

# EMSC/CHILD READY MT CONNECTION NEWSLETTER

2016: VOLUME 4, ISSUE 4



A word from the MT EMSC Program Manager:

## Greetings!

The Emergency Medical Services for Children (EMSC) Program aims to ensure that emergency medical care for the ill and injured child or adolescent is well integrated into an emergency medical service system.

We work to ensure that the system is backed by optimal resources and that the entire spectrum of emergency services (*prevention, emergency response, prehospital care, hospital care, interfacility transport, and rehabilitation*) is provided to children and adolescents, no matter where they live, attend school or travel.

**THE RIGHT CARE AT THE RIGHT PLACE AT THE RIGHT TIME WITH THE RIGHT RESOURCES!**



**Child Ready Montana-** State Partnership of Regionalized Care (SPROC)

The intent of the program is to develop an accountable culturally component and assessable emergent care system for pediatric patients across Montana.

**Exciting news and events are going on this month!**

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**CHILD ABUSE AWARENESS & TRAINING— SEE PAGE 3, 4 & 6**

**WHAT ABOUT THOSE PINWHEELS?- SEE PAGE 5**

**PRESHOSPITAL MENTAL HEALTH WELLBEING- SEE PAGE 6**

**SAFE TRANSPORT RESOURCES- SEE PAGE 7**

**PEDIATRIC EMERGENCIES AND TRAUMA COURSE-SEE PAGE 8**

**TRIVIA, PREPARE KIDS FOR EMERGENCIES RESOURCES AND FAMILY CENTERED CARE TRAINING RESOURCES - PAGE 9**



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## APRIL IS AUTISM AWARENESS MONTH

Autism is a lifelong neurological disability that affects a person's ability to communicate, understand language, play, and socially interact with others. The first signs of autism usually appear as developmental delays before age three. Every person with autism is different. However, there are some common characteristics of individuals with autism that may occur.



**Put on the Puzzle!** The **AUTISM AWARENESS PUZZLE RIBBON** is the most recognized symbol of the autism community in the world. Autism prevalence is now **one in every 68 children in America**.

Learn more about the Autism Awareness at <http://www.autism-society.org/about-the-autism-society/history/autism-awareness-ribbon>. **Autism is the fastest-growing developmental disability.** (CDC, 2008)

**Learning how to effectively interact with an individual with autism is the one training we can't afford to overlook. Knowing what to do and how to approach individuals with autism is the first step in effectively handling any emergency situation. There is training available.**

### Course Objectives:

- Present the students a description and understanding of autism.
- Teach them how to recognize autistic traits and characteristics.
- Give the students tools that will help them communicate and interact with the autistic individual in an emergency situation.
- Coach the students to reduce or eliminate dangerous behaviors that could lead to either the first responder or the autistic individual be harmed.
- Educate the students how to best restrain the individual if they are unable to control the patient.

**Chapter 1 - Knowledge is the key to understanding Autism-** Autism 101 Parts 1-3; How to Identify Parts 1-3; and Imagine Autism Challenges - Chapter Test (12 questions, requires 80%+ to pass and move forward )

### Chapter 2 - Search & Rescue: Effective Communication

- Questions Searching Communication Restraining
  - Entering & Exiting Rescue from Heights Handling the Situation Correctly Parts 1-2
- Chapter Test (10 questions, requires 80%+ to pass and move forward)

### Chapter 3 - On Scene EMTs Responding

- Autism, 911 & the Dispatcher On Scene Parts 1-3 Treating an Active Seizure
  - Do's & Don'ts Meltdown of the Individual At the Emergency Room Parts 1-2
- Chapter Test (14 questions, requires 80%+ to pass and move forward )

### Chapter 4 - Wandering Gone Now What?

- Keeping Track, Easier Said... Where Did They Go? What are the Risks?
  - You – The 1st Responder
- Chapter Test (8 questions, requires 80%+ to pass and move forward)

**Chapter 5 - Conclusion-This is an overall recap of the training summarizing 22 key points.**

SEE: <https://prevent-educate.org/course-objectives-and-curriculum.html>

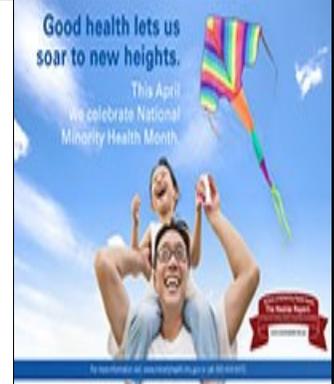
**\* Drowning is a leading cause of death among individuals with autism. Most have a strong attraction to water but may not have skills to swim and may not realize the danger. When looking for someone with autism, checking local water sources should be a top priority.**

## April is National Minority Health Month 2016!

The theme for 2016 is “**Accelerating Health Equity for the Nation.**” We invite all across the nation to join with the HHS Office of Minority Health to raise awareness of the health disparities that continue to affect racial and ethnic minorities and how we are working together to accelerate health equity.

That observance grew into what is today a month-long initiative to advance health equity across the country, on behalf of all racial and ethnic minorities – National Minority Health Month.

The HHS Office of Minority Health leads the observance of National Minority Health month each year, and joins with federal, state, tribal, local and territorial partners across the country in calling for a renewed commitment to eliminate health disparities and achieve health equity. See more information at: <http://minorityhealth.hhs.gov/omh/content.aspx?lvl=2&lvlid=12&ID=10234>



## APRIL IS CHILD ABUSE PREVENTION MONTH ... BUT YOU CAN ACT TO SUPPORT FAMILIES AND PROTECT CHILDREN ALL YEAR ROUND!

The future prosperity of the next generation. When a community invests wisely in children and families, the next generation will pay that back through a lifetime of productivity and responsible citizenship. Yet, when not all children have equal opportunity for healthy growth and development — due to experiences of child abuse and neglect — we put our future at risk.

While April is Child Abuse Prevention Month, you can make a big difference year-round through small acts that help protect children, strengthen families, promote traits that help protect families — and, ultimately, prevent the abuse and neglect of children.



## Child Abuse, Neglect, and Maltreatment

COURSE PRICE: **\$15.00**

CONTACT HOURS: **3**

### ACCREDITATION / APPROVAL

Wild Iris Medical Education is an approved provider for paramedic and EMT continuing education in California by the Coastal Valleys EMS Agency: CE Provider #49-0057.

**This course is appropriate for EMTs, paramedics, and first responders.**

Course Availability: Expires May 31, 2018. You must score 70% or better on the test and complete the course evaluation to earn a certificate of completion for this CE activity. Wild Iris Medical Education, Inc., provides educational activities that are free from bias. The information provided in this course is to be used for educational purposes only. It is not intended as a substitute for professional healthcare. [Medical Disclaimer](#) [Legal Disclaimer](#) [Disclosures](#)



## CHILD ABUSE, NEGLECT, AND MALTREATMENT

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**COURSE OBJECTIVE:** The purpose of this course is to enable healthcare professionals and mandated reporters to identify and report child maltreatment, including child abuse and child neglect.

**LEARNING OBJECTIVES-** Upon completion of this course, you will be able to:

- Define child maltreatment, child abuse, and child neglect according to the Centers for Disease Control and Prevention.
- Explain the risk factors contributing to child maltreatment.
- Recognize physical and behavioral indicators of child maltreatment.
- Differentiate situations in which mandated reporters must report suspected cases of maltreatment.
- List procedures for placing a child into protective custody.
- Discuss the legal protections afforded mandated reporters as well as the consequences for failing to report.

[http://www.ems-ceu.com/courses/505/index\\_ems.html](http://www.ems-ceu.com/courses/505/index_ems.html)

### COURSE ANNOUNCEMENT: CHILD ABUSE: AN EMS PROFESSIONAL'S ROLE AND RESPONSIBILITIES

In this course, the role of EMS professional related to assessing, suspecting, and reporting child abuse is reviewed. The course explains several types of abuse and neglect, and discusses general principles for treatment and assessment. The course concludes with a short discussion of prevention programs. Since the course focuses on general principles, it is important to know and understand specific state or local guidelines applicable to your practice as an EMT or paramedic.

#### Objectives

- Describe EMS professionals role related to possible child abuse
- Explain types of abuse and abuse syndromes
- Discuss assessment and management of the pediatric patient who has been abused
- Examine proactive prevention programs

The CentreLearn Learning Management System features hundreds of accredited online training videos for EMTs, Paramedics, including this course on an EMS professional's role and responsibilities when responding to known or suspected child abuse.

*Individuals can access this CECBEMS accredited course through [RapidCE.com](http://www.rapidce.com). - See more at: <http://www.centrelearnsolutions.com/blog/2013/04/new-course-announcement-child-abuse-an-ems-professionals-role-and-responsibilities/#sthash.ZwFNnYHD.dpuf>*

### **ACE STUDY**

Many children suffer multiple types of abuse, which increases their risk of serious health consequences as adults. The Adverse Childhood Experience (ACE) study, published in 2009, investigated the association between childhood maltreatment and later-life health and well-being.

The findings suggest that certain negative experiences in childhood are major risk factors for illness, poor quality of life, and death later in life. The more adverse childhood experiences that were experienced by an individual, the greater the risk of developing alcoholism, chronic obstructive pulmonary disease (COPD), depression, illicit drug use, intimate partner violence, sexually transmitted infections, criminality, and smoking.

Source: CDC, 2014.

## MANDATORY REPORTING LAW - [MCA 41-3-201](#).

**Reports.** (1) When the professionals and officials listed in subsection (2) know or have reasonable cause to **suspect**, as a result of information they receive in their professional or official capacity, that a child is abused or neglected by anyone regardless of whether the person suspected of causing the abuse or neglect is a parent or other person responsible for the child's welfare, they shall report the matter promptly to the department of public health and human services.

**Who Must Report-MCA 41-3-201. Reports.** Professionals and officials required to report include (but not limited to:)

- ✓ **a physician, resident, intern, or member of a hospital's staff engaged in the admission, examination, care, or treatment of persons;**
- ✓ **a nurse, osteopath, chiropractor, podiatrist, medical examiner, coroner, dentist, optometrist, or any other health or mental health professional;**
- ✓ school teachers, other school officials, and employees who work during regular school hours;
- ✓ a social worker, operator or employee of any registered or licensed daycare or substitute care facility, a child-care facility;
- ✓ a peace officer or other law enforcement official; and including
- ✓ a member of the clergy, as defined in [15-6-201\(2\)\(b\)](#);

To report a possible case of  
child abuse or neglect,  
call toll-free  
1 (866) 820-5437.



- 1 Read Course
- 2 Pass Test
- 3 Complete Evaluation
- 4 Register & Pay
- 5 Get Certificate

## Child Abuse, Neglect, and Maltreatment

COURSE PRICE: **\$24.00**

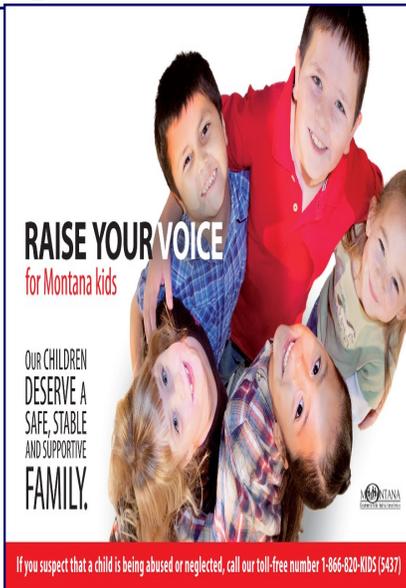
CONTACT HOURS: **3**

### ACCREDITATION / APPROVAL

Wild Iris Medical Education, Inc. is accredited as a provider of continuing nursing education by the American Nurses Credentialing Center's Commission on Accreditation.

Wild Iris Medical Education, Inc. (CBRN Provider #12300) is approved as a provider of continuing education for RNs and LVNs by the California Board of Registered Nursing.

Course Availability: Expires May 31, 2018. You must score 70% or better on the test and complete the course evaluation to earn a certificate of completion for this CE activity. Wild Iris Medical Education, Inc., provides educational activities that are free from bias. The information provided in this course is to be used for educational purposes only. It is not intended as a substitute for professional healthcare. [Medical Disclaimer](#) [Legal Disclaimer](#) [Disclosures](#)



In 2015, the Montana DPHHS Child and Family Services (CFSD) completed **8,908** investigations related to child abuse involving 12,987 children. The DPHHS child abuse hotline received **35,812** calls in 2015, of which **2,422** were substantiated-an **increase** of more than **10,000** from 2010 and an increase of over 200 substantiated cases.

DPHHS CFSD reported 3,019 Montana children are currently in foster care, a **100 percent increase from 2008** and the highest amount in the last 16 years.

**There are 942 children in care because of meth-related reasons. In 2010 there were 230 meth-related placements.** Reasons relating to prescription drug abuse accounts for 247 children currently in foster care and **overall drug placement is 1,650 children.** That is just under double the 851 cases that the DPHHS handled in 2010.

## AMBULANCE: HOW TO MANAGE YOUR MENTAL WELLBEING

This 19-page document explains the factors that can affect the mental health of ambulance workers and gives practical suggestions about how to build resilience. It provides a mental wellbeing checklist, describes what support is available, and provides a list of contacts.

Did you know? 91% of ambulance personnel have experienced stress and poor mental health at work.

Emergency services personnel are more likely to experience a mental health problem than the general workforce, but you are less likely to take time off work as a result.

You work hard to prevent mental health problems affecting your performance at work, but this can come at a large personal cost, impacting relationships and physical health.

[http://www.mind.org.uk/information-support/ambulance-mental-wellbeing-ambulance/?ctald=%2Fnews-campaigns%2Fcampaigns%2Fblue-light%2Fblue-light-information-booklets%2Fmental-wellbeing%2Fslices%2Fmanaging-mental-wellbeing-ambulance%2F%23.VtWjQP\\_2Yif#.Vt2crWdi45s](http://www.mind.org.uk/information-support/ambulance-mental-wellbeing-ambulance/?ctald=%2Fnews-campaigns%2Fcampaigns%2Fblue-light%2Fblue-light-information-booklets%2Fmental-wellbeing%2Fslices%2Fmanaging-mental-wellbeing-ambulance%2F%23.VtWjQP_2Yif#.Vt2crWdi45s)

## **NASEMSO RESOURCES FOR SAFE TRANSPORT OF CHILDREN IN AMBULANCES**

The Safe Transport of Children (STC) Ad Hoc Committee was created for the purpose of examining current resources and pursuing research to develop specific and practical recommendations and promising practices for safely transporting children in ground ambulances. The goals of the committee are to:

- To recommend the criteria or specifications for proper restraint of children in ambulances. Such criteria will be evidence-based and will consider safety of both patients and providers.
- To have the recommended criteria adopted by one or more accredited standard setting organizations.
- To develop a strategy and resources for educating EMS providers on safely transporting children in ground ambulances based on the recommended criteria or standards.

The committee has initiated a collection of resources in a new area of NASEMSO's web site. Federal and state materials, including guidebooks, posters, guidelines, and protocols are available. Eric Hicken (NJ) serves as the Chairman for this new effort. For more information... <https://www.nasemso.org/Committees/STC/Resources.asp>



### **CHILD READY MONTANA**

**Child Ready Montana** is a State Partnership Regionalization of Care Grant (SPROC) funded by the Federal Health Resource and Services Administration (HRSA). Montana is one of 6 states to be awarded this grant with the MT Emergency Medical Services for Children (EMSC) Program.

### **Save the Date! Providing Culturally Sensitive Care to Children and Families**

Starting at 4:00 pm (Eastern) on Thursday, April 14, the Emergency Medical Services for Children (EMSC) National Resource Center (NRC) will host the webinar [Providing Culturally Sensitive Care to Children and Families](#). This webinar will focus on the importance of cultural sensitivity in the provision of care to American Indian children and families, the cultural difference in providing care to Native American reservation and urban children and families, as well as barriers to implementing culturally sensitive strategies.

The target audiences for this webinar include medical directors, emergency department physicians and nurses, community health planners, hospital administrators, clinical managers, state EMSC program managers, family members, as well as others interested in improving pediatric emergency care.

The EMSC NRC has applied for continuing education for physician and nurse participants. [Pre-registration](#) is required. Once registered, participants will automatically receive an email message with information about attending the live event.

**This webinar features Child Ready MT's Cultural Liaison Kassie Runsabove and Theda NewBreast as facilitators.**

Look for more information regarding registration soon.

Please contact Kassie Runsabove for Cultural Sensitivity Presentations:

Kassie Runsabove

406-238-6216

[Kassie.runsabove@sclhs.net](mailto:Kassie.runsabove@sclhs.net)

**PEDIATRIC EMERGENCIES:** This is an exciting virtual online course for all healthcare providers that presents pediatric emergencies. It is a companion course to *A Multi-Systems Approach to Pediatric Trauma*. but differs in that education focuses on emergency care for the ill child.

**The course is also scenario based with streaming video, rich multimedia and interactive instruction.** The module format utilizes a user friendly, visually interesting interface to navigate through the pages.

**PEDIATRIC TRAUMA COURSE—A MULTI—SYSTEMS APPROACH TO PEDIATRIC TRAUMA**-This is an exciting virtual online course for all healthcare providers that presents *A Multi-Systems Approach to Pediatric Trauma*. **This is true "edutainment" with streaming video, rich multimedia and interactive instruction.**

The filmed video segments begin a module with the medical interviewer and interviewee introducing themselves and the module. A pediatric trauma scenario is filmed with talented volunteers who act out the scenes. The filmed interview portion comments on and discusses the scenario to provide the teaching and instruction. Flash animated **Video Recaps** and interactive **Apply Your Knowledge** questions complete the repeating format. Each module presents a different facet of the **Multi-Systems Approach** and how they interface and interact together to medically treat the pediatric trauma patient.

These multi-systems are described below and are covered in the course.

- Trauma to different body systems in children ( head neck & spine; abdomen & chest; musculoskeletal...)
- Care and treatment by various healthcare providers (i.e. physicians, nurses, paramedics, EMT's)
- Patient presentation to various healthcare facilities, rural & urban, for care (i.e. clinics, local emergency room, major trauma center)
- Various transport modes (i.e. fire EMS, ambulance, helicopter)
- Preparation for pediatric trauma in various settings (i.e. EMS, ER, clinic)

**OTHER MODULES INCLUDE:**

**MODULE 1: PEDIATRAIC SEIZURES CE 1.0**

**MODULE 2: DIABETES IN CHILDREN CE 1.0**

**MODULE 3: BLUNT CHEST TRAUMA-COMMONTION CORDIS CE 1.0**

**MODULE 4: METHAMPHETAMINE IN CHILDREN CE 1.0**

**MODULE 5: CHILDREN WITH SPECIAL HEALTHCARE NEEDS (CSHCN) PART 1 DOWN SYNDROME CE 1.0**

**MODULE 6: CHILDREN WITH SPECIAL HEALTHCARE NEEDS (CSHCN) PART 2 TECHNOLOGY DEPENDENT CHILDREN CE 1.0**

**MODULE 7: CHILD ABUSE/SHAKEN BABY SYNDROME CE 1.0**

**MODULE 8: POISONING/TOXIC EXPOSURE CE 1.0**

**MODULE 9: ADRENAL CRISIS AND EMS CE 1.0**

**MODULE 10 & 11: SAFE TRANSPORT OF CHILDREN IN EMS VEHICLES PART 1 & 2 EACH CE 1.0**

<http://emed.unm.edu/pem/programs/ems-for-children-emsc/emsc-online-course-directory.html>



## TRIVIA CONTEST:

Answer the trivia and win free give away gifts for EMSC Day May 18th-pediatric first aid slide guides-first 4 to email answers to Robin at [rsuzor@mt.gov](mailto:rsuzor@mt.gov) NOT to the listserve.

1. What is one of April's Health Awareness topics?
2. What is the leading cause of death among individuals with autism?
3. What do pinwheels symbolize?

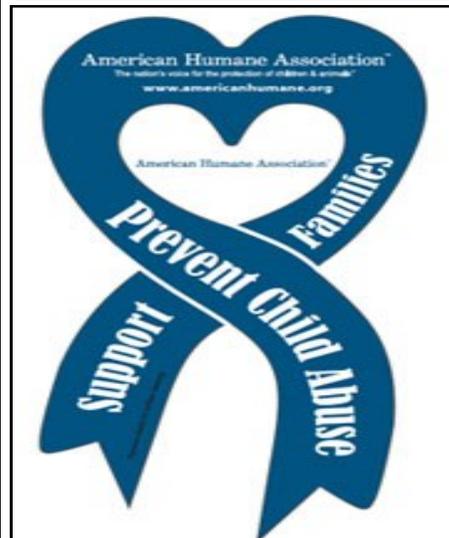
## TRAINING RESOURCES:

UNM EMSC Partnership Online Course -the UNM Division of Pediatric Emergency Medicine- **EMSC ONLINE TRAINING PROGRAM** (NEW Course Module " **available** "[Module 1: EMSC Patient- and Family-Centered Care.](#)"

National CECBEMS Approved Continuing Education Credit Available for \$5.00 per module- National CE is available for all of our EMSC modules. There is a \$5.00 processing fee for national CECBEMS CE certificate per module. Online payment processing followed by CE registration, generating an automated certificate, makes the process simple and instantaneous. The NM EMS Bureau CE certificate is no charge to NM EMS personnel per state contract agreement. CE is also available for our other 2 courses Pediatric Trauma and School Nurse and EMS, a total of 36 modules. Both have national CECBEMS and NM EMS Bureau CE approval available.

**It is easy to take the modules!** Click from the menu **EMSC Online Course Directory** to view course description, a list of modules available and CE units. **No Log In or Registration** required **BEFORE** viewing the module content.

Registration required only for CE. Courses provide current specialized training in pediatric pre-hospital care.



American Red Cross

*Help kids stay safe with a Fun, New and Free game!*  
Prepare kids for real emergencies.

**MONSTER GUARD**

**Download today!**

[redcross.org/monsterguard](http://redcross.org/monsterguard)

