

Pediatric Emergency Care Coordinators in Emergency Medical Services

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EMS responses for pediatric patients represent thirteen percent of total EMS responses in the United States, but because call volume is highly variable across regions and across agencies, nearly 40% of all EMS agencies in the United States see fewer than thirteen pediatric patients per year on average.^{1,2} With EMS providers having limited pediatric focused education and infrequent encounters with children, particularly with the critically ill, there are gaps in patient care, patient safety, and clinical outcomes.^{3,4}

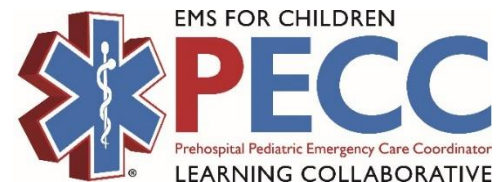
To help address these gaps, the Institute of Medicine (IOM) released *Emergency Care for Children: Growing Pains* which specifically recommends that EMS agencies designate a pediatric emergency coordinator to ensure that training and guidelines are available to field providers to maintain competence in the emergent

care of children.⁵ This role is now commonly referred to as a pediatric emergency care coordinator (PECC). The IOM report suggests the individual(s) filling this role would serve as a resource to provide oversight to the care of children, to promote the integration of pediatric components into daily service delivery, as well as local and regional disaster planning, and to promote pediatric education throughout their EMS agency.⁵

Acting on the recommendations from the IOM report, the Health Resources and Services Administration's (HRSA) Emergency Medical Services for Children (EMSC) program has set as a performance measure for the EMSC State

Partnership Program that 90% of all EMS agencies have a PECC by 2026. Based on responses from the 2017-2018 EMSC Program Survey, only 22.9% of EMS agencies currently have a PECC.

As such, the EMSC program is currently engaged in a national collaborative to increase the number of prehospital PECCs across 9 states, thus new strategies for identifying, expanding the number of, and training prehospital PECCs are being discovered. Resources developed from this quality improvement collaborative will be made available to other states and territories to help them understand how best to help EMS agencies adopt these interventions according to their needs. For more information, [click here](#).



References

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