



NAEMT Position Statement EMS Patient Safety and Wellness

Statement: EMS practitioners provide a variety of treatment modalities to our patients, often done in adverse or challenging environments. Due to the diversity of any given EMS response, serious challenges exist in ensuring EMS patient safety. NAEMT supports the development of a culture of safety in all EMS systems in our nation. NAEMT is committed to advocating for the safest practices and regulations that protect and promote EMS patient safety and wellness. This requires the following:

- Federal and state EMS laws and regulations that specifically address a systematic approach to patient safety and error accountability
- Funding for the research of patient safety issues specific to the EMS response.
- Initial and ongoing employer provided overview of patient safety concepts and practices in the workplace.
- EMS systems development of error reporting and tracking systems for workplace patient safety, clinical or medication error and inappropriate use or failure of equipment used in patient assessment and treatment.
- Employer implemented policy addressing medical device failure that includes appropriate, immediate alternatives, and provides for removal and replacement to ensure patient safety.
- Quality assurance programs that include patient safety issues and provide clear guidelines for clinical improvement and preventative safety measures
- Employer provided training and accountability on the use of safety procedures on vehicle operation and equipment, including effective patient moving and procedures covering the proper use of seatbelts, restraints, and patient moving equipment, such as stair chairs, backboards, scoop stretchers, etc.
- Employer provided proficiency training and accountability in clinical procedures; invasive and noninvasive, (airway management, ECG interpretation, and medication administration [including patient assisted]).
- Employer required safe medication practices which include but are not limited to: uniform labeling standards; accessibility limiting misidentification; appropriate

storage; and appropriate and timely inspections and removal of contaminated or outdated medications.

- The partnership of EMS practitioners and local agencies in the development and maintenance of prehospital patient safety programs.

Background: The 1999 Institute of Medicine report “To Err is Human...” brought needed attention to the topic of errors in medicine. Over the past ten years, some solutions have been implemented in the area of patient safety. However, there remains a lack of evidence based principles addressing patient safety in EMS. Emergency Medical Service systems are regulated in most states as a means to protect the safety of the public, however there are specific regulations directly addressing patient safety in EMS.

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