

The Pony Express

Improving Emergency Medical Care for Children All Across Texas

EMS for Children Mission Statement

To reduce child and youth morbidity and mortality caused by severe illness or trauma by providing the right care, at the right place, at the right time.



Welcome to the New Pony Express Newsletter

You will notice a new look to our newsletter as I continue to learn all of the features of the newsletter software that was introduced in our last edition. I hope you like it.

In this edition, we will look at how the EMS for Children Program is evolving at the national level with input from our EMS for Children State Partnership, Texas Advisory Committee members. We will also see how these changes impact us within the state. Texas Children's Hospital in Houston is featured in this edition as we continue with recognition of all of our children's hospitals in Texas.

If you have any feedback on our newsletter, or if there are any stories that you would like to see, please send them to Sam Vance, Program Manager, EMSC State Partnership, Texas at: Samuel.Vance@bcm.edu

Find us on Facebook and Twitter!



Upcoming Events

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| May 11-13 | Governor's EMS and Trauma Advisory Council: Wyndham Gardens Hotel, Austin, TX |
| May 11 | EMS for Children Advisory Committee Meeting : Wyndham Gardens Hotel, Austin, TX |
| May 18 | 14th Annual Circle of Survival Trauma Conference : Bayou City Event Center, Houston, TX |
| June 1-3 | Austin Trauma & Critical Care Conference : AT&T Executive Education Center, Austin, TX |
| June 17-18 | 12th Annual Texas Parent to Parent Conference : Embassy Suites, San Marcos, TX |

Check out the EMSC State Partnership website at:
www.bcm.edu/pediatrics/emsc

To remove your name from our mailing list, please [click here](#).

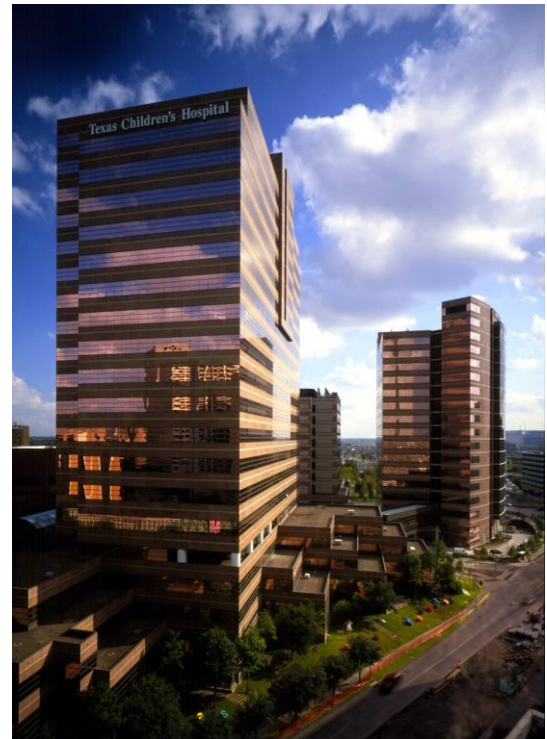


Texas Children's Hospital

This is part 3 of the ongoing series highlighting our children's hospitals in the State of Texas. Covenant Children's in Lubbock was featured in our last edition, and in this edition we are featuring Texas Children's Hospital in Houston

Texas Children's Hospital, a not-for-profit health care organization, is committed to creating a healthier future for children and women throughout the global community by leading in patient care, education and research. Consistently ranked as the best children's hospital in Texas, and among the top in the nation, Texas Children's has garnered widespread recognition for its expertise and breakthroughs in pediatric and women's health. The hospital includes the Jan and Dan Duncan Neurological Research Institute; the Feigin Center for pediatric research; Texas Children's Pavilion for Women, a comprehensive obstetrics/gynecology facility focusing on high-risk births; Texas Children's Hospital West Campus, a community hospital in suburban West Houston; and Texas Children's Hospital the Woodlands, a second community hospital planned to open in 2017. The organization also created the nation's first HMO for children,

has the largest pediatric primary care network in the country and a global health program that's channeling care to children and women all over the world. Texas Children's Hospital is affiliated with Baylor College of Medicine.



More information on the Voluntary Pediatric EMS Recognition Program can be found [here](#).

Voluntary Pediatric EMS Recognition Program has begun

This is a multi-phase recognition program for EMS agencies that wish to establish programs and standards to improve their capabilities to deliver care to pediatrics. This is an excellent opportunity for your agency to receive recognition within your community for going "*above and beyond*" state requirements.

On March 18, 2016, EMSC Program Manager Sam Vance kicked off the recognition program in Amarillo. The goal is to pilot the program in Amarillo for 3-6 months, then introduce it to a larger region for an additional 3-6 months. After that, it will be introduced throughout the rest of the state.

The Charlotte, Houston, and Milwaukee Research Node

Manish Shah, MD, MS

In September 2013, the EMS for Children program funded the first-ever multi-center, pediatric prehospital research node. The Charlotte, Houston, and Milwaukee Prehospital (CHaMP) Research Node is led by Principal Investigator, Brooke Lerner from the Medical College of Wisconsin, and is composed of its Charlotte site (Jon Studnek from Mecklenburg EMS and Stacy Reynolds from Carolinas Medical Center), Houston site (Manish Shah from Baylor College of Medicine/Texas Children's Hospital and Daniel Ostermayer from the Houston Fire Department and University of Texas-Houston), and its Milwaukee site (David Brousseau from Children's Hospital Wisconsin and Lorin Browne from Milwaukee EMS). Since its inception, CHaMP has actively been working on defining pediatric prehospital research priorities and conducting pilot studies on pain management, seizures, and recognition of the child requiring higher level of medical care. Noted below are two of the publications that have come out of the CHaMP Research Node in the past year, and others are in process.

- Browne LR, Shah MI, Studnek JR, Farrell BM, Mattrisch LM, Reynolds S, Ostermayer DG, Brousseau DC, Lerner EB. 2015 Pediatric Research Priorities in Prehospital Care. *Prehospital Emergency Care*. 2016; Early online publication ahead of print. PMID: 26808233
- Browne LR, Studnek JR, Shah MI, Brousseau DC, Guse CE, Lerner EB. Prehospital Opioid Administration in the Emergency Care of Injured Children. *Prehospital Emergency Care*. 2016; 20(1): 59-65. PMID: 26727339



CHaMP is part of the Pediatric Emergency Care Applied Research Network (PECARN), and in 2015 PECARN added six EMS affiliate sites from California (Sacramento Fire Department), Colorado (Aurora Fire Department), Maryland (Prince George's County EMS), New Mexico (State of New Mexico EMS), and Ohio (Cincinnati and Columbus Fire Departments). With the addition of these six sites, PECARN now has the infrastructure to conduct multi-center pediatric prehospital research across nine sites in the country.

CHaMP has addition information posted on its website (<http://www.mcw.edu/Emergency-Medicine/Research/CHaMP.htm>), including educational modules about conducting prehospital research, geared for prehospital providers. You can also find out more about CHaMP by visiting its site on Facebook (<https://www.facebook.com/champernc/?fref=nf>).



MEDIC
Medical Excellence. Compassionate Care.

What is ENA and the EMS for Children Program Up To?

Sally Snow BSN, RN, CPEN, FAEN

In April of 2015, a group of stakeholders were convened in Washington DC. That meeting was a remarkable opportunity to join an amazing group of people totally committed to moving pediatric readiness to the next stage.

The Emergency Nurses Association (ENA) was one of the key stakeholders involved from the beginning with the American Academy of Pediatrics (AAP), the American College of Emergency Physicians (ACEP) and the federal EMS for Children (EMSC) program. These four partners were asked to facilitate focus groups around organizational goals. ENA's focus group goal was to ESTABLISH STATE CHAMPION TEAMS FOR PEDIATRIC READINESS IN EVERY STATE!

So.... Why Teams of Champions? What we know about emergency departments being ready to care for kids is that having a designated nurse or physician who champions pediatric readiness improves the chances that a hospital ED will be PedsReady. The 2009 Joint Policy Statement: *Guidelines for Care of Children in the Emergency Department*¹ establishes the standard against which all ED's should measure their preparedness. A Guidelines Checklist makes it easy to see what is needed. Dr. Marianne Gausche Hill and colleagues demonstrated that no matter how much equipment or how many staff an ED has; it's the champion for pediatrics that has the most impact.² ENA has experience first-hand with seeing this work. The Pediatric Committee of the Emergency Nurses Association at the National level took on the responsibility of encouraging our pediatric committees at the state level to engage with their hospitals to improve participation in the 2013 NPRP



This effort proved to be a huge success. Specifically In 2013, participation in the NPRP in Louisiana hospitals was very low. As a member of the ENA Pediatric committee, I reached out to Louisiana ENA to ask for their help. Because of the efforts of ENA and ACEP members, Louisiana closed their assessment with 93% participation. 101 of 109 hospitals did the assessment and received their readiness score. This result illustrates the power of collaboration. I have many times encouraged ENA members by letting them know we need to improve our collaboration with the EMS for Children State Partnership managers. I've talked about how much the State Partnership managers need the assistance of emergency nurses to open doors and facilitate dialogue. ENA members are uniquely positioned to help bridge the gap and enable the EMS for Children managers to mobilize available resources to improve emergency preparedness in hospitals.

It is that type of collaboration that was the impetus for the State Champion Teams.

Our focus groups suggested a State Champion Pilot project to iron out the details and establish a model for success as a means to address gaps identified from the 2013 National Pediatric Readiness Assessment.

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The ENA Board of Directors was asked to support funding to bring the EMS for Children state managers and ENA representatives from five states together to develop a plan. The AAP and ACEP were asked to support their national representatives to join us for this pilot project kick-off meeting. The ENA hosted a meeting of the State Champion Pilot states on Nov. 12, 2015 in Des Plaines, Illinois.

Colorado, Illinois, Indiana, Louisiana and Pennsylvania were chosen to participate in the pilot. The meeting goals were to: 1) identify roles and responsibilities of the PedsReady State Champion Teams, 2) develop job descriptions for each member of the team, 3) develop a joint statement in support of the PedsReady State Champion Team concept, and 4) to identify measures of success to monitor improvement.

All of the EMS for Children state partnership representatives came prepared to share their NPRP assessment data and to talk about their barriers and challenges in participation. They shared ways to be successful in garnering participation and how they planned to organize their state champion teams. Many discussed the collaboration in their states that clearly supported the concept of state champion teams. Consensus was reached on the goals of the teams. They should be multidisciplinary and willing to serve as the state resource for their particular discipline to champion pediatric readiness. The core professional organizations should be represented and partners identified from various other stakeholder groups. EMS representatives from organizations like the National Association of EMT's, the National Association of State EMS Officials and the National Association of EMS Physicians could help.



Representatives from the office of rural health in each state and representatives from the American Association of Family Physicians, the American College of Surgeons and the Society of Trauma Nurses should be engaged to participate. State hospital associations can play a major role in many teams. And certainly not to be left out are Family Representatives in each state. The bottom line is.....States should identify where help is needed and engage those groups that can provide that help. There should be a willingness to identify state specific available resources to provide guidance to hospitals to improve their readiness scores based on the national guidelines and a commitment to encourage hospitals to participate in ongoing readiness assessment. Each state should develop and share their best practices and successful initiatives with the group on an ongoing basis. A steering committee has been established to monitor the progress of the PedsReady State Champion Pilot project and to provide support for the teams along the way.

At the end of the pilot project, lessons learned will be shared along with keys to success. Texas will surely be poised and ready to launch its State Champion Team when the time comes.

¹ Joint Policy Statement: Guidelines for Care of Children in the Emergency Department, American Academy of Pediatrics, American College of Emergency Physicians and Emergency Nurses Association Pediatric Committee published online Pediatrics, September 21, 2009; DOI: 10.1542/peds.2009-1807

² Gausche-Hill, M., Schmitz, C., & Lewis, R.J. (2009) Pediatric preparedness of United States emergency departments: A 2003 survey. *Pediatrics*, 120(6), 1229-1237

National Pediatric Readiness

Project Updates

Katherine Remick, MD, FAAP

Since the 2013 National Assessment and following publication of these results, the National Pediatric Readiness Project (NPRP) has taken off.^{1,2} Leaders from the American Academy of Pediatrics (AAP), the American College of Emergency Physicians (ACEP), the Emergency Nurses Association (ENA), and the federal Emergency Medical Services for Children program (EMS-C), have collaborated on next steps to improve our nation's ability to meet the emergency care needs of children. With a change in the overall approach of the EMS-C program as evidenced by the anticipated Emergency Innovation and Improvement Center, the common theme is quality improvement.

The ENA has developed a State Champion Team model currently being piloted in five states: Colorado, Illinois, Indiana, Louisiana, and Pennsylvania. The goal of these teams is to address gaps in pediatric readiness at the state level. With appointed representatives from AAP, ACEP, ENA, and the EMSC State Program Manager, these teams will provide outreach and engage communities in pediatric readiness efforts as well as map all acute care hospitals in their state delineated by size, type and location in order to better identify the differing needs and resources across their state.

The ACEP is working to identify a pediatric champion in every state. In addition the Pediatric Committee is focused on identifying pediatric metrics that can be targeted by ED physicians across the country. The ultimate goal is to bolster community EDs to meet the needs of children in a given region.

The AAP has developed a NPRP Special Interest Group out of the educational arm of the Academy. This group is developing a collaborative to promote the implementation of pediatric-specific quality improvement (QI) processes in every ED.

To this end, QI educational platforms are being developed for local physician and nurse leaders across the country to include in-person, on-line, and webinar series.

Finally, the federal EMS-C has implemented a QI collaborative to increase the number of states that have developed a plan to recognize EDs capable of stabilizing and managing pediatric medical emergencies. Twelve states were selected to participate in this collaborative: Connecticut, District of Columbia, Florida, Kansas, Kentucky, Michigan, New Mexico, New York, Oklahoma, Pennsylvania, South Carolina, and Texas. This collaborative will continue over an 18-month period with the goal of having at least one facility recognized in each state by September 2017.

In addition to the work above, the Pediatric Readiness Guidelines are undergoing revisions by leaders from each of the previously mentioned organizations. The final version is anticipated in 2017. Prehospital pediatric readiness guidelines are also being developed with the support of the National Association of EMS Physicians, the National Association of Emergency Medical Technicians, and the National Association State of EMS Officials. Other national stakeholder groups have also voiced support and/or interest in the pediatric readiness initiative. The Joint Commission is considering adding pediatric readiness metrics to the ED verification process. The American Hospital Association has invited national leaders, Elizabeth Edgerton, MD, MPH (HRSA) and Joseph Wright, MD, MPH to speak on NPRP activities. Last, the American Academy of Family Physicians is beginning to work with the other national organizations to garner the support of leaders in community EDs.

¹ Gausche-Hill M, Ely M, Schmul P, et al. A National Assessment of Pediatric Readiness of Emergency Departments. *JAMA Pediatr.* 2015; 169(6):527-534

² Remick K, Kaji A, Olson L, et al. Pediatric Readiness and Facility Verification. *Annals of Emergency Medicine.* August 29, 2015