

1 **JOINT RESOLUTION ENCOURAGING THE REDUCTION OF**
2 **PEDIATRIC DEATHS FROM INJURY AND ILLNESS**

3 2018 GENERAL SESSION

4 STATE OF UTAH

5 **Chief Sponsor: Jani Iwamoto**

6 House Sponsor: Stephen G. Handy

8 **LONG TITLE**

9 **General Description:**

10 This joint resolution encourages the Department of Health to convene a
11 multi-stakeholder Pediatric Trauma and Quality Assurance Network to advise the
12 department on triage, transport, transfer, and treatment of ill and injured pediatric
13 patients in Utah.

14 **Highlighted Provisions:**

15 This resolution:
16 ▶ highlights the impact of pediatric deaths and injuries on the state of Utah;
17 ▶ emphasizes the importance of reducing pediatric deaths and injuries; and
18 ▶ encourages the Department of Health to form a multi-stakeholder Pediatric Trauma
19 and Quality Assurance Network to advise the department on triage, transport,
20 transfer, and treatment of ill and injured pediatric patients.

21 **Special Clauses:**

22 None

24 *Be it resolved by the Legislature of the state of Utah:*

25 WHEREAS, children make up 32% of the population in Utah;

26 WHEREAS, injury is the leading cause of death in the pediatric population;

27 WHEREAS, from 2001 through 2014, 1,003,054 pediatric patients were hospitalized in



28 Utah;

29 WHEREAS, from 2001 through 2014, 27,968 pediatric patients were hospitalized for
30 injury in Utah;

31 WHEREAS, from 2001 through 2014, 3,189 children died from either illness or injury;

32 WHEREAS, from 2001 through 2014, 580 children died as a result of injury;

33 WHEREAS, from 2003 through 2013, 27% of pediatric patients were over-triaged to a
34 Level I pediatric trauma center;

35 WHEREAS, the over-triage of pediatric trauma patients resulted in unnecessary
36 transport charges in excess of \$8,900,000;

37 WHEREAS, Utah Code Section [26-8a-205](#) directs the Department of Health to
38 establish a statewide trauma system;

39 WHEREAS, Utah Code Section [26-8a-205](#) directs the Department of Health to
40 establish a pediatric quality improvement resource program; and

41 WHEREAS, the Department of Health has not yet established a pediatric quality
42 improvement resource program in accordance with Utah Code Section [26-8a-205](#):

43 NOW, THEREFORE, BE IT RESOLVED that the Legislature of the state of Utah
44 urges the Department of Health to convene a multi-stakeholder Pediatric Trauma and Quality
45 Assurance Network to recommend methodology, standards, and guidelines to reduce
46 morbidity, mortality, and the cost of injury and illness to pediatric patients in Utah.

47 BE IT FURTHER RESOLVED that the committee be comprised of pediatric surgeons,
48 emergency physicians, community trauma surgeons, specialists, nurses, emergency medical
49 service providers, medical directors, and staff from the Bureau of Emergency Medical Services
50 and Preparedness who are familiar with the emergency care system and triage, transport, and
51 care of pediatric patients in Utah.

52 BE IT FURTHER RESOLVED that the Legislature of the state of Utah encourages the
53 committee to consider:

54 (1) action that may be taken to decrease health care costs by improving pediatric
55 trauma and emergency care patient transfer practices and by reducing the over-triage of
56 pediatric patients to the Level I Pediatric Trauma and Tertiary Care Center;

57 (2) establishing a statewide pediatric performance improvement network, inclusive of
58 all regions, hospitals, and emergency medical service agencies to collectively and

59 collaboratively improve outcomes for pediatric emergency care patients;
60 (3) ways to reduce pediatric morbidity, mortality, and cost from injury and illness;
61 (4) benchmarking pediatric injury and illness outcomes in regions to study best
62 practices to treat pediatric patients to ensure that the patients are transported to the right place,
63 in the right time, and via the right modality;
64 (5) exploring and initiating telehealth services at appropriate facilities throughout Utah;
65 (6) developing a pediatric emergency care recognition system for hospitals meeting
66 performance standards established by the department;
67 (7) ways to encourage hospitals and EMS agencies to establish pediatric emergency
68 care coordinators to improve pediatric readiness capabilities to care for ill and injured pediatric
69 patients; and
70 (8) ways to provide statewide pediatric education, practice guidelines, and illness and
71 injury prevention resources to emergency medical service providers and hospitals to reduce
72 death and disability from pediatric medical emergencies.
73 BE IT FURTHER RESOLVED that a copy of this resolution be sent to the Department
74 of Health.

Legislative Review Note
Office of Legislative Research and General Counsel