developed by PPRP collaborative partners. It is intended to be used to evaluate overall pediatric readiness in Prehospital Agencies. Users agree they will not adapt, alter, amend, abridge, modify, condense, make derivative works, or translate the assessment. The project is funded in part by <u>HRSA</u>'s EMSC Data Center (EDC) grant award UJ5MC30824 and the EMSC Innovation and Improvement Center (EIIC) grant award U07MC37471. For more information, write to <u>emsc@hsc.utah.edu</u>

Note: The questions in this paper version of the assessment are asked in the same order as the online version but the question numbers may vary from the online version based on automatic electronic skip patterns.

2024 NATIONAL PREHOSPITAL PEDIATRIC READINESS ASSESSMENT

Before we begin, please provide us with the following information, in case we need to contact you to clarify any of your responses:

EMS Agency

- 1. Name of your Agency: cv_agency _____
- 2. Address of your Agency: address _____
- 3. City your Agency is located in: city_____
- 4. Zip code of your Agency: zip_____
- 5. Does your EMS agency respond to 9-1-1 emergency medical calls (or emergency medical calls placed through other emergency access numbers if used in your region)? cv_respond911
 - $Yes Y \longrightarrow Go to 6$

If your EMS agency DOES NOT respond to 911 calls, you are finished with the assessment. Thank you for your time.

EDUCATION AND COMPETENCIES FOR PROVIDERS [Internal Note: ECP domain = 15 total points]

In the next set of questions, we are asking about the process that your agency uses to evaluate your EMS providers' skills using pediatric-specific equipment (i.e. airway adjunct use/ventilation, child safety restraint vehicle installation for pediatric patient restraint, IV/IO insertion and administration of fluids, etc.).

While individual providers in your agency may take PEPP or PALS or other national training courses in pediatric emergency care, we are interested in learning more about the process that your agency uses to evaluate provider skills, cognitive education, and behavior related to pediatric-specific equipment or events.

We realize that there are multiple processes that might be used to assess the correct use of pediatric equipment; we are interested in the following three processes:

- At a skill station
- Within a simulated event
- During an actual pediatric patient encounter

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specific	totals be c	correct.												

6. At a *Skill Station* (not part of a simulated event), does your agency have a process which *Requires* your *EMS* providers to *Physically Demonstrate* the correct use of *Pediatric-Specific* equipment? cv_skillStationDemo_YN

(This is an isolated skill-check rather than part of a simulated event.)

	Yes	[Internal	Note:	Yes=	0.2	points
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- 7. How often is this process required for your EMS providers? cv_skillStationDemoFreq (Choose one)
 - Two or more times a year **twoOrMorePerYr** [Internal Note: = 0.2 points]
 - At least once a year **oncePerYr** [Internal Note: = 0.2 points]
 - At least once every two years **oncePerTwoYrs** [Internal Note: = 0.2 points]
 - Less frequently than once every two years lessThanOncePerTwoYrs
- 8. Within a *Simulated Event* (such as a case scenario or a mock incident), does your agency have a process which *Requires* your *EMS* providers to *Physically Demonstrate* the correct use of *Pediatric-Specific* equipment? cv_skillSimulationDemo_YN

Yes [Internal Note: Yes= 0.2 points]

No -----> Skip to 10

- 9. How often is this process required for your EMS providers? cv_skillSimulationDemoFreq (Choose one)
 - Two or more times a year **twoOrMorePerYr** [Internal Note: = 0.2 points]
 - At least once a year **oncePerYr** [Internal Note: = 0.2 points]
 - At least once every two years **oncePerTwoYrs** [Internal Note: = 0.2 points]
 - Less frequently than once every two years **lessThanOncePerTwoYrs**
- 10. During an actual *Pediatric Patient Encounter*, does your agency have a process which *Requires* your *EMS* providers to be observed by a *Field Training Officer, Medical Director*, or *Supervisor* to ensure the correct use of *Pediatric-Specific* equipment? cv_skillObserveField_YN

Yes	[Internal	Note:	Yes=	0.2	points]

] No **→ Skip to 12**

11. How often is this process required for your EMS providers? cv_skillObserveFieldFreq (Choose one)

- Two or more times a year **twoOrMorePerYr** [Internal Note: = 0.2 points]
- At least once a year **oncePerYr** [Internal Note: = 0.2 points]
- At least once every two years **oncePerTwoYrs** [Internal Note: = 0.2 points]
- Less frequently than once every two years lessThanOncePerTwoYrs

<u>(FINAL formatted version based on adjustments from cognitive interviews and feedback from IHS)</u>

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We are now going to ask about specific types of Skills Testing using pediatric equipment.

12. Does your EMS agency require physical hands-on demonstration (psychomotor) on the use of any pediatric equipment *at least once every two years*? cv_skillpsychomotor



 \square No \longrightarrow Skip to 23

We are interested in understanding a little bit more about which skills you require hands-on demonstration.

Which of the following skills are tested?

(Check Yes, No, or Not within scope of practice for each of the following questions)

13. Nasopharyngeal suctioning? cv_NasoSuction

Yes	[Internal	Note: Yes	s = 0.4 pc	oints]
	L		, p.	, mool

No No

Not within scope of practice **NasoSuction_NotScope**

14. Bag mask ventilation? cv_BagVentilation

	Yes	[Internal	Note:	Yes=	0.7	points	
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No

Not within scope of practice **BagVentilation_NotScope**

15. Adjunct airway use (nasal or oral airway)? cv_AdjunctAirway

Yes [Internal Note: Yes= 0.5 points]

🗌 No

Not within scope of practice **AdjunctAirway_NotScope**

16. Safe transport/securing children? cv_SafeTransport

Yes [Internal Note: Yes= 0.5 poin	ts
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```
🗌 No
```

Not within scope of practice **SafeTransport_NotScope**

17. Cervical spine motion restriction? cv_CervicalRestriction

Yes [Internal Note: Yes= 0.4 points]

No No

Not within scope of practice **CervicalRestriction_NotScope**

18. Peripheral intravenous line placement? cv_PeripheralLine

Yes [Internal Note: Yes= 0.4 points]

No

Not within scope of practice **PeripheralLine_NotScope**

19. Intraosseous needle placement? cv_IntraossNeedle

Yes [Internal Note: Yes= 0.6 points]

No

Not within scope of practice **IntraossNeedle_NotScope**

27. Skills Station (not part of a simulated event)? cv_SkillTrain



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specific totals be correct.
28. How often is this training offered for your EMS providers? cv_SkillTrainFreq
(Choose one)
Two or more times a year twoOrMorePerYr [Internal Note: = 0.6 points]
At least once a year oncePerYr [Internal Note: = 0.6 points]
At least once every two years oncePerTwoYrs [Internal Note: = 0.6 points]
Less frequently than once every two years lessThanOncePerTwoYrs
29. Simulation? cv_SimulationTrain
Yes [Internal Note: Yes= 0.1 points]
\square No \longrightarrow Skip to 31
\downarrow — ·
30. How often is this training offered for your EMS providers? cv_SimulationTrainFreq
(Choose one)
Two or more times a year twoOrMorePerYr [Internal Note: = 0.5 points]
At least once a year oncePerYr [Internal Note: = 0.5 points]
At least once every two years oncePerTwoYrs [Internal Note: = 0.5 points]
Less frequently than once every two years lessThanOncePerTwoYrs
31. Direct Patient Encounter? cv_PatientEncounter
Yes [Internal Note: Yes= 0.1 points]
\square No \longrightarrow Skip to 33
\downarrow – -
32. How often is this training offered for your EMS providers? cv_PatientEncounterFreq
(Choose one)
Two or more times a year twoOrMorePerYr [Internal Note: = 0.3 points]
At least once a year oncePerYr [Internal Note: = 0.3 points]
At least once every two years oncePerTwoYrs [Internal Note: = 0.3 points]
Less frequently than once every two years lessThanOncePerTwoYrs
33. Other? OtherTrain
Yes
\square No \longrightarrow Skip to 36

34. What other types of training do you offer? OtherTrainText

35. How often is this other type of training offered for your EMS providers? OtherTrainFreq (Choose one)



Less frequently than once every two years **lessThanOncePerTwoYrs**

36. Does your EMS agency *Document* whether its providers have completed continuing education on pediatric-specific *Knowledge* (e.g. neonatal resuscitation, respiratory distress in children) at least once every two years? cv_DocumentEducation

```
Yes [Internal Note: Yes= 0.6 points]
```

- No
- 37. For your *Highest* level of provider, what is the minimum number of pediatric continuing education hours that your EMS agency requires every two years? cv_MinimumEducation (card classes like PALS, PEPP, EPC, APLS, NRP count) (Choose one)

0 hours **none** [Internal Note: = 0 points]

1-2 hours **High_Two** [Internal Note: = 0.1 points]

3-4 hours **High_Four** [Internal Note: = 0.2 points]

5-6 hours **High_Six** [Internal Note: = 0.3 points]

7-8 hours **High_Eight** [Internal Note: = 0.4 points]

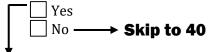
9 or more hours **High_Nine** [Internal Note: = 0.5 points]

Does your EMS agency require a minimum number of hours of pediatric continuing education?

(Check Yes or No for each of the following questions)

Note: the response options of the following questions (38, 40, & 42) will be customized in the online assessment to better reflect individual state/territory terminology.

38. For **BLS** providers? **BLSTrain**

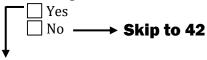


39. Which of the following pediatric classes are required at least every 2 years? BLSClass (Check all that apply)

PALS **BLS_Pals** PEPP **BLS Pepp** EPC BLS EPC APLS BLS APLS NRP **BLS_NRP** PEARS **BLS_PEARS** Other Pediatric Training: _____

BLS_OtherPedTrain

40. For ILS providers? ILSTrain



- 41. Which of the following pediatric classes are required at least every 2 years? ILSClass
 - (Check all that apply) PALS **ILS_Pals** PEPP ILS_Pepp EPC ILS_EPC APLS ILS_APLS NRP ILS_NRP PEARS ILS_PEARS

Other Pediatric Training: ______ ILS_OtherPedTrain

42. For ALS providers? ALSTrain Yes \square No \longrightarrow Skip to 44 43. Which of the following pediatric classes are required *at least* every 2 years? ALSClass (Check all that apply) PALS **ALS_Pals** PEPP ALS Pepp EPC ALS_EPC APLS ALS_APLS NRP ALS_NRP PEARS ALS_PEARS Other Pediatric Training: ______ ALS_OtherPedTrain

Please indicate for which of the following behavioral education topics your EMS agency requires training?

(Check Yes or No for each of the following questions)

44. Communicating with pediatric patients across all ages? cv_CommunicatePed

Yes	[Internal	Note:	Yes=	0.5	points]
No						

45. Communicating with families of pediatric patients? cv_CommunicateFam

```
Yes [Internal Note: Yes= 0.6 points]
```

46. Practicing cultural humility? cv_CulturalHumility

Yes	[Internal Note: Yes= 0.4 points]
No	

- 47. Being aware of and utilizing strategies to address implicit bias? cv_ImplicitBias
 - Yes [Internal Note: Yes= 0.4 points] No
- 48. Applying strategies to de-escalate the agitated patient? cv_DeescalatePatient

Yes [Internal Note: Yes= 0.7 points] No

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specific totals be correct.	

49. Providing bereavement support? cv_BereavementSupport

] Yes	[Internal Note: Yes= 0.4 points]
No	

50. Practicing trauma informed care? cv_TraumaCare

Yes [Internal Note: Yes= 0.5 points]

51. Understanding nonverbal communication? cv_NonverbalCommunication

```
Yes [Internal Note: Yes= 0.5 points]
```

EQUIPMENT AND SUPPLIES [Internal Note: ES domain = 12 total points]

These next questions ask about pediatric equipment.

52. Do your vehicles have *ALL* pediatric equipment recommended by national consensus guidelines (link to guidelines' equipment list) consistent with the EMS agency's *Scope of Practice*?

cv_VehicleEquipYes [Internal Note: Yes= 6.9 points]

No

53. Is this verified by periodic inspection *at least* once every 2 years? **cv_VehicleInspect** Yes [Internal Note: Yes= 5.1 points] No

INTERACTIONS WITH SYSTEMS OF CARE [Internal Note: ISC domain = 10 total points]

Next, we have some questions about engaging with hospitals.

In addition to direct patient care, please indicate in which of the following ways your EMS agency engages with hospital(s) or emergency department staff to promote pediatric emergency care in your region.

(Check Yes or No for each of the following questions)

54. Developing protocols and policies? cv_DevelopPolicy

Yes [Internal Note: Yes= 0.6 points]

55. Regional surge capacity planning? cv_SurgePlanning

Yes [Internal Note: Yes= 0.5 points]

56. Promoting education? cv_EducationPromote

Yes [Internal Note: Yes= 0.6 points]

57. Sharing and receiving feedback on clinical care? cv_FeedbackCare

- Yes [Internal Note: Yes= 0.7 points]
- 58. Ensuring medication/equipment/supply availability? cv_MedAvailability

Yes [Internal Note: Yes= 0.6 points]

59. Promoting injury prevention? cv_lnjuryPrevent

Yes [Internal Note: Yes= 0.5 points]

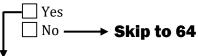
60. Promoting research? cv_ResearchPromote

Yes [Internal Note: Yes= 0.4 points]

61. Promoting family-centered care? cv_FamCarePromote

☐ Yes [Internal Note: Yes= 0.6 points] ☐ No

62. Other? OtherPedCare



63. You answered "Other." Please describe how your EMS agency engages with hospital(s) or emergency department staff to promote pediatric emergency care in your region. OtherPedCareText

Please indicate if your EMS agency collaborates with public health agencies to incorporate the needs of patients of all ages, including children, in one or more of the following ways. (Check Yes or No for each of the following questions)

64. Engaging in public health *Policy* development? PubHealthPolicy

Yes
No

65. Engaging in public health *Protocol* development? cv_PubHealthProtocol

Yes [Internal Note: Yes= 0.3 points]

66. Identifying public health issues, including disease epidemics (e.g. influenza, opioids)? cv_PubHealthlssue

Yes [Internal Note: Yes= 0.5 points]

67. Engaging in performance improvement initiatives? cv_PubHealthPerformance

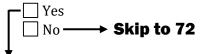
Yes [Internal Note: Yes= 0.4 points]

68. Disaster preparedness planning? cv_PubHealthDisaster

Yes [Internal Note: Yes= 0.6 points]

- 69. Participating in healthcare coalition meetings? cv_PubHealthCoalition
 - Yes [Internal Note: Yes= 0.4 points]No

70. Other? PubHealthOther



71. You answered "Other." Please describe how your EMS agency collaborates with public health agencies to incorporate the needs of patients of all ages, including children. PubHealthOtherText

Does your EMS agency have a disaster preparedness policy that addresses ...?

(Check Yes or No for each of the following questions)

72. Use of a pediatric disaster triage tool? cv_PrepareTriage

Yes [Internal Note: Yes= 0.6 points]

73. Use of antidotes for pediatric patients? cv_PrepareAntidote

Yes [Internal Note: Yes= 0.5 points]
No

74. Mass transport of pediatric patients? cv_PrepareTransport

Yes [Internal Note: Yes= 0.5 points]

75. Tracking of unaccompanied children? cv_PrepareTracking

Yes [Internal Note: Yes= 0.7 points]No

76. Family reunification? cv_PrepareFamily

Yes [Internal Note: Yes= 0.5 points]

77. Mechanisms to address pediatric mental health emergencies? cv_PrepareMental

Yes [Internal Note: Yes= 0.5 points]

78. Other? PrepareOther

- Yes

□ No **→ Skip to 80**

79. You answered "Other." Please describe other components of your disaster preparedness policy. **PrepareOtherText**

COORDINATION OF PEDIATRIC EMERGENCY CARE [Internal Note: ISC/CPEC domain = 14 total points]

Now we are interested in hearing about how pediatric emergency care is coordinated at your EMS agency. This is an emerging issue within emergency care and we want to gather information on what is happening across the country within EMS agencies.

One way that an agency can coordinate pediatric emergency care is by **DESIGNATING (AN) INDIVIDUAL(S)** who is/are responsible for coordinating pediatric-specific activities that could include:

- Ensuring that the pediatric perspective is included in the development of EMS protocols.
- Ensuring that fellow providers follow pediatric clinical-practice guidelines and protocols.
- 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.
- Interacting with the ED pediatric emergency care coordinator.
- Promoting family-centered care at the agency.

(A) DESIGNATED INDIVIDUAL(S) who coordinate(s) pediatric emergency care need not be dedicated solely to this role; it can be (an) individual(s) already in place who assume(s) this role as part of their existing duties. The individual(s) may be (a) member(s) of your agency, work at a county or region level, and/or serve more than one agency.

An individual or group that collaborates internally or externally in overseeing administrative and/or system-level aspects to improve pediatric-specific care could include a designated individual or Pediatric Emergency Care Coordinator (PECC) within an EMS agency, an individual or PECC that has responsibilities

for more than one EMS agency, a Pediatric Advisory Council (PAC), and/or a medical director with pediatric-specific knowledge and experience.

80. Which one of the following st	tatements best describes your EMS agency?)(
(Choose one)		

□ Our EMS agency *HAS* a designated INDIVIDUAL(S) who coordinates pediatric emergency care (skip logic to next question) **hasPECC** → **Go to 81** [Internal Note: Yes= 0.7 points]

□ Our EMS agency does *NOT Have* a designated INDIVIDUAL(S) who coordinates pediatric emergency care at this time **noPECC** → **Skip to 105**

- Our EMS agency does *NOT Currently* have a designated INDIVIDUAL(S) who coordinates pediatric emergency care but we *Have A Plan To Add* this role within the next year **planToAddPECC**
- Our EMS agency does *NOT Currently* have a designated INDIVIDUAL(S) who coordinates pediatric emergency care but would be *Interested In Adding* this role interestedInAPECC

 \rightarrow Skip to 105

You indicated that you have at least one designated individual or a group who coordinates pediatric emergency care for your EMS agency. Is this individual(s) a...?

- 81. A *Medical Director* with pediatric-specific knowledge and experience who coordinates care for your agency? cv_PECCMedDirector
 - ☐ Yes [Internal Note: Yes= 0.7 points] → Go to 82
 - □ No → Skip to 88

Please describe the training that your medical director has completed.

(Check Yes or No for each of the following questions)

82. Pediatric residency? DirectorPedResidency

☐ Yes ☐ No ☐ Unknown

83. Pediatric emergency medicine fellowship? DirectorPedFellowship

Yes No

Unknown

84. Family medicine residency? DirectorFamResidency

Yes

] No

Unknown

85. Emergency medicine residency? **DirectorEMResidency**

🗌 Yes

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specific totals be correct.
No
Unknown

86. EMS fellowship? DirectorEMSFellowship

- Yes
 No
- Unknown

87. Other? DirectorOther

- Yes
- 🗌 No
- 🗌 Unknown

You indicated that you have at least one designated individual or a group who coordinates pediatric emergency care for your EMS agency. Is this individual(s) a...?

(Check Yes or No for each of the following questions)

88. A person *Other Than* a medical director with pediatric-specific knowledge who coordinates care *Only For Your Agency*? cv_PECCOneAgency
 Yes [Internal Note: Yes= 0.4 points]

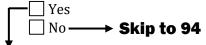
No

- 89. A person Other Than a medical director with pediatric-specific knowledge who coordinates care for Your Agency as Well as Other agencies? cv_PECCMultAgency
 Yes [Internal Note: Yes= 0.3 points]
 - 🗌 No
- 90. A *Pediatric Advisory Council* or committee that coordinates care for either your agency *Only*

or Other agencies? cv_PECCCouncil Yes [Internal Note: Yes= 0.3 points]

🗌 No

91. Another individual or group? **PECCOther**



92. You answered, "Another individual or group." Please specify: PECCOtherText

We are interested in understanding a little bit more about what this individual or group does for your agency in the coordination of pediatric emergency care.

Does this individual or group...?

(Check Yes or No for each of the following questions)

- 93. Ensure that the pediatric perspective is included in the development of EMS protocols?
 - cv_inputDevProtocols_YN

Yes [Internal Note: Yes= 0.8 points] No

94. Ensure that providers follow pediatric clinical practice guidelines and/or protocols? cv_providerFollowsProtocols_YN

Yes [Internal Note: Yes= 0.6 points] No

95. Promote pediatric continuing education opportunities? cv promoteConED_YN

Yes [Internal Note: Yes= 0.6 points] No

96. Oversee pediatric process and/or quality improvement initiatives? cv_overseeQl_YN

Yes [Internal Note: Yes= 0.6 points] No

97. Ensure the availability of pediatric medications, equipment, and supplies?

cv_ensureSupplies_YN Yes [Internal Note: Yes= 0.7 points] No

98. Promote EMS agency participation in pediatric injury prevention programs?

cv_promotePrevention_YN Yes [Internal Note: Yes= 0.4 points] No

99. Collaborate with one or more emergency department Pediatric Emergency Care Coordinator(s)? cv_coordWithED_YN

Yes [Internal Note: Yes= 0.5 points] 🗌 No

100. Promote family-centered care by ensuring inclusion of pediatric specific needs in system policies and procedures? cv_promoteFamilyCare_YN

Yes [Internal Note: Yes= 0.5 points] No

101. Promote EMS agency participation in pediatric research efforts? cv_promoteResearch_YN

Yes [Internal Note: Yes= 0.4 points] No

102. Provide support to more than one EMS agency? SupportMult

Yes No

103. Have other roles or responsibilities? OtherRoles

Yes] No **→ Skip to 105**

104. You marked 'other' to the previous question. Please describe the 'other' roles or responsibilities performed by the designated individual who coordinates pediatric emergency care at your agency. OtherRolesText

Does your EMS agency have a policy or protocol to guide destination decision making for pediatric patients with . . . ?

(Check Yes or No for each of the following questions)

105. Medical emergencies (including critically ill children)? cv_PolicyEmergency

Yes [Internal Note: Yes= 1.0 points]No

106. Traumatic injuries (including suspected child abuse)? cv_PolicyTraumatic

Yes [Internal Note: Yes= 0.9 points]
No

107. Behavioral health emergencies? cv_PolicyBehavioral

Yes [Internal Note: Yes= 0.8 points]

108. Does your EMS agency have a policy to specify when pre-arrival notification of critically ill or injured children is necessary? cv_PolicyPreArrival

```
Yes [Internal Note: Yes= 0.6 points]
```

Does your EMS agency have a standardized method or template to ensure consistency in what information is conveyed for patient hand offs in the emergency department that includes . . .?

(Check Yes or No for each of the following questions)

109. Assessment (e.g. vital signs, mental status relative to baseline, provider impression,

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diagnostics including glucose)? cv_StandardVital
```

Yes [Internal Note: Yes= 0.8 points]

110. Weight in kilograms? cv_StandardWeight

Yes [Internal Note: Yes= 0.7 points]

111. Interventions (e.g. medications given, procedures performed)? cv_StandardIntervention

Yes [Internal Note: Yes= 0.9 points]

112. Suspicion or concern for patient maltreatment? cv_StandardMaltreat

Yes [Internal Note: Yes= 0.8 points]

113. Other? **StandardOther**

114. You marked 'other' to the previous question. Please describe the 'other' method or template to ensure consistency in what information is conveyed for patient hand offs in the emergency department. StandardOtherText

PATIENT AND FAMILY-CENTERED CARE IN EMS [Internal Note: PFC domain = 10 total points]

This section asks about family-centered care.

Does your EMS agency have a policy for promoting family-centered care that addresses...?

(Check Yes or No for each of the following questions)

115. Family and guardian presence during resuscitation? cv_FamResuscitation

Yes [Internal Note: Yes= 0.9 points]

116. Practicing cultural competencies? cv_FamCultural

Yes [Internal Note: Yes= 0.7 points]

- 117. Cultural humility? FamHumility
 - Yes No

118. Strategies to counteract implicit bias? cv_FamBias

Yes [Internal Note: Yes= 0.8 points]

119. Flexibility around religious customs? cv_FamReligious

Yes [Internal Note: Yes= 0.8 points]

120. Family member/guardian to accompany a pediatric patient during transport?

cv_FamTransport

Yes [Internal Note: Yes= 1.3 points]

121. Family preference considered in destination decision-making? cv_FamDecision

Yes [Internal Note: Yes= 1.1 points]

122. Mechanisms to communicate with non-verbal patients? cv_FamNonVerbal

Yes [Internal Note: Yes= 1.0 points]

123. Accessing language services to communicate with non-English speaking patients and families?

```
cv_FamLanguage

Yes [Internal Note: Yes= 1.3 points]

No
```

124. Use of lay terms when communicating with families? cv_FamCommunicate

Yes [Internal Note: Yes= 1.0 points]

125. Narrating actions and alerting patients and caregivers before interventions are performed?

cv_FamNarrate

Yes [Internal Note: Yes= 1.1 points]

126. Other? FamOther

- Yes □ No -----> Skip to 128

127. You marked 'other' to the previous question. Please describe the 'other' ways your agency's policy addresses promoting family-centered care. FamOtherText

PATIENT AND MEDICATION SAFETY [Internal Note: PMS domain = 14 total points]

These questions are about medication safety.

128. Does your EMS agency use a length-based tape or volumetric dosing guide for medication administration? cv_MedTape

```
Yes [Internal Note: Yes= 1.9 points]
```

129. Does your EMS agency have a process to identify and/or review pediatric medication dosing errors (i.e. provider reported, manual data query, or automated tracking)? cv_MedDoseError

· Yes [Internal Note: Yes= 2.0 points] □ No → Skip to 136

Does this process include review of all patient encounters to identify errors in dosing or route of administration for these commonly administered medications?

(Check Yes or No for each of the following questions)

130. Midazolam? cv_MedMid

Yes [Internal Note: Yes= 1.4 points]

131. Epinephrine? cv_MedEpi

```
Yes [Internal Note: Yes= 1.4 points]
```

132. Normal Saline? cv_MedSaline

```
Yes [Internal Note: Yes= 0.9 points]
```

```
133. Fentanyl? cv_MedFent

Yes [Internal Note: Yes= 1.4 points]

No
```

134. Other? MedOther

_ Yes _ No **→→ Skip to 136**

135. What other medications are reviewed for dosing errors? MedOtherText

136. Does your EMS agency have a policy for proper restraint of children during transport?

cv_TransportRestrain → Yes [Internal Note: Yes= 1.8 points] No → Skip to 138

137. Is your EMS agency's or state's policy on safe transport of children consistent with guidance from national organizations? (If unsure, click the link for NASEMSO's Interim Guidance on this topic)

cv_TransportPolicy

Yes [Internal Note: Yes= 1.5 points]

138. Does your EMS agency carry a device for pediatric transport to safely seat/position a child which can be securely mounted to the stretcher or a seat in the back of the ambulance?

cv_TransportDeviceSection Section Contended Section Contendad Section Contendad Section Contendad S

🗌 No

POLICIES, PROCEDURES, AND PROTOCOLS [Internal Note: PPP domain = 13 total points]

Next, we have some questions about policies and procedures.

139. Does your EMS *Dispatch Center* provide *Pediatric-Specific* pre-arrival instructions? **DispatchInstructions**

☐ Yes ☐ No **→ Skip to 141**

□ Unknown DispatchInstructions_Unknown → Skip to 141

140. Which of the following *Pre-Arrival* instructions have *Pediatric-Specific* components?

DispatchPed

(Check all that apply)

Respiratory distress **DispatchPed_RD** Choking **DispatchPed_Choking**

Cardiac arrest **DispatchPed_CA**

Seizure **DispatchPed_Seizure**

Altered mental status **DispatchPed_AMS**

Newborn delivery **DispatchPed_Newborn**

All of the above **DispatchPed_All**

Unknown DispatchPed_Unknown

None of the above **DispachPed_None**

For which of the following does your EMS agency include Pediatric-Specific guidance integrated into protocols, procedures, and/or policies?

(Check Yes or No for each of the following questions)

141. Respiratory distress? cv_PedRespiratory

Yes [Internal Note: Yes= 0.7 points]

142. Choking? cv_PedChoking

Yes [Internal Note: Yes= 0.8 points]

143. Cardiac arrest? cv_PedCardiac

Yes [Internal Note: Yes= 0.9 points]

144. Seizure? cv_PedSeizure

Yes [Internal Note: Yes= 0.8 points]

145. Altered mental status? cv_PedAltered

Yes [Internal Note: Yes= 0.6 points]No

146. Trauma? cv_PedTrauma

Yes [Internal Note: Yes= 1.0 points]

147. Newborn delivery? cv_PedNewborn

☐ Yes [Internal Note: Yes= 0.9 points]☐ No

148. Consent of minors? cv_PedConsent

☐ Yes [Internal Note: Yes= 0.8 points]☐ No

149. Assessment? cv_PedAssessment

Yes [Internal Note: Yes= 0.8 points

150. Abuse/maltreatment? cv_PedAbuse

Yes [Internal Note: Yes= 0.9 points]

151. Refusal of minors? cv_PedRefusal

Yes [Internal Note: Yes= 0.8 points]
No

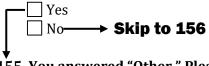
152. Children with behavioral or developmental disabilities? cv_PedBehavioral

Yes [Internal Note: Yes= 0.8 points]

153. Children who are technology dependent? cv_PedTechnology

Yes [Internal Note: Yes= 0.8 points]No

154. Other? PedOther



155. You answered "Other." Please list the other topics. PedOtherText

156. During direct patient care, do your EMS agency's providers have 24-hour/day access to a physician(s) with pediatric emergency care expertise (may be based within your own EMS agency, another EMS agency, an EMS base station, or a hospital emergency department)? cv_PedAllDay

□ No → Skip to 164

What is the training of the physician?

(Check Yes or No for each of the following questions)

157. Pediatric residency? PedResidency

Yes
No

158. Pediatric emergency medicine fellowship? PedPEMFellowship

Yes No

	on based on adjustments from cognitive interviews and feedback from IHS)
Approved by the PPRPS specific totals be correc	Steering Committee on 01/31/2022 Points reformatted on 3/13/22 to equal 100 total and have domain t
	medicine residency? PedFamResidency
Yes	
🗌 No	
160 Fmerge	ency medicine residency? cv_PedEMResidency
	[Internal Note: Yes= 0.4 points]
No	
	lowship? cv_PedEMSFellowship
	[Internal Note: Yes= 0.3 points]
162. Other ?	PedOtherEdu
	Skin to 164
	→ Skip to 164 nown→ Skip to 164
•	
163. What a	re the physician's other type(s) of training? PedOtherEduText
164 Але	The second se
	ır EMS agency's protocols updated or revised <i>at Least Once Every 2 Years</i> to rate new pediatric evidence or guidelines (e.g. from scientific studies or other national
-	(e.g. nom scientific studies of other national e)? cv_PedProtocolUpdate
•	nternal Note: Yes= 0.9 points]
No	
Unkno	own PedProtocolUpdate_Unknown
	(EMENT / DEDEODMANCE IMPROVEMENT [Internal Nata: OIDI domain = 12 tata]
points]	/EMENT/PERFORMANCE IMPROVEMENT [Internal Note: QIPI domain = 12 total
This section asks ab	out quality improvement processes.
	our EMS agency have a performance improvement process that includes reviewing
-	charts or gathering information from <i>Pediatric Encounters</i> ? cv_PerformProcess
res [Internal Note: Yes= 0.7 points]

Yes [Internal Note: Yes= 0.7 point]
 No → Skip to 174

Which of the following does your EMS agency utilize?

(Check Yes or No for each of the following questions)

166. Chart review on *ALL* pediatric patient encounters? **cv_PerformAllChart** Yes [Internal Note: Yes= 0.5 points] No

<mark>(FINAL formatted version based on adjustments from cognitive interviews and feedback from IHS)</mark> Approved by the PPRP Steering Committee on 01/31/2022 Points reformatted on 3/13/22 to equal 100 total and have domain
specific totals be correct.
167. Chart review on <i>Randomly Selected</i> pediatric patient encounters? cv_PerformRandomChart Yes [Internal Note: Yes= 0.5 points] No
 168. Chart review to identify inequities in care based on Specific Patient Demographics (e.g. gender, race, ethnicity)? cv_PerformInequities Yes [Internal Note: Yes= 0.5 points] No
169. Chart review of <i>Critical Pediatric Events</i> (e.g. procedure performed; medication administered; resuscitation; trauma; death)? cv_PerformCritical Yes [Internal Note: Yes= 0.8 points] No
170. Other? PerformOther
$\int \stackrel{\square}{\longrightarrow} \text{Skip to 172}$
171. What other type(s) does your agency utilize? PerformOtherText
172. Does your EMS agency <i>Share</i> information gathered from <i>Chart Reviews</i> with the <i>Involved</i> <i>Providers</i> ? cv_PerformShare Yes [Internal Note: Yes= 0.6 points] No
Providers? cv_PerformShare Yes [Internal Note: Yes= 0.6 points] No 173. Does your EMS agency integrate Key Findings gathered from Chart Reviews into EMS agency Training or Education? cv_PerformIntegrate Yes [Internal Note: Yes= 0.6 points]
Providers? cv_PerformShare Yes [Internal Note: Yes= 0.6 points] No 173. Does your EMS agency integrate <i>Key Findings</i> gathered from <i>Chart Reviews</i> into EMS agency <i>Training or Education</i> ? cv_PerformIntegrate
Providers? cv_PerformShare Yes [Internal Note: Yes= 0.6 points] No 173. Does your EMS agency integrate Key Findings gathered from Chart Reviews into EMS agency Training or Education? cv_PerformIntegrate Yes [Internal Note: Yes= 0.6 points] No 174. Does your EMS agency Track patient-level data that Includes prehospital care of Children? cv_PerformTrackData Yes [Internal Note: Yes= 0.6 points]
Providers? cv_PerformShare ☐ Yes [Internal Note: Yes= 0.6 points] ☐ No 173. Does your EMS agency integrate Key Findings gathered from Chart Reviews into EMS agency Training or Education? cv_PerformIntegrate ☐ Yes [Internal Note: Yes= 0.6 points] ☐ No 174. Does your EMS agency Track patient-level data that Includes prehospital care of Children? cv_PerformTrackData ☐ Yes [Internal Note: Yes= 0.6 points] ☐ No 174. Does your EMS agency Track patient-level data that Includes prehospital care of Children? cv_PerformTrackData ☐ Yes [Internal Note: Yes= 0.6 points] ☐ No Which of the following types of patient-level data are Tracked?

176. Predefined quality or performance metrics specific to a clinical condition (e.g. percentage of anaphylaxis patients who received IM Epinephrine, including treatments administered by ALS and BLS providers)? cv_TrackClinical

```
Yes [Internal Note: Yes= 0.6 points]
```

- 177. Components of patient assessments performed or completed (e.g. pain assessed for trauma)? cv_TrackAssessments
 - Yes [Internal Note: Yes= 0.6 points]

178. Patient outcomes (e.g. mortality)? cv_TrackOutcomes

Yes [Internal Note: Yes= 0.6 points]

179. Patient refusals? cv_TrackRefusals

Yes [Internal Note: Yes= 0.4 points]No

180. Other? TrackOther

 $I \stackrel{\square Yes}{\frown} No \longrightarrow Skip to 182$

181. What "other" types of patient-level data are tracked? TrackOtherText

- 182. Which of the following best describes your EMS agency's approach to improving the quality of pediatric emergency care? cv_ImproveApproach (Choose one)
 - Our agency *Has Defined* pediatric quality metrics, and *Collects* data on our own patient care **Improve_Metrics** [Internal Note: = 1.5 points]
 - Our agency has *Not Defined* pediatric quality metrics, but *Collects* data on our own patient care **Improve_Data** [Internal Note: = 0.7 points]
 - Our agency *Has Defined* pediatric quality metrics, and *Plans To Collect* data from our own patient care **Improve_Plan**
 - Our agency has *Not Defined* pediatric quality metrics, and does *Not Collect* data from our own patient care **Improve_None**

183. Does your EMS agency submit *NEMSIS Compliant* data to the state EMS office? **cv_NEMSISData**

□ No → Skip to 185

184. Does your EMS agency have a process of extracting data in a fashion that is compliant with

NEMSIS v3.x Data Standards? cv_	_NEMSISExtract
Yes [Internal Note: Yes= 0.4 point	s]
No	

Does your EMS agency have a method (manual or automated) to obtain hospital data for at least 50% of your pediatric transports that includes?

(Check Yes or No for each of the following questions)

185. Secondary transport destination? DataDestination

Yes
No

186. ED and hospital *Disposition*? cv_DataDisposition

Yes	[Internal	Note:	Yes=	0.6 p	oints]
No	-			_	

187. ED and hospital *Diagnoses*? cv_DataDiagnoses

Yes	[Internal Note: Yes= 0.5 points]
No	

188. Survival to hospital Admission? cv_DataAdmission

Yes [Internal Note: Yes= 0.5 points]

189. Survival to hospital *Discharge*? cv_DataDischarge

Yes [Internal Note: Yes= 0.5 points]

190. For your pediatric patients, on which of the following demographic characteristics do you report data? **ReportData**

(Check all that apply)

Age Distribution **Report_Age**

Race (e.g., Asian, Black) **Report_Race**

Ethnicity (e.g., Hispanic, non-Hispanic) **Report_Ethnicity**

Sex (e.g., as assigned at birth) **Report_Sex**

- Patient Gender **Report_Gender**
- Payor Source (e.g., private insurances, self-pay, Medicare/Medicaid) **Report_Payor**
- Response Levels (e.g., BLS, ALS, critical care) **Report_Response**
- Priority Levels **Report_Priority**

DEMOGRAPHICS

The following questions relate to your agency's resources and location.

191. Please estimate how many 911 calls (both *adult and pediatric*) your EMS agency responded to in the last year? total911Calls

(Numeric data only, e.g., 5000, not "five thousand")

192. Please estimate how many 911 calls your EMS agency responded to for *Pediatric Patients* (as defined by your agency) in the last year? **Ped911Calls**

(Numeric data only, e.g., 5000, not "five thousand")

193. Which one of the categories below approximates the number of 911 calls your EMS agency responded to for *Pediatric Patients* (as defined by your agency) in the last year? cv_911PedsVolume

(Choose one)

Low: Twelve (12) or fewer pediatric calls in the last year (average of 1 or fewer pediatric calls per month) **low**

Medium: Between 13-100 pediatric calls in the last year (average of 2 - 8 pediatric calls per month) **medium**

Medium to High: Between 101-600 pediatric calls in the last year (average of 9 - 50 pediatric calls per month) **mediumHigh**

High: More than 600 pediatric calls in the last year (average of more than 50 pediatric calls per month) **high**

Note: the response options of the following questions (196-198) will be customized in the online assessment to better reflect individual state/territory terminology.

194. What is the *Highest* level of *Licensure* that pertains to the scope of care that *EMS Providers* in your agency provide to patients? LicensureLevel

(Choose one) While we realize that your agency may have other levels of certification, we ask that you only provide a response for the choices listed below.

Emergency Medical Responder (EMR) Licensure_EMR

Emergency Medical Technician (EMT) Licensure_EMT

Advanced EMT (AEMT) Licensure_AEMT

Paramedic Licensure_Paramedic

195. Please estimate how many *EMS Providers* currently work at your agency for each of the following level(s) of licensure?

(If no providers for a licensure level, enter 0.) Your agency may employ other types of providers than those listed here. For purposes of this assessment, we only need you to provide responses for these four types.

Provider Level	Number of Providers Full & part-time, volunteer, & paid
Emergency Medical Responder (EMR)	EMSproviders_EMR_Num
Emergency Medical Technician (EMT)	EMSproviders_EMT_Num
Advanced EMT (AEMT)	EMSproviders_AEMT_Num
Paramedic	EMS Providers_Paramedic_Num

196. What is the *Highest* level of *Certification* of your *EMS agency*? highestEMSLevel

(Choose one) While we realize that your agency may have other levels of certification, we ask that you only provide a response for the choices listed below.

Basic Life Support (BLS) **BLS**

Intermediate Life Support (ILS) ILS

Advanced Life Support (ALS) ALS

These next few questions will help us understand the infrastructure of your agency.

197. Which of the following best describes the *Primary* source for how your EMS agency is funded? **PrimaryFund**

(Choose one)

Municipal county Fund_MunicipalCounty

Municipal city **Fund_MunicipalCity**

Franchise for profit **Fund_ProfitFranchise**

Franchise non-profit **Fund_NonFranchise**

Donations and grants **Fund_Donations**

Federally funded **Fund_Federal**

Tribally funded **Fund_Tribal**

198. How is your agency staffed? AgencyStaff

(Check all that apply)

Paid employees **Staff_Paid**

Volunteers **Staff_Volunteer**

199. Which of the following describes your response model/service? ResponseModel

(Check all that apply)

Fire-based **Response_Fire**

Hospital-based **Response_Hospital**

Private **Response_Private**

Third service **Response_Third**

Public utility **Response_Public**

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200. If you have any questions or comments regarding pediatric readiness, please note them here.

Respondent Information Individual completing the assessment

These last few questions are in regards to your contact information, please note that your personal contact information will be kept **SECURE**. This personal contact information will **NOT** be sold. Personal contact information will be used solely for HRSA EMSC program initiatives to improve the delivery and quality of pediatric emergency care ONLY.

201. First and last name of the person completing this assessment: cv_name ______

202. Job title of the person completing this assessment: cv_jobtitle _____

203. Phone number for your EMS agency: cv_phone _____

204. Email address of the person completing this assessment: cv_emailAddress _____

These are the final questions.

You had indicated that your EMS agency has an individual or individuals who coordinate pediatric emergency care for your agency.

While you are **Not Required** to provide their name and email, we would appreciate that information so your state EMSC Program Manager can reach out to them with resources.

Please note that this contact information will be kept **SECURE**. This personal contact information will **NOT** be sold. Personal contact information will be used solely for HRSA EMSC program initiatives to improve the delivery and quality of pediatric emergency care ONLY.

205. First and last name of the *Primary* person providing pediatric emergency care coordination for your agency: cv_PECCname _____

206. Job title: cv_PECCtitle _____

207. Email: cv_PECCemail _____

You are now finished with the survey. You can officially submit your survey by going to EMSpedsready.org.