

Table 2. Illustrative quotations from EMS professionals regarding their attitudes about and experiences with responding to emergencies at the homes of CYSHCN.

<i>Assets</i>	<i>Challenges</i>
<ul style="list-style-type: none"> • “Knowing the layout of the home, equipment there, and what was needed to be transported and what could remain behind. The Pt’s. family supplied us with this information, which we had with us when responding to that residence.” • “Get down to their level, height, voice and show you care. Try to develop a good relationship in a subject...Be supportive and put on a happy face and do not lie, but be honest about what you are doing to help them.” • “I tend to give more credibility to what the parents or caregivers are telling me, as they are generally well versed in the patient’s care.” • “I have a great sensitivity to this because I have two special needs children. I always try to approach these children with a little ‘extra’ something because it seems like they may need to have extra steps taken to be comfortable with strangers providing care.” 	<ul style="list-style-type: none"> • “I become more anxious about the call. Concerned if I will know how to meet the child's special needs.” • “It is hard to judge what is wrong with them if they can't speak to you.” • “We do not know their baseline and therefore, it can be hard to complete an assessment or prepare treatment.” • “There are so many diseases that we may respond to that it is impossible for EMS to know every detail. Families frequently get frustrated that we are not specialists or have access to specialty resources like an emergency department has.” • “Extrication of patients who require specialized medical equipment.”