



MACEP Pediatric Committee Newsletter

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Pediatric Committee Leadership Transition

Emory Petrack, MD, FAAP, FACEP
Ashley Foster, MD

As we enter the Spring season, I want to share with you that I (Emory) will be retiring at the end of June, and Dr. Ashley Foster will be taking over as Chair of the MACEP Pediatric Committee. In addition, Dr. Joyce Li, a long-time committee member and active participant, will be taking the role of Co-Chair. I feel strongly that we are leaving the leadership of this active group in excellent hands as we continue working to advocate for pediatric emergency care in the Commonwealth.

We thought we'd take this opportunity to briefly review the history and accomplishments of our committee. I arrived at Tufts Medical Center some 7 years ago, after leading the Pediatric Emergency Departments at the Cleveland Clinic system for the previous decade. Dr. Mostofi, our Associate Chair at Tufts and former President of MACEP encouraged me to get involved with this great organization. Shortly after joining MACEP, I founded the Pediatric Committee in late 2014 with the support of then president Dr. Rathlev. Since that time, the Pediatric Committee has been a very active MACEP committee.

One of our first efforts was to create clinical practice guidelines aimed to support community EDs in the state. We developed guidelines for pediatric croup, febrile seizure, and our most challenging, febrile infant without a source.

By 2016, several members of Pediatric Committee were engaged with national efforts to enhance pediatric readiness through the National Pediatric Readiness Project (NPRP, sponsored by Emergency Medical Services for Children, the American College of Emergency Physicians, the American Academy of Pediatrics, and the Emergency Nurses Association). As a national effort, the NPRP created guidelines and recommendations to enhance care of all children who present to an ED for care. Part of the NPRP recommendations included establishing a pediatric emergency care coordinator (PECC) in every ED who helps to champion for enhanced pediatric emergency care.

The Pediatric Committee subsequently started a collaboration with the Emergency Medicine Network (EMNet, www.emnet-usa.org), based out of

Massachusetts General Hospital and after much discussion, the collaboration set an ambitious goal to help MA become the first state in the country to achieve identification of a PECC in 100% of EDs. Given there were 73 EDs in the Commonwealth at that time, we had our work cut out for us.

As we started to figure out how to move forward with this project, we identified some key goals:

- Enhance pediatric and family centered care
- Increase both patient and ED staff satisfaction
- Make the ask for EDs easy to implement
- Provide resources and support for PECC implementation
- Add minimal to no additional cost to EDs

In early 2017, with approval from the MACEP Board, we started to reach out to all ED medical directors in the Commonwealth with a letter introducing the project. We knew this would be a hard sell for some, given lower pediatric volumes and needed focus on other ED challenges. The Pediatric Committee developed free resources to enhance pediatric emergency care, including development of a MA-specific website that included information for MA PECCs: www.MassPediatricToolkit.com. This website provides a wide array of resources, including physician and nursing PECC role descriptions, guidelines for equipment, QI projects, training video clips and more. We also included a password protected list of PECCs for every ED, allowing for communication and highlighting which EDs have or do not have a PECC identified.

The year that we started this initiative (2017) was our most challenging year. While some EDs were happy to help and take advantage of free resources to enhance pediatric care, others had expressed hesitancy over the feasibility of recruiting a PECC within their ED. To further support the initiative, we enlisted help from both MACEP board members and EMNet leadership to reach out to EDs. Our goal was to reach 100% PECC participation by the October 2017 national ACEP meeting. While we did not quite reach that goal, we did get to 100% participation in early 2018, becoming the first state in the country to have at least one PECC within every ED statewide. For more details about this project, please click [here](#). The “bottom line” result of this work can be seen in the maps at the end of this article.

Since achieving 100% in the state, one of our biggest challenges has been keeping our list of PECCs up to date. We have witnessed frequent turnover of ED staff which impacts the PECC list on a regular basis.

As of now, we are at 96% of EDs with identified PECCs. This is an amazing number, given frequent turnover of the PECC position within EDs.

Ensuring the committee is abreast of a PECC status change and ensuring a new PECC is elected by ED leadership requires frequent attention. To help with this effort, along with overall oversight of the PECC network, Dr. Foster took on the role of the MA PECC Network Chair in 2018. As part of the effort to provide ongoing support and resources for the network, she has been crafting monthly emails for all PECCs. Once created, the e-mail goes to the full pediatric committee for review and edits. The goal of the e-mails is to be concise, with one new pediatric emergency pearl or resource offered each month. We have received great feedback from PECCs about the usefulness of these monthly e-mails.

Once MA PECCs were established, the Pediatric Committee and EMNet set a new goal of helping to establish PECCs throughout the New England Region. Under the leadership of Dr. Joyce Li, PECCs were recruited and established or confirmed in Maine, New Hampshire, Vermont, Connecticut, and Rhode Island.

Since 2016, we have been putting out a newsletter for MACEP membership, and it is now published each Spring and Fall, with contributions by our members. We bring information on pediatric emergency topics, relevant regional and national meetings, and other highlights of note. The committee has also provided pediatric emergency teaching in local and regional conferences including Dr. Petrack delivering a pediatric-specific presentation during the pain management course offered by MACEP in 2018.

With the ongoing leadership of Dr. Foster, we have enhanced collaboration over the past couple of years with both the Massachusetts Emergency Nurses Association (ENA) Pediatric Committee and MA Emergency Medical Services for Children (EMSC). We are actively working with Massachusetts ENA to increase the number of EDs with nursing PECCs; ideally, our goal would be for each ED to have a PECC team that would include at least 2 individuals (physician, nurse, advanced practice provider, or paramedic working in the ED).

In 2019-2020, Drs. Foster and Li teamed up with MA EMSC, other New England EMSC agencies, and pediatric emergency physicians in the New England Region in an effort to create a regional pediatric preparedness forum. The target audience included PECCs, emergency department leadership and pre-hospital leadership. The forum was to be a one-day interactive session aimed to introduce topics of “do-it-

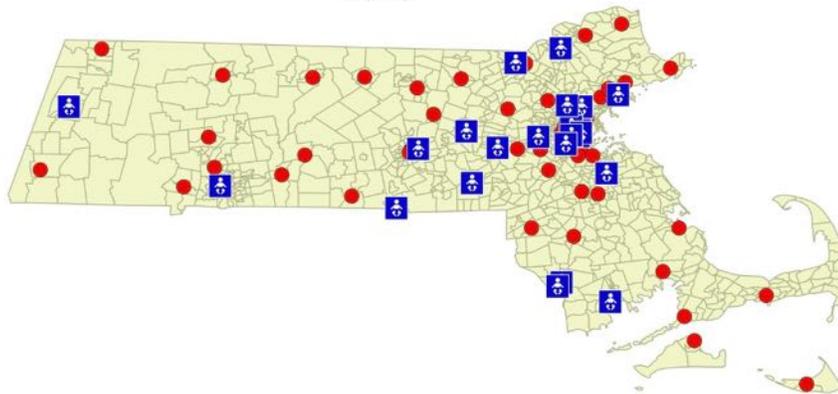
yourself” simulation, critical debriefing, and enhancing patient handoff through implementation of a standardized tool. The forum was also set to include time where PECCs could meet one another and share successes and challenges. Originally slated for March 2020, the forum was sadly cancelled due to the Sars-Cov-2 pandemic. However, the forum steering committee converted all created content for the forum into a virtual forum. This virtual forum is housed on OpenPeditrics.org and free to access by all.

Due to the success of the regional collaboration, the pediatric committee members Drs. Li and Foster continue to work with a New England steering committee to enhance pediatric care in the region. The next regional project selected by the steering committee focuses on improving the ED care of pediatric patients with a mental health condition through the creation of an ED toolkit. The initial step of this project was a needs assessment of New England EDs that care for this vulnerable patient population. The current stage of the project is the dissemination of a PECC survey to help prioritize resources that will be included in the toolkit. The

upcoming steps will include the creation and curation of resources into a toolkit that will subsequently be disseminated to EDs in the New England region. The regional mental health toolkit project has been well received, with several hospitals noting this will be very useful for their EDs and look forward to the toolkit. We hope to have the first phase of the toolkit out for a trial period by late Spring.

In short, for the past seven years, this committee has been very active in working to improve pediatric emergency care and resources for the Commonwealth. The expansion of PECCs to all EDs in Massachusetts, and beyond to the entire New England region, has resulted in increased engagement by a network of dedicated physicians, nurses, advanced practice providers, and other ED staff on behalf of the children and families we collectively serve. While we continue to have significant challenges, the pediatric committee is well positioned to continue this important work. We are looking to expand participation and welcome any MACEP members who are potentially interested in joining us to contact Dr. Foster (ashleyafoster@gmail.com).

2016



2018



COVID-19 - Pediatric Resources



Pediatric Infectious Diseases Society,
COVID-19 Resources: [LINK](#)

EM:RAP Online Textbook Chapter on
COVID-19, free and constantly updated, with
section on pediatrics: [LINK](#)

Pediatric Emergency Medicine Database, up-
to-date articles on COVID-19: [LINK](#)

Don't Forget the Bubbles, evidence based
summary of pediatric COVID-19 literature:
[LINK](#)

EMSC Innovation & Improvement Center,
pediatric and pre-hospital preparedness for
COVID-19: [LINK](#)



Emergency Pediatric Websites

Mass Pediatric Toolkit: [LINK](#)

EMS-C Pulse Newsletter: [LINK](#)

EMSC Resources/Toolkit: [LINK](#)

EMS-C Webinars: [LINK](#)

National Pediatric Readiness Project: [LINK](#)

PEM Playbook (PEM podcast): [LINK](#)

Pediatric EMS Webinars: [LINK](#)

MIS-C update

As a follow up to our fall 2020 Pediatric Fever MIS-C discussion, we wanted to provide two follow up resources to help you with pediatric presentations where this may be on your differential. As a reminder, Multisystem Inflammatory Syndrome in Children is a potentially life-threatening hyperinflammatory syndrome that occurs approximately 4-6 weeks after primary covid infection. Children who present with prolonged fever continue to be a clinical quandary during this time in which MIS-C is on the differential. Below are two clinical pathways that we hope you will find helpful when caring for these children.

CHOP MIS-C Guideline: [LINK](#)

Children's of Minnesota MIS-C guideline: [LINK](#)

EIIC Education kits (PEAK)

The Emergency Medical Services for Children Innovation and Improvement Center (EIIC) are developing Pediatric Education and Advocacy Kits (PEAK) to provide best practice educational resources for ED providers to help provide the highest quality of care to pediatric ED patients. PEAK toolkits utilize multiple delivery methods including modules, question banks, podcasts, webinars and guidelines. EIIC's first PEAK toolkit is on status epilepticus and can be found here: [LINK](#)

Joyce Li, MD, MPH



Consider adding some artwork or images
to your ED walls to improve the
patient and staff experience!

Images above placed in Tufts Medical Center ED
as part of a hospital “Always Thinking Ahead” Grant

Photography by Emory Petrack