

TITLE: Pediatric Emergency Care Coordination in EMS Agencies: Findings of a Multistate Learning Collaborative.

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Introduction: In 2017, the Health Resources and Services Administration's Emergency Medical Services for Children (EMSC) Program implemented a new performance measure aimed at increasing the proportion of emergency medical service (EMS) agencies who have a pediatric emergency care coordinator (PECC) to 90% within ten years. In response, the PECC Learning Collaborative (PECCLC) was developed to identify best practices to achieve this goal.

Objective: The objective of this study is to report on the structure and outcomes of the PECCLC conducted with participating states.

Methods: This study used quantitative and qualitative methods to evaluate outcomes from the PECCLC. Participating state representatives engaged in a six-month collaborative which included monthly meetings with subject matter experts and support staff, concluding with a two-day in-person meeting. Outcomes included the number of PECCs recruited and barriers and enablers to PECC recruitment. Additional outcomes included identification of best practices to support PECCs and common themes around the PECC role. Outcomes were captured by self-report from state representatives and longitudinal qualitative interviews conducted with representative PECCs at six and 18 months after conclusion of the PECCLC.

Results: Over the six-month period PECCLC states recruited a total of 341 PECCs (92% of goal) with continued recruitment of a total of 525 (142% of the goal) over the ensuing months. Feedback from state representatives and PECCs revealed the following barriers: competition from other EMS responsibilities, budgetary constraints, lack of incentive for agencies to create the position, and lack of requirement for establishing the role. Enablers identified included having an EMS agency recognition program that includes the PECC role, train-the-trainer programs, and inclusion of the PECC role in agency licensure requirements. Longitudinal interviews with PECCs identified that the most common activity associated with their role was pediatric-specific education and agency-level support was the most important need for PECC success.

Conclusion: Over the six-month Learning Collaborative, nine states were successful in recruiting a substantial number of PECCs. Financial and time constraints were significant barriers to statewide PECC recruitment, yet these can be potentially addressed by EMS agency recognition programs.

Figure 1. Number of PECCs Recruited

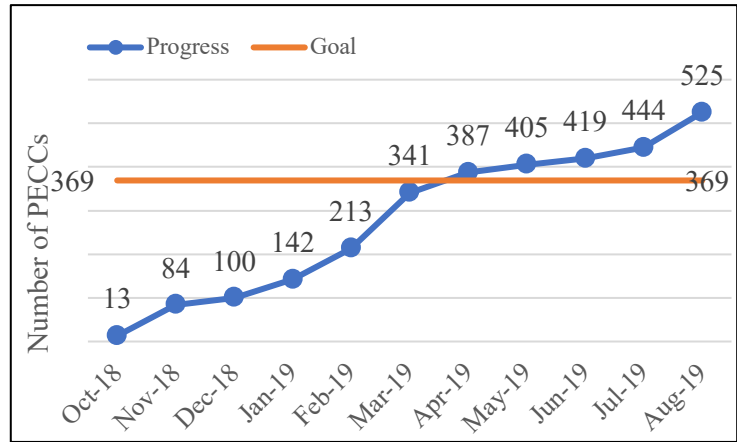


Table 1: Qualitative Outcomes

Themes for PECC role	Quotation
Involvement in quality assurance/patient safety	“Like I said, case review is one of my biggest things. I really look at what the call was versus what the protocol is [...] Then I turned that into a training that's coming up. We utilize that exact scenario to train everybody on how we treated that patient.”
Involvement in injury prevention/community outreach	“We also do a lot of community outreach, safety, [...] injury prevention programs, anything that we can to help make sure the kids in our community are served.”
Role as a pediatric champion	“It helps to have the certifications and to have the higher education.”
Involvement in pediatric education and resources	“Two primary advantages. The first one is just awareness of the resources out there for pediatric training. Before being notified of this program, we were on our own to do our own pediatric training and it's always challenging to get everybody motivated to do individual PEDS training because we see so few true PEDS emergencies. The second resource that has been useful are these trainings [...] all I have to do is get our crews scheduled to line up to the webinar and then I don't have to put together curriculum.”
Involvement in pediatric equipment access that is organized for the end-user	“I approached my chief and I said, ‘Listen, we have a problem.’ First, our pediatric bags are just not up to par at all. It was a big orange bag with everything just shoved in it; old, expired stuff and nothing was organized appropriately. So, I was able to get him to order three because we had three rescues.”
A challenge is competing interests and time	“The big priority, the priority to our EMS training is to satisfy our National Registry requirements and there's a very small number of hours that are dedicated to pediatrics. To get all the other hours in, it's a challenge to work pediatrics into the mix.”
Need for additional support and funding	“I think having regional PECCs or state PECCs or somebody to go to for pediatric education, information, protocols, guidelines, is an important step that I think we're missing. [...] Unfortunately, where we're at right now, you have to have a lot of passion for pediatrics and wanting to improve the system for this to work, because it is an extra time requirement within our system the way it currently is set up. It's not going to be funded, it's not going to be, “Hey, take time off work to get this done.” It's going to be, get done what you can get done. In my opinion, the more people you can bring together, the less work every individual has to do.”