Altered standards of care for emergency medical services (EMS) personnel during a public health emergency

Michael J. Reilly, MPH NREMT-P¹ David S. Markenson, MD EMT-P²



¹Assistant Director, Center for Disaster Medicine Assistant Professor of Public Health Practice New York Medical College, School of Public Health

²Director, Center for Disaster Medicine Associate Professor of Public Health Practice New York Medical College, School of Public Health



Introduction

- The emergency medical services (EMS) system is one of the key components in disaster, terrorism and public health emergency preparedness and response.
- The EMS system has developed over the past 30 years into an effective means of delivering prehospital medical care.
- Public health agencies across the United States typically provide regulatory oversight of emergency medical services.
- Recent studies have demonstrated the value of a EMS/public health partnership in increasing a community's preparedness to disasters and other public health emergencies.

Methods

- A nationally representative sample of the 203,465 basic and paramedic emergency medical service providers in the United States was surveyed to assess training in core areas of public health emergency preparedness and their ability and willingness to perform public health duties in addition to their traditional job functions.
- National scope of practice models and peer-reviewed literature were reviewed to identify current skills applicable to a public health emergency as well as potential areas for expanded scopes of practice with additional training.

Methods

L ongitudinal
E mergency Medical Technician
A ttributes &
D emographics
S tudy



• The LEADS project is a longitudinal study project hosted by the National Registry of Emergency Medical Technicians (NREMT). It is designed to describe the attributes and demographic information that accurately reflect the individuals providing emergency medical services throughout the United States.

• The project began in August 1998 and is led by a team of researchers made up of State EMS Directors, State EMS Training Coordinators, EMS System Managers, Emergency Physicians, EMS Educators, survey researchers, and staff of the NREMT. Longitudinal data and cross sectional data are collected annually. Data collected will allow for description of the EMT population, their work activities, working conditions, and job satisfaction. Most importantly, these data permit longitudinal analyses in addition to cross sectional data analyses gained from snapshot surveys.

Results

- 62.5% of EMS providers stated they could accomplish disease reporting while on-duty in addition to their current job duties.
- 42.6% and 47.6% stated they would be able to accomplish symptom cluster recognition and reporting, and public health education respectively.
- Furthermore, there is specific literature from both EMS and public health publications which support joint prehospital and public health preparedness initiatives.

Public Health Activities Emergency Medical Services (EMS) Providers State they Can Perform

While on Duty (From U.S. Survey of 203,465 EMS Workers by Authors)



Current and Proposed Expanded Scope of Practice for Emergency Medical Services (EMS) Providers – EMT-Basic

- Current Applicable Skills
 - » Triage
 - » Assessment and Medical Screening
 - » Evacuation/Patient Transportation
 - » Emergency Communication
- Expanded Scope of Practice (with Training)
 - » Vaccination
 - » Case/Contact Tracing
 - » Patient Education

Current and Proposed Expanded Scope of Practice for Emergency Medical Services (EMS) Providers – EMT-Intermediate

Current Applicable Skills

- » Triage
- » Assessment and Medical Screening
- » Evacuation/Patient Transportation
- » Emergency Communication
- » Patient Education
- Expanded Scope of Practice (with Training)
 - » Vaccination
 - » Case/Contact Tracing
 - » Chart Abstraction/Surveillance

Current and Proposed Expanded Scope of Practice for Emergency Medical Services (EMS) Providers – EMT-Paramedic

- Current Applicable Skills
 - » Triage
 - » Advanced Assessment and
 - » Medical Screening
 - » Evacuation/Patient Transportation
 - » Emergency Communication
 - » Medication Dispensing
 - » Vaccination
 - » Patient Education

• Expanded Scope of Practice (with Training)

- » Case/Contact Tracing
- » Chart Abstraction/Surveillance
- » Treatment of Patients with Adverse Reactions to Vaccine or Medication

Conclusion

- As a natural extension of their current scopes of practice, EMS providers can provide a critical manpower asset to the public health workforce.
- Assuming that emergency response functions are not immediately necessary, EMS providers can provide services and critical functions including vaccine administration, case and contact tracing, emergency communications surveillance, and increased surge capacity through augmentation of the traditional health care workforce.

Questions, Comments...



Prof. Michael J. Reilly New York Medical College, School of Public Health Center for Disaster Medicine Valhalla, New York USA michael_reilly@nymc.edu