**Recommendation for Consideration**

Board Meeting Date: June 12, 2019

Subject: Update to Pediatric Voluntary Recognition Program - PECC

VTR#: 0619-01  Committee/Task Force: EMS for Children

☐ Recommended Goal  ☐ Recommended Policy Change  ☒ Other: Update to Current Program

**Recommendation:** The Department of Health should accept the following revision to the current Pediatric Voluntary Recognition Program (PVRP). This revision will designate of the Pediatric Emergency Care Coordinator (PECC) at the master and expert levels.

**Rationale [Background]:**

The role of a Pediatric Emergency Care Coordinator is not a defined job description or pre-determined set of responsibilities. The function is to support the preparedness and safe delivery of pediatric care.

*The Pediatric Emergency Care Coordinator:*

- Works in collaboration with the agency Medical Director.
- Is tasked with looking out for the needs of children.
- Is a Pediatric Champion; a Pediatric Advocate; a Content Expert; an EMSC contact person.

A PECC is a designated individual or group who coordinates pediatric emergency care and who need not be dedicated solely to this role; it can be an individual or group already in place who assumes this role as part of their existing duties. The individual or group may be a member of the EMS agency, or work at a community or regional level and serve more than one agency.

EMS systems vary greatly across the state as does the EMS model of a PECC. At the EMS agency level, a PECC can be an individual, dedicated to the role or taking on the role as additional duties. This is the simplest form of a PECC but in no way the only way to meet the needs of a PECC program. An EMS agency may institute a PECC team where more than one individual assumes different roles of the PECC in order to meet objectives and share workload. When a team model is utilized, there should be one individual who is identified as a contact person in representing the team’s activities for the EMS agency.

A PECC can be any level of provider however, a PECC should be at or above the specific service delivery level. For example, an EMT should not be overseeing an ALS service’s PECC responsibilities. When a model other than an individual PECC is utilized, representation within the model group should include an individual(s) who meets the qualifications of a PECC in whole.
The EMSC Committee considers the addition of the PECC designation appropriate for the master and expert levels. Both of these levels already have a person or persons who meet the description of a PECC, “a designated individual or group who coordinates pediatric emergency care and who need not be dedicated solely to this role; it can be an individual or group already in place who assumes this role as part of their existing duties.”

**Medical Review [Concerns]:**
No concerns

**Fiscal Concerns:**
The addition of the PECC requirement to the master and expert levels is simply a designation, therefore no financial burden exists for the EMS agency

**Educational Concerns:**
The timing of this recommendation will coincide with the rollout of PECC education (What is a PECC?) over the fall of 2019.

**Plan of Implementation:**
The current PVRP program overview is attached to this recommendation and will be modified after PA DOH approval.

The proposed changes would take effect January 1, 2020. This will allow enough time for existing PVRP agencies to transition by identifying the PECC. The January deadline will also provide enough time to implement these updates by re-distributing the program guidance in the electronic version. Additionally, 144 EMS agencies currently in the program will be provided with personalized information and updates on the program to transition as needed.

The PEHSC Committee/Task Force offers consultation to the Department in regard to the content of this Vote to Recommend (VTR) and its attached documents. The PEHSC Committee/Task Force specifically offers staff or member support to participate in Department deliberations regarding this recommendation in an effort to convey committee/task force discussions.

**Board Meeting Comments/Concerns:**

Signed:_________________________________________ Date___________________

President

For PEHSC Use Only – PA Department of Health Response

Accept:____ Table:____ Modify:____ Reject:____

Comments:

Date of Department Response:_______________