

Caring for Children in Emergencies: The EMSC Program

The Emergency Medical Services for Children (EMSC) program is the only federal program dedicated to improving the emergency care continuum for children.

In an emergency, children have unique needs.

- Emergencies involving children can occur anytime, anywhere. There are more than 30 million emergency department (ED) visits by children each year, accounting for approximately 25% of all ED visits.
- Children experiencing a medical emergency should have access to high-quality care that meets their distinct needs. In fact, taking steps to prepare for children's unique needs in EDs is associated with 60-70% fewer deaths.
- The EMSC program is designed to ensure that all children and adolescents—no matter where they live, attend school, or travel—receive appropriate emergency care.

EMSC improves the quality of emergency care for children by:

SUPPORTING STATES AND TERRITORIES

All states and territories receive a state partnership grant to help them expand and improve their capacity to reduce and respond to pediatric emergencies.

CONDUCTING RESEARCH

The Pediatric Emergency Care Applied Research Network (PECARN) is the first and only federally-funded network for research in pediatric emergency medicine in the US. Serving approximately 1.3 million pediatric patients, this network conducts rigorous institutional research into the prevention and management of acute illness and injuries in children across the emergency medicine care continuum.

IMPROVING HEALTH OUTCOMES

EMSC Targeted Issues (TI) Grants aim to connect improvements in pediatric emergency care capacity to improved pediatric emergency health outcomes. TI Grants are studying the impact of pediatric emergency care coordinators (PECCs) on pre-hospital outcomes as well as outcomes in emergency departments after adoption of standardized guidelines.

Because of EMSC...

- EDs and pre-hospital emergency medical services (EMS) personnel have more appropriate medication, equipment, training, and systems in place to treat children.
- The majority (90%) of EMS agencies in the US have consistent availability to online medical direction when treating a pediatric patient and 85% have offline medical direction that includes pediatric-inclusive protocols.
- Most hospitals have guidelines and agreements in place to ensure the safe and effective transfer of children from one hospital to another as necessary.
- EDs are better able to manage care for infants less than 2 months old who present with fevers, more is known about the safety of fluid hydration for children with diabetic ketoacidosis, and children are exposed to less radiation as a result of standards for appropriate use of CT scans for children with head trauma.
- The EMSC Innovation and Improvement Center (EIIC) is helping optimize outcomes for children across the emergency care continuum by leveraging quality improvement science and multidisciplinary, multisystem collaboration.
- The National Pediatric Readiness Project has empowered EDs to improve their capability to provide high-quality care for children.

Reauthorize the EMSC Program

AAP urges Congress to pass the **Emergency Medical Services for Children Program Reauthorization Act of 2024** (H.R. 6960/S. 3765), a clean, 5-year reauthorization of the program.