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**Lights and Siren Collaborative Aims to Improve Safety**  
*National Emergency Medical Services Quality Alliance (NEMSQA)*  
*Improvement Project Enlists 50 EMS Agencies*

**DALLAS**—A national quality improvement project led by the [National EMS Quality Alliance \(NEMSQA\)](#) has enlisted 50 diverse EMS agencies to participate in the Lights and Siren (L&S) Collaborative to improve the safety of EMS response and transport.

“With the Lights and Siren EMS Quality Improvement Partnership (EQIP), we are operationalizing evidence to improve the safety and quality of care in EMS across the country. We’re excited to see the data flowing in from our partner agencies using the NEMSQA performance measures,” said Michael Redlener, MD, NEMSQA board president and co-leader of the project. “Ultimately, the best practices that come out of this project will allow every agency, whatever the service model or size, to more safely and effectively respond to 9-1-1 calls.” Dr. Redlener also serves as the Medical Director of the Mount Sinai West Emergency Department and the Director of the Division of EMS and Disaster Preparedness in the Department of Emergency Medicine in the Mount Sinai (New York) Health System.

The topic of the value of ambulances running “hot” has been a part of the national conversation for decades. Earlier this year NEMSQA joined more than a dozen national EMS organizations in announcing a joint [position paper](#) on the topic that updates and reinforces an earlier paper released in 1994.

“For EMS,” the paper states, “the purpose of using L&S is to improve patient outcomes by decreasing the time to care at the scene...but only a small percentage of medical emergencies have better outcomes from L&S use.” It goes on to state a series of principles to guide the use of L&S and to improve safety.

“Our L&S Collaborative puts these principles to the test,” said Mike Taigman, nationally known expert in quality improvement science and who serves as the Improvement Guide at

FirstWatch, a technology company that helps public safety agencies use their data to improve. Taigman is co-leading the project with Dr. Redlener and Joey Grover, MD, a Clinical Assistant Professor at the University of North Carolina Department of Emergency Medicine, EMS Fellowship Program Director, and Medical Director of Orange County (NC) Emergency Services.

“The Collaborative is where the rubber meets the road, so to speak,” said Taigman. “We’re using NEMSQA’s [evidence-based performance measures](#) and NEMSIS data to gather information from participating agencies.”

In 2017, National Highway Traffic Safety Administration (NHTSA) Office of EMS contracted with Douglas Kupas, MD, to create a comprehensive review paper called [“Lights and Siren Use by Emergency Medical Services: Above All Do No Harm.”](#)

“The time saved by using L&S during response and transport has been evaluated by several studies. These all show that a relatively short amount of time is saved by L&S use,” the author concludes. “While this may be of clinical importance to patient outcome in critical time-sensitive conditions like cardiac arrest, the consensus among the researchers in this field is that the time is not significant in most of the responses or transports.”

The peer-reviewed article [“Using Red Lights and Sirens for Emergency Ambulance Response: How Often Are Potentially Life-Saving Interventions Performed?”](#) was published in the July 2020 edition of *Prehospital Emergency Care*. The authors had similar conclusions: “In this large national dataset, RLS responses were very common (86 percent) yet potentially life-saving interventions were infrequent (6.9 percent). These data suggest a methodology to help EMS leaders craft targeted RLS response strategies.”

“The science is clear,” Taigman, one of the authors, said. “Patients only benefit from L&S in a small class of cases. In fact, the evidence shows that a significant number of patients avoid using 9-1-1 because they are adverse to the attention L&S will bring. We need a shift in policy, attitudes and culture. The results from the Collaborative will show us how.”

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### **About NEMSQA and the L&S Collaborative**

[The National EMS Quality Alliance](#), hosted by the American College of Emergency Physicians (ACEP), was created as an independent organization in 2019 to operationalize best practices through the use of evidence-based performance measures. It continued the work that started with the National EMS Compass Initiative. Its members include national EMS organizations, federal partners and corporate partners. NEMSQA is excited to join with experts and quality leaders in EMS to implement meaningful change through the Lights and Siren Collaborative.

In addition to Dr. Redlener, Dr. Grover and Mike Taigman, the Lights and Siren Collaborative team includes a host of experts including Jeff Jarvis, MD, Remle Crow, PhD, Rick Ferron, Bryan

Wilson, MD, Jon Krohmer, MD, Jeff Clawson, MD, Doug Kupas, MD, Brooke Burton, Jeff Goodloe, MD, and Sheree Murphy, NEMSQA's Executive Director. The 50 participating agencies represent every size and type of EMS agencies. Their goal is to provide a pathway for all agencies to only use L&S when medically indicated. They hope to share the lessons learned and demonstrate meaningful change as the organizations address local and systemic challenges. Although quality improvement is a continuous process, the collaborative plans to be actively engaged with partners through 2022. There will be a special update on the L&S Collaborative at the upcoming [Pinnacle EMS Leadership Forum](#) on July 28.

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