EMS Transport Safety Summit 2012 Safety Systems, Strategies and Solutions

NTSB/DHS/NEMSAC/NIST/NIOSH Eileen Frazer

February 29th, 2012



Federal Agencies

The NTSB investigates aviation, marine, train and highway accidents but not specific to ambulances.

<u>www.ntsb.gov</u>

DHS – FEMA became part of the Department of Homeland Security 3/1/03

<u>www.fema.gov</u>



Federal Emergency Management Agency

"Mission is to support our citizens and first responders to ensure that as a nation we work together to build, sustain and improve our capability to prepare for, protect against, respond to and recover from and mitigate all hazards."

Working Groups include: Search and Rescue, Animal Rescue, EMS and Aviation Management Working Group.

- Developing Resource Guides



DHS/NIST/NIOSH

NIST Time | NIST Home | About NIST | Contact Us | A-Z Site Index |

National Institute of Standards and Technology | NIST Organization | News | Programs & Projects | User Facilities | Work with NIST |

NIST Home > OLES > NIST and Partners Seek Input on Safer Ambulance Designs

NIST and Partners Seek Input on Safer Ambulance Designs

From NIST Tech Beat: November 22, 2011

Contact: Michael E. Newman

301-975-3025

C SHARE LE

The National Institute of Standards and Technology (NIST) is seeking input from paramedics, emergency medical technicians (EMTs) and other interested parties on the development of new design guidelines for ambulances to reduce the crash risk to emergency workers.

Emergency medical service (EMS) workers riding in the back of ambulances are at high risk of suffering injuries during a crash or a maneuver to avoid a crash if they're not using restraints. However, restraints make it difficult to access and treat patients while in route to a hospital. To meet the challenge of finding a balance between these two demands, NIST, the Department of Homeland Security's Human Factors and Behavioral Sciences Division (DHS HFD) and the National Institute of Occupational Safety and Health (NIOSH) are developing design guidelines for ambulance patient compartments that maximize safety without compromising effectiveness.

These guidelines will be used to update current, and enhance emerging, ambulance design criteria, such as National Fire Protection Association (NFPA) 1917, the "Standard for Automotive Ambulances."

To gather input for the guidelines from a broad cross-section of the key stakeholders, EMTs and paramedics, the three agencies are conducting an anonymous web survey from Nov. 28, 2011, to Dec. 28, 2011. Insight and opinions from this survey will supplement data previously gathered from focus groups, interviews with individual EMS workers, visits to equipment manufacturers and EMS stations, and "ride-along" experiences aboard on-duty ambulances.

The web survey can be found at either the NIST Office of Law Enforcement Standards site, www.nist.gov/oles, or the DHS Responder Knowledge Database site, www.rkb.us.

For more information, or to get more involved in the effort to improve safety in ambulance patient compartments, contact Darren Wilson, DHS, at (202) 254-6657 or darren.wilson@dhs.gov; Larry Avery, BMT Designers & Planners, at (919) 713-0383 or lavery@dandp.com; or Jennifer Marshall, NIST, at (301) 975-3396 or jennifer.marshall@nist.gov.



Recent Survey – results pending

https://svy.cfigroup.com/cgi-bin/qwebcorporate.dll?idx=77XW2B



The U.S. Department of Homeland Security Science and Technology Directorate Human Factors and Behavioral Sciences Division is teaming with the National Institute of Standards and Technology (NIST), the National Institute for Occupational Safety and Health (NIOSH) and BMT Designers and Planners to aid in the development of standards for the design of patient compartments in ambulances. In conjunction with that goal, this survey is also measuring satisfaction with current design standards.

This survey is being administered by CFI Group. All information you provide will be combined with information from other respondents for research and reporting purposes. Your individual responses will not be released. This survey will take about 15 minutes of your time.

If you have any questions about this survey, please contact jennifer.marshall@nist.gov.

This survey is authorized by the U.S. Office of Management and Budget Control No. 1090-0007.





NEMSAC In 2007, the National EMS Advisory Council was formalized to serve as an ongoing forum to provide to NHTSA and the DOT advice and recommendations from non govt. organizations and people on a range of issues -One of the designated NEMSAC **Committees is Safety** www.EMS.gov

NEMSAC follows a very specific process —the committee drafts "Advisories" that are then reviewed by the full NEMSAC in public session until final approval - According to Daniel Patterson, Chair of NEMSAC Safety Committee - recent issues with NEMSAC include:

- 1) Intersection of Leadership and Safety Culture;
- Emergency Vehicle Operator Education, Training, and Safety;
- 3) Fatigue Management; and
- 4) Role of Crew Resource Management in EMS

For the remainder of our tenure on this committee, we will be addressing numbers 3 and 4 listed above. Our goal will be to produce a draft or final advisory for each of the two focus areas.

The public may provide feedback during designated public comment periods when NEMSAC meets in Washington DC, by providing comments by e-mail to nemsac@dot.gov





Published "Guidelines for Field Triage of Injured Patients" in 2009. The goal of this process is to ensure that injured patients are taken to the most appropriate facility in a timely manner.

The expert panel reconvened in 2011 to evaluate new evidence and examine the criteria for field triage in light of new findings.

The 2011 Guidelines include:

Step 1 Physiologic Criteria

Step 2 Anatomic Criteria

Step 3 Mechanism of Injury

Step 4 Special Considerations

www.cdc.gov



Summary

There are various agencies within the federal government working on EMS issues that provide EMS providers with the opportunity to comment, participate and communicate.

It is important that these agencies work together so that we do not waste valuable time and resources in addressing the future of EMS.

