

LIASON REPORT

2026



EMSC
Emergency Medical
Services for Children

EMSC is the only federal program dedicated to improving emergency care for the 27 million children who need it each year.^{1,2}

EMSC AT A GLANCE

- **Federal home:** Health Resources and Services Administration Maternal and Child Health Bureau
- **Established:** 1985
- **Reauthorized:** December 2024
- **Budget:** ~\$24M/Year
- **Structure:** Four arms comprising 60+ grants across 57 states, territories, and jurisdictions
- **Scope:** 27 million children, 5,000+ emergency departments (EDs), and 15,000+ emergency medical service (EMS) agencies

The Problem

- Children have distinct physiological and development needs that require specialized care—for example, they have smaller airways, underdeveloped immune systems, and difficulty conveying symptoms.
- However, because pediatric emergencies are relatively infrequent, emergency systems are designed around adults. Most EDs see <10 children per day, while most EMS agencies receive <8 pediatric calls per month.^{3,4}
- The result: gaps in pediatric-specific coordination, protocols, equipment, and training across the country.

The Solution: Pediatric Readiness

Pediatric Readiness means an ED or EMS agency has put the right systems in place to provide safe, high-quality care for children. That includes having pediatric-specific protocols, appropriately sized equipment, regular pediatric training, and a dedicated champion (also known as a pediatric emergency care coordinator or PECC) to oversee it all. **This preparation doesn't happen automatically—it has to be built deliberately.**

Why It Matters: The Evidence

Research shows an ED score of at least 88 out of 100 points on Pediatric Readiness assessments is associated with:

76%

lower mortality risk
in ill children^{5,6}

60%

lower mortality risk
in injured children⁶

**If all EDs achieved high readiness:
2,100 children's lives
could be saved annually.⁷**

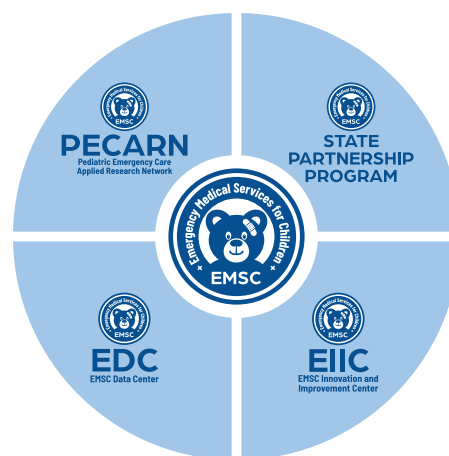
Parallel research in prehospital care is ongoing.

How EMSC Works: Four Arms

State Partnership Program

Funds all 57 states, territories, and jurisdictions — serving as the connective tissue between national initiatives and local emergency systems. These program drive implementation of 11 measures, including increasing the presence of pediatric champions, disaster plans that include children, and state-based Pediatric Readiness recognition programs.

Recent milestones: 21 states have launched verified ED Pediatric Readiness recognition programs and three have launched EMS recognition programs, honoring facilities that achieve key readiness criteria. See page 5 for more state successes.



Family Advisory Network

Part of the State Partnership Program, the Family Advisory Network includes family representatives from each state, territory, or jurisdiction. These individuals and their children have lived experience with the emergency care system and provide insight, guidance, and expertise that informs EMSC activities.

Pediatric Emergency Care Applied Research Network (PECARN)

Leverages a large network of 18 hospitals and nine EMS agencies to generate clinical evidence that directly changes practice through decision rules, screening tools, and treatment protocols.

Recent milestones: 40+ peer-reviewed papers published annually; recent work has reshaped cervical spine management (*Lancet*, 2024) and newborn fever care (*JAMA*, 2025). PECARN was referenced in the medical drama *The Pitt*—reflecting its reach into everyday clinical decision-making.

EMSC Innovation & Improvement Center

Offers quality improvement (QI) and education opportunities and coordinates dissemination across the EMSC Program; administers the program's flagship Pediatric Readiness projects.

Recent milestones: Released a nine-module ED PECC training series—the first of its kind; updated the Pediatric Readiness toolkit for EDs; launched a QI collaborative enrolling 180+ EDs.

EMSC Data Center

Collects, analyzes, reports data for all EMSC grantees, including PECARN researchers; serves as the data hub for the program's flagship projects.

Recent milestones: Consistently achieves 45–80% national survey response rates; supported the first-ever national assessment of EMS agencies; facilitated study enrollment and data collection for 150,000+ children.

The Link Between Emergency Readiness and Disaster Preparedness

EMSC's sister program, the Pediatric Pandemic Network (PPN), brings together 14 children's hospitals to improve the nation's ability to meet the needs of children during natural disasters and global health emergencies. The PPN works closely with the EMSC and three Administration for Strategic Preparedness and Response-funded Pediatric Disaster Centers of Excellence. The PPN, which is administered through the HRSA EMSC Branch, advances everyday Pediatric Readiness as the foundation for disaster response. Learn more at pedspandemicnetwork.org



Flagship Programs: NPRP & PPRP

Pediatric Readiness is the cornerstone of EMSC. Two initiatives—the National Pediatric Readiness Project (NPRP) for EDs and the Prehospital Pediatric Readiness Project (PPRP) for EMS and fire-rescue agencies—are systematically measuring and improving the nation's capacity to care for children in emergencies.

The Pediatric Readiness Project Model:

1. Assessment developed based on national guidelines
2. EDs and EMS agencies take the assessment and identify gaps and resource needs
3. Resources and QI opportunities are developed to address gaps
4. National results produce a nationwide "report card," drive further research, and inform future guideline updates

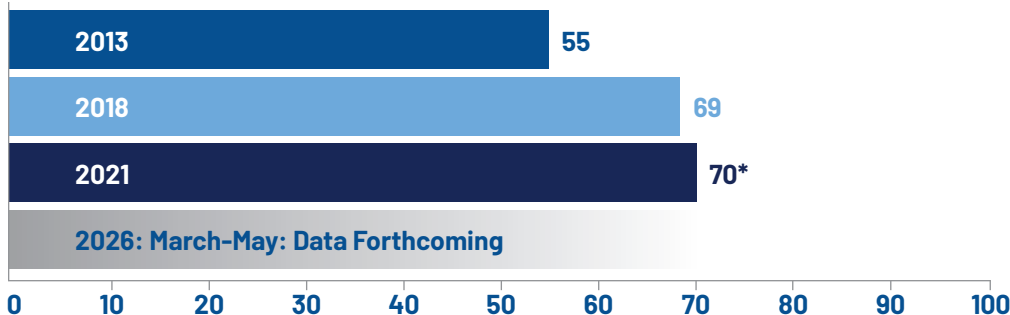
Cycle repeats

National Pediatric Readiness Project (NPRP) – Emergency Departments

Established in 2012, the NPRP works to ensure every U.S. ED has the infrastructure, protocols, equipment, and designated pediatric champions needed to provide effective emergency care to children. It is a multidisciplinary effort led by EMSC in collaboration with leading national organizations in pediatric emergency care.



NATIONAL MEDIAN ED SCORE



* The 2021 assessment was conducted during COVID-19, which strained EDs and made even incremental progress a meaningful achievement. In fact, EDs improved in every category of readiness except a heavily weighted one, which likely reflects widespread workforce shortages at the time.

Recent Milestones

- NPRP Assessment participation was integrated into the American College of Emergency Physicians ED Accreditation Program and American College of Surgeons trauma center verification standards, suggesting broad endorsement of Pediatric Readiness as a national standard of care.
- The Emergency Nurses Association adopted a resolution (95% in favor) calling for a designated pediatric champion (PECC) in every U.S. ED, a strong professional mandate aligned directly with NPRP goals.

NPRP in Practice: Voices from the Field



Geisinger Health System (Pennsylvania)

Geisinger serves rural and semi-rural communities that may be many hours from pediatric specialty care. By using the NPRP as a shared baseline, their team built a system-wide readiness infrastructure and now scores in the top quartile nationally. [Read more at https://bit.ly/PedsReadyGeisinger](https://bit.ly/PedsReadyGeisinger).

"I want every ED to be ready to take care of children, including my own."



Nemaha County Hospital (Nebraska)

A small critical access hospital has used EMSC's free clinical QI tools to give staff something rare in low-volume EDs: concrete, data-driven feedback on their pediatric care. In fact, they've contributed more than half of the state's total pediatric charts to the national database. [Read more at https://bit.ly/PedsReadyNemaha](https://bit.ly/PedsReadyNemaha).

"Our little hospital is making a real national impact."

National Prehospital Pediatric Readiness Project (NPRP) – EMS Agencies

The PPRP is the prehospital counterpart to the NPRP—focused on ensuring EMS agencies are equipped, trained, and prepared to care for children. The project was launched in 2019 with more than 20 partner organizations.



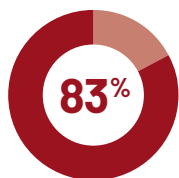
A First-Ever, Comprehensive Baseline

The first-ever, comprehensive national assessment of EMS pediatric capabilities was conducted in 2024—establishing a baseline readiness score of 66 out of 100 for agencies nationwide. Just as ED readiness started at 55 in 2013 and climbed to 70, we now have the starting line for EMS.

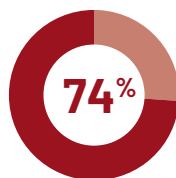


EMS and fire-rescue agencies participated in the PPRP national assessment—a landmark level of engagement.

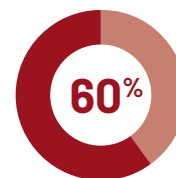
Key Findings



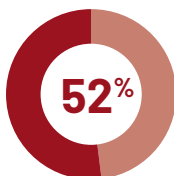
have all recommended pediatric equipment



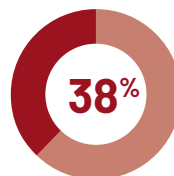
have a performance improvement plan that includes review of pediatric encounters



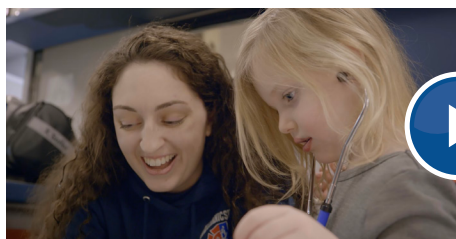
collect pediatric elements as part of their patient care data



do skills testing with pediatric equipment at least twice per year



of EMS agencies reported having a PECC



One Family's Story

In rural Iowa, a 2-year old's life was saved by a Pediatric Ready EMS agency—a story that illustrates what these numbers mean for real families. Video available at emscimprovement.center

State Snapshots

EMSC's 57 State Partnership Programs translate national Pediatric Readiness efforts into local realities, funding state-level infrastructure, driving adoption of standards, and connecting clinicians to evidence-based tools. The snapshots below reflect a sampling of recent state achievements.

Legislation & Policy

Utah



Passed legislation requiring EDs to designate a PECC and participate in the NPRP Assessment, among other criteria—

embedding Pediatric Readiness standards directly into state law and creating a sustainable foundation for improvement.

Trauma System Integration

Kentucky



Revised state trauma regulations to require the NPRP Assessment and improvement plans for Level IV trauma centers, and

updated the Kentucky Trauma Hospital Reference Manual to incorporate Pediatric Readiness standards throughout.

Texas



Adopted Pediatric Readiness criteria in state trauma verification standards—extending EMSC-driven benchmarks into

the requirements hospitals must meet to maintain trauma center designation across one of the nation's largest and most geographically diverse states.

Recognition Programs

Florida



Launched a statewide Prehospital Pediatric Readiness Recognition Program with a formal two-tier (Silver/Gold) framework for EMS agencies. The program received

national media coverage, in *EMS World*, positioning Florida as a model for states nationwide.

Ohio



Expanded participation in its Pediatric Readiness Facility Recognition Program through a new statewide webinar series, partnering with the Ohio Department of

Health and Hospital Preparedness Program (HPP) to guide EDs through the recognition pathway via regional HPP contacts—a distinctive cross-agency collaboration model.

Clinical Innovation

Maryland



Developed a first-of-its-kind statewide pediatric high-performance cardiopulmonary resuscitation (CPR)

protocol for EMS, adapting the adult "Pit Crew" resuscitation model for children with a custom pediatric technique. The program trained instructors in all 28 EMS jurisdictions and loaned CPR manikins statewide to enable regular drills, giving EMS clinicians hands-on practice for a critical skill.

Education & Training

Missouri



Built a statewide pediatric simulation training program in partnership with children's hospitals and the Pediatric

Pandemic Network, delivering structured, hands-on simulations and biennial assessments to rural and community EDs. Results are documented and fed back into each hospital's improvement plan, with participating facilities demonstrating measurable progress.



Midwest EMSC Coalition (Iowa, Kansas, Minnesota, Nebraska, North Dakota, South Dakota)

Six state programs joined forces to deliver 30+ hours of free pediatric continuing education annually to thousands of emergency care professionals across a largely rural, resource-limited region—maximizing reach by pooling EMSC State Partnership resources.

Prevention & Outreach

South Dakota



Launched the "Don't Thump Your Melon, Wear a Helmet" bike safety campaign, using creative community-based outreach to

reduce pediatric head injuries statewide—an example of EMSC State Partnership funding working to stop emergencies before they happen.

Federal Collaborations

How the EMSC Program and federal partners are collaborating to improve emergency care for children.

Administration for Strategic Preparedness and Response (ASPR)

Three ASPR-funded Pediatric Disaster Care Centers of Excellence (Western Regional Alliance, Region V, and Gulf 7) coordinate directly with EMSC and the Pediatric Pandemic Network on pediatric disaster preparedness.

National Highway Traffic Safety Administration (NHTSA)

EMSC has worked with NHTSA on the EMS Scope of Practice, National EMS Education Standards (with expanded pediatric content), and the first-ever pediatric dashboards that use National Emergency Medical Services Information System (NEMSIS) data—a landmark tool for tracking prehospital pediatric clinical care.

Indian Health Service (IHS)

EMSC collaborates with IHS on a joint PECC initiative supporting Tribal and IHS EDs, including a simulation training program co-facilitated by PECCs in partnership with academic medical centers, with 19 Tribal and IHS EDs enrolled thus far.

National Institutes of Health Eunice Kennedy Shriver National Institute of Child Health and Human Development (NICHD) Pediatric Trauma and Critical Illness Branch

The Pediatric Trauma and Critical Illness Branch support EMSC-aligned research and training; NICHD previously issued a notice of special interest for EMSC-related research.

Learn More

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EMSC is a proven federal investment with an extraordinary return: better outcomes for acutely ill and injured children across the United States. Learn more at emscimprovement.center.

For references, visit <https://bit.ly/LiaisonRef>.

The Health Resources and Services Administration (HRSA), Department of Health and Human Services (HHS) provided financial support for this and other communications works. The award totaled \$2.5M with 18% of this total used to support this and other communication works. The contents are those of the author. They may not reflect the policies of HRSA, HHS, or the U.S. Government. For more information, visit hrsa.gov. 260318 | 6/2/2026.