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DEPARTMENT OF HUMAN SERVICES



NEVADA DIVISION of PUBLIC
and BEHAVIORAL HEALTH



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NEVADA PEDS READY ADVANCED + TRAUMA RECOGNITION APPLICATION

Hospital: _____ Application POC: _____

Address: _____ City: _____ State: _____ Zip: _____

Pediatric Emergency Care Coordinator (PECC)

Please provide the name and contact information of the PECC coordinators (nurse and provider) for your ED and the name and location of your ED.

Provider PECC Name: _____ Email: _____

Nurse PECC Name: _____ Email: _____

Emergency Department Name: _____ ED Location: _____

National Pediatric Readiness Project Survey

Completion of EMSC national pediatric readiness survey in a timely manner when it is requested by the Nevada Emergency Medical Services for Children (EMS-C) Program. Please provide the date when you last completed and submitted an EMS-C national pediatric readiness survey.

Date of last survey completion: _____

Competency Training

Emergency Department physicians should complete training in a certified pediatric resuscitation course such as PALS, APLS, or PEARS, on an ongoing basis. Please provide a letter of certification by the Emergency Department Medical Director attesting that all ED physicians in your facility have completed one of these courses in the last 2-years. Attach the letter to this application as an additional attachment.

All nurses on staff in the Emergency Department are trained in the emergency evaluation and treatment of children of all ages (e.g. PALS, APLS, or ENPC certified). Please provide a letter of certification by the Emergency Department nursing supervisor that at all nurses on staff in the Emergency Department have training in the emergency evaluation and treatment of children of all ages. Attach the letter to this application as an additional attachment.

All staff are regularly oriented every 6-months on the location of pediatric equipment. Please provide a letter of certification detailing how Emergency Department staff are regularly oriented every 6-months on the location of pediatric equipment. Attach the letter to this application as an additional attachment.

All healthcare providers who staff the Emergency Department have quarterly pediatric-specific competency evaluations for children of all ages. Areas of pediatric competencies include any and all of the following:

- Assessment and treatment (triage)
- Medication administration
- Device/equipment safety
- Resuscitation
- Patient and family- centered care
- Team training and effective communication
- Critical Procedures
- Trauma and stabilization
- Disaster drills—participation in community disaster drills which include a pediatric mass casualty incident component at least every 2 years

This requirement can be met by documentation of quarterly pediatric scenario participation OR documentation of care of acute actual pediatric patients in the ED to include such situations not limited to cardiac arrest, respiratory distress, etc. OR documentation of participation in disaster drills or disaster scenarios involving pediatric patients. Please provide documentation of these quarterly pediatric-specific competency evaluations and provide dates and information about the types of activities completed to meet this requirement as an additional attachment.

Equipment and Medication Minimums

See attachment 1 for the NEVADA PEDS READY ADVANCED + TRAUMA DESIGNATION Equipment and Medication list. Include the equipment and medication checklist as an additional attachment.

Education

Please document dates of training for Emergency Department staff for EZ-IO training and ventilation training with appropriate bag and mask for age groups. Attach the EZ-IO and ventilation training reports as an additional document.

Patient Safety Standards

Please certify that each category in patient safety standards is met and provide examples of the meeting of these standards for each category. Attach the patient safety standards summary as an additional attachment.

- All children are weighed in kilograms only. Weight is documented and recorded in kilograms only and scales are locked to weigh in kilograms only
- A standard method of estimating weight in kilograms if a scale is not available or indicated is used (i.e. a weight-based tape)
- The ED environment is safe for children and supports patient/family centered care.
- Pediatric equipment, supplies, and medications are age- and size-appropriate for all children and are easily accessible, clearly labeled, and logically organized. Staff are educated on the location of all of the items.
- Pediatric transport equipment is appropriate, and padding is adequate to fill voids if needed.

Pediatric Interfacility Transfer Agreements

A transfer agreement is in place that is appropriate for pediatric patients. Provide a copy of your pediatric-appropriate transfer agreement as an additional attachment.

Disaster Preparedness

The facility must have at least one person who has completed the on-line ICS course to include: ICS 100, 200, 700, or 800. Resources and information can be provided about the course to meet this requirement.

The facility must have at least one person at the facility has successfully completed the FEMA pediatric disaster planning course #439.

Please provide copies of the course completion certificates of the person or persons who completes these requirements as an additional attachment.

Quality Initiatives

- A process is in place to monitor and track compliance with pediatric care standards using audit filters and benchmarks.
- The QI plan for the ED includes pediatric-specific indicators.
- Policies are implemented based on data obtained and performance.
- Policies are in place to provide suicide prevention and mental illness information and referral resources.
- At least 12 months of audits on all qualifying pediatric records have been completed.
- Continuous QI activities are in place with documentation available for review.

Please provide documentation that these initiatives are in place and provide examples for each initiative as an additional attachment.

American College of Surgeons Trauma Center Designation

Please provide documentation of your certification as an ACS verified pediatric trauma center and designated by the state and your level of certification as an additional attachment.

Please return the completed application to:

Michael Bologlu
Nevada EMS for Children Program Manager
mbologlu@health.nv.gov

