



Join MEDIC's *Pediatric Readiness Pilot Program* in partnership with MI EMSC



WHAT?

This pilot program is a strategic initiative sponsored by the [Michigan Emergency Department Improvement Collaborative \(MEDIC\)](#), in collaboration with Michigan [Emergency Medical Services for Children \(EMSC\)](#). The aim is to ensure that all EDs are equipped with the essential resources & are sufficiently prepared to deliver high-quality emergency care to children, ultimately elevating the standard of pediatric care in emergency departments (EDs) across Michigan.

WHY?

Research shows that high pediatric readiness in EDs leads to improved outcomes including lower morbidity & mortality in sick & injured children, yet many EDs are not prepared to meet the unique needs of pediatric patients.

High pediatric readiness in EDs is associated with:

76%

lower mortality rate in ill children^{1,2}

60%

lower mortality rate in injured children²

AT LEAST 1,400

children's lives saved across the US each year²

1. "Emergency Department Pediatric Readiness and Mortality in Critically Ill Children" Pediatrics, 2019, Ames et al.

2. "Emergency Department Pediatric Readiness and Short-term and Long-term Mortality Among Children Receiving Emergency Care" JAMA Network Open, 2023, Newgard et al.

OBJECTIVES

Assessment: Evaluate current pediatric readiness scores utilizing the [National Pediatric Readiness Project \(NPRP\) survey tool](#) to identify gaps in pediatric emergency care readiness

Quality Improvement: Develop & implement initiatives specific to participating EDs to improve pediatric readiness scores

Participating Site Support: Create a network for ongoing collaboration & sharing of best practices through support from MEDIC & EMSC

Process Evaluation & Outcomes: Measure post-implementation pediatric readiness scores with the goal of improved quality of pediatric emergency care & patient outcomes

KEY BENEFITS

- ↑ confidence of healthcare professionals in delivering pediatric care
- Enhanced reputation of participating sites as leaders in pediatric emergency preparedness
- Support requirements for American College of Surgeons (ACS) verification for trauma centers

SITE EXPECTATIONS

1. Identify key pediatric readiness contact(s) April-June '24
2. Complete baseline NPRP Pediatric Readiness Survey with support from MEDIC May-Aug '24
3. Implement QI initiatives targeting to identified gaps in pediatric care based on survey results Aug '24-Jan '25
4. Complete follow-up Pediatric Readiness Survey Feb-April '25

Contact **Catie Guarnaccia**,
szedlaca@med.umich.edu for
 more information