

Emergency Medical Services for Children (EMSC) Program



Established by Congress in 1984, the Emergency Medical Services for Children (EMSC) Program is the only federal program that focuses specifically on improving the pediatric components of the emergency medical services (EMS) system. Just this year, 30 million children will visit the emergency department and emergencies involving children can occur anytime, anywhere. The EMSC program is designed to ensure that all children and adolescents – no matter where they live, attend school, or travel – receive appropriate care in a health emergency.

What Does EMSC Do?

Supports States and Territories

All states and territories have received state partnership grants to expand and improve their capacity to reduce and respond to pediatric emergencies. Success for this program is measured by the quality of care provided in the pre-hospital and hospital settings.

Drives Research

The Pediatric Emergency Care Applied Research Network (PECARN) PECARN is the first and only federally-funded network for research in pediatric emergency medicine in the United States. Serving approximately 1.1 million pediatric patients, this network conducts rigorous institutional research into the prevention and management of acute illness and injuries in children across the continuum of emergency medicine health care.

Translates Research into Practice

Targeted Issue (TI) grants support innovative, cross-cutting projects focused on improving outcomes across the continuum of pediatric emergency care.

Spurs Quality Improvement

The EMSC Innovation & Improvement Center (EIIIC), housed at Texas Children's Hospital (TCH) and Baylor College of Medicine (BCM) in Houston Texas, uses a systems integration framework to accelerate improvements in quality emergency care and outcomes for pediatric patients.

Assists Rural and Tribal Communities

State Partnership Regionalization of Care (SPROC) grants aim to develop systems of care models to improve pediatric emergency care capacity in rural and tribal communities.



EMSC Works for Children

- Emergency departments (EDs) and pre-hospital EMS personnel have more appropriate medication, equipment training, and systems in place to treat children. For example, doctors and nurses are better able to manage pediatric emergencies such as traumatic brain injuries, pediatric seizures, and bronchiolitis.
- The majority (90%) of EMS agencies in the US have consistent availability to online medical direction when treating a pediatric patient and 85% have off line medical direction that includes protocols inclusive of pediatric patients. In the hospital setting, almost two thirds (67%) of hospitals have interfacility transfer agreements and 50% have interfacility transfer guidelines that incorporate recommended pediatric components.
- Looking ahead, EMSC aims to ensure all EDs are ready to care for children through the implementation of the National Pediatric Readiness Project, a national quality improvement initiative to ensure EDs have the essential guidelines and resources in place.

What Congress Can Do

We ask Congress to provide \$24,506,000 in funding for the EMSC program in Fiscal Year 2019.

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