Ensuring high-quality, equitable emergency care for every child.



The Emergency Medical Services for Children (EMSC) Program is the only federal program dedicated to children's needs in health emergencies.

80%

- Children's health needs are distinct from adults. They are more prone to medical errors and require specialized care.
- Because of low pediatric volume, emergency systems tend to focus on adult needs. They may lack the pediatric-specific skills, equipment, and policies to ensure high-quality care.

of EDs see <10 children per day¹

of EMS agencies see <8 children per month²

Our Approach

Since 1984, the EMSC Program has worked to improve gaps in pediatric emergency care. The program has five distinct arms encompassing 71 grants, which touch all 50 states plus seven territories and jurisdictions.





Our Services & Resources

- Cutting-edge research
- National- and state-level data and analysis
- Assessment tools and gap reports
- Improvement resources, like toolkits
- Clinical resources and practice guidelines
- Policy and procedure development

- Quality improvement collaboratives
- Communities of practice
- Educational webinars
- Learning modules
- Disaster preparedness and planning resources
- Scholar and fellowship roles

Our Flagship Initiatives

Parallel pediatric readiness projects engage clinicians in cycles of measurement and improvement.



For EDs



For EMS

Our Impact

A recent national assessment of pediatric capabilities of EDs found a median score of 69.5 out of 100. Research shows an ED score of >87 points is associated with the potential for:



60%

lower mortality risk in injured children⁴



A prehospital assessment is forthcoming.

Pediatric readiness saves lives. Learn more:



View references here: https://bit.ly/EMSCoverviewref

This Emergency Medical Services for Children Innovation and Improvement Center resource is supported by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) as part of an award (U07MC37471) totaling \$2.5M with 0 percent financed with nongovernmental sources. The contents are those of the author(s) and do not necessarily represent the official views of, nor an endorsement, by HRSA, HHS, or the U.S. Government. For more information, visit HRSA.gov.

230726 . Updated 11/16/23