

January 11, 2024

The Honorable Buddy Carter
United States House of Representatives
2432 Rayburn House Office Building
Washington, DC 20515

The Honorable Kathy Castor
United States House of Representatives
2052 Rayburn House Office Building
Washington, DC 20515

The Honorable Dr John Joyce
United States House of Representatives
152 Cannon House Office Building
Washington, DC 20515

The Honorable Dr Kim Schrier
United States House of Representatives
1110 Longworth House Office Building
Washington, DC 20515

Dear Representatives Carter, Representative Castor, Representative Joyce, and Representative Schrier:

As organizations that care deeply about the health and safety of children, we offer our strong support for the *Emergency Medical Services for Children Program Reauthorization Act of 2024*. The EMSC program has made landmark improvements to the emergency care delivered to children all across the nation. As the only federal program dedicated to improving emergency care for children, EMSC has brought vital attention and resources to this important population.

Just this year, 30 million children will visit the emergency department, and emergencies involving children can occur anytime, anywhere.ⁱ Children have unique physiological, emotional, and developmental characteristics that require specialized emergency care. Research shows that taking steps to prepare for children's unique health needs in emergency departments is associated with 60-70% fewer deaths.ⁱⁱ The EMSC program is designed to improve emergency care for children and adolescents – no matter where they live, attend school, or travel.

Through EMSC, all states and territories have received state partnership grants to expand and improve their capacity to reduce and respond to emergencies. EMSC funding is used to equip hospitals and ambulances with the tools they need to treat pediatric emergencies, to provide pediatric training to paramedics and first responders, and to improve the systems that allow for efficient, effective pediatric emergency medical care. Additionally, EMSC funding has helped to improve pediatric capacity and transport of pediatric patients and address emerging issues such as pediatric emergency care readiness through the National Pediatric Readiness Project and pediatric emergency medical services in rural and remote areas.

Initiated in 2016, the EMSC Innovation and Improvement Center (EIIC) is working to accelerate improvements in the quality of care and outcomes for children who are in need of urgent or emergency care through an infrastructure that ensures routine, integrated coordination of quality improvement activities. The EIIC was invaluable during the surge in pediatric respiratory illnesses seen in late 2022 that strained healthcare facilities, staff, and resources across the U.S. EIIC created recommendations and resources to support the immediate response to the surge of pediatric patients and to guide planning and preparation for future surges.

EMSC has been successful in improving care for children. Emergency departments 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.

Your bill would reauthorize the EMSC program to continue its vital work for an additional five years. We thank you for your leadership in authoring this critical legislation for children and appreciate your long-standing commitment to the quality of the emergency care children receive. We look forward to working with you in support of enactment of this legislation.

Sincerely,

Academic Pediatric Association
American Academy of Pediatrics
American Ambulance Association
American College of Emergency Physicians
American College of Surgeons
American Pediatric Society
Association of Maternal & Child Health Programs
Association of Medical School Pediatric Department Chairs
Children's Hospital Association
Children's Hospital of Philadelphia
Emergency Nurses Association
First Focus Campaign for Children
March of Dimes
National Association of Emergency Medical Technicians (NAEMT)
National Association of Pediatric Nurse Practitioners
National Association of State EMS Officials
National League for Nursing
Nemours Children's Health
Pediatric Policy Council
Society for Pediatric Research
The National Alliance to Advance Adolescent Health
The Paramedic Foundation

ⁱ Newgard CD, Lin A, Malveau S, et al. Emergency Department Pediatric Readiness and Short-term and Long-term Mortality Among Children Receiving Emergency Care. *JAMA Netw Open*. 2023;6(1):e2250941.
doi:10.1001/jamanetworkopen.2022.50941

ⁱⁱ https://media.emscimprovement.center/documents/Pediatric_Readiness_Outcomes_-_2023_Q5q8cow.pdf