



PROJECT PLAN: EMS Agencies and COVID-19

Research Question: What has been the experience of EMS agencies in the North East US during the COVID-19 pandemic?



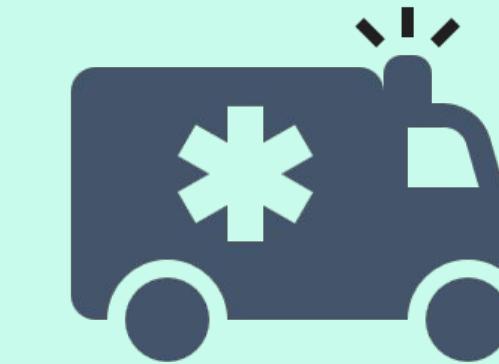
Methods/Analysis

- **Content analysis:**

- Comparative case study approach
- Identify protocols initiated
- Personal protective equipment (PPE) availability
- Differences in manpower availability
- Evaluate EMS agencies' disaster preparedness
- Identify gaps in pandemic-related education and training

- **Narrative analysis:**

- Evaluate EMS workers' willingness to report to duty during the COVID-19 pandemic based on geographic location and availability of adequate resources, training, and effective communication regarding pandemic patient care protocols



Background

- The COVID-19 pandemic has reconstructed every aspect of healthcare, including Emergency Medical Services (EMS), in both urban and rural areas of the Northeast United States. Specifically, the EMS response of each area has been dependent on availability of personal protective equipment (PPE), manpower, and awareness of state mandated protocols². Current research supports the notion that implementing specific pandemic patient care protocols to identify possible COVID-19 patients has helped reduce unnecessary exposure to other healthcare workers¹. However, to better understand the experience of EMS agencies during this pandemic, this study dived deeper to evaluate the type of emergency preparedness training that was received by EMS professionals and to identify the similarities and differences in EMS patient care protocols established in rural versus urban areas in response to the pandemic.

Data

- **Setting:**

- One rural EMS agency in Potsdam, New York
- Two urban EMS agencies in Manhasset, New York and Mahwah, New Jersey

- **Data Collected:**

- Interviews with members and Chiefs of the EMS agencies listed above to gather qualitative data on availability of PPE, training, manpower, etc. during the COVID-19 pandemic.

Contribution

- Identify similarities and differences in challenges encountered by urban and rural EMS agencies during COVID-19, including those that resulted in barriers to patient care or willingness to work
- Develop a common narrative for identifying gaps in training of EMS professionals

References:

¹Edelson D. et al. AHA Journals 3 (2020), doi: 10.1161/circulationaha.120.047463

²Ventura et al. Heliyon 3 (2020), doi: 10.1016/j.heliyon.2020.e03900

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