

8.h. GETAC Pediatric Committee Update to Council

Chair: Christi Thornhill, DNP

Vice-chair: Belinda Waters, RN



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Health and Human
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Texas Department of State
Health Services

Pediatric Committee

2025 Committee Priority Outcomes

Priority Not Implemented
Priority Activities Recorded
Priority Completed and Monitored

Committee Priorities	Outcomes	Status
Develop a pediatric imaging guideline for transferring facilities following the ALARA principles	<ol style="list-style-type: none">1. Research and develop best practice guideline for imaging in pediatric patients following the ALARA principles for the pediatric patient.2. Provide education for transferring and receiving facilities regarding over imaging of children and delay of transfer due to unnecessary imaging at referring facility.3. Utilize Regional PRISM's, Hospital PECC's and RAC's to disseminate guideline and education.	
Develop a pediatric transfusion/massive transfusion guideline for transferring facilities	<ol style="list-style-type: none">1. Research and develop best practice guideline for pediatric transfusion/massive transfusion guideline.2. Provide education for transferring facilities regarding pediatric transfusion/massive transfusion guideline.3. Utilize Regional PRISM's, Hospital PECC's and RAC's to disseminate guideline and education.	

Pediatric Committee

2025 Committee Priority Outcomes

Priority Not Implemented
 Priority Activities Recorded
 Priority Completed and
 Monitored

Committee Priorities	Outcomes	Status
Develop a pediatric guideline for transferring facilities for pediatric pain assessment and appropriate pain management	<ol style="list-style-type: none"> 1. Research and develop best practice guideline for pediatric specific pain assessment and pain management. 2. Provide education for transferring facilities regarding pediatric pain assessment and pain management. 3. Utilize Regional PRISM's, Hospital PECC's and RAC's to disseminate guideline and education. 	
<i>Request and review data from the state registry and National Pediatric Readiness Improvement Project regarding vital signs and weight in kilograms obtained on pediatric patients.</i>	<ol style="list-style-type: none"> 1. <i>Utilize Regional PRISM's, Hospital PECC's and RAC's to disseminate best practices regarding complete set of vital signs and weight in kilograms for pediatric patients.</i> 2. <i>Increase compliance.</i> 	
Complete 2024 priority of developing a toolkit regarding pediatric magnet/button battery ingestion.	<ol style="list-style-type: none"> 1. Complete toolkit 2. Present to GETAC for approval 3. Utilize Regional PRISM's, Hospital PECC's and RAC's to disseminate information. 	

Pediatric Committee

2025 Committee Priority Outcomes

Priority Not Implemented
Priority Activities Recorded
Priority Completed and Monitored

Committee Priorities	Outcomes	Status
Complete 2024 priority of developing a toolkit regarding Sudden Cardiac Arrests/Deaths in Pediatrics	<ol style="list-style-type: none">1. Complete toolkit2. Present to GETAC for approval3. Utilize Regional PRISM's, Hospital PECC's and RAC's to disseminate information.	
<i>Pediatric Simulations</i>	<ol style="list-style-type: none">1. <i>Monitor utilization of 13 pediatric simulations by regional PRISM's.</i>2. <i>Request data from state regarding trauma center compliance with bi-annual simulations after rule 157.126 is in effect.</i>	

GETAC Committee/Stakeholder Action Item Request for Council March 225

Christi Thornhill, DNP, ARPN, ENP, ACNP-BC, CPNP-AC, CP-SANE
Pediatric Committee



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Action Item Request and Purpose

- Public resource for the Pediatric Imaging Guideline
 - Requesting approval by the GETAC council today
 - To be able to post the approved toolkit to the Pediatric Committee website
- Public resource for the Consideration for Pediatric Consultation and Transfer Guideline
 - Requesting approval at the November 2025 GETAC Council meeting
 - To be able to post the approved toolkit to the Pediatric Committee website
- Public resource for the Magnet/Button Battery Ingestion Toolkit
 - Requesting approval at the November 2025 GETAC Council meeting
 - To be able to post the approved toolkit to the Pediatric Committee website
- Public resource for the Sudden Cardiac Arrest/Death Toolkit
 - Requesting approval at the November 2025 GETAC Council
 - To be able to post the approved toolkit to the Pediatric Committee website

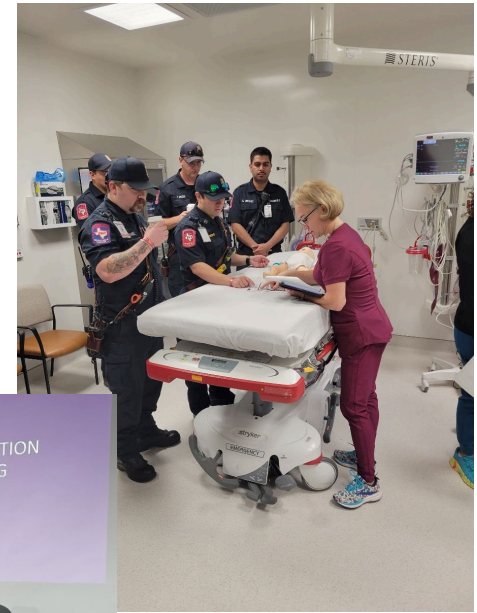
8.h.B. Update: TX Pediatric Readiness Improvement Project

Dr. Kate Remick



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Texas Pediatric Readiness Improvement Project Update, Phase 1 Summary
GETAC August 2025

Texas Pediatric Readiness Improvement Project (TPRIP)

Project Arms:

- TPRIP Virtual Education Series - Season 2
- 13 Standardized Pediatric trauma simulation scenarios
- 14 Pediatric Readiness Improvement & Simulation Mentors
- Pediatric QI performance and dashboards to drive Pediatric QI efforts

Supported by:

GETAC

Texas EMS for Children

Texas ENA

Texas Trauma Coordinators
Forum

TETAF

NPRQI

TX Pediatric Readiness Improvement Virtual Education Series - Season 2 Coming Soon

- 1-hour virtual sessions held 3rd Thursday every month @10am
- Pediatric-specific topics
- Highlight evidence-based practices and resources for adoption
- Emphasis on evaluating ED performance using NPRQI platform

2025 save the date

March 20, 2025	10am
April 17, 2025	10am
May 15, 2025	10am
June 19, 2025	10am
July 17, 2025	10am
Aug. 21, 2025	10am
Sept. 18, 2025	10am
Oct. 16, 2025	10am
Nov. 20, 2025	10am
Dec. 18, 2025	10am

https://dellmed-utexas.zoom.us/webinar/register/WN_agwVXDgYT0aD49FENhCgOw#/registration

TX PRIP Education Series Attendance

March 2025 - Abdominal Surgical Emergencies

Registered - 596

Unique Users - 250

April 2025 - Improving Pediatric Acute Care Through Simulation

Registered - 681

Unique Viewers - 225

May 2025 - Improving Pediatric Emergency Care Nationwide: The National Pediatric Readiness Quality Initiative

Registered - 741

Unique Viewers - 210

TX PRIP Education Series Attendance

June: Safe Sleep & Sudden Unexpected Infant Death

Registered - 769

Unique Viewers - 184

July: Pediatric Mental and Behavioral Health Emergencies

Registered - 795

Unique Viewers - 204

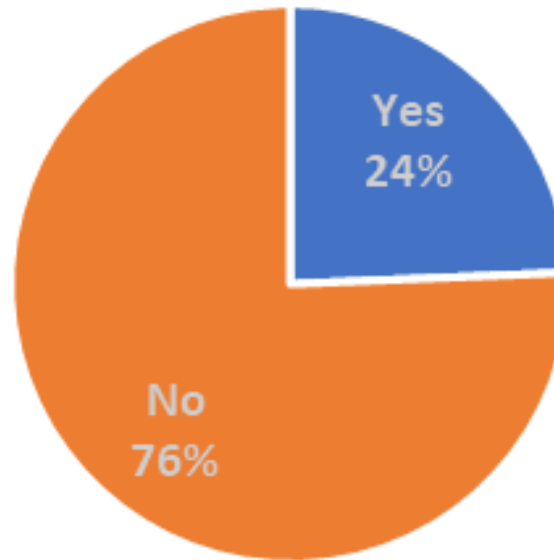
August 21: Glow in the Dark or Miss an Injury: Indications for Cross-Sectional Imaging in Pediatric Trauma (Dr. Aaron Jensen)

Continuing Professional Development: Summary

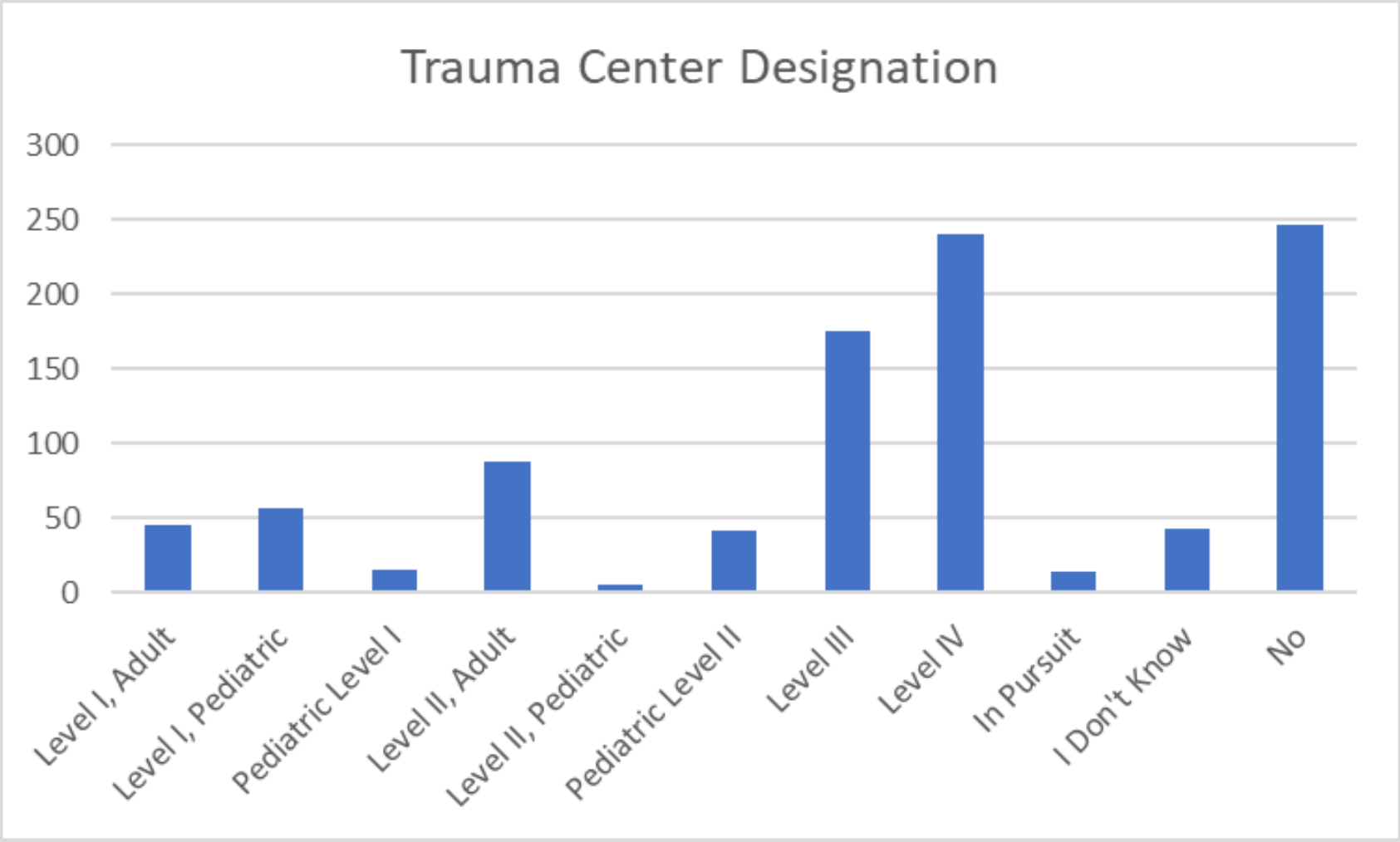
	Topic	Unique Viewers	NCPD Attendance	Average Evaluation Score
Session 1	Upper Airway Obstruction; Anaphylaxis		139	4.69
Session 2	Pediatric DKA		160	4.90
Session 3	Abdominal Surgical Emergencies	250	200	4.83
Session 4	Improving Pediatric Acute Care Through Simulation	225	168	4.77
Session 5	Improving Emergency Pediatric Care Nationwide (NPRQI)	210	154	4.75
Session 6	Safe Sleep and Sudden Unexpected Infant Death	184	150	4.85
Session 7	Mental and Behavioral Health Emergencies	204	163	4.87
Total Continuing Professional Development Hours Awarded			1134	4.81

Continuing Professional Development: Summary

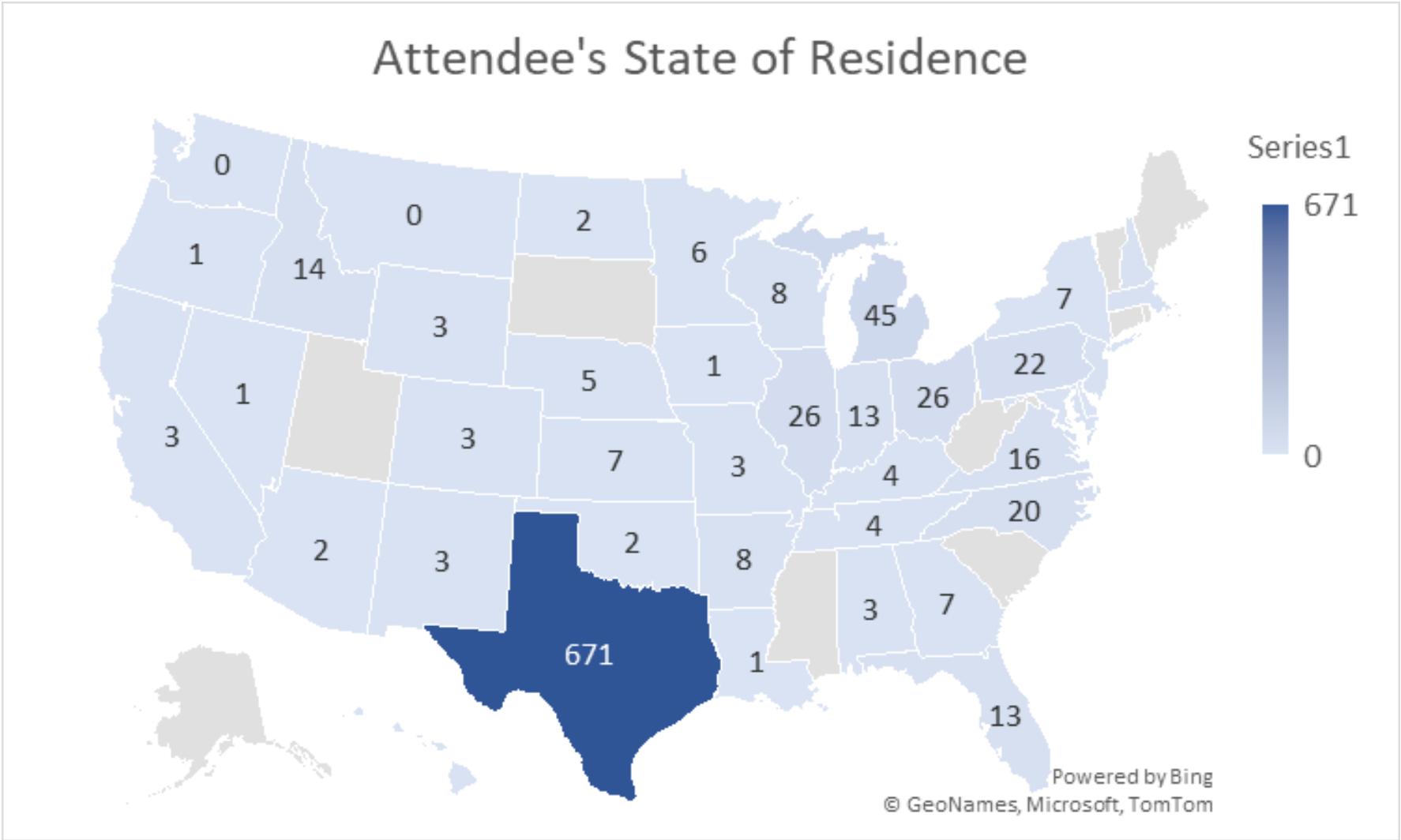
Do you serve as your organization's Pediatric
Emergency Care Coordinator (PECC)?



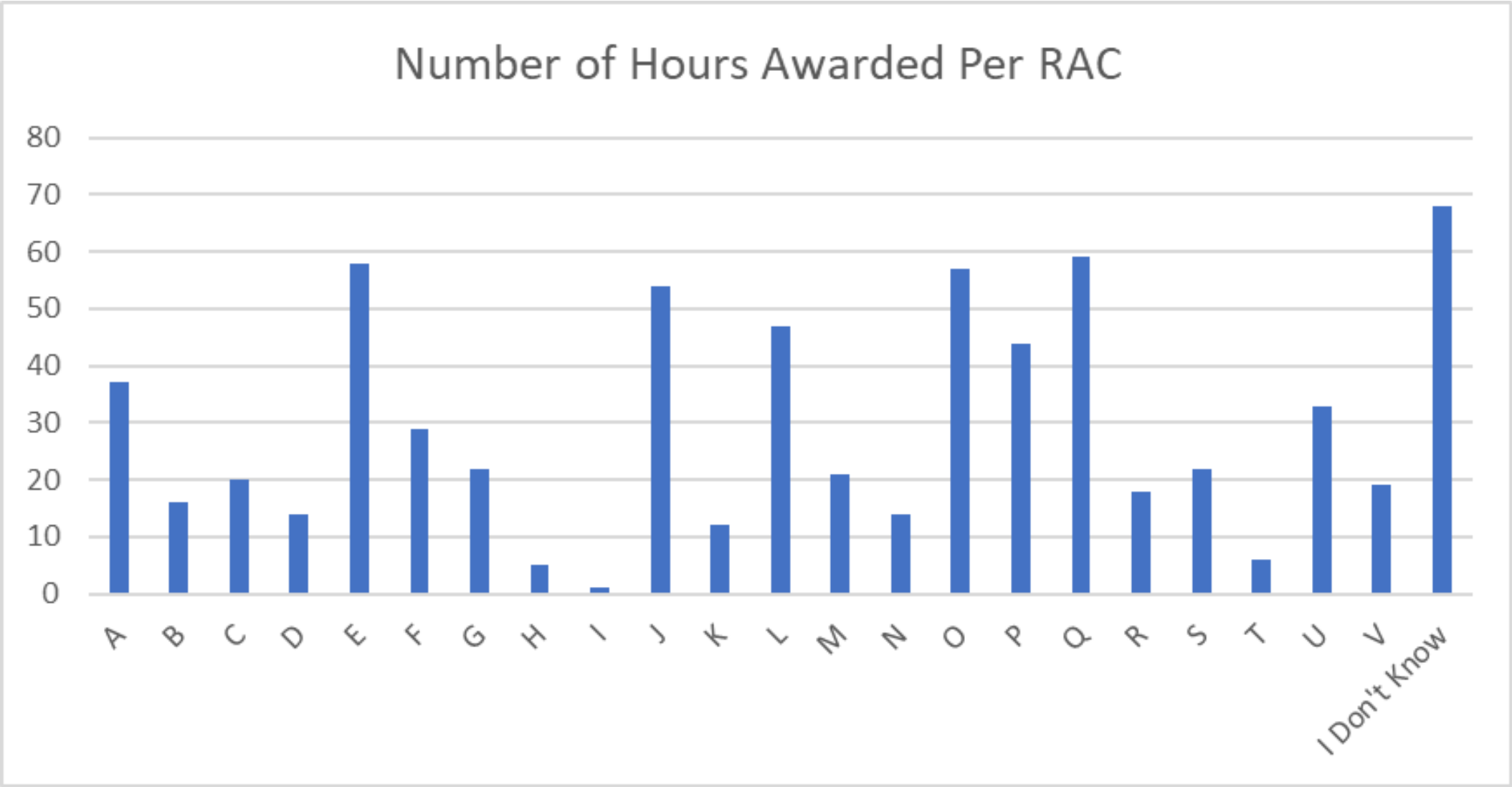
Continuing Professional Development: Summary



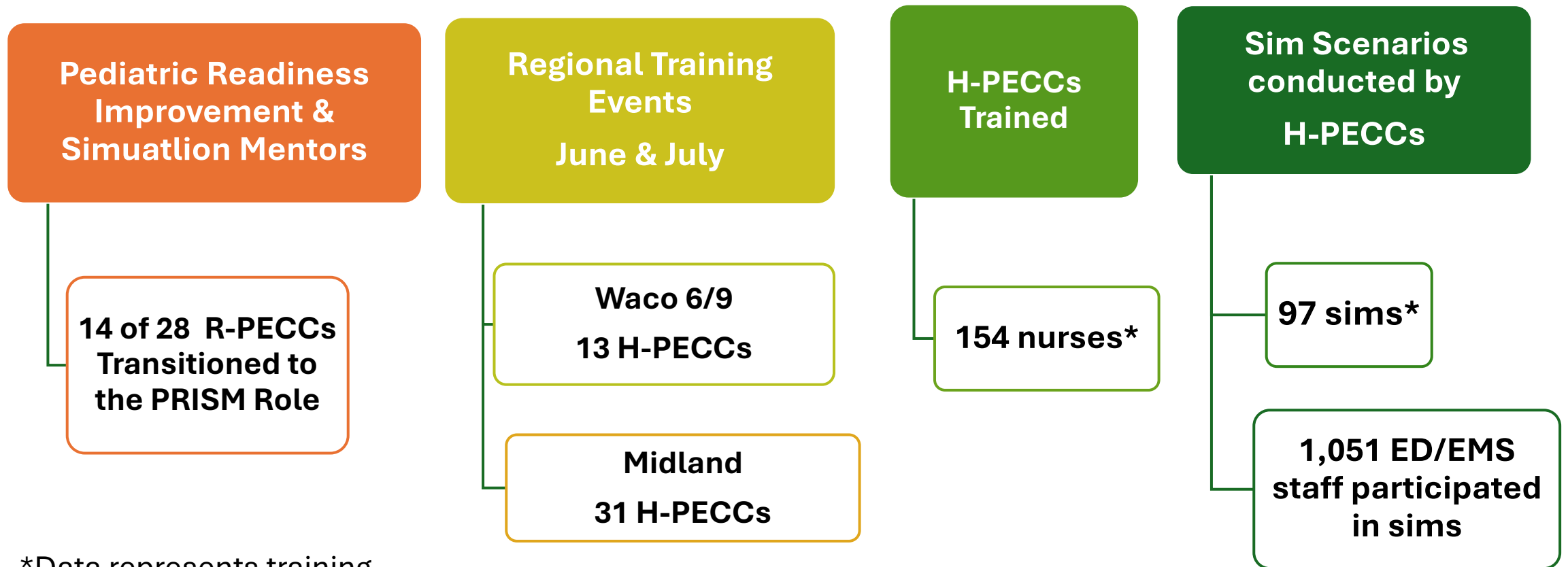
Continuing Professional Development: Summary



Continuing Professional Development: Summary



Phase 2 work by PRISMs with Hospital PECCs



*Data represents training done in Feb.-July 2025

Simulation Videos Status

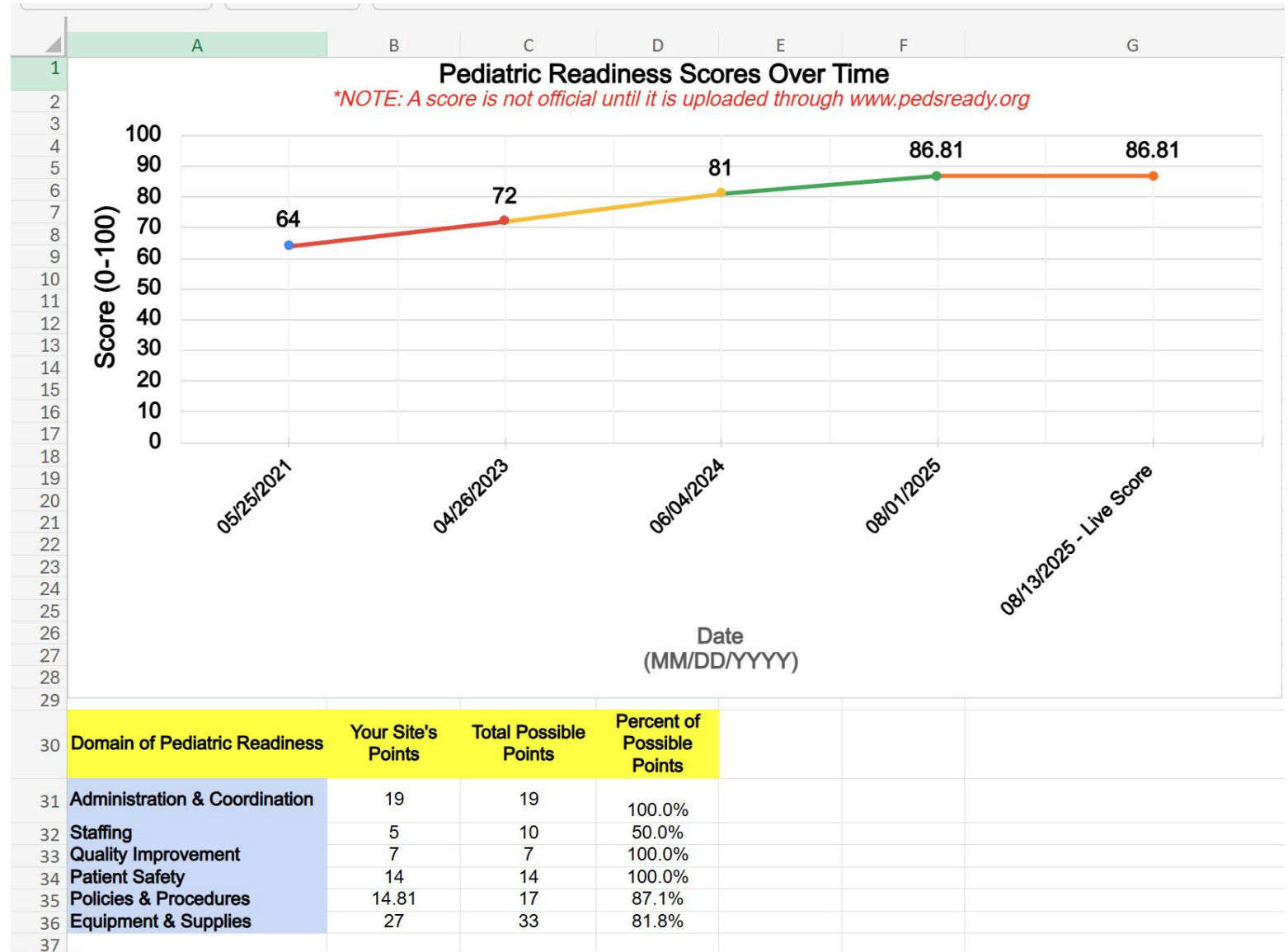
Complete and Available:

- TBI
- Pediatric Burn
- Non-Accidental Trauma (vomiting baby)
- Abdominal Trauma
- Newborn Resuscitation
- Respiratory Distress-Bronchiolitis

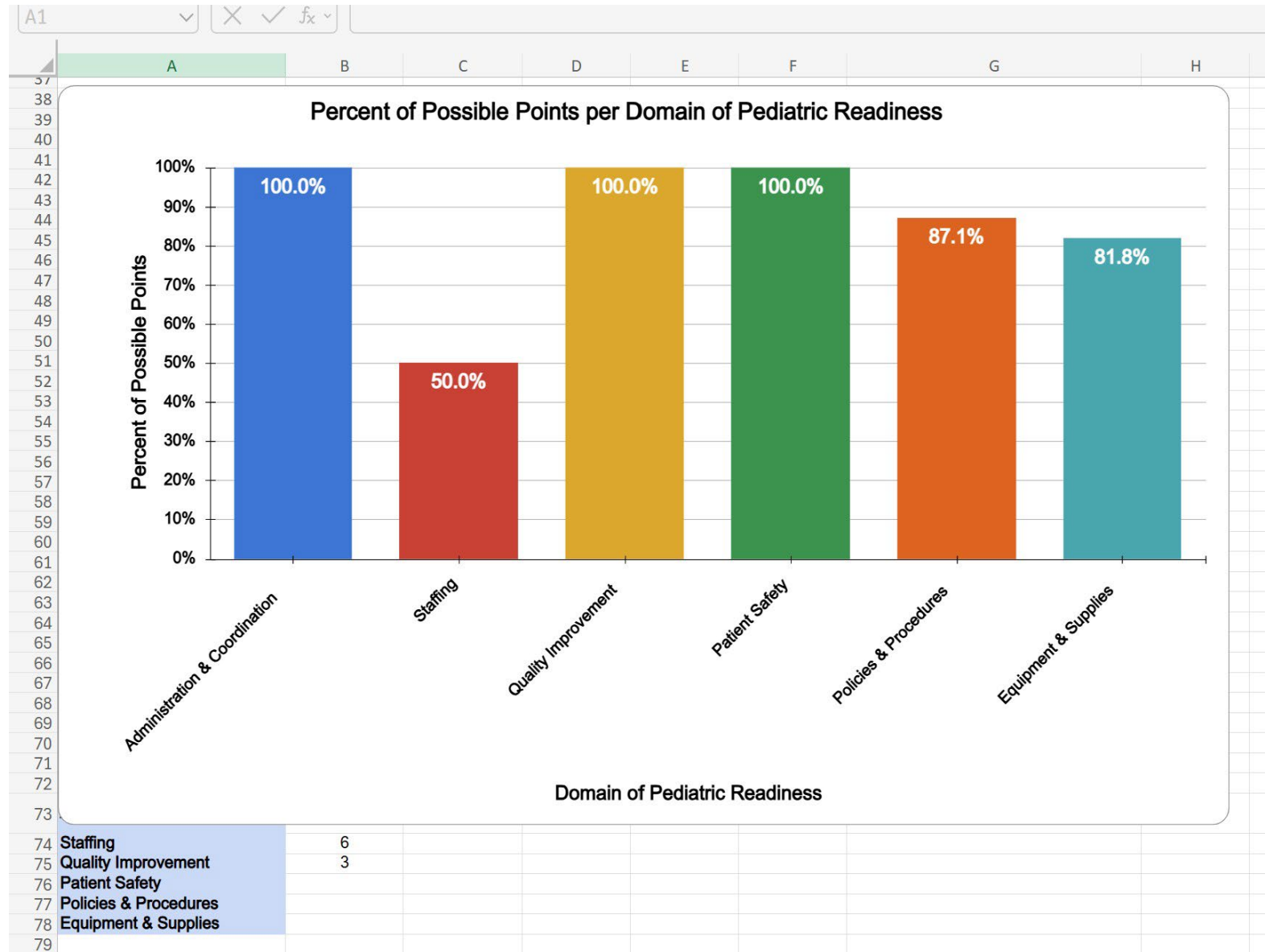
Still in Production:

- C-Spine inj.
- Hanging-suicide attempt
- Long-bone fracture
- Penetrating trauma
- Pediatric (child) sepsis
- DKA

Hospital PECC Dashboard



Hospital PECC Dashboard



Hospital PECC Dashboard

	A	B	C	D	E	F	G
1	Pediatric Readiness Improvement Project Pediatric Emergency Care Coordinator Activity Log		PECC Name: Sally Snow Hospital Name: XYZ hospital	Total PECC Hours = 16	<div>ADD ACTIVITY</div>		
2	DIRECTIONS: Add your activity to the fields in row 4 and click the green "ADD ACTIVITY" button at the top. Notes: <ul style="list-style-type: none"> - Please enter dates as MM/DD/YYYY. - If a sim was completed, F4 must be a numeric value - If you make a mistake, please delete that row and re-enter in column 4. 						
3	Date <i>(MM/DD/YYYY)</i>	Activity (5-10 word note) <i>(Free Text in B4)</i>	Category <i>(Use Drop Down Menu in C4)</i>	# of Hours <i>(Use Drop Down Menu in D4)</i>	Which simulation was it? <i>*IF MORE THAN ONE CASE WAS CONDUCTED, PLEASE SEPARATE ONTO THE NEXT LINE (Use Drop Down Menu in E4)</i>	Simulation Participants <i>(Numeric Value in F4)</i>	Facilitator & Participant Feedback Forms Submitted? <i>(Use Drop Down Menu in G4)</i>
4							
5							
6	Activities Supporting Pediatric Readiness						
7	Date	Activity	Category	Hours	Simulations	Participants	Feedback Forms
8	05/03/2025	sim	Simulation Facilitation	2	Newborn Resuscitation	12	BOTH Facilitator & Participant
9	04/25/2025	skills week	Staffing competency evaluations	6			
10	04/14/2025	NPRQI	Facilitating and participating in ED pediatric QI/PI activities	1			
11	03/14/2025	NPRQI	Facilitating and participating in ED pediatric QI/PI activities	2			
12	02/22/2025	sim	Simulation Facilitation	2	Vomiting Infant	15	BOTH Facilitator & Participant
13	02/21/2025	sim	Simulation Case Preparations	1	Vomiting Infant		
14	01/05/2025	sim	Simulation Facilitation	2	Bronchiolitis/Respiratory Distress	5	BOTH Facilitator & Participant

Hospital PECC Dashboard

	A	B	C
1	PECC Milestones		St. Elsewhere MC-Utopia, USA
48	<input type="checkbox"/>	Repeat Sim!	
49			
50	Physician and Nurse Staffing and Training Milestones		
51	<input type="checkbox"/>	Review Simulation/Education Guide	X
52	<input type="checkbox"/>	Choose date(s) and time for in situ simulation in ED with PECC	X
53	<input type="checkbox"/>	Complete in situ SimBox in the ED with PECC co facilitating	X
54	<input type="checkbox"/>	Complete associated Facilitator checklist with that scenario	X
55	<input type="checkbox"/>	Schedule quarterly sims (PRISM can co-facilitate virtually if needed)	X
		Review Sim Report with PRISM and choose at least 1 action item identified in simulation to work on over the next quarter	
		Domains:	
	<input type="checkbox"/>	<ul style="list-style-type: none"> • Administration & Coordination • Equipment & Supplies • Provider Competency • Safety • Policy & Procedure • Quality Improvement (QI) 	
56			X
57	<input type="checkbox"/>	Once an action item is completed return to Milestone 2 and repeat!	X
58			
59	Policies, Procedures, and Protocols		
60	<input type="checkbox"/>	ED policy templates can be found here: Templates	X
		Follow your institutions process for implementing new policy, some things include:	
	<input type="checkbox"/>	<ul style="list-style-type: none"> • Medical direction support • ED leadership support • Policy Committee 	
61		• IT support through charting system or electronic policy system	X
62	<input type="checkbox"/>	Repeat sim!	X

Hospital PECC Dashboard

K134	✕	✓	fx								
	A	B	C	D	E	F	G	H	I	J	
1	Pediatric Emergency Care Coordinator (PECC) Activity Log Guide										
2											
3											
4											
5											
6	Date: 05/29/2025										
7	Version 1.0										
8											
9	Overview										
10											
11	<i>This spreadsheet is designed to streamline and simplify tracking your activities, hospital contacts, PECC milestones, and Pediatric Readiness Score progression. While each component of this spreadsheet is intended to simplify aspects of the PECC role, focus only on the components that are useful to you! Our goal is to help you, not overwhelm you! If you have any recommendations on how we can improve the PECC Activity Log, please reach out to Ben Michaels (BenjaminLMichaels@gmail.com) or Cage Cochran (cage.cochran@yale.edu).</i>										
12											
13											
14											
15											
16											
17											
18	Snapshot: Sheet that provides a quick view of key metrics with charts and graphs based on data you've input from the tabs in the worksheet. This sheet cannot be edited.										
19											
20											
21											
22	Activity Log: Sheet to enter PECC related activities. This sheet is a great way to track PECC activities and showcase to ED leadership what you have been doing for improved pediatric care.										
23											
24											
25	Hospital Info: Sheet to assist in keeping track of contacts and Pediatric Readiness scores. Please enter your contact information on line 6.										
26											
27											
28	Milestones: Sheet to help guide your work as a PECC. Contains links to helpful resources.										
29											
30											
31	PRS: Sheet to assist in filling out the Pediatric Readiness Assessment and tracking progress through the assessment for institutional memory. Scores recorded using this sheet are not official. All scores must be										
32	uploaded through pedready.org to be official.										
	<	>	Snapshot	Activities	Hospital Info	Milestones	PRS	PRS Export	Instructional Guide	+	:

Simulation Videos Status

Complete and Available:

- TBI
- Pediatric Burn
- Non-Accidental Trauma (vomiting baby)
- Abdominal Trauma
- Newborn Resuscitation
- Respiratory Distress-Bronchiolitis

Still in Production:

- C-Spine inj.
- Hanging-suicide attempt
- Long-bone fracture
- Penetrating trauma
- Pediatric (child) sepsis
- DKA

NPRQI Reporting Dashboard
129 Sites / 26,581 Records

Make your selections from the green filter bar, and Click "GO" to return your report


Year
Select all that apply
All

Quarter
Limit the # of Quarters by selecting Year(s) first
All

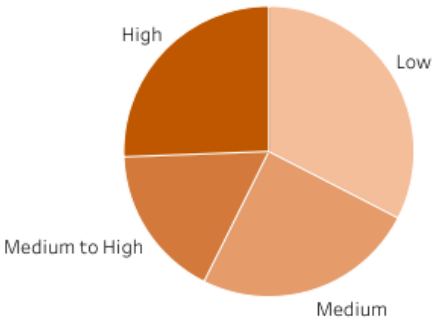
Site
Multiple values

Results View
Table

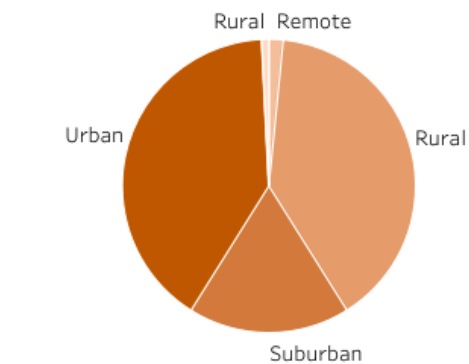
Patient Clinical Group
All Patients (Core Measures)



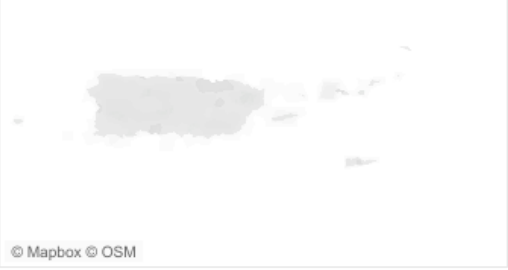
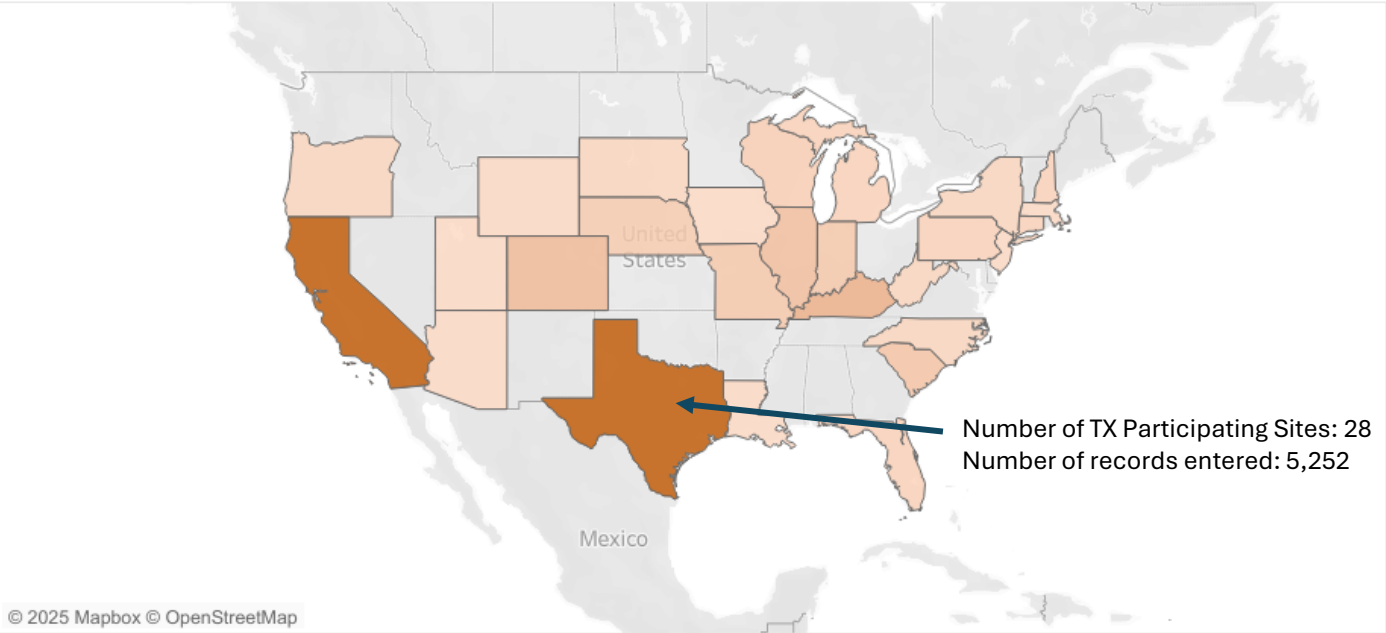
Number of Sites by Patient Volume Category



Number of Sites by Geographic Category



Participation in the National Pediatric Readiness Quality Initiative



NPRQI: Texas Participating Sites

Texas Registered Sites	70
Texas Sites with Executed POA	40
Texas Sites Entering Data	28
Texas Registered RACs	5 (E,I, J,K,O)

Texas Participating Sites By Regional Advisory Council (RAC) With Executed Agreement

<div><div>A- Panhandle</div><div>Golden Plains Com. Hospital *</div></div>	<div><div>F-Northeast Texas</div><div>Titus Regional Medical Center *</div></div>	<div><div>J- Texas</div><div>Medical Center Health System *</div><div>Permian Regional Medical Center *</div><div>Ward Memorial Hospital *</div><div>Winkler County Memorial Hospital *</div><div>Big Bend Regional Medical Center *</div></div>
<div><div>B-B</div><div>University Medical Center *</div></div>	<div><div>G-Piney Woods</div><div>Christus Mother Frances Hospital – Jacksonville *</div><div>Christus Mother Frances Hospital - Winnsboro *</div><div>Christus Mother Frances Hospital – Tyler *</div></div>	
<div><div>C-North Texas</div><div>Graham Hospital District *</div></div>		
<div><div>E-North Central Texas</div><div>Baylor All Saints Medical Center at Fort Worth *</div><div>Methodist Southlake Hospital *</div><div>Texas Health Hospital Mansfield *</div><div>Methodist Richardson Medical Center *</div><div>Palo Pinto General Hospital *</div><div>Medical City ER Saginaw</div></div>	<div><div>I-Border</div><div>El Paso Children's Hospital *</div><div>University Medical Center of El Paso *</div></div>	

 Denotes sites entering data

Minimum of 5 sites needed to see RAC dashboard

Texas Participating Sites By Regional Advisory Council (RAC) With Executed Agreement

K-ConchoValley
Schleicher County Medical Center *
Lillian M. Hudspeth MH *
Reagan Hospital District

L-Central Texas
Adventhealth Rollins Brook *
Coryell Memorial Hospital *

M- Heart of Texas
Hill Regional Hospital

N- Brazos Valley
Baylor Scott and White Medical Center - College Station
CHI St Joseph Health Burleson Hospital
CHI St Joseph Health - College Station Hospital *
CHI St Joseph Health Grimes Hospital
CHI St Joseph Health Madison Hospital
St Joseph Regional Health Center

O-Capital Area
Baylor Scott and White Medical Center - Marble Falls

P- Southwest Texas
Christus Children's *

R- East Texas Gulf Coast
HCA Houston Healthcare Mainland
Liberty - Dayton RMC *

S- Golden Crescent
Detar Hospital Navarro
Detar Hospital North
Lavaca Medical Center *
Cuero Regional Hospital *

 Denotes sites entering data

Minimum of 5 sites needed to see RAC dashboard

Texas Sites By Regional Advisory Council (RAC) – Registration Started

A-Panhandle

Parkview Hospital - Wheeler

B-B

W.J. Mangold Memorial Hospital

C- North Texas

Faith Community Hospital

E- NorthCentral Texas

Texas Health Arlington Memorial Hospital

Methodist Mansfield Medical Center

Ennis Regional Medical Center

Lake Granbury Medical Center

Hunt Regional Medical Center

F- NorthEast Texas

Christus Mother Frances Hospital - Sulphur Springs

G- Pineywoods

Longview Regional Medical Center

UT Health East Texas Pittsburg Hospital

I-Border

William Beaumont Army Medical Center

J- Texas

Iraan General Hospital

Reeves County Hospital

K-ConchoValley

Ballinger Memorial Hospital District

O- Capital Area

Ascension Seton Bastrop Hospital

Ascension Seton Edgar B Davis

Ascension Seton Medical Center Austin

St. David's South Austin Medical Center

P- Southwest Texas

Guadalupe Regional Medical Center

Q-SoutheastTexas

Houston Methodist West Hospital

Memorial Hermann Memorial City Medical Center

S- Golden Cresent

Memorial Medical Center

Yoakum Community Hospital

T- Seven Flags

Laredo Medical Center

R- East Texas Gulf Coast

Baptist Hospitals of Southeast Texas

Christus Southeast Texas - St Elizabeth and St Mary

Memorial Hermann Pearland Hospital

UT Medical Branch

NPRQI: Texas Head Trauma Measures

<div>Performance Report: Texas</div> <div>Year(s): All, Quarter(s): All Clinical Measures Group: Patients with Head Trauma (Bundle only)</div> <div>Measures with fewer than 10 records will not be displayed</div> <div>State Performance (As Filtered) represents the average of site performances in Texas and responds to site and patient level filters (displayed with minimum of 5 sites)</div> <div>*State-Wide Performance represents the average of site performances for ALL hospitals in Texas (displayed with minimum of 5 sites)</div> <div>**National performance represents the average of site performances across all participating sites (displayed with a minimum of 5 sites)</div>					<div>Back to Landing</div>		<div>Last Dataset Refresh: 8/13/2025 6:28:06 PM</div> <div>Last Patient Included: 8/12/2025</div>	
Bundle	# of Records	Quality Measure	State-Wide Performance*	National Performance**			<div>Site Demographics</div> <div>Site Demographics filters are not applied to the State-Wide or National Metrics.</div>	
HEAD TRAUMA	558	% of pediatric patients with a full set of vital signs obtained (i.e. temperature, heart rate, respiratory rate, oxygen saturation, blood pressure, mental status)	71.0 %	62.7 %			<div>Specialty Center Status</div> <div>All</div>	
		% of pediatric patients with GCS re-assessment	57.4 %	31.8 %			<div>Patient Volume</div> <div>All</div>	
		% of pediatric patients who received hypotonic saline	0.0 %	0.1 %			<div>Geographic Category</div> <div>All</div>	
	141	% of pediatric patients with a head CT that met one or more PECARN criteria	72.1 %	63.8 %			<div>Patient Demographics</div> <div>Patient level filters are not applied to the State-Wide or National Metrics.</div>	
							<div>Age Category</div> <div>All</div>	
							<div>Triage Level</div> <div>All</div>	

NPRQI: Texas Head Trauma Measures

Records	Measure	Statewide Performance	National Performance
558	% of pediatric patients with a full set of vital signs obtained	71.0%	62.7%
558	% of pediatric patients with a GSC reassessment	57.4%	31.8%
558	% of pediatric patients that received hypotonic saline	0.0%	0.1%
141	% of pediatric patients with a head CT that met one or more PECARN criteria	72.1%	63.8%

NPRQI: Texas Suicide Measures

Performance Report: Texas

Year(s): All, Quarter(s): All | Clinical Measures Group: Patients with Suicidality (Bundle only)

Measures with fewer than 10 records will not be displayed

State Performance (As Filtered) represents the average of site performances in Texas and responds to site and patient level filters (displayed with minimum of 5 sites)

*State-Wide Performance represents the average of site performances for ALL hospitals in Texas (displayed with minimum of 5 sites)

**National performance represents the average of site performances across all participating sites (displayed with a minimum of 5 sites)

Back to Landing

Last Dataset Refresh:
8/13/2025 6:28:06 PM
Last Patient Included:
8/12/2025

Site Demographics
Site Demographics filters are not applied to the State-Wide or National Metrics.

Specialty Center Status
All

Patient Volume
All

Geographic Category
All

Patient Demographics
Patient level filters are not applied to the State-Wide or National Metrics.

Age Category
All

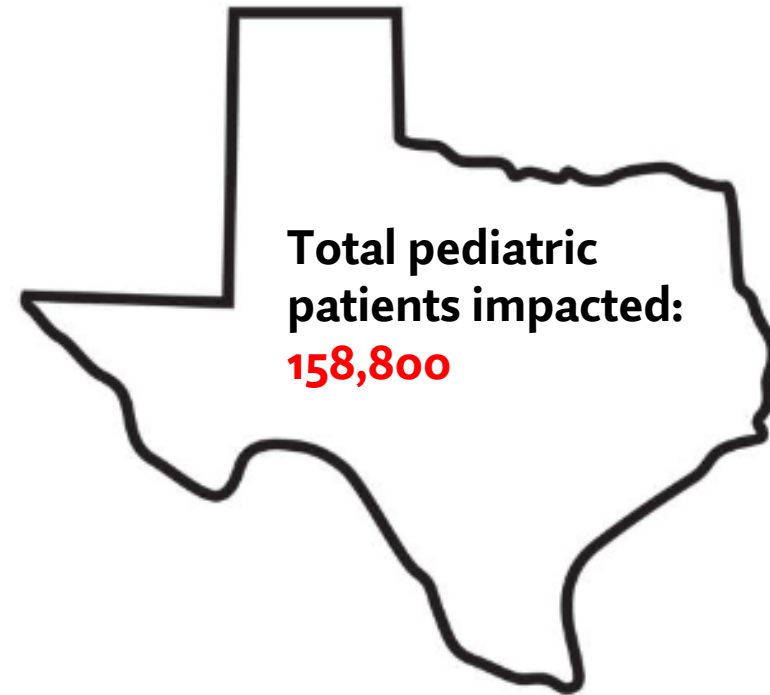
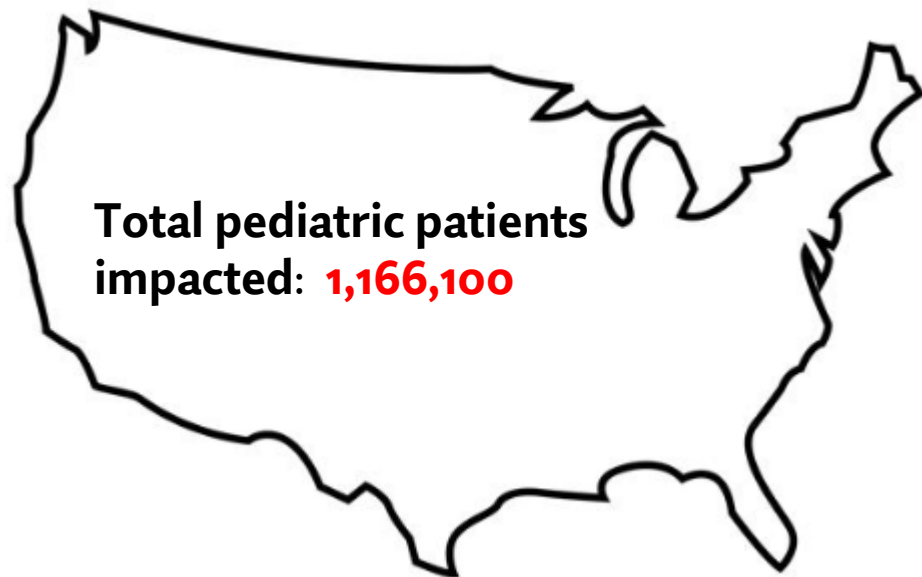
Triage Level
All

Bundle	# of Records	Quality Measure	State-Wide Performance*	National Performance**	
SUICIDALITY	1,288	% of adolescents who were assessed with a suicide screening tool	51.6 %	65.3 %	
	19	% of pediatric patients with a positive suicide screen who had a structured suicide assessment	--	97.1 %	
		% of pediatric patients with a positive suicide screen who received consultation with a licensed mental health professional	--	91.8 %	

NPRQI: Texas Suicide Measures

Records	Measure	Statewide Performance	National Performance
1,288	% of adolescent who were assessed with a suicide screening tool	51.6%	65.3%
19	% of patients with a positive suicide screen who had a structured suicide assessment	--	97.1%
	% of patients with a positive suicide screen who received a consultation with a licensed mental health professional	--	91.8%

NPRQI: Patients Impacted



Future Plans

- Sustained funding through 2027
- System Upgrades underway
- Electronic Data Entry Exploration
- Upcoming Texas-centric Collaborative
 - Launch January 2026
- Obstetrical Emergency Care Measures

