

# South Carolina Pediatric Ready EMS Recognition Guidebook



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## Introduction

The South Carolina EMS for Children (SCEMSC) program is pleased to have a voluntary Pediatric Ready EMS Recognition program. This two-level system will recognize Basic Life Support (BLS) and Advanced Life Support (ALS) agencies who have demonstrated a commitment to excellence in pediatric emergency care and better healthcare outcomes for pediatric patients. The 4-year recognition showcases agencies who go above and beyond by providing the best care for pediatric patients.

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

Again, this is voluntary recognition program and your decision to participate will not affect your agency license.

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

Please contact Sable Land, SC EMSC Program Coordinator at 803-545-4486 or [landsb@dhec.sc.gov](mailto:landsb@dhec.sc.gov) with any questions or concerns.

Thank you for all you do!

# Application and Review Process

## Application

The Pediatric Ready EMS application and attestation forms can be found on the SC EMS for Children [website](#) or requested from the EMS for Children Program Coordinator at [landsb@dhec.sc.gov](mailto:landsb@dhec.sc.gov) or 803-545-4486.

### **Documents to submit:**

Application

Attestation and Compliance Form

PECC Attestation Form

## SCEMSC Program Review

Once completed, the application and attestation forms should be sent to the SCEMSC Coordinator at the information above. Only complete applications and signed attestation forms will be accepted. If further information is needed, the agency will be contacted by the SCEMSC Coordinator. The applying agency will be contacted to schedule a visit with their DHEC EMS inspector to verify equipment.

Upon successful submission of the application and equipment check verification, all documentation will be presented to the South Carolina EMSC Advisory Committee at the following quarterly meeting (January, April, July, October). The committee will review applications and supporting documentation and determine if the agency meets the recognition requirements.

## Award of Recognition

Agencies who successfully complete the recognition process will receive a certificate and decals. Their agency name will also be listed as Pediatric Ready on the SCEMSC website. Agencies are encouraged to promote their recognition in their community. Agencies will be asked to attend the SCEMSC Advisory meeting to obtain their certificate and decals. The recognition will be valid for four (4) years from that date.

## Renewal

At the end of the 4-year recognition cycle, the agency may apply for renewal by completing the application and review process.

# 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	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	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
Infant AED pads	X	X	X	X
Pediatric cervical collars (adjustable or minimum of two sizes)	X	X	X	X
Commercially appropriate pediatric transport device for 5-99 lbs.	X	X		

Color Coded weight and/or length base response system (Broselow, Handtevy, etc.)		X		X
Three way Stop Cock		X		X
Video laryngoscope with pediatric component		X		X
Safe Transport	BLS	ALS	EMR BLS	EMR ALS
In addition to the equipment list in Regulation 61-7, 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. on every ambulance in service (See Appendix A for resources on pediatric safe transport policies and transport equipment)	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. The survey is once a year and takes about 10-15 minutes to complete. 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 61-7 and the National Registry of EMTs, agencies must meet additional pediatric education and skills verifications	X	X	X	X
100% of ALS agency credentialed providers must have a certification for a current nationally accepted advanced pediatric course (PALS, Handtevy, Pre-hospital Pediatric Provider, PEPP, and EPC)		X		X
80% of agency credentialed providers must have a certification for a current nationally accepted basic pediatric course (PALS, Handtevy, Pre-hospital Pediatric Provider, PEPP, and EPC)	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
Agency must have representation at the 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
SUMMARY OF REQUIREMENTS	BLS	ALS	EMR BLS	EMR ALS
Designated Pediatric Emergency Care Coordinator (PECC)	X	X	X	X
Compliance with additional pediatric equipment	X	X	X	X
Policy for Safe Transport of pediatric patients	X	X		
Additional pediatric education (6 hours ALS, 2 hours BLS)	X	X	X	X
Quality Assurance	X	X	X	X
Community Outreach events	X	X	X	X

## **Appendix A**

### **Safe Transport Documents**

*Pediatric Transport Products for Ground Ambulances (August 2019, NASEMSO Safe Transport Committee)*  
<https://nasemsso.org/wp-content/uploads/Pediatric-Transport-Products-for-Ground-Ambulances-v2.1.pdf>

*Safe Transport of Children by EMS: Interim Guidance (March 2017, NASEMSO)*  
<https://nasemsso.org/wp-content/uploads/Safe-Transport-of-Children-by-EMS-InterimGuidance-08Mar2017-FINAL.pdf>

*Working Group Best Practice Recommendation for the Safe Transportation of Children in Emergency Ground Ambulances (September 2012, NHTSA)*  
<https://nasemsso.org/wp-content/uploads/NHTSA-Safe-Transportation-of-Children-in-Ambulances-2012.pdf>

## **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
- Conducting 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