

FEDERAL GRANT CONTRACTS/COOPERATIVE AGREEMENTS

National Research Agenda Modification No. 7 – Ethics

The cooperative agreement awarded to NAEMSP® by the National Highway Traffic Safety Administration (NHTSA) in the amount of \$49,992.15 was completed on July 30, 2007. The cooperative agreement was awarded to evaluate the current requirements for exception from informed consent in emergency situations, and to identify those requirements that are serious impediments to conducting EMS research. The cooperative agreement also included efforts to develop and propose EMS-specific consent strategies as well as appropriate revisions to the existing regulations. The Principal Investigator was Michael R. Sayre, MD and the Co-Principal Investigators were Lynn White, MS and Lawrence Brown, EMT-P.

The Agency for Healthcare Research and Quality (AHRQ) awarded NAEMSP® a separate Small Conference Grant in the amount of \$40,000 which allowed NAEMSP® to hold a small conference in Washington, DC on February 7-8, 2007. The conference served as the impetus for the development of a guidance document to address issues of both consent and ethical conduct for EMS research.

Pediatric Emergency Care Research Workshop

The Health Resources and Services Administration (HRSA), Maternal and Child Health Bureau's (MCHB) Emergency Medical Services for Children (EMSC) program approved a Firm Fixed Price Purchase Order in the amount of \$98,153 for NAEMSP® to develop a two-day workshop focusing on pediatric emergency care research. This workshop, the fourth Pediatric Research Workshop conducted by NAEMSP®, was held on January 9 and 10, 2007 in Naples, Florida. There were 20 participants. The first workshop in this series was successfully held January 7-8, 2004, in Tucson, Arizona, and hosted 20 registrants and a faculty of 10. A second workshop was January 11-13, 2005 in Naples, Florida with 20 registrants and 12 faculty. The third workshop was held again in Tucson, Arizona on January 17-18, 2006 with 25 registrants. The Principal Investigator for the Workshop was Kathleen Brown, MD and the Steering Committee consisted of Lynn White, MS, and Brooke Lerner, PhD. Unfortunately, funding was not available to hold a fifth Pediatric Research Workshop in January 2008.

Terrorism Injuries: Information Dissemination and Exchange (TIIDE)

Formerly known as Linkages of Acute Care and EMS to State and Local Health Programs: The Role of Interactive Information Systems for Responding to Events Resulting in Mass Injury:

NAEMSP® was awarded a cooperative agreement in April 2003 to work with federal, state, and local public health agencies to identify currently functioning interactive informational systems between public health agencies, emergency departments, and EMS systems, and to identify linkages of acute care and EMS to state and local injury prevention programs. The work product from this phase of the grant has been published in *Prehospital Emergency Care* and the *Journal of Public Health Management and Practice*.

NAEMSP® was awarded a second \$100,000 cooperative agreement with the Centers for Disease Control and Prevention on September 30, 2004 for a one-year period to identify model communities that have established linkages between public health and the emergency response community; create a document describing recommendations for best practices; create an inventory of communities with established best practices; create a strong interactive communication system between EMS and public health; and identify characteristics of interactive informational systems.

NAEMSP® was further awarded \$25,000 to participate in a cooperative agreement with ACEP and other agencies to work on coordinated linkages of acute care and EMS to state and local injury prevention programs.

A subcontract was entered into between NAEMSP® and the CDC in the amount of \$61,625 to conduct a one-day conference on "Lessons Learned from Terrorist Attacks" in Nice, France, on September 2, 2005. The objectives of the conference were to assemble an international group of clinicians and administrators to discuss the clinical and system responses to terrorist bombings and disseminate the findings of the conference via available methods including publication in a refereed journal, and attaching links through global organizational web sites. The conference was attended by 22 international participants. A Writing Team created a manuscript on the meeting, which has been submitted to *Annals of Emergency Medicine*.

NAEMSP® was awarded an additional \$50,000 for the fiscal year running from September 30, 2005 through September 30, 2006, to continue working on the objectives of the original Cooperative Agreement and will be redirecting approximately \$69,000 from the prior year. This money was to be used to summarize the findings on a second Lessons Learned meeting for blast injury and to continue our participation with the TIIDE grantees. The project has an expiration date of September 29, 2007. The total funding to date is \$236,624.

The principal investigator for this project is Robert O'Connor, MD, MPH and the Co-Principal Investigator is E. Brooke Lerner, PhD. Writing Team Members include Kathy Brinsfield and Richard Schwartz.

A redirected budget was filed with the CDC in which NAEMSP® requested to carry over unspent funds from past CDC grants as well as incorporate funds from the existing grant. NAEMSP® was notified on July 22, 2006, that the carry over had been awarded in the amount of \$30,000.

A meeting of the mass casualty work group was held in Alexandria, Virginia on March 1, 2007. This group was charged with identifying all current Mass Triage methodologies and the science and experiences that support them. The group then presented this information at a consensus conference and was charged with producing a paper on the review and the findings of the conference.

A carry over request for the remaining \$56,844 from 2005-2006 award was approved in May 2007. That award was used to fund a second meeting of the mass casualty work group in Washington, DC on August 22-23, 2007 to discuss many of the issues that were not addressed in the first meeting. These issues include: the role of provider judgment within the triage scheme, the role of chronic medication use and medical history in triage, the use of triage tags for identification of patient priority, the process for provider education and skill retention, the development of a triage related research agenda, triage system changes based on incident type, who should triage, the role of technology during triage, and the process and timing of re-triage and re-assessment.

The grant was due to expire on September 29, 2007.

Terrorism Injuries: Information Dissemination and Exchange (TIIDE 2)

Identifying & Disseminating Best Practices by Collaboration of Public Health & the EMS

NAEMSP® was awarded a cooperative agreement by the Centers for Disease Control and Prevention in the amount of \$70,000. The project period of the cooperative agreement runs from September 1, 2007 to August 31, 2010. This is a new cooperative agreement that continues the work of the first TIIDE project.

The objectives of this project are to: (1) identify at least two model communities, (2) develop evidence-based, user friendly products to address model community recommendations, mass triage review findings, and blast lessons learned findings, (3) develop additional products as directed by the CDC, (4) develop a system for disseminating timely and evidence-based information related to injuries resulting from terrorism and mass casualty events, (5) develop, disseminate, and evaluate at least one training course, and (6) develop a minimum dataset for disseminating information on mass casualty incidents for the purpose of evaluation and sharing lessons learned.

Medical Directors Distance Education & Mentoring Program

Formerly known as Medical Response to Terrorism/National Disaster Life Support Integration Project:

NAEMSP® was awarded a cooperative agreement with the National Highway Traffic Safety Administration in the amount of \$150,000. The cooperative agreement was completed on June 30, 2007. The cooperative agreement involved reformatting of the Medical Response to Terrorism course to an online interactive structure as a module in the NHTSA/NAEMSP/CITF online EMS Medical Director course. The module was reviewed by EMS physicians and educators for level of knowledge and applicability in online format. Another piece of the grant is the on-line pairing to a mentor. NAEMSP® worked in conjunction with the Critical Injury Trauma Foundation on this project. Bethany Cummings, DO and Douglas Kupas, MD served as the Co-Principal Investigator's.

NAEMSP® contracted with Burns Technology in Montana to work on producing the media for the Distance Learning work product. This is the same group that the Critical Injury Trauma Foundation is using for their work product and it was felt that the two pieces should have a similar look.

Technology and EMS Project

Formerly known as ITS Grant

NAEMSP® was awarded a cooperative agreement from the National Highway Traffic Safety Administration in the amount of \$300,000 that covered a two year period, concluding on March 17, 2007. The purpose of this agreement was to implement the *Recommendations for ITS Technology in Emergency Medical Services* to increase national medical community involvement in the planning and implementation of ITS technology. The Co-Principal Investigators for this project were Robert Domeier, MD and Bob Bailey, MA. A meeting of the Technical Consultation Committee was held in Fairfax, VA on April 18-19, 2005. The ITS Work Group held a meeting in Washington, DC on August 29, 2006 to finalize the work product.