



Re: Pediatric Readiness and the Regionalization of Pediatric Care

The Montana Emergency Medical Services for Children (EMSC) Program conducted a Pediatric Readiness Assessment in 2013 with Montana's hospitals. The response rate was an outstanding 86.7%, with 52 out of 60 hospitals responding. The bad news is we scored an average of 58%. Hospitals needed a score of 80% or higher to be considered Pediatric Ready (or ready, willing, and able to care for the pediatric patient.)

Pediatric emergent care is a great need in Montana. Pediatric volume maybe low, but the severity and need when it arises, is high priority. Child Ready MT is a State Partnership Regionalization of Care Grant (SPROC) funded by the Federal Health Resource and Services Administration (HRSA.) Montana is one of 6 states in the nation to be awarded this grant. This grant is a collaborative with the Montana Department of Public Health and Human Services, Emergency Medical Services and Trauma Systems, Emergency Medical Services for Children (EMSC) Program and St. Vincent Healthcare.

Mission: The mission of Montana's Child Ready project is to implement a performance driven system of healthcare for pediatrics in Montana ensuring that children, no matter where they live, have access to the *right care at the right time with the right resources.*

Vision: Through analysis of existing services, partnership among key collaborators and adoption of cooperative comprehensive practices, *Child Ready Montana and the MT EMSC* will implement a replicable regionalized system of healthcare for pediatrics in Montana.

Strategic Priorities

- **Collaboration:** Facilitate collaborative activities to ensure all stakeholders and populations of focus are engaged in the MT EMSC's Child Ready Montana project.
- **Assess existing care services** and identify gaps and challenges to high performance healthcare for pediatric patients.
- **Examine capabilities of each component** of a pediatric system of care and implement activities to optimize the performance of each component.
- **Develop and implement processes** to manage and treat acutely ill and severely injured children.
- **Data & Evaluation:** Facilitate access to and retrieval of data that supports performance driven pediatric care.
- **Sustainability:** Establish and solidify the MT EMSC's Child Ready Montana program.

Pediatric Readiness Visits:

Assessments of most critical access facilities have been completed. Evaluations of pediatric readiness included reviews of procedures, equipment, cultural barriers, and certifications of staff. These visits included a mock code pediatric simulation interaction with a Pediatric Intensivist via Telehealth. Hospital personnel and local EMS providers were encouraged to attend.

Findings from the regions includes the following:

- Most are Telehealth equipped and ready for primary care but not used in urgent or emergent situations.
- Need standard pediatric specific transport protocols both guidelines and agreements.
- Most do not have crisis debriefings.
- Most lack cultural sensitivity and awareness education.
- Educational opportunities and resources are often limited.
- Pediatric specific policies including child abuse and neglect and death of a child in the ED are needed.

Now that the Critical Access facilities have been reached, we will be moving forward on collaborating and setting up **Regional Councils** to ensure hospitals and children's needs are both being met in regards to emergent pediatric care.

The Regional Councils will schedule two meetings annually and advise the Montana EMSC/Child Ready MT Advisory Committee on pediatric issues. The issues will include education, training, and policy.

What we hope to accomplish:

Each Regional Council will be comprised of Providers, Nurses, Midlevel Providers, EMS, and clinical support staff. We recognize that each region has both similarities and differences.

We are working towards a state wide goal of standards of care for pediatrics to help ensure the right care, in the right place, at the right time with the right resources no matter where the child lives.

The MT EMSC and Child Ready MT will be scheduling Pediatric Facility Recognition Site visits with Montana hospitals in the near future. Assessments will be conducted using the Montana Pediatric Facility Recognition Criteria. The new Montana Pediatric Facility Recognition Criteria follow the *Guidelines for Care of Children in the Emergency Department* endorsed by the American Academy of Pediatrics (AAP), the American College of Emergency Physicians (ACEP), and the Emergency Nurses Association (ENA). The **Montana Chapter of the American Academy of Pediatrics** has given their endorsement as well!

Pediatric Facility Recognition Informational Packets will be distributed to all Montana hospitals in the near future.

We look forward to working with you. For further information or questions, please contact Robin Suzor, EMSC Program Manager at (406) 444-0901 or rsuzor@mt.gov and/or Kassie Runsabove at (406) 238-6216 or Kassie.Runsabove@sclhs.net.

