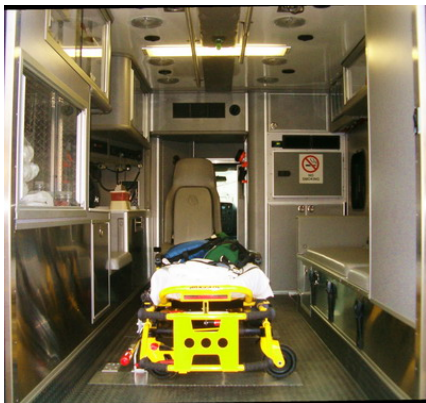




Pennsylvania Emergency Health Services Council

Fiscal Year 2011-2012 Annual Corporate Report

To the PEHSC Board of Directors



The core mission of the Pennsylvania Emergency Health Services Council is to serve as an independent advisory body to the Pennsylvania Department of Health and all other appropriate agencies on matters pertaining to emergency medical services. As an advocate for its diverse member organizations, PEHSC's ultimate purpose is to foster improvements in the quality and delivery of emergency health services throughout the Commonwealth.

“Your Voice In EMS”

Table of Contents

Mission.....	3
Vision.....	3
Core Values.....	3
History.....	3
Funding.....	3
Advisory Function	3
Composition.....	4
Affiliate Council	5
Board of Directors.....	6
PEHSC Executive Committee	7
PEHSC Staff	8
Executive Offices.....	8
Electronic Media.....	8
Fiscal Year 2011-2012 Financial Information.....	9
Committee and Task Force Meetings	10
Recommendations Approved by the Board of Directors.....	11
Additional Projects by PEHSC Committees, Task Forces, and Staff.....	16
EMS for Children Project	18
PEHSC List Serv Distributions.....	20
Partnership Meetings Attended by PEHSC Leadership and Staff	20
Legislative Affairs	21
Corporate Activity	21
Staff Activity.....	22
Group Purchasing.....	22
Pennsylvania’s 34 th Annual EMS Conference.....	22
Pennsylvania’s 1st Annual Pediatric Emergency Care Symposium.....	23
Preparations for Pennsylvania’s 35 th Annual EMS Conference	24
2012 PEHSC Awards.....	25
Acknowledgement.....	25

Mission

The Pennsylvania Emergency Health Services Council (PEHSC) is a 501 (c)(3) non-profit organization. The core mission of the Pennsylvania Emergency Health Services Council is to serve as an independent advisory body to The Department of Health and all other appropriate agencies on matters pertaining to Emergency Medical Services. As an advocate for its diverse member organizations, PEHSC's ultimate purpose is to foster improvements in the quality and delivery of emergency health services throughout the Commonwealth.

Vision

Pennsylvania will be a national leader in developing a unified system of high quality emergency medical services and other health services. In partnership with other organizations statewide that are involved with emergency services, PEHSC's role includes a heightened emphasis on advocacy and legislative liaison, outcomes research, system finances and development, public education, and resources to enhance organizational management.

Core Values

Service • Diversity • Objectivity • Responsiveness • Synergy

History

PEHSC was formed and incorporated in 1974. In 1985, the Council's Board of Directors was recognized as the official EMS advisory body to the Pennsylvania Department of Health through the Emergency Medical Services Act of 1985 and reauthorized in Act 37 of 2009.

Funding

The Council is partially funded through a contract with the Pennsylvania Department of Health. PEHSC does not charge any fees or dues to its member organizations.

Advisory Function

The Council's cornerstone is the grassroots provider network, which meet to discuss statewide issues. These grassroots providers generate recommendations for consideration by the PEHSC's Board. These recommendations ultimately lead to the delivery of formal recommendations to the Pennsylvania Department of Health. The volunteer, grassroots participation of pre-hospital providers throughout the Commonwealth gives EMS a voice in decision making at the state level. The volunteer involvement of providers in the PEHSC process has saved the Commonwealth thousands of dollars in personnel costs, as the PEHSC members often prepare statewide documents and/or educational programs to support recommendations. Interested providers may apply for membership to PEHSC Task Forces by completing an application. Task Forces are established either on a long term or short term basis and are either focused on a specific issue or general topic area.

Composition

The Council is an organization-based, non-profit corporation consisting of 96 organizations representing every facet of EMS in Pennsylvania. Each organization appoints a representative and one alternate to serve on the Council. Our member organizations include representatives of ambulance services, hospitals, health care providers, and firefighters among others.

Albert Einstein Medical Center – EMS Division	Montgomery County Regional EMS Office
Allegheny County EMS Council	Murrysville Medic One
Allegheny General Hospital	National Collegiate EMS Foundation
Ambulance Association of Pennsylvania	National Ski Patrol
American Heart Association – Great Rivers Affiliate	Non-Profit Emergency Services of Beaver County
American Medical Response Mid-Atlantic, Inc.	Northeast PA Volunteer Ambulance Association
American Red Cross	Northwest EMS Inc.
American Trauma Society, PA Division	PA Association of Rehabilitation Facilities
Best Practices of PA	PA Athletic Trainers’ Society, Inc.
Bethlehem Township Volunteer Fire Co.	PA Chapter, American College of Emerg. Physicians
Bradford/Susquehanna EMS Council	PA Committee on Trauma – ACS
Bucks County EHS Council, Inc.	PA Firemen’s Legislative Federation
Bucks County Squad Chief’s Association	PA Medical Society
Burholme EMS	PA Neurosurgical Society
Center for Emergency Medicine of Western PA, Inc.	PA Orthopaedic Society
Cetronia Ambulance Corps	PA Osteopathic Medical Association
Chalfont EMS	PA Psychological Association
Chester County Department of Emergency Services	PA Society of Internal Medicine
Chester County EMS Council	PA Society of Physician Assistants
City of Allentown EMS	PA State Nurses Association
City of Pittsburgh – Bureau of EMS	The Pennsylvania State University
Columbia Quick Response Service	PA Trauma Systems Foundation
County of Schuylkill - Office of Public Safety	Philadelphia Fire Fighters’ Union IAFF Local #22
Danville Ambulance Service	Philadelphia Paramedic Association
Delaware County EHS Council	Philadelphia Regional EMS
Eastern Lebanon County School District	Philadelphia University
Eastern PA EMS Council	Providence Township Ambulance
Emergency Health Services Federation, Inc.	Second Alarmers EMS & Rescue Squad
Emergency Medical Service Institute	Seneca Area Emergency Services
Emergency Medical Services of Northeastern PA	Seven Mountains EMS Council
Emergency Nurses Association	Southern Alleghenies EHS Council
EMMCO East	Southern Chester County EMS
EMMCO West	Southwest Ambulance Alliance
First Aid and Safety Patrol of Lebanon	Special Events EMS, Inc.
Fraternal Association of Professional Paramedics	St. Luke’s University Network
Good Fellowship Ambulance & EMS Training Inst.	STAR Career Academy
Harrisburg Area Community College	State Firemen’s Assoc. of PA
Hershey Medical Center	Suburban EMS
Highmark, Inc.	Susquehanna EHS Council, Inc.
The Hospital & Healthsystem Association of PA	Susquehanna Health System
JeffSTAT	Tioga County EMS Council
J R Henry Consulting, Inc.	UPMC Presbyterian
Lancaster County EMS Council	Valley Ambulance Authority
Lancaster General Hospital	VFIS/Education and Training Services
Levittown-Fairless Hills Rescue Squad	VMSC of Lower Merion and Narberth
Lewistown Hospital	Washington County EMS Council
LTS EMS Council	Westmoreland County EMS Council
Lycoming Co Health Improvement Coalition	York Hospital / WellSpan Health

Affiliate Council

This group is comprised of 141 organizations or individuals who are considered to be members of the Council without voting privileges.

7th Ward Civic Association Ambulance Service	Fellows Club Volunteer Ambulance Service
Acute Care Medical Transports Inc	Forest Hills Area Ambulance Association, Inc
American Health Medical Transport	Franklin and Northmoreland Township Amb Assn
American Life Ambulance	Gilbertsville Area Community Ambulance Service
American Patient Transport Systems, Inc (APTS)	Girardville Ambulance Service
Area Services, Inc	Goshen Fire Company
Auburn Fire Company Ambulance Service	Greater Pittston Ambulance & Rescue Assoc
Blakely Borough Community Ambulance Assoc	Greater Valley EMS, Inc
Brownsville Ambulance Service Inc	Guardian Angel Ambulance Service Inc
Buffalo Township Emergency Medical Services	Halifax Area Ambulance and Rescue Association, Inc
Canonsburg General Hospital EMS	Hamburg Emergency Medical Services, Inc
Central Medical Ambulance Service	Hamlin Fire & Rescue Co
Centre County Ambulance Association	Harmony EMS
Christiana Community Ambulance Assoc Inc	Hart to Heart Ambulance Service Inc
Citizens Volunteer Fire Company EMS Division	Haverford Township Paramedic Department
Clairton Volunteer Fire Department	Health Ride Plus
Clarion Hospital EMS	Health Trans Ambulance
Community Ambulance Association Ambler	Honesdale Volunteer Ambulance Corps, Inc
Community College of Beaver County	d/b/a Honesdale EMS
Community Life Team	Honey Brook Ambulance Association
Conemaugh Township EMS Inc	Hose Co #6 Kittanning Ambulance Service
Corry Ambulance Service, Inc	Irvona Volunteer Ambulance Service
Cresson Area Ambulance Service Inc	Jacobus Lions Ambulance Club
Delaware County Community College	Jefferson Hills Area Ambulance Association
Delaware County Memorial Hospital EMS	Jessup Hose Co No 2 Ambulance Association
Dover Area Ambulance Club	Karthaus Ambulance Service
Duncannon EMS, Inc	Kecksburg VFD Rescue Squad
Duquesne EMS	Kutztown Area Transport Service, Inc
Duryea Ambulance and Rescue Association	Lack Tuscarora EMS
East Brandywine Fire Company QRS	Lackawanna Ambulance
Eastern Area Prehospital Service	Lawn Fire Co. Ambulance
Elizabeth Township Area EMS	Lehigh Carbon Community College
Ebensburg Area Ambulance Association	Lehighon Ambulance Association, Inc
Elysburg Fire Department EMS	Liverpool Emergency Medical Services
EmergyCare, Inc	Lower Kiski Ambulance Service Inc
Em-Star Ambulance Service	Loyalsock VFC #1 EMS Division
Event Medical Staffing Solutions	Manheim Twp. Ambulance Assn.
Factoryville Fire Co. Ambulance	Manheim Veterans Memorial Ambulance Assn.
Fame Emergency Medical Services, Inc	McConnellsburg Fire Department
Fayetteville Volunteer Fire Department, Inc	Meadville Area Ambulance Service LLC
	Med-Van Transport

Memorial Hospital EMS	Rostraver/West Newton Emergency Services
Meshoppen Fire Company	Russell Volunteer Fire Department
Midway Volunteer Fire Company	Scott Township Emergency Medical Services
Milmont Fire Co. EMS	Shippensburg Area EMS
Mount Nittany Medical Center - EMS	Snow Shoe EMS
Muncy Township Volunteer Fire Co Ambulance	Somerset Area Ambulance
Myerstown First Aid Unit	South Central Emergency Medical Services, Inc
Nazareth Ambulance Corps	Southern Berks Regional EMS
New Holland Ambulance Association	Springfield Ambulance Association
Newberry Township Fire & EMS	Springfield Hospital EMS
Northampton Community College	Stat Medical Transport, LLC
Northampton Regional EMS	Superior Ambulance Service, Inc
Northwestern Ambulance Corps	Susquehanna Township EMS, Inc
Norwood Fire Co #1 EMS	Temple Health System Transport Team, Inc
NovaCare Ambulance	Trans-Med Ambulance, Inc
Orwigsburg Ambulance Inc	Trappe Fire Company No. 1 Ambulance
Penn State Hershey Life Lion EMS	Tri-Community South EMS
Pennsylvania College of Technology	United Hook & Ladder Co #33
Pike County Advanced Life Support, Inc	UPMC Passavant
Pleasant Volunteer Fire Department	Valley Community Ambulance
Pointe 2 Pointe Services Inc	Veterans Memorial Ambulance
Pomeroy Volunteer Fire Co. No. 1 Ambulance	Weirton Area Ambulance & Rescue Squad
Portage Area Ambulance Association	Western Alliance Emergency Services, Inc
Pottsville Area Emergency Medical Services, Inc	Western Berks Ambulance Association
PRISM Health Services	Westmoreland County Community College
ProMobile Transportation, Inc	White Mills Fire Department Ambulance
Quick Response Service Medical Transport Regional EMS	White Oak EMS
Regional EMS & Critical Care, Inc	White Rose Ambulance
Rices Landing Volunteer Fire Department	Yoe Fire Co. Ambulance Service Inc
Robinson Emergency Medical Service, Inc	York Technical Institute LLC

Board of Directors

Each year, the Council elects a Board of Directors, comprised of at least 30 of the organizations represented by the Council. The Board of Directors serves as the official advisory body to the Pennsylvania Department of Health on EMS issues. The Board is responsible to elect the Council officers, which include President, Vice President, Secretary and Treasurer. The officers, two At-Large Board Members, and the Immediate Past President also comprise the Council's Executive Committee.

Allegheny County EMS Council
 Ambulance Association of Pennsylvania
 American Heart Association, Great Rivers Affiliate
 American Red Cross
 Bradford/Susquehanna EMS Council
 Center for Emergency Medicine of Western PA

Douglas Garretson
 Donald DeReamus
 Jennifer Ebersole
 Patricia Mullins
 Thomas Brandt
 Dr. Walt Stoy

City of Allentown EMS	David Van Allen
City of Pittsburgh, Bureau of EMS	Mark Bocian
Columbia Quick Response Service, Inc	Frank Splain, Jr.
Eastern PA EMS Council	Dr. Everitt Binns
Emergency Nurses Association	Kay Ella Bleecher
EMMCO East	Don Fortney
EMMCO West	Christopher Heile
Harrisburg Area Community College	Robert Bernini
Hershey Medical Center	Dr. Steven Meador
Hospital & Healthsystem Association of PA, The	Lynn Leighton
JEFFSTAT	Duane Spencer
Murrysville Medic One	Darrick Gerano
Non-Profit Emergency Services of Beaver County	Robert Lordo
Pennsylvania Chapter of ACEP	Dr. Arthur Hayes
Pennsylvania Committee on Trauma – ACS	Dr. Nikhilesh Agarwal
Pennsylvania Society of Physician Assistants	Lane Bower
Philadelphia University	Dr. Jean Bail
Southern Alleghenies EMS Council	Sandra Jablonski
Tioga County EMS Council	John Getty
UPMC Presbyterian	Myron Rickens
Valley Ambulance Authority	J R Henry
Volunteer Medical Service Corps of Lower Merion & Narberth	Suzanne Smith
Westmoreland County EMS Council Inc.	Randy Margarcelli
York Hospital / WellSpan Health	Dr. Daniel Bledsoe

PEHSC Executive Committee

J.R. Henry	President
Jean Bail, Ed.D., MSN, CEN, EMT-P	Vice President
John Getty	Secretary
Ronald Roth, MD, FACEP	Treasurer
Duane Spencer	Member-at-Large
David Van Allen	Member-at-Large
Arthur Hayes, MD, FACEP	Immediate Past President



PEHSC Staff

PEHSC employs a staff of six, which includes a full time Executive Director. The professional staff members have extensive experience as prehospital providers, administrators and educators. The staff is responsible for coordinating and administering the activities of the Council and its committees/task forces, as well as providing technical expertise to Pennsylvania’s EMS community.

Janette Swade	Executive Director
Donald Potter	EMS Systems Specialist
Stephen Mrozowski	EMSC Program Director
Travis Woodyard	EMS Systems Specialist
Patricia Morrison	Office Manager
Jean Gochenauer	Administrative Assistant


Executive Offices

The Council’s executive office is located at 600 Wilson Lane, Suite 101, Mechanicsburg, PA 17055. The Council maintains a toll-free telephone number in Pennsylvania (1-800-243-2EMS) to respond to hundreds of inquiries each year for information.

Electronic Media

The Council maintains several websites as well as other types of electronic communications:

EMS BOOKMARKS

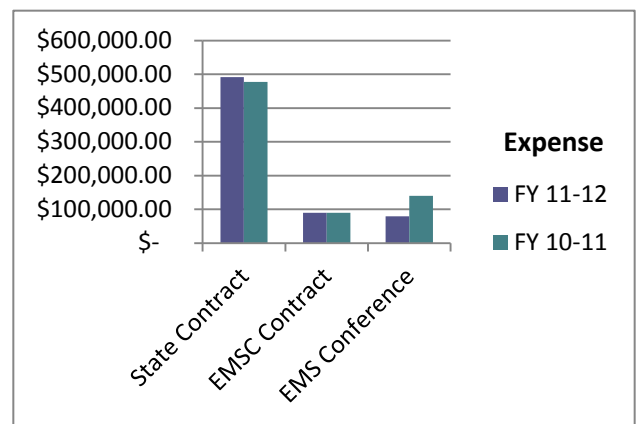
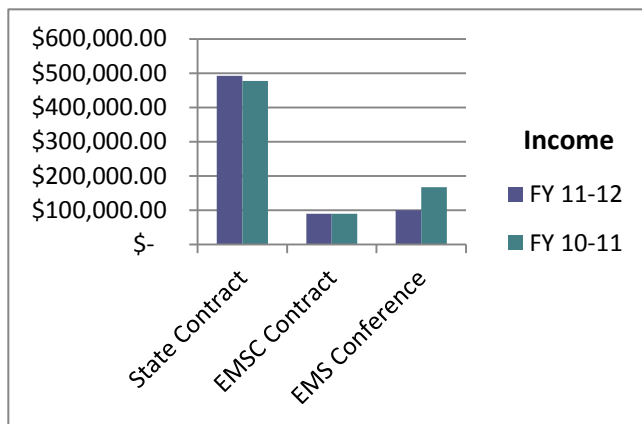
<p>PA EMERGENCY HEALTH SERVICES COUNCIL (PEHSC)</p> <p>GO TO: WWW.PEHSC.ORG</p> <ul style="list-style-type: none"> • To order an official PA EMS Flag for your Station • Annual State Conference Information 	<p>JOIN US...</p> <ul style="list-style-type: none"> • Become A Member • No Fee • Information and Resources <p>YOUR VOICE IN EMS</p> <p>GO TO: WWW.PEHSC.ORG</p> 	<p>RECRUITMENT WEBSITE:</p> <p>Created for the public to answer questions about a career in EMS – Downloadable video appropriate for school career day or job fairs</p> <p>GO TO: WWW.PA-EMS.ORG</p>
<p>PEDIATRIC EMERGENCY CARE EMS for Children (EMSC) www.pehsc.org/ems_children.htm</p>	<p>GO TO: WWW.PAEMSINFO.PEHSC.ORG</p> <p>For Alerts, Department of Health Information Bulletins, Policies, Regulations, and Urgent Messages</p>	

Fiscal Year 2011-2012 Financial Information

Note: Complete PEHSC financial audits are available by request as prepared by James J McCarthy & Associates, Certified Public Accounts, Harrisburg, PA.

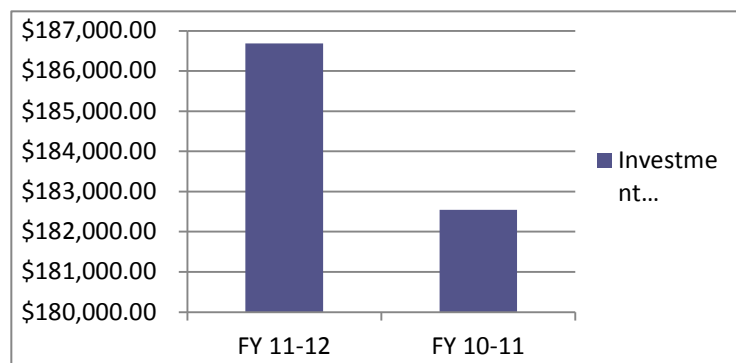
Income and Expense Comparison

	FY 11-12	FY 10-11	Net Change	% of Change
State Contract:				
Income	\$491,949.00	\$477,621.00	\$14,328.00	3%
Expense	\$491,949.00	\$477,621.00	\$14,328.00	3%
EMSC Contract:				
Income	\$90,000.00	\$90,000.00	\$0.00	0%
Expense	\$90,000.00	\$90,000.00	\$0.00	0%
EMS Conference:				
Income	\$100,109.00	\$166,945.00	-\$66,836.00	-40%
Expense	\$79,630.00	\$139,559.00	-\$59,969.00	-43%



Investment Account

	FY 11-12	FY 10-11	Net Change	% of Change
Balance as of Fiscal Year End	\$186,686.00	\$182,545.00	\$4,141.00	2.27%



Committee and Task Force Meetings

Board of Directors/Council:

Chair - JR Henry

October 26, 2011; December 14, 2011; March 21, 2012; June 13, 2012

Air Medical Task Force:

Chair - Duane Spencer

July 20, 2011; March 23, 2012

Communications Task Force:

Chair – Melvin Musulin

October 26, 2011

Critical Care Transport Task Force:

Chair – Mary Ann Rock

September 29, 2011; January 5, 2012; February 15, 2012

EMS for Children Advisory Committee:

Chair – Kirsten Johnson-Moore, RN

September 15, 2011; December 1, 2011; March 1, 2012; June 21, 2012

EMS Information Task Force:

Chair - Christopher Heile

September 29, 2011; November 3, 2011; December 5, 2011; January 19, 2012; May 15, 2012

Executive Committee:

Chair - JR Henry

August 29, 2011; October 31, 2011; December 13, 2011; January 30, 2012; February 20, 2012;

March 26, 2012; April 30, 2012

Medical Advisory Committee:

Chair - Dr. Michael Reihart

July 13, 2011; January 18, 2012; March 6, 2012; June 6, 2012 (Special Meeting),

Membership Committee:

Chair – Suzanne Smith

September 23, 2011; November 8, 2011; February 16, 2012; April 19, 2012; April 25, 2012; May 9, 2012

Nominating Committee (2012-2013 PEHSC Board of Directors/Executive Committee)

Chair – Douglas Garretson

January 24, 2012; February 8, 2012; April 25, 2012; May 3, 2012

Rescue Task Force:

Co-Chairs – Jack Glass and Chris Peischl

September 21, 2011; November 16, 2011; April 18, 2012

State EMS Development Plan Task Force:

Chair - Everitt Binns, PhD

November 16, 2011; January 10, 2012; February 7, 2012; February 23, 2012

Recommendations Approved by the Board of Directors

As forwarded to the Pennsylvania Department of Health and the official response

VTR# 1011-01 Changes to Required Equipment List – 12 Lead EKG

Recommendation

THE DEPARTMENT SHOULD AMEND THE LIST OF REQUIRED GROUND AND AIR AMBULANCE EQUIPMENT AND SUPPLIES TO INCLUDE 12-LEAD EKG DEVICES AND METHOD OF DATA TRANSMISSION FOR ALL GROUND AND AIR ALS VEHICLES BY JULY 1, 2013.

The PEHSC Board of Directors voted to table VTR# 1011-01 and returned it to the Medical Advisory Committee for further review.

VTR# 1011-02 Reception of 12 Lead EKG Data by Medical Command Facilities

Recommendation

THE DEPARTMENT SHOULD REQUIRE ALL ACCREDITED MEDICAL COMMAND FACILITIES TO HAVE THE CAPABILITY TO RECEIVE WIRELESS 12-LEAD EKG DATA, USING VARIOUS METHODS, BY JULY 1, 2013.

Dr. Reihart, Medical Advisory Committee Chair, withdrew VTR# 1011-02 in view of the PEHSC Board of Directors' decision to table VTR# 1011-01; it was returned to the Medical Advisory Committee for further review.

VTR# 1011-03 Changes to Required Equipment List – IV Infusion Pump

Recommendation

THE DEPARTMENT SHOULD AMEND THE LIST OF REQUIRED GROUND AND AIR AMBULANCE EQUIPMENT AND SUPPLIES TO INCLUDE AN IV INFUSION PUMP ON ALL GROUND AND AIR ALS VEHICLES BY JULY 1, 2013.

The PEHSC Board of Directors voted to table VTR# 1011-03 and returned it to the Medical Advisory Committee for further review.

VTR# 1211-01 Changes to Required Equipment List – Pulse-oximetry Devices

Recommendation

THE DEPARTMENT OF HEALTH SHOULD MODIFY THE LIST OF *REQUIRED GROUND AND AIR AMBULANCE EQUIPMENT AND SUPPLIES* TO INCLUDE PULSE-OXIMETRY UNITS WITH THE CAPABILITY TO ASSESS BOTH ADULT AND PEDIATRIC PATIENTS. THIS MODIFICATION SHOULD BE EFFECTIVE BY JULY 1, 2013 AND APPLY TO ALL AMBULANCE TYPES, INCLUDING QUICK RESPONSE SERVICES (QRS).

Department of Health Response

The Bureau of EMS accepts the first portion of this recommendation but with additional medical consideration the Department will not require pulse-ox devices for QRS units.

VTR# 1211-02 Child Abuse Clearance Checks for EMS ProvidersRecommendation

THE DEPARTMENT OF HEALTH SHOULD EXPAND ITS CURRENT CRIMINAL HISTORY MONITORING EFFORTS TO INCLUDE SCREENING FOR CONVICTIONS OF CRIMINAL ACTS AGAINST CHILDREN, VIA THE PA CHILD LINE, TO BE PERFORMED BY THE EMS AGENCY AS PART OF THE REQUIRED DOCUMENTATION FOR LICENSURE AND SHOULD ALSO INCLUDE THE SCREENING OF STUDENTS ENROLLED IN AN EMS CERTIFICATION PROGRAM.

Department of Health Response

The Bureau of EMS will provide information on accessing the Pa Child Line to EMS agencies and accredited EMS educational facilities. The Department will continue to observe the progress of House Bill 2038 which will require background checks for all new EMS Providers in the Commonwealth.

VTR# 1211-03 Voluntary Rescue Service Recognition Marketing ProgramRecommendation

THE DEPARTMENT OF HEALTH SHOULD DEVELOP A SHORT AND LONG TERM MARKETING PLAN TO IMPROVE AWARENESS IN AN EFFORT TO INCREASE PARTICIPATION IN THE VOLUNTARY RESCUE SERVICE RECOGNITION (VRSR) PROGRAM.

Department of Health Response

The Bureau of EMS currently has been working with the Fire Commissioner's Office to develop courses and programs focusing on the development of rescue training programs and implementation of the VRSR program. Fiscal constraints have limited the resources that are available to conduct this type of program at this time but would consider this recommendation in the future.

VTR# 0312-01 Changes to Required Equipment List – 12 Lead EKGRecommendation

THE DEPARTMENT SHOULD AMEND THE LIST OF *REQUIRED GROUND AND AIR AMBULANCE EQUIPMENT AND SUPPLIES* TO INCLUDE 12-LEAD EKG DEVICES AND A PROCESS FOR DATA TRANSMISSION BY GROUND AND AIR ALS VEHICLES IN FY 13-14.

Department of Health Response

The Bureau of EMS accepts this recommendation.

VTR# 0312-02 Reception of 12 Lead EKG Data by Medical Command FacilitiesRecommendation

THE DEPARTMENT SHOULD REQUIRE ALL ACCREDITED MEDICAL COMMAND FACILITIES TO HAVE THE CAPABILITY TO RECEIVE WIRELESS 12-LEAD EKG DATA, USING VARIOUS METHODS, IN FY 13-14.

Department of Health Response

The Bureau of EMS accepts this recommendation.

**VTR# 0312-03 Changes to List of Approved Drugs for ALS Ambulance Services:
Control of IV Infused Medications**Recommendation

THE DEPARTMENT SHOULD AMEND THE LIST OF APPROVED DRUGS FOR ALS AMBULANCE SERVICES TO INCLUDE A REQUIREMENT THAT AN ELECTRONIC IV INFUSION PUMP OR MECHANICAL FLOW CONTROL DEVICE BE USED TO CONTROL THE RATE OF ADMINISTRATION OF ALL CONTINUOUSLY INFUSING IV MEDICATIONS ESTABLISHED IN THE PREHOSPITAL SETTING.

THE DEPARTMENT SHOULD ALSO AMEND THE LIST OF *REQUIRED GROUND AND AIR AMBULANCE EQUIPMENT AND SUPPLIES* TO REQUIRE EACH ALS UNIT TO CARRY AT LEAST ONE (1) ELECTRONIC IV INFUSION PUMP OR MECHANICAL FLOW CONTROL DEVICE.

Department of Health Response

The Bureau of EMS will amend the list of approved drugs for Advanced Life Support (ALS) ambulance services to require, in the prehospital setting, that continuous infusions of crystalloid solutions containing medication (except intravenous electrolyte solutions with potassium concentrations of no more than 20 mEq/L) will be rate controlled by a manual flow control device capable of setting specific numeric flow rates or an electronic intravenous (IV) pump.

The Bureau of EMS will change the list of required equipment for ALS ambulance services by requiring that, effective July 1, 2012, all ALS and Air Ambulance service must have at least one electronic IV pump or a manual flow control device capable of setting specific numeric flow rates.

The Bureau of EMS will modify the requirements for all ALS and Air EMS services to require at least one electronic IV pump by July 1, 2014.

**VTR# 0312-04 Changes to the List of Approved Drugs for ALS Ambulance Services:
Removal of Heparin Flush**Recommendation

THE DEPARTMENT OF HEALTH SHOULD REMOVE HEPARIN FLUSH FROM THE LIST OF APPROVED DRUGS FOR ALS AMBULANCE SERVICES.

Department of Health Response

The Bureau of EMS accepts this recommendation and will remove IV heparin IV flush from the ALS drug list.

VTR# 0312-05 Changes to Statewide ALS Protocol 7007-SeizuresRecommendation

THE DEPARTMENT OF HEALTH SHOULD AMEND STATEWIDE ALS PROTOCOL 7007-SEIZURES TO INCLUDE AN OPTION FOR INTRAMUSCULAR ADMINISTRATION OF MIDAZOLAM IN ADULTS TO RESOLVE SEIZURE ACTIVITY.

Department of Health Response

The Bureau of EMS accepts this recommendation and will consider this treatment when the protocols are updated.

**VTR# 0312-06 Change to BLS Level Provider Scope of Practice:
Addition of Mechanical CPR Devices**Recommendation

THE DEPARTMENT OF HEALTH SHOULD AMEND THE PREHOSPITAL PRACTITIONER SCOPE OF PRACTICE TO PERMIT THE USE OF MECHANICAL CPR DEVICES BY ALL DEPARTMENT OF HEALTH CERTIFIED PROVIDERS.

Department of Health Response

The Department will review the issues that must be addressed before adding this type [of] device to the list of treatments that can be performed by BLS providers under the current scope of practice. Following this review the Department will notify the Council of the Department's decision.

VTR# 0312-07 EMS Transfer of Care FormRecommendation

THE DEPARTMENT OF HEALTH SHOULD ADOPT THE ATTACHED FORM TITLED "PENNSYLVANIA EMS TRANSFER OF CARE FORM" AS THE OFFICIAL PENNSYLVANIA DEPARTMENT OF HEALTH EMS TRANSFER OF CARE FORM TO RECEIVING FACILITIES.

Department of Health Response

The Department thanks the Council for the proposed EMS hand-off form. An updated draft of the hand-off form will be circulated more broadly than the previous pilot to permit all EMS agencies in the Commonwealth a chance to use and comment on the form in anticipation of regulations that require standardized hand-off information.

VTR# 0612-01 Critical Care Paramedic Project

Recommendation

THE PENNSYLVANIA DEPARTMENT OF HEALTH SHOULD ADOPT THE STANDARDS AND EXPANDED SCOPE OF PRACTICE DETAILED IN THE ATTACHED DOCUMENT ENTITLED, "ESTABLISHING THE CRITICAL CARE PARAMEDIC IN PENNSYLVANIA."

Department of Health Response

The Bureau of EMS accepts this recommendation as a starting point that will follow adoption of the regulations needed to implement Act 37.

VTR# 0612-02 Vehicle Extrication Awareness Education

Recommendation

THE DEPARTMENT OF HEALTH SHOULD ACCEPT THE VEHICLE EXTRICATION AWARENESS EDUCATION INSTRUCTIONAL GUIDANCE FOR INCLUSION IN PENNSYLVANIA EMS CERTIFICATION PROGRAMS.

Department of Health Response

The Bureau of EMS will accept this document as a reference that may be used by individuals and organizations searching for guidance when planning vehicle extrication programs as part of an EMS certification program.

VTR# 0612-03 Essential Transfer of Care Elements

Recommendation

THE DEPARTMENT SHOULD PUBLISH A NOTICE IN THE PENNSYLVANIA BULLETIN SPECIFYING THE ATTACHED LIST OF REQUIRED AND RECOMMENDED ELEMENTS AS THE TYPES OF PATIENT INFORMATION THAT ARE ESSENTIAL FOR IMMEDIATE TRANSMISSION FOR PATIENT CARE.

The following elements, if applicable to the patient, are considered essential information for immediate transmission to the receiving facility at the time of patient delivery either in verbal and/or written format.

Element	Required Verbal	Required Written
1. Date		X
2. Time		X
3. EMS Agency Name		X
4. Patient Name	X ¹	X ¹
5. Date of Birth		X ¹
6. Age	X ¹	X ¹
7. Gender		X
8. Chief Complaint	X	X
9. Provider Impression	X	X
10. Pertinent Past Medical History	X ²	X ²
11. History of Present Illness	X	X
12. Onset of Symptoms Date/Time	X	X
13. Allergies	X	X
14. Medications	X ³	X ³
15. Vital Signs: Pulse, BP, Respirations, Pupils, Glucose, SpO2	X	X
16. Mental Status		X
17. ECG: Rhythm, 12 lead Interpretation, ECG Delivered with report?	X	X
18. EMS Treatment: Medication/Dose	X	X
19. IV Site: Size/Location, Fluid Administration		X
20. Oxygen Administration: LPM	X	X
21. Provider Transferring Care Name		X

¹ When available

² Supplemental patient history documentation should be provided if available

³ May be provided via a separate list or by providing the medication containers

The following elements, while not essential for patient care, are recommended for a written transfer of care:

1. Provider Transferring Care Certification #
2. EMS Provider Signature
3. Care Transferred to: Facility/Agency Name, Time of Transfer, Receiving Facility Signature
4. Patient Phone Number

Department of Health Response

The Bureau of EMS will publish a list of required elements considered essential for immediate transmission for patient care, following promulgation of regulations needed to implement the EMS Act. The Bureau will continue to pilot the current form, to obtain as much feedback as possible before publication of the final list.

Additional Projects by PEHSC Committees, Task Forces, and Staff

Critical Care Paramedic Project - During FY 2011-2012, the PEHSC Air Medical Task Force’s critical care paramedic workgroup has worked to produce educational and other standards related to establishing the critical care paramedic in Pennsylvania. The vision is that a paramedic who completes the prescribed educational requirements and successfully passes a national-level cognitive examination will

be granted expanded scope of practice when functioning on a Pennsylvania Department of Health licensed critical care ground-based or air ambulance.

These standards were reviewed and approved by the PEHSC Board of Directors in June 2012 and subsequently accepted by the Pennsylvania Department of Health. In the second phase of this project, the workgroup will develop recommendations related to the critical care paramedic's scope of practice, resource typing of critical care transport teams, a statewide critical care drug list, and statewide critical care transport protocols.

The Air Medical Task Force's goal is to complete the remaining program elements in a timeframe that will enable the critical care paramedic to become operational upon the approval of the rules and regulations for Pennsylvania's EMS Act (Act 37 of 2009).

2012 Pennsylvania Volunteer Ambulance Service Grant Program (VASG) – Materials were disseminated by email to Council, Affiliate Council, and ambulance service distribution lists. Materials were placed on the PEHSC website.

Training Institutes

- An issue, which could impact portability of EMS teaching certificates related to Pennsylvania public schools, was identified at the PEHSC Board of Directors meeting. The issue was addressed with the Bureau of EMS so that existing specialty certifications can be portable to enable programs to continue in Pennsylvania.
- PEHSC staff met with the Department of Health, Bureau of EMS staff to finalize the CPR skill sheets for BLS. PEHSC staff supported the Bureau of EMS operations in regard to the resubmission and final review of the EMR skill sheets.

EMS Patient Care Reports - The PEHSC EMS Information Task Force monitored Pennsylvania's participation in the NEMSIS program. The Task Force reviewed the NEMSIS 3 data elements for possible incorporation into Pennsylvania data collection.

The PEHSC EMS Information Task Force created an EMS Transfer of Care Form that will satisfy requirements to be set forth in the rules and regulations for Act 37. A draft form was approved by the Task Force and submitted to the Department of Health, Bureau of EMS with VTR# 0312-07. The Bureau distributed the draft statewide and requested feedback from participating services.

In conjunction with the Transfer of Care Form, the Task Force worked to identify elements for patient care transfer that must be transmitted in written form and those that must be given in a verbal report. A list of elements was submitted with VTR# 0612-03.

Statewide EMS Development Plan – The PEHSC State Plan Task Force conducted the annual review of the state plan, and the final priority document for years 3-5 was approved at the March PEHSC Board of Directors meeting for delivery to the Department of Health, Bureau of EMS. In an effort to assist the regional councils with the state plan integration into the work statements, an informational session for the EMS Regional Directors was delivered at the June Regional Directors meeting and education for the regional staff was delivered in July.

Additional EMS System Funding – PEHSC worked with the Pennsylvania Fire and Emergency Services Institute to develop strategies to increase available funding for PA's fire, EMS and rescue organizations and to explore other potential funding streams for public safety. Reauthorization for the PA Volunteer Fire and Volunteer Ambulance Grant Program, Senate Bill 866, was approved by the Pennsylvania General Assembly; the bill became Act 78 of 2012 and included five million dollars in additional funding.

Good Samaritan Act – PEHSC staff worked with representatives from the American Heart Association to review Pennsylvania’s current Good Samaritan Act. PEHSC recommended language to strengthen the current provisions of the Act with regard to first response personnel. Senate Bill 351, which amends the Good Samaritan Act, was approved by the Pennsylvania General Assembly and became Act 125 of 2012.

Review of Rules and Regulations, Standards and Policies

- PEHSC distributed the published regulations, via email and posting of information on the PEHSC website, for comment as per the Pennsylvania Bulletin.
- All EMS Information Bulletins issued by the Bureau are posted on the PEHSC website.
- PEHSC staff and the Council reviewed and forwarded comments in regard to the following Department of Health, Bureau of EMS documents: SOP, EMSOF funding list, the ambulance equipment list, and the ALS drug list.
- PEHSC staff answered and forwarded comments and questions regarding the Transfer of Care Form and AEMT in relation to the pending draft regulations.
- Comments in regard to the proposed ambulance federal equipment list by the National Highway Traffic Safety Administration (NHTSA) were received from stakeholders by PEHSC and forwarded to the Pennsylvania Department of Health for dissemination to the NHTSA as requested.

EMS for Children Project

Through the contract with the Department of Health, the Council employs a full-time EMS for Children (EMSC) Program Director to manage the EMS for Children grant, which is awarded by the Health Resources and Services Administration (HRSA). Activities of the EMSC program are guided by federal performance measures, which evaluate a state’s ability to provide emergency medical care to children in the following areas:



- The availability of online and offline pediatric-specific medical direction
- The presence of essential pediatric equipment and supplies on all EMS units
- The existence of a standardized system to recognize hospitals capable of treating pediatrics
- The existence of interfacility transfer guidelines and agreements to ensure appropriate transfer of pediatric patients between facilities
- The requirement for pediatric education for certification renewal of EMS providers
- The establishment of EMSC permanence within the state through the existence of an EMSC Advisory Committee, a full-time EMSC Program Director, and EMSC priorities in regulation

During this fiscal year, the EMSC advisory committee continued to meet to conduct projects with a goal of achieving federal performance measures and formed several new strategic partnerships. A new partnership with the General Federation of Women’s Clubs allowed for the purchase of pulse-oximetry units, which were distributed to various EMS agencies across the Commonwealth. In addition, Pennsylvania remained represented on several national EMSC groups, including the Pediatric Emergency Care Council of the National Association of State EMS Officials (NASEMSO). Several key projects included the revision of the Emergency Care Guidelines for Schools resource manual, the launch of a safe transport of children in ambulances initiative, and planning for the 2nd Annual Pediatric Emergency Care Symposium. In May 2012, the new EMSC website was launched – www.paemsc.org. The previous EMSC website was re-designed and launched on the new domain, offering EMS providers, other healthcare agencies, and the public easy access to EMSC information. Included on the website is

pediatric symposium information, current project highlights, recent meeting minutes, and a downloadable version of the Emergency Care Guidelines for Schools document.

In addition to working toward successful completion of the federal performance measures outlined above, the EMSC Program Director remains active in various committees and councils to ensure that EMSC priorities are considered in policy development by numerous organizations. The EMSC Program Director and committee members are actively partnered with the following organizations:

- PA Trauma Systems Foundation: Pediatric Trauma Committee
- American Academy of Pediatrics - PA Chapter
 - PA Child Death Review Team
 - Suspected Child Abuse and Neglect (SCAN) for EMS
 - Prevent Child Abuse PA
- Safe Kids Pennsylvania
- Atlantic Region EMSC Council
- The National Association of State EMS Officials (NASEMSO)
- NASEMSO Pediatric Emergency Care Council
- The EMSC National Resource Center and National EMSC Data Analysis Resource Center
 - The EMSC Director actively participates in annual conferences and workshops offered by both of these organizations.

The EMSC Committee provided input on several PEHSC projects including the conducting and data analysis of a racemic epinephrine pilot project for the treatment of croup, the State EMS Plan, and the following Board recommendations:

VTR # 1211-01 – Pulse-oximetry Units for EMS Vehicles

THE DEPARTMENT OF HEALTH SHOULD MODIFY THE LIST OF *REQUIRED GROUND AND AIR AMBULANCE EQUIPMENT AND SUPPLIES* TO INCLUDE PULSE-OXIMETRY UNITS WITH THE CAPABILITY TO ASSESS BOTH ADULT AND PEDIATRIC PATIENTS. THIS MODIFICATION SHOULD BE EFFECTIVE BY JULY 1, 2013 AND APPLY TO ALL AMBULANCE TYPES, INCLUDING QUICK RESPONSE SERVICES (QRS).

VTR #1211-02 – Child Abuse Clearance Checks for EMS Providers

THE DEPARTMENT OF HEALTH SHOULD EXPAND ITS CURRENT CRIMINAL HISTORY MONITORING EFFORTS TO INCLUDE SCREENING FOR CONVICTIONS OF CRIMINAL ACTS AGAINST CHILDREN, VIA THE PA CHILD LINE, TO BE PERFORMED BY THE EMS AGENCY AS PART OF THE REQUIRED DOCUMENTATION FOR LICENSURE AND SHOULD ALSO INCLUDE THE SCREENING OF STUDENTS ENROLLED IN AN EMS CERTIFICATION PROGRAM.

The Emergency Care Guidelines for School Nurses resource book was edited during this fiscal year with input from several stakeholders and was published and distributed to all (501) public school districts across the Commonwealth. A digital version was made available for download on the EMSC website, and several requests were received for additional copies of the guide.

All Pennsylvania hospital emergency departments were provided a resource CD, developed through the PA EMSC program, to offer guidance on the creation and implementation of interfacility transfer guidelines and agreements specific to pediatric patients.

The EMSC program, through a cooperative effort with Laerdal Medical, provided thirteen regional EMS councils with Laerdal ALS Baby Simulators to promote no-cost pediatric education across the Commonwealth. Educator training was provided in these regions to train educator staff in the use of the simulators.

The EMSC Committee meets quarterly via webinar or live meetings, and is comprised of members covering many facets of pediatric emergency care including prehospital personnel, pediatric physicians, pediatric nurses, emergency department physicians, state agency representation, and a family representation. In addition to the required membership, the PA EMSC Committee also maintains strong representation from our partner organizations, regional EMS councils, and injury prevention programs. Additionally, the EMSC Program Director, committee co-chairs and project medical director meet monthly via conference call.

Finally, the EMSC Program provides support and education content to the annual statewide EMS conference and the Pediatric Emergency Care Symposium.

PEHSC List Serv Distributions

Notices sent included topics such as:

- United States Fire Administration Releases Updated Medical Director Handbook
- Urgent Bulletin re: Medicare Reimbursement
- Federal Line of Duty Death Benefit
- Draft Rules and Regulations to Pennsylvania's EMS Act 37
- Draft EMS Rules and Regulations Published in the Pennsylvania Bulletin

Partnership Meetings Attended by PEHSC Leadership and Staff

- Pennsylvania Trauma Systems Foundation Board of Directors Meetings
- Good Fellowship EMS Conference
- 2011 Pennsylvania Fire & Emergency Services Institute Annual Dinner and Pennsylvania EMS Awards Presentation
- National Center for Patient and Family Centered Care Meeting
- Community Injury Prevention Meeting
- American Heart Association Advocacy Day
- American Heart Association Good Samaritan Bill Related Meetings
- Lehigh Valley Health Network Safe Transport of Children in Ambulances Seminar
- 2011 Emergency Medical Service Institute Regional EMS Conference
- 2011 Susquehanna Emergency Health Services Council Conference
- Rural Health Legislative Briefing
- Pennsylvania Chapter of the American Academy of Pediatrics Meeting
- Safe Schools Meeting
- Regional Directors Meetings
- National Community Paramedicine Monthly Webinars
- National Highway Traffic Safety Administration - State Level Interface Webinar

- National Association of EMTs Required Ambulance Design Webinars
- Pennsylvania Trauma Systems Foundation Rural Trauma Sub-Committee
- Pennsylvania Trauma Systems Foundation Geriatric Trauma Sub-Committee
- Regional Training Coordinators Meetings
- Pennsylvania Trauma Systems Foundation Pediatric Standards Committee
- 2011 Pennsylvania Trauma Systems Foundation Annual Conference Volunteer Loan Assistance Program Application Review Committee
- Quarterly Pennsylvania Fire & Emergency Services Institute Statewide Advisory Board Meetings
- 2011 EMS Provider Foundation 9/11 Dinner
- 2011 American Trauma Society Conference
- 2011-12 Ambulance Association of Pennsylvania Reimbursement and Leadership Conferences
- EMSC Annual Program Meeting
- Prevent Child Abuse Pennsylvania Board of Directors Meetings
- Atlantic Region EMSC Meeting and National EMSC Data Analysis Workshop

Legislative Affairs

During Fiscal Year 11-12, PEHSC tracked, and when appropriate, provided comment on state and federal legislation affecting emergency medical services.

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|------------------------------|---|
| • House Bill 2038 | Provider Background Checks |
| • House Resolution 315 | LB&FC/JSGC Review of EMS System |
| • Senate Bill 351 | Good Samaritan Law Update/Act 125 of 2012 |
| • House Bill 1344 | Direct Pay by Private Insurers |
| • House Bill 1400 | Stroke Center/Act 54 of 2012 |
| • House Bill 1610 | Cardiac Arrest in Student Athletes/Act 59 of 2012 |
| • Senate Bill 866 | Fire and Ambulance Service Grant Program/Act 78 of 2012 |
| • House Bill 527 | EMS Memorial Flag |
| • House Resolution 607 | Federal Public Safety Officers' Benefits Program |
| • Senate Resolution | 2012 EMS Week; EMS for Children Day |
| • House Resolution | 2012 EMS Week; EMS for Children Day |
| • Gubernatorial Proclamation | 2012 EMS Week |

Corporate Activity

- The Executive Director reviewed and secured benefit packages for the next twelve months.
- The Executive Director prepared the FY 12-13 operating budget and submitted the final FY 11-12 budget revisions.
- The PEHSC Continuity of Operations Plan for relocation of the Council's operation in the event of emergency or unanticipated worksite disruption was updated during FY 11-12 and forwarded to the Department of Health.
- The financial audit for FY 10-11 was completed by James J McCarthy and Associates and approved by the PEHSC Board of Directors.

- The final FY 11-12 activity report was completed by the Executive Director and submitted to the Department of Health.
- PEHSC explored the feasibility of member organizations obtaining group healthcare benefits through its group purchase program.

Staff Activity

- Support provided to Emergency Health Services Federation/Southern Alleghenies EMS Council, Inc. re: Line of Duty Death
- 2012 Pennsylvania Farm Show Influenza Vaccinations
- National EMS Memorial Bike Ride Events

Group Purchasing

PEHSC has coordinated cost savings agreements with the following organizations in an effort to assist EMS organizations in purchasing needed services.

- BoundTree Medical
- Fire Med Grant Solutions, LLC National Associations of EMTs
- National EMS Academy
- Philips Healthcare Systems
- Progressive Medical International (PMI)
- Southeastern Emergency Equipment

Pennsylvania's 34th Annual EMS Conference

August 18-19, 2011

Lancaster County Convention Center & Marriott at Penn Square, Lancaster, Pennsylvania

National Faculty:

- David Page (Colorado)
- T. Ryan Mayfield (New York)
- John Hill (Iowa)
- Raphael Barishansky (Maryland)
- Dawn Zulauf (Maryland)
- Heidi Erb (Ohio)
- The law firm of Thomas, Thomas, and Hafer, LLC. (Pennsylvania)

Session Summary:

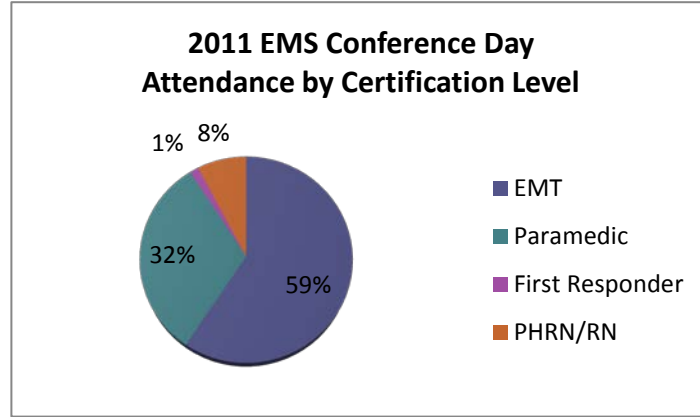
- 34 Sessions Total
 - 5 General Sessions
 - 29 Breakout Sessions
 - 26 Sessions with a primarily clinical focus
 - 8 Sessions with a primarily management of a blended management/clinical focus
- 40 hours of continuing education credits were available
- 40 nurses submitted for contact hours

Conference Highlights:

- Pediatric Emergency Care Symposium – August 18th
- Exhibitor Reception – August 18th
- DOH Regional EMS Director & Regional Education Coordinator Meetings – August 18th
- ITLS Workgroup Meeting
- Regional Tactical EMS Workgroup Meeting

- DOH Resuscitation Update (two offerings)
- Human Anatomy Lab (four offerings)

Total Attendance	338
Multi-Day General Conference	234
Single-Day General Conference	47
Human Anatomy Lab Attendance	60
Exhibiting Organizations	55



Pennsylvania’s 1st Annual Pediatric Emergency Care Symposium
September 16, 2011 – Downtown Holiday Inn, Johnstown, Pennsylvania

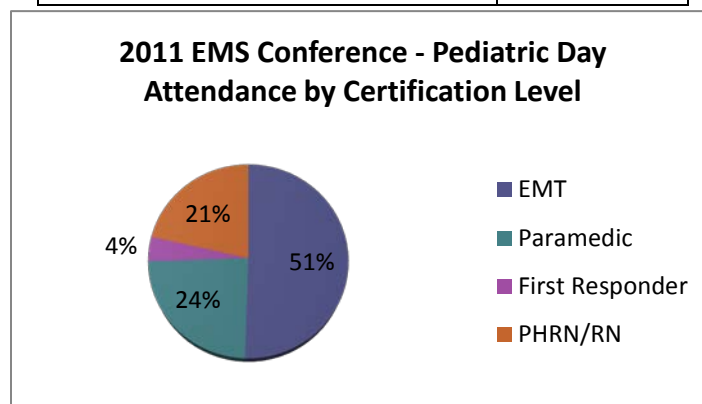
Faculty:

- Josh Stuart
- Erin Phrampus, MD
- Rob McLafferty
- Dean Kelble
- Kimberly Roth, MD
- Richard Lippert

Session Summary:

- 6 Sessions
 - Risky Teen Behavior
 - Shock in the Pediatric Patient
 - Trauma Case Studies
 - Autism for EMS
 - Pediatric Poisonings
 - Pediatric Assessment

Total Attendance – Johnstown	63
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Preparations for Pennsylvania's 35th Annual EMS Conference

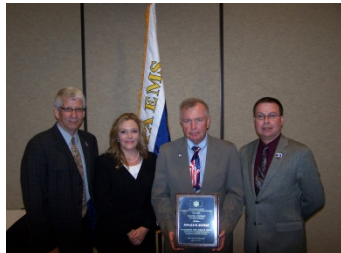
- A survey was distributed to all attendees of the 34th Annual PA EMS Conference to obtain feedback on the program. The results of this survey will be considered when planning for the 35th Annual Conference.
- Based on an analysis of the survey data, the 35th Annual PA EMS Conference will return to the Lancaster Convention Center and Marriott in August of 2012.
- In cooperation with the EMS for Children Program, two Pediatric Emergency Care Symposia are planned for 2012, one of which will be offered in conjunction with the 35th Annual Conference. This program will offer a full-day of pediatric-specific continuing education for EMS providers and registered nurses.
- Enhancements were made to the PA EMS Conference website to facilitate ease of online registration for both exhibitors and attendees.

PEHSC staff:

- Prepared a preliminary conference budget
- Secured both local and national speakers for the conference
- Secured exhibitor organizations to attend the conference
- Presented proposed session topics to, and obtain approval from, the Bureau of EMS Director
- Coordinated with the Bureau of EMS to assign continuing education credit to sessions
- Coordinated with the PA Department of Education for Act 48 nursing continuing education
- Developed direct mail material that was distributed to EMS providers from across the Commonwealth and past-year attendees. A mailing was also prepared and distributed to all licensed/recognized ambulance and QRS services. Mailings included a full-size poster for display in EMS stations and hospital emergency departments.

2012 PEHSC Awards

Each year, as a thank you to those individuals who have provided exemplary service to the Pennsylvania Emergency Health Services Council, a series of awards are delivered at a luncheon held in conjunction with the June Board of Directors meeting.



Walter J. Thomas Citizen Award
Donald H. Konkle
Pennsylvania Fire and Emergency Services Institute



Jerry Esposito EMS Administrator Award
J.R. Henry
Valley Ambulance Authority



Mildred K. Fincke Nursing Award
Maryann Rock, RN
Penn State Life Lion



Joel E. Grottenthaler Memorial Award
Jennifer Ebersole
American Heart Association, Great Rivers Affiliate

Acknowledgement

Without the continued support of our council members and individuals who participate on our committees and task forces, PEHSC would face a daunting task to identify and discuss issues in order to make recommendations to the PA Department of Health for EMS system improvement.

This positive attitude enables PEHSC to continue our role in Pennsylvania's EMS system and meet our mission. The Pennsylvania Emergency Health Services Council would like to thank everyone who has volunteered their time.

Pennsylvania Emergency Health Services Council

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