

South Carolina

Pediatric Ready EMS

Recognition Guidebook



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INTRODUCTION

The South Carolina EMS for Children (SCEMSC) program is pleased to offer a voluntary Pediatric Ready EMS Recognition program. This four-level system will recognize Basic Life Support (BLS) and Advanced Life Support (ALS) EMS and non-transport agencies who have demonstrated a commitment to excellence in pediatric emergency care and better healthcare outcomes for pediatric patients. The four-year recognition showcases agencies who go above and beyond by providing the best care for their pediatric patients.

If your agency is interested in applying for recognition, please review the following guidebook. Agencies who are awarded recognition will receive a certificate for display and decals for your trucks. The guidebook will be reviewed annually with the most recent version available on the SCEMSC website.

Participation in this program is completely voluntary and will not affect your agency license.

Thank you to the members of the working group who created this program and to the Kentucky EMS for Children Program for their guidance and support.

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APPLICATION AND REVIEW PROCESS

Application Process

The Pediatric Ready EMS application forms can be found on the SCEMSC website or requested from the EMS for Children program coordinator.

Required Application Documents:

- SCEMSC Pediatric Ready EMS Recognition Application
- Attestation and Compliance Reporting Form
- Pediatric Emergency Care Coordinator (PECC) Designation Form

Review Process

Once applications are complete, submit documents to the EMS for Children program coordinator via email. When applications are verified to be complete, the applicant will be contact by the SCEMSC program coordinator and their regional DPH EMS inspector to schedule a visit to verify your agency meeting program requirements.

Verification consists of an inspection of at least two (2) front line vehicles completed by the regional DPH EMS inspector and an interview with the SCEMSC program coordinator.

It is suggested, but not required, to provide a binder or folder complete with documentation to support your agency meeting the recognition program criteria.

Upon successful submission and verification, all documentation will be presented to the EMSC Advisory Committee at the following quarterly meeting (January, April, July, October).

Award of Recognition

Agencies who successfully complete the recognition process will receive a certificate and decals in the mail. Their agency name will also be listed as Pediatric Ready on the SCEMSC website. The recognition will be valid for four years from the certificate date.

Renewal

The renewal process reflects the same as the initial application and review process. At the end of the four year recognition cycle, the agency may apply for renewal by providing an updated application and completing the review process again.



Peds Ready EMS Recognition Criteria

Pediatric Emergency Care Coordinator (PECC)	BLS	ALS	EMR BLS	EMR ALS
Agencies are required to have a designated PECC who serves as a liaison between the agency and the SCEMC program.	X	X	X	X
Ensure that the pediatric perspective is included in the development of EMS protocols	X	X	X	X
Ensure that fellow EMS providers follow pediatric clinical practice guidelines	X	X	X	X
Promote pediatric continuing education opportunities	X	X	X	X
Oversee pediatric process improvement	X	X	X	X
Ensure the availability of pediatric medications, equipment, and supplies	X	X	X	X
Promote agency participation in pediatric prevention programs (See Appendix B)	X	X	X	X
Promote agency participation in pediatric research efforts	X	X	X	X
Liase with the emergency department pediatric emergency care coordinator	X	X	X	X
Promote family-centered care at the agency EMS	X	X	X	X
Paramedic certification		X		X
Hold an instructor certification in one of the following: PEPP, PALS, Handtevy	X	X	X	X
Equipment	BLS	ALS	EMR BLS	EMR ALS
Epi for anaphylaxis	X	X	X	X
Albuterol	X	X	X	X
Narcan	X	X	X	X
Thermometers	X	X	X	X
Active warming device for newborns and infants	X	X	X	X
Commercially appropriate neonate transport device for <5 lbs.	X	X	X	X
Commercially appropriate pediatric transport device for 5-99 lbs.	X	X	X	X
Infant AED pads	X	X	X	X
Color Coded weight and/or length base response system with the most current version (Broselow, Handtevy, etc.)	X	X	X	X
Three way Stop Cock		X		X
Endotracheal Intubation equipment if available (Video preferred)		X		X
Safe Transport	BLS	ALS	EMR BLS	EMR ALS
In addition to the equipment list in Regulation 60-7, agencies must have a policy that outlines safe transport of all patients regardless of age or weight. Policy should include a commercially appropriate pediatric transport device designed to transport children between 5-99 lbs. and a commercially appropriate neonatal transport device for children <5lbs. readily available for responding units. (See Appendix A for resources on pediatric safe transport policies and transport equipment)	X	X		
Non-transport agencies should have a guideline that outlines having commercially appropriate pediatric transport devices designed to transport children between 5-99 lbs. and commercially appropriate neonatal transport devices for children <5 lbs. The guideline should include how to use the equipment, how to safely transfer the care of pediatric and neonate patients to transporting units, and the exchange of transport devices when necessary.			X	X
Disaster Preparedness	BLS	ALS	EMR BLS	EMR ALS
Participate in bi-annual disaster/MCI exeries that include children	X	X	X	X
Utilize a prehospital triage algorithm that includes children	X	X	X	X

SCEMSC Assessments	BLS	ALS	EMR BLS	EMR ALS
SCEMSC is required to collect data from the state's EMS agencies to determine progress. Agencies participating in Pediatric Ready EMS must complete the assessment.	X	X	X	X
Education	BLS	ALS	EMR BLS	EMR ALS
In addition to education requirements in Regulation 60-7 and the National Registry of EMTs, agencies must meet additional pediatric education and skills verifications	X	X	X	X
100% of agency credentialed providers must have a certification for a current nationally accepted pediatric course (PALS, Handtevy, Pre-hospital Pediatric Provider, PEPP, and EPC)	X	X	X	X
Additional 2 hours of annual pediatric training that includes skills verification	X		X	
Additional 6 hours of annual pediatric training that includes skills verification		X		X
Quality Assurance	BLS	ALS	EMR BLS	EMR ALS
100% review of pediatric cardiac arrest, stroke, advanced airway interventions, IO insertion or attempts, and trauma alert patients	X	X	X	X
Medical Control physician oversight on pediatric review process	X	X	X	X
Agency must have representation at their applicable Regional Trauma Advisory Council (RTAC)	X	X	X	X
Community Outreach	BLS	ALS	EMR BLS	EMR ALS
Agencies are required to regularly participate in outreach initiatives within their community, at least one outreach activity annually. (See Appendix B for examples)	X	X	X	X

Appendix A

Pediatric Transport Products for
Ground Ambulances
(June 2022, NASEMSO Safe
Transport Committee)

[CLICK HERE](#)

Safe Transport of Children by EMS:
Interim Guidance
(March 2017, NASEMSO)

[CLICK HERE](#)

Working Group Best Practice
Recommendation for the Safe
Transportation of Children in
Emergency Ground Ambulances
(September 2012, NHTSA)

[CLICK HERE](#)



Appendix B

Community Outreach Examples



Hosting a community safety day at station



Hosting a community CPR class, including child/infant curriculum components



Providing a presentation to local elementary school students on EMS



Conduct an injury prevention talk at the local swimming pool or local public library



Holding a bike safety rodeo



Community Health Fairs



Hosting events with your local hospital



Hosting events with community-based organizations or local county public health departments



Hosting Pediatric Disaster Trainings or drills

