



## The percentage of hospitals with an emergency department (ED) recognized through a statewide regional standardized system that are able to stabilize and manage pediatric medical emergencies.

Delaware, 'The First State', has a population of just under one million people. There are eight acute care hospitals with Emergency Departments that treat children. In 2011 approximately 73,207\* pediatric patients were treated in these eight Emergency Departments.

**Delaware completed the initial phase of development of its new Statewide** Pediatric System through recognition of Delaware's hospitals as Pediatric **Emergency Care Facilities (PECF) on December 30, 2011. Every Delaware** acute care hospital that treats children voluntarily chose to participate in this new program. It required them to meet state standards, submit a lengthy application, and be visited by a state review team.

The EMSC Standards Committee, a group of 19 Delaware clinical experts, worked since 2007 to develop the PECF Recognition Program with the goal of standardizing emergency medical care for children statewide. The committee reviewed documents adopted in other states such as Illinois, California, and Tennessee as models for the Delaware program.





whealth Kent General and Milford Hospitals, Level III



Representatives from Beebe Medical Center, Level III





Representatives from St. Francis Hospital, Level III



Representatives from Nanticoke Memorial Hospital. Level III



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Delaware Hospitals and Health Systems







Bottom, left to right: Nanticoke Memorial Hospital (III), 98 beds, & Beebe Medical Center (III), 155 beds. (Bed count is staffed beds.)

## Delaware hospitals are recognized as PECF Level I - III. There are one Level 1, one Level 2, and six Level 3 recognized facilities.

**The Level 1** facility is capable of providing comprehensive specialized pediatric medical and surgical care to all types of ill children. This facility serves as a regional referral center for the specialized care of pediatric patients.

**The Level 2** facility is capable of identifying and stabilizing critically ill or injured pediatric patients and providing ongoing inpatient care or appropriate timely transfer to a Level 1 facility.

**The Level 3** facility is capable of identifying and stabilizing those pediatric patients who are critically ill or injured and providing appropriate timely transfer to a higher level of care. Level 3 facilities have capabilities for the management of minor pediatric inpatient illnesses.

The healthcare facility that has appropriately trained staff and equipment to take care of the child, or has the ability to transfer the child to a designated hospital that can provide definitive treatment, and help reduce children's mortality and morbidity.

According to the EMSC National Resource Center, Delaware is only the 5<sup>th</sup> state in the USA to successfully implement the PECF Recognition Program. Delaware also is the 3<sup>rd</sup> in the nation to develop an inclusive pediatric system with all acute care hospitals that treat children recognized.

References

\* Delaware Pediatric System: Annual Pediatric Emergency Department Patients by Hospital, 2011.

## **DELAWARE PEDIATRIC EMERGENCY CARE FACILITY RECOGNITION PROGRAM**

**Emergency Medical Services for Children (EMSC) Performance Measure # 74 :** 







Above, left to right: A. I. du Pont Hospital for Children (I) 180 beds, Christiana Hospital (II), 808 beds & Wilmington Hospital (III), 258 beds.



Middle, left to right: Bayhealth Kent General (III), 224 beds, Bayhealth Milford Memorial Hospital (III), 110 Beds,



Mr. and Mrs. Metro, parents of a 3-year-old child who nearly drowned, give their heartfelt appreciation of the services provided by EMTs, paramedics, nurses, and physicians. They praised the care their son received from the time of the incident through his discharge from the Level 1 Nemours/Alfred I. du Pont Hospital for Children. This child is alive and well today thanks to Delaware's system of pediatric care.



Delaware Office of



**Action Steps Year One, 2011** 

1. Letters sent to hospital CEOs requesting Letter of Intent (LOI). 2. Appropriate application sent to each hospital based on LOI. **3. Applications reviewed upon return to OEMS.** 4. Brief feedback/questions to hospital on application. 5. Hospital site visit to review essential criteria. 6. Letter of recognition and site visit reports sent to hospitals.

**Future Steps Year Two 2012 and Three 2013** 

**1.** Hospitals submit pediatric plan within six months after recognition. 2. Promulgation of regulations.

**3.** Develop Pediatric Emergency Care Facility Recognition Committee. 4. Develop Pediatric System Performance Improvement Committee 5. Site visit with outside reviewers- PI, chart review, follow up as needed. 6. Introduce level 4 walk-in care facilities to system.

