



National
P R P
Pediatric Readiness Project
Ensuring Emergency Care for All Children



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Maternal Child Health Bureau/HRSA/HHS
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Are these locations Pediatric Ready?



FEDERATED STATES OF MICRONESIA



Comprehensive Regional Pediatric Centers



| | |
|-----------------------------|------------|
| CRPC = Orange | Blue |
| = Purple | =Green |





Plan that describes the strategy
Effort that involves partners



Focus on systems rather than individuals





Development of a Standard



FROM THE AMERICAN ACADEMY OF PEDIATRICS

Joint Policy Statement—Guidelines for Care of Children in the Emergency Department

American Academy of Pediatrics, Committee on Pediatric Emergency
Medicine, American College of Emergency Physicians, Pediatric
Committee, Emergency Nurses Association Pediatric Committee

American Academy
of Pediatrics



DEDICATED TO THE HEALTH OF ALL CHILDREN™



Methods for Success



Steps to Success

- Engagement
 - Benchmarking
 - Tool to start discussion
- Analysis
 - Strengths & weaknesses
- Strategic Interventions
QI Model-
 - Plan, Do, Study, Act



- 189 Items on the assessment
- 82 Items Scored for “*Pediatric Readiness*”
- **Perfect Score = 100**

- 6 Major Sections*
 - **Coordination (19 pts)**
 - Staffing (10 pts)
 - QI/PI (7 pts)
 - Safety (14 pts)
 - Policies (17 pts)
 - Equipment (33 points)

*Modified Delphi Process Used



Guidelines for Care of Children in the Emergency Department

This checklist is based on the American Academy of Pediatrics (AAP), American College of Emergency Physicians (ACEP), and Emergency Nurses Association (ENA) 2009 joint policy statement “Guidelines for Care of Children in the Emergency Department,” which can be found online at <http://aappolicy.aapublications.org/cgi/reprint/pediatrics;124/4/1233.pdf>. Use the checklist to determine if your emergency department (ED) is prepared to care for children.

Upon Completion Receive a Live Gap Analysis:

Facility Score



Hospital Name: [REDACTED]

Hospital Volume: Medium to High: 5,000 – 9,999 pediatric patients (average of 14-26 a day)

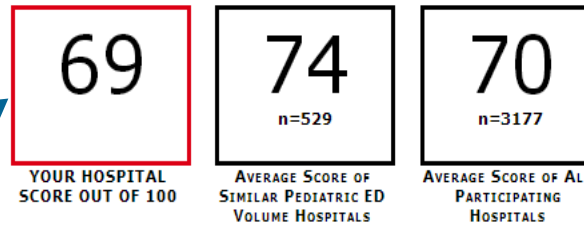
Report Date: 5/29/2013 2:40:18 PM

We encourage you to **print** or **export this report to pdf** as you will not have access to the report after exiting this screen (see the buttons above).



This score represents the essential components needed to establish a foundation for pediatric readiness. Not all of the questions on the assessment are scored. The score is in no way inclusive of all the components recommended for pediatric readiness; it represents a suggested starting point for hospitals. We encourage you to carefully review the [Guidelines for Care of Children in the Emergency Department](#) to develop a comprehensive pediatric readiness program for your hospital. The scoring criteria was developed by a group of clinical experts through a modified-delphi process.

YOUR SCORE AND COMPARATIVE SCORES:



ANALYSIS OF YOUR SCORE:

Below are your scores* for each section of the assessment. The scores are based on the weighted assessment items for each section and are displayed on the right-hand side. The weighted assessment items that you indicated were missing from your ED are listed beneath the section header with an explanation as to why the items are important, as well as links to additional resources for improvement.

* The sum of the sectional scores below may vary slightly from your actual overall readiness score above due to rounding.

Guidelines for Administration and Coordination of the ED for the Care of Children

YOUR SCORE:
19.0 out of 19

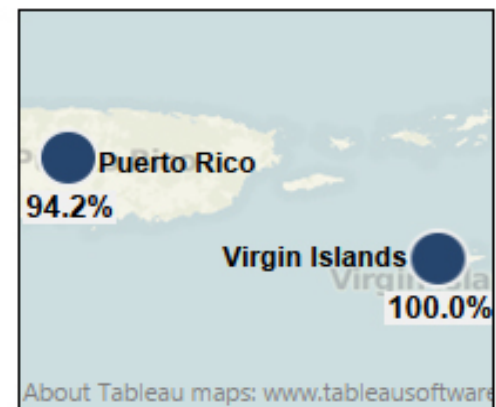
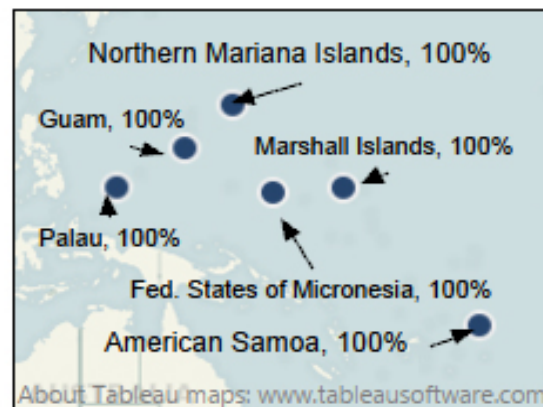
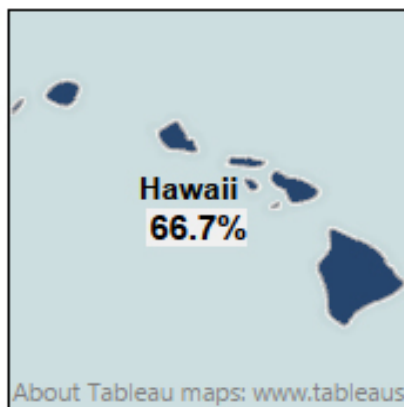
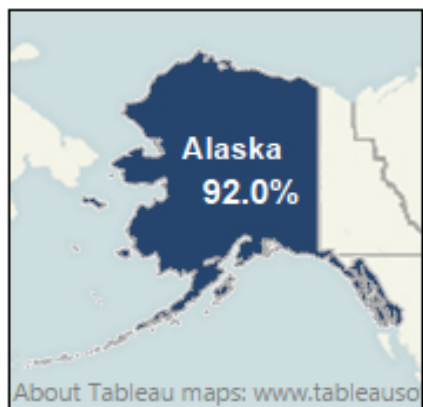
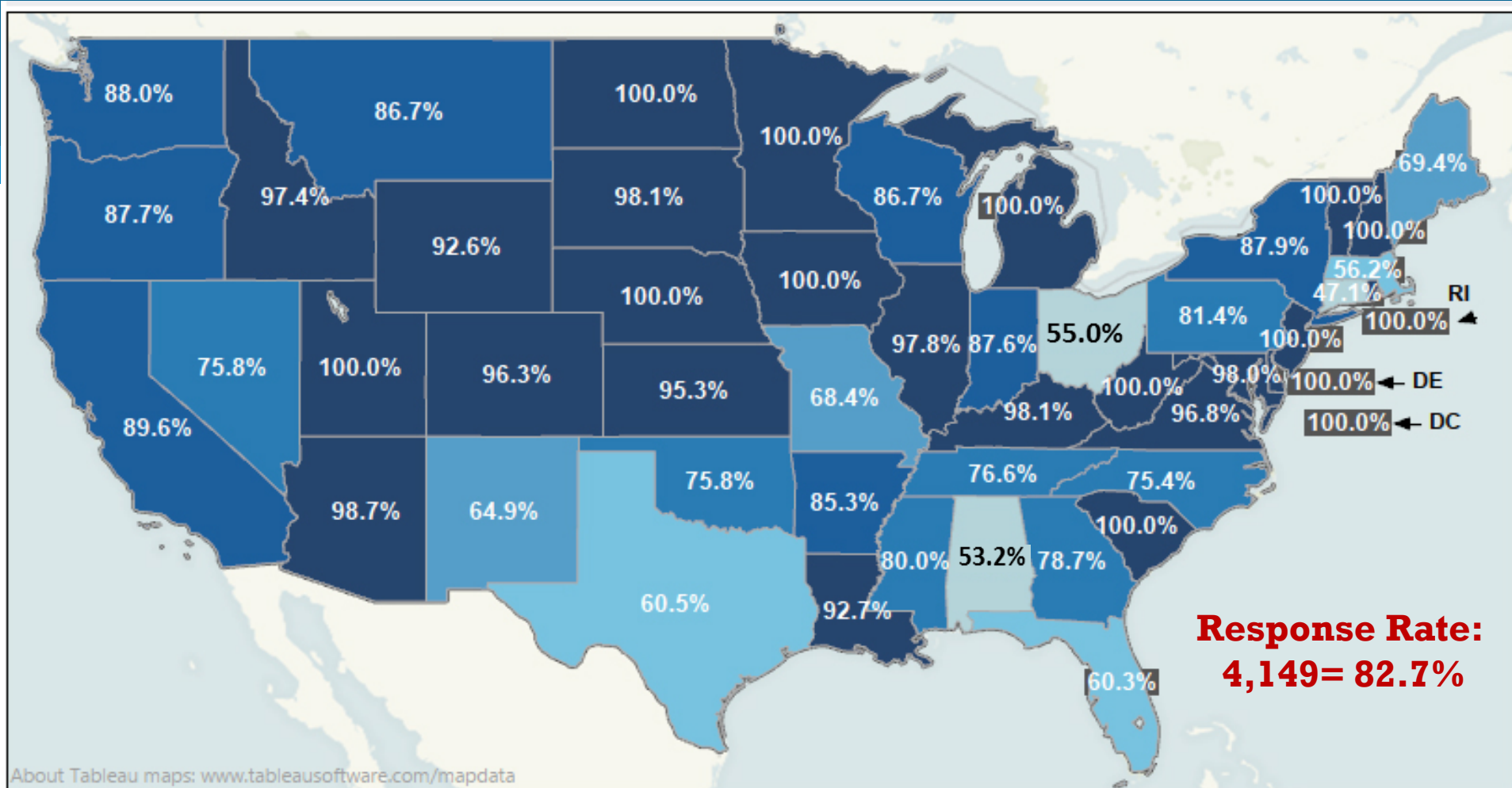
You have all the scored elements in this section. For additional improvement ideas see below.

RESOURCES FOR IMPROVEMENT: For additional resources regarding the guidelines for administration and coordination of the ED refer to the [Guidelines for Care of Children in the Emergency Department](#) or visit the resources available about this section found at www.pediatricreadiness.org under *Readiness Toolkit > Administration and Coordination*.

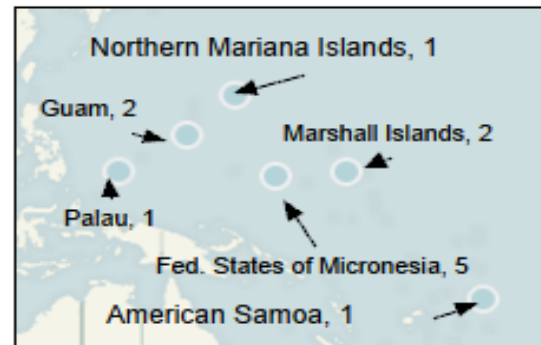
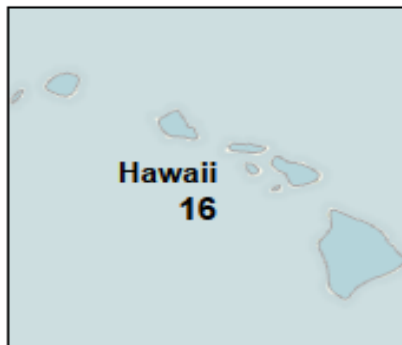
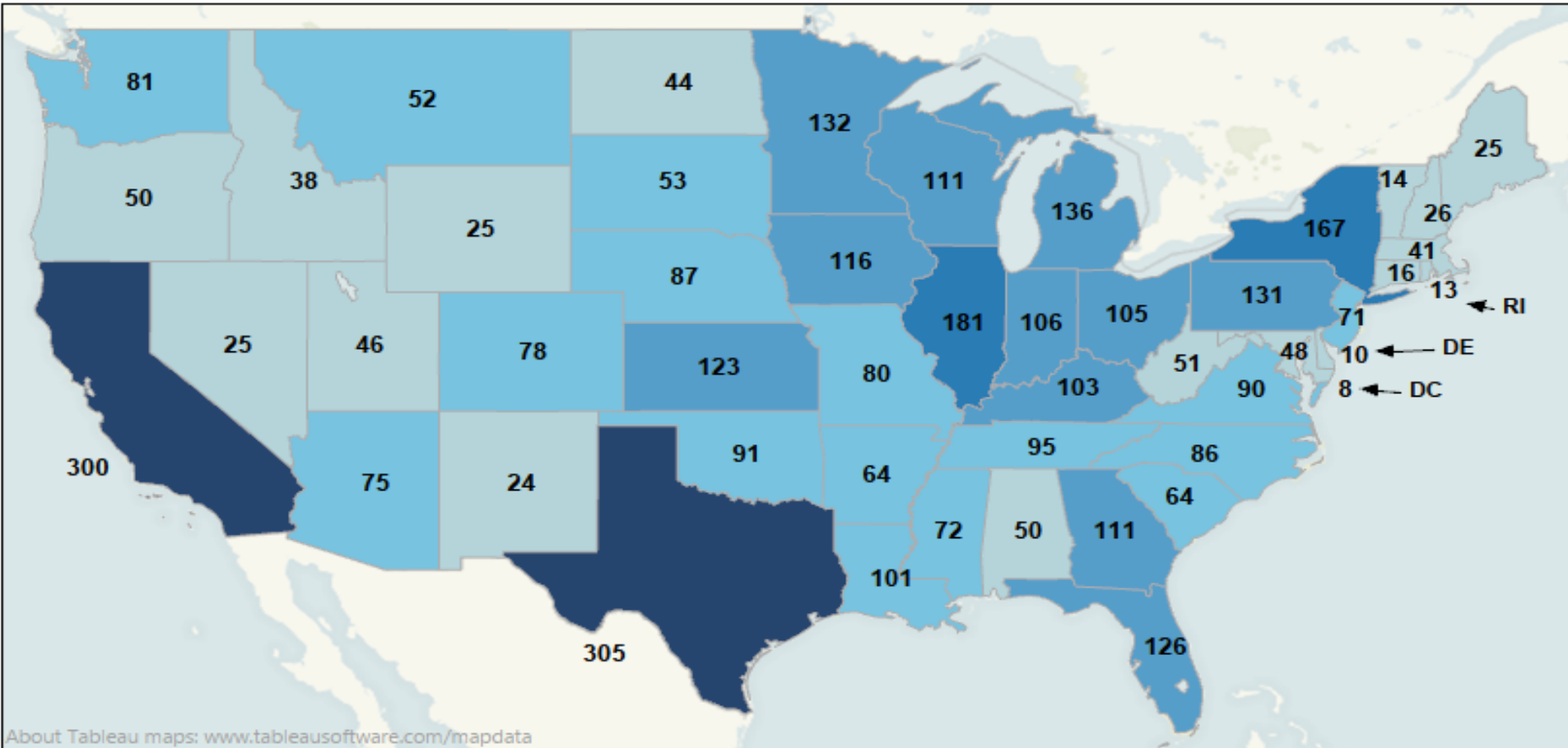
Physicians, Nurses, and Other Health Care Providers Who Staff the ED

YOUR SCORE:
5.0 out of 10

- You indicated that specific pediatric competency evaluations ARE NOT required of physicians staffing the ED.



Number of Respondents



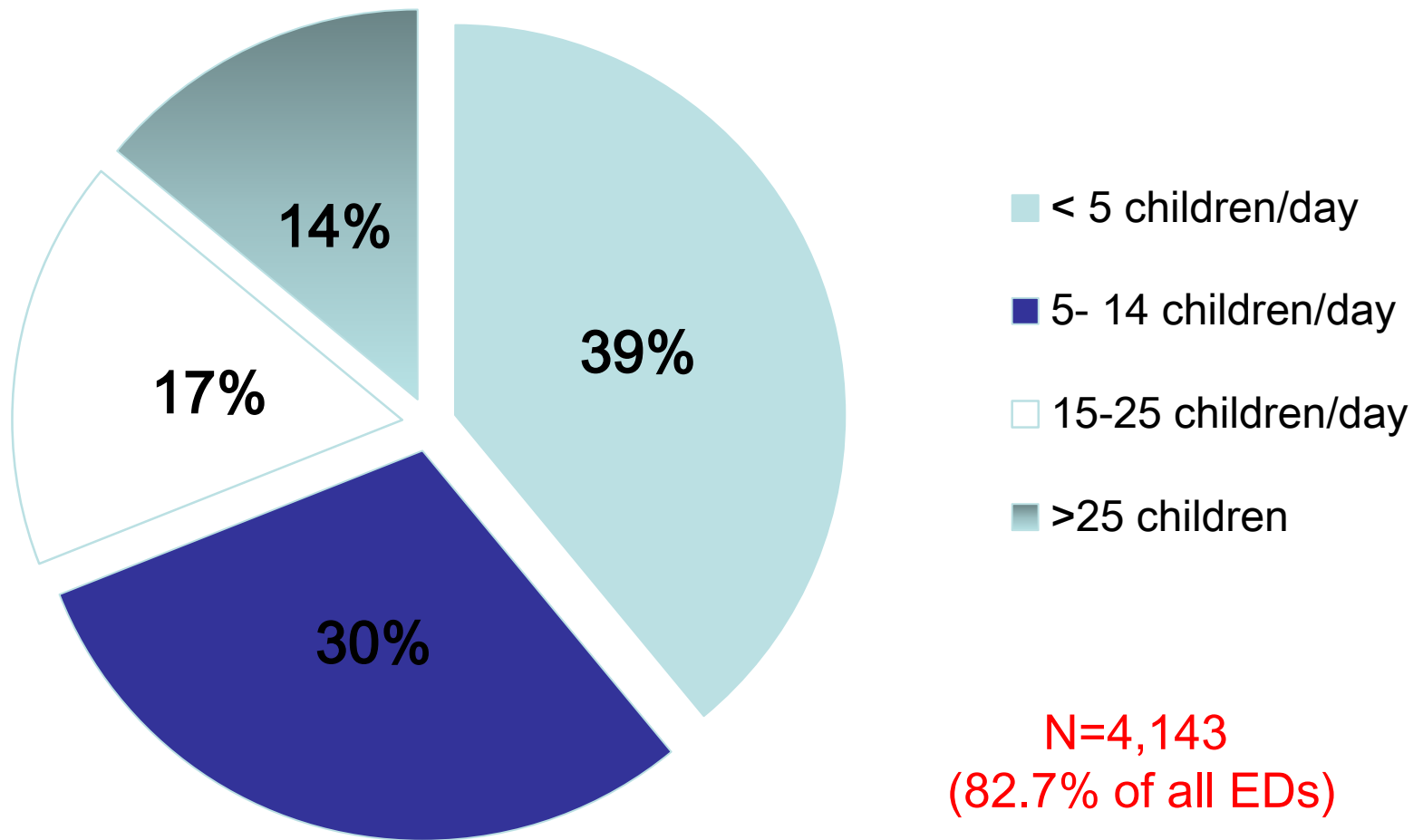


RESULTS - NATIONAL GAP ANALYSIS

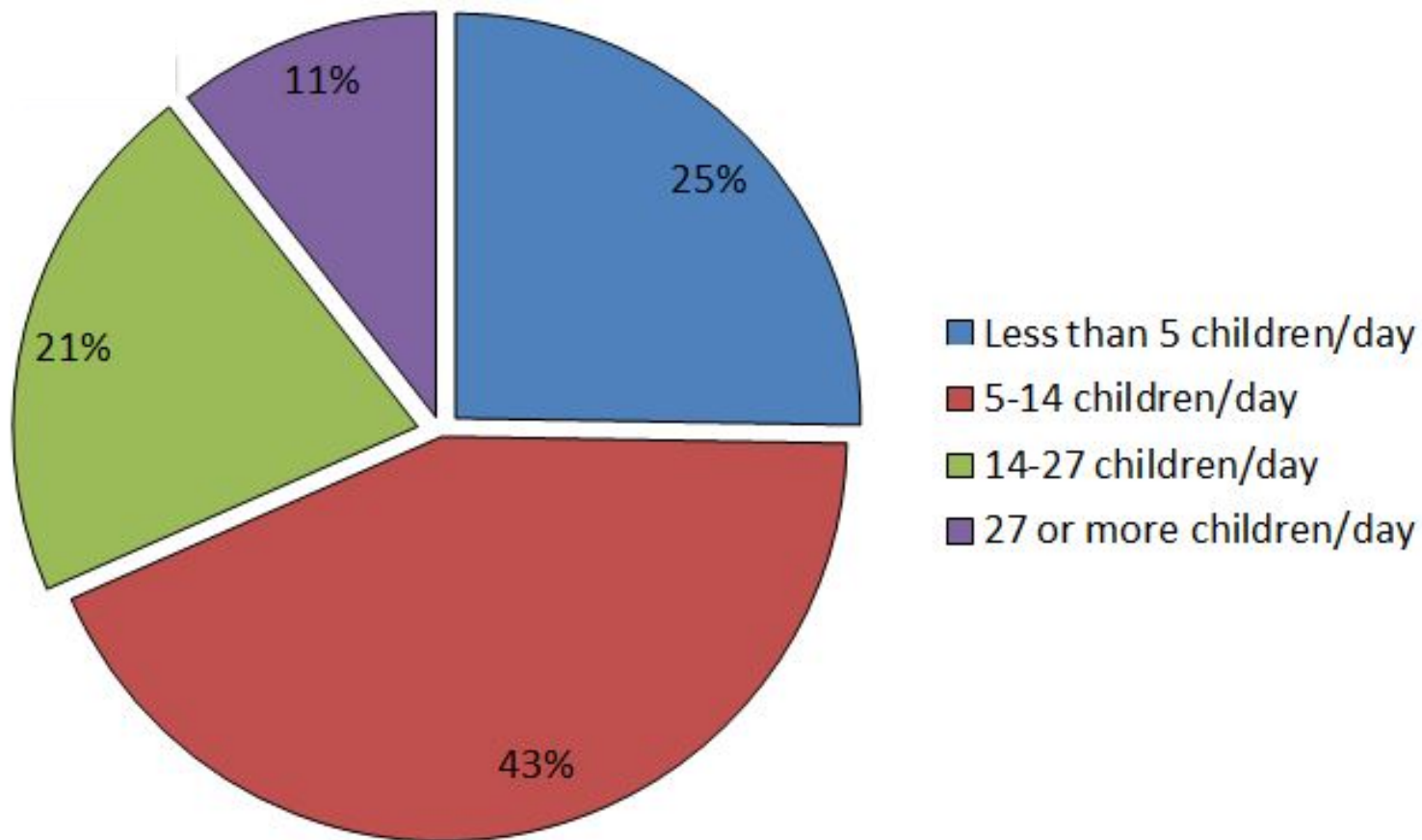


Where are children being seen?

Nation % EDs by Volume



% Tennessee ED's by Volume



N = 95 TN hospitals responding



Benchmarking



Average Pediatric Readiness Scores

| Low Volume (<1800 patients) | Medium Volume (1800-4999 patients) | Medium to High Volume (5000-9999 patients) | High Volume (>=10000 patients) | All Participating Hospitals |
|-----------------------------|------------------------------------|--|--------------------------------|-----------------------------|
| 62 | 70 | 74 | 84 | 69 |
| n = 1,632 | n = 1,241 | n = 707 | n = 563 | n = 4,143 |

Nation

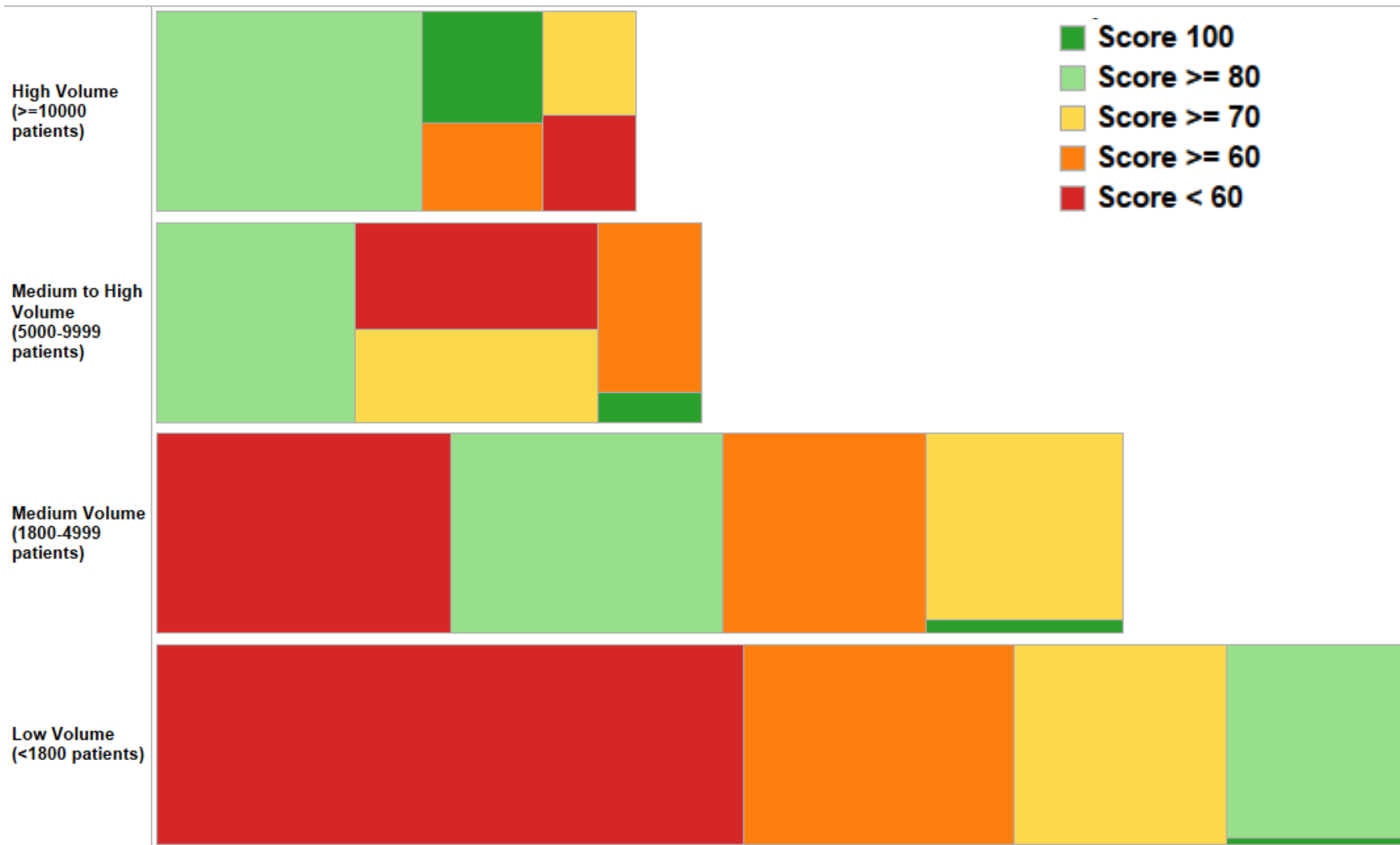
Average Pediatric Readiness Scores

| Low Volume (<1800 patients) | Medium Volume (1800-4999 patients) | Medium to High Volume (5000-9999 patients) | High Volume (>=10000 patients) | All Participating Hospitals |
|-----------------------------|------------------------------------|--|--------------------------------|-----------------------------|
| 82.6 | 82.8 | 85.8 | 96.1 | 89 |
| n = 24 | n = 41 | n = 20 | n = 10 | n = 95 |

Tennessee



Pediatric Readiness by Hospital Volume





The ambulance will never be a helicopter, but can we ensure that the ambulance can get to the helicopter



Basic Statistics from Completed Assessments

| Annual ED Pediatric Patient Volume | Hospitals w/EDs | Average Score | Median Score | Minimum Score | Maximum Score |
|--|-----------------|---------------|--------------|---------------|---------------|
| Low Volume (<1800 patients) | 1,632 | 62 | 61 | 22 | 100 |
| Medium Volume (1800-4999 patients) | 1,241 | 70 | 69 | 27 | 100 |
| Medium to High Volume (5000-9999 patients) | 707 | 74 | 75 | 31 | 100 |
| High Volume (>=10000 patients) | 563 | 84 | 90 | 35 | 100 |
| Grand Total | 4,143 | 69 | 69 | 22 | 100 |

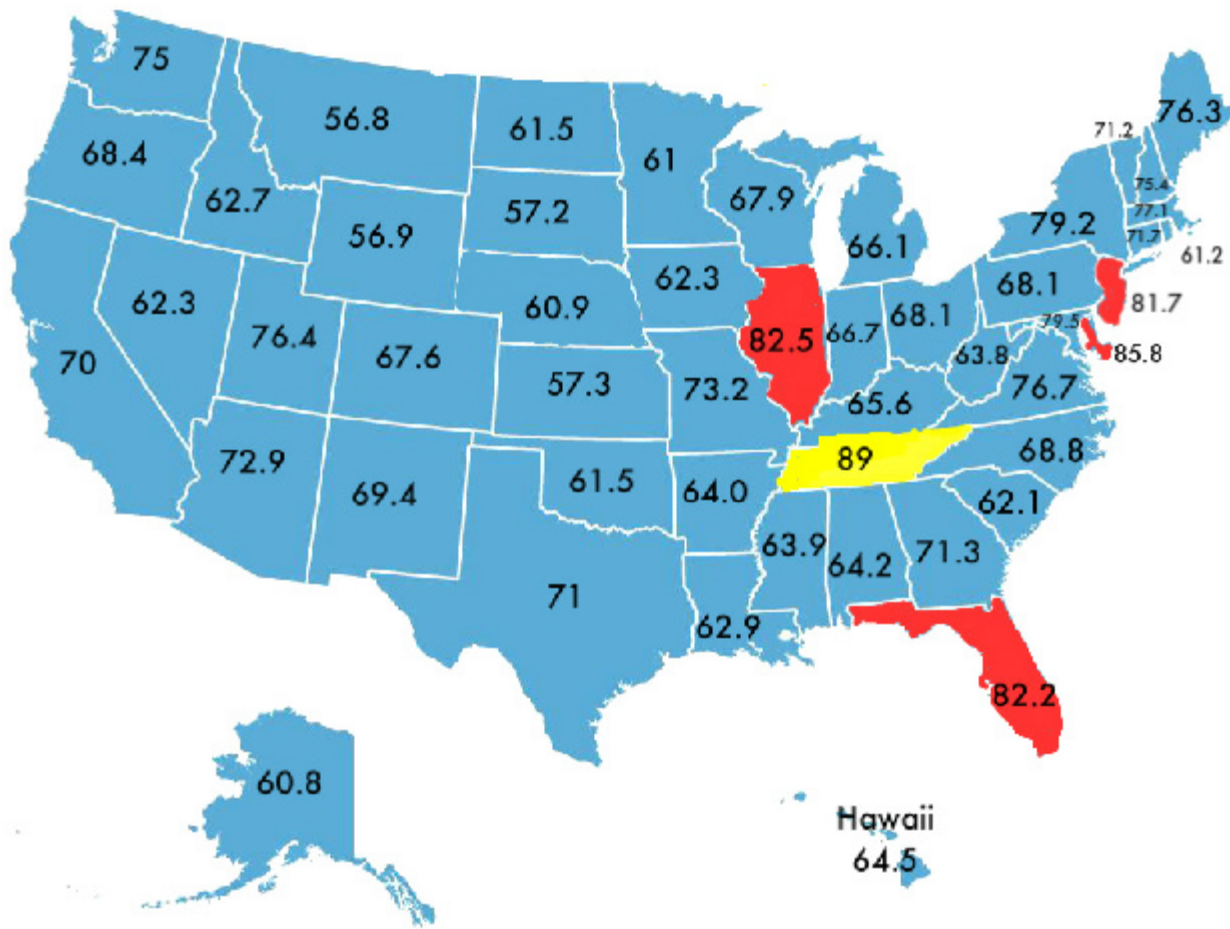
Emergency Department Approved for Pediatrics (EDAP)

| | | | | | |
|---------------------|-----|------|------|------|-----|
| Participating EDAPs | 399 | 81.6 | 87.0 | 30.0 | 100 |
|---------------------|-----|------|------|------|-----|



Stage IV

RESULTS – SOME OF THE DETAILS FOR TN





Median Hospital Score Out of 100

■ Tennessee ■ Nation

88.997



69



Tennessee

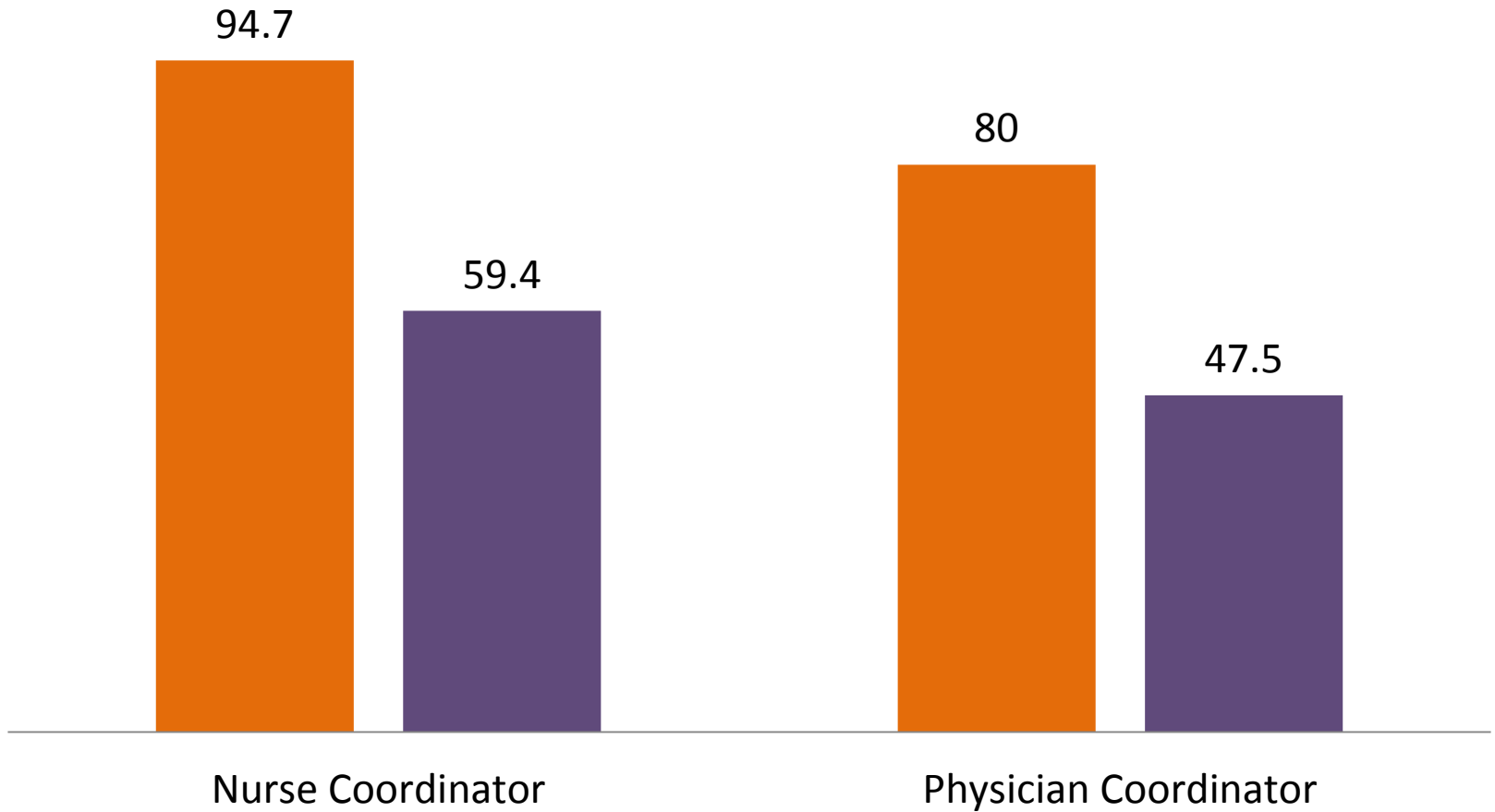
Nation





Guidelines

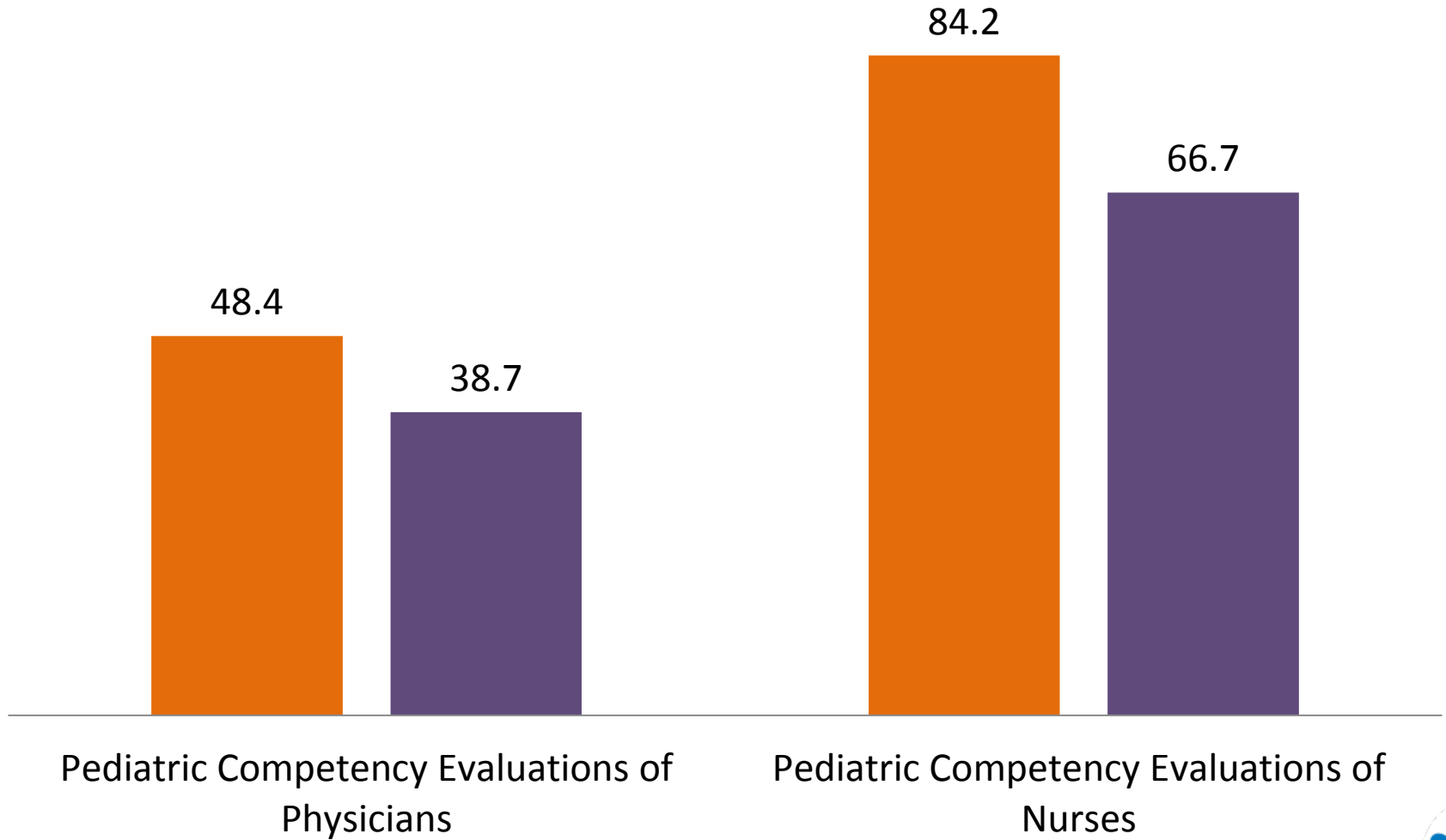
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Competency Evaluations

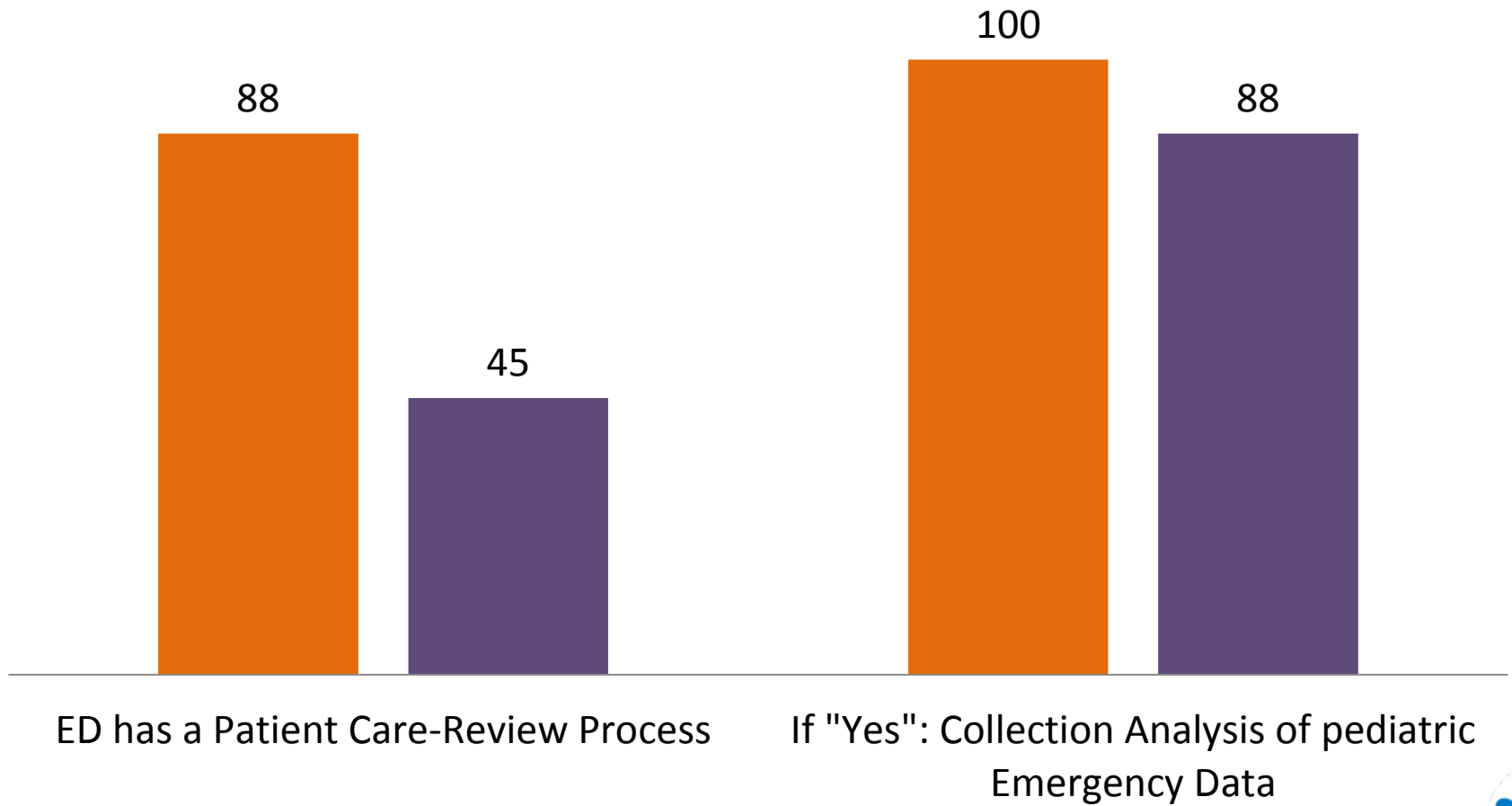
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Guidelines Q1/P1

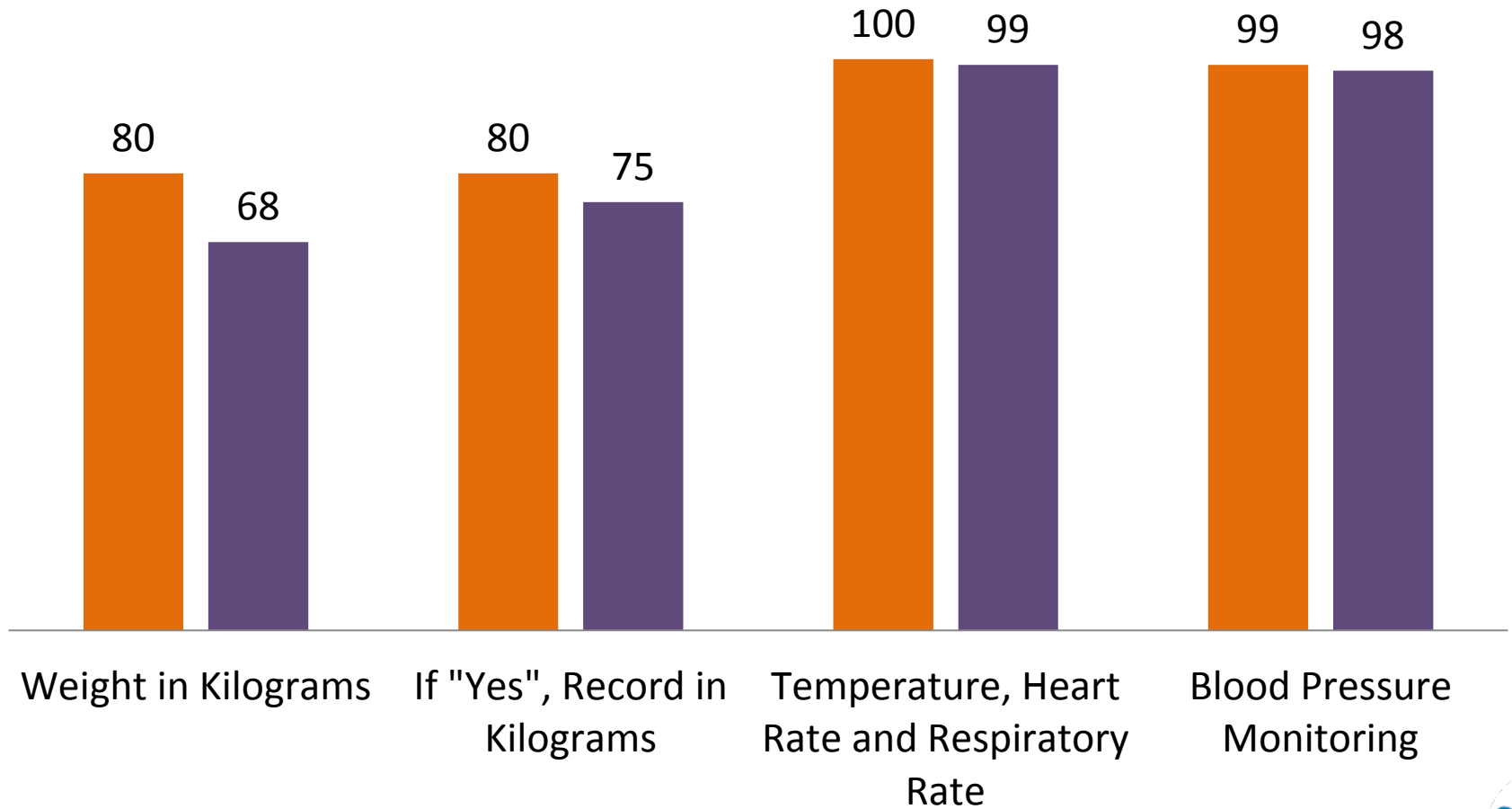
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Safety

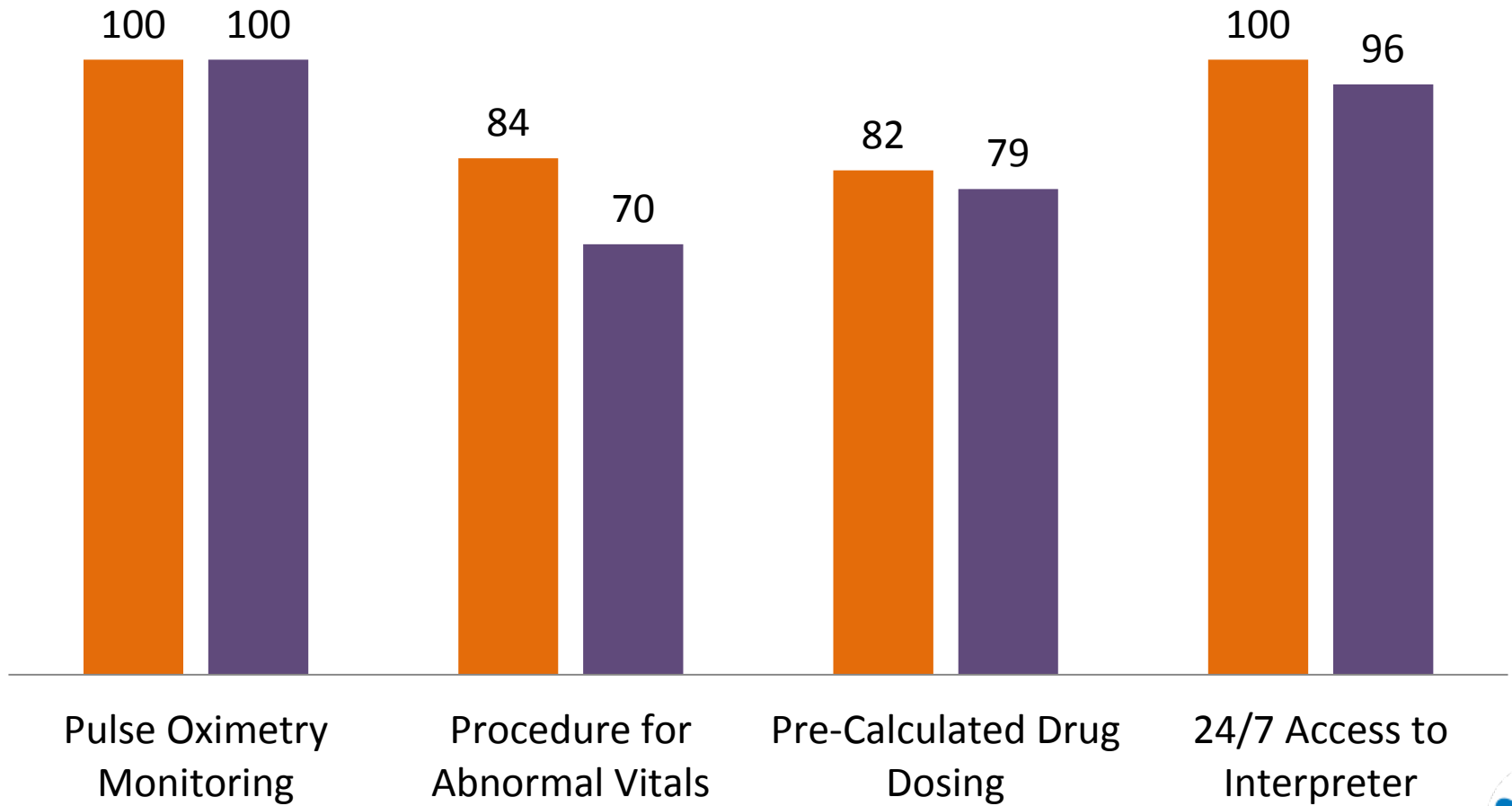
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Safety

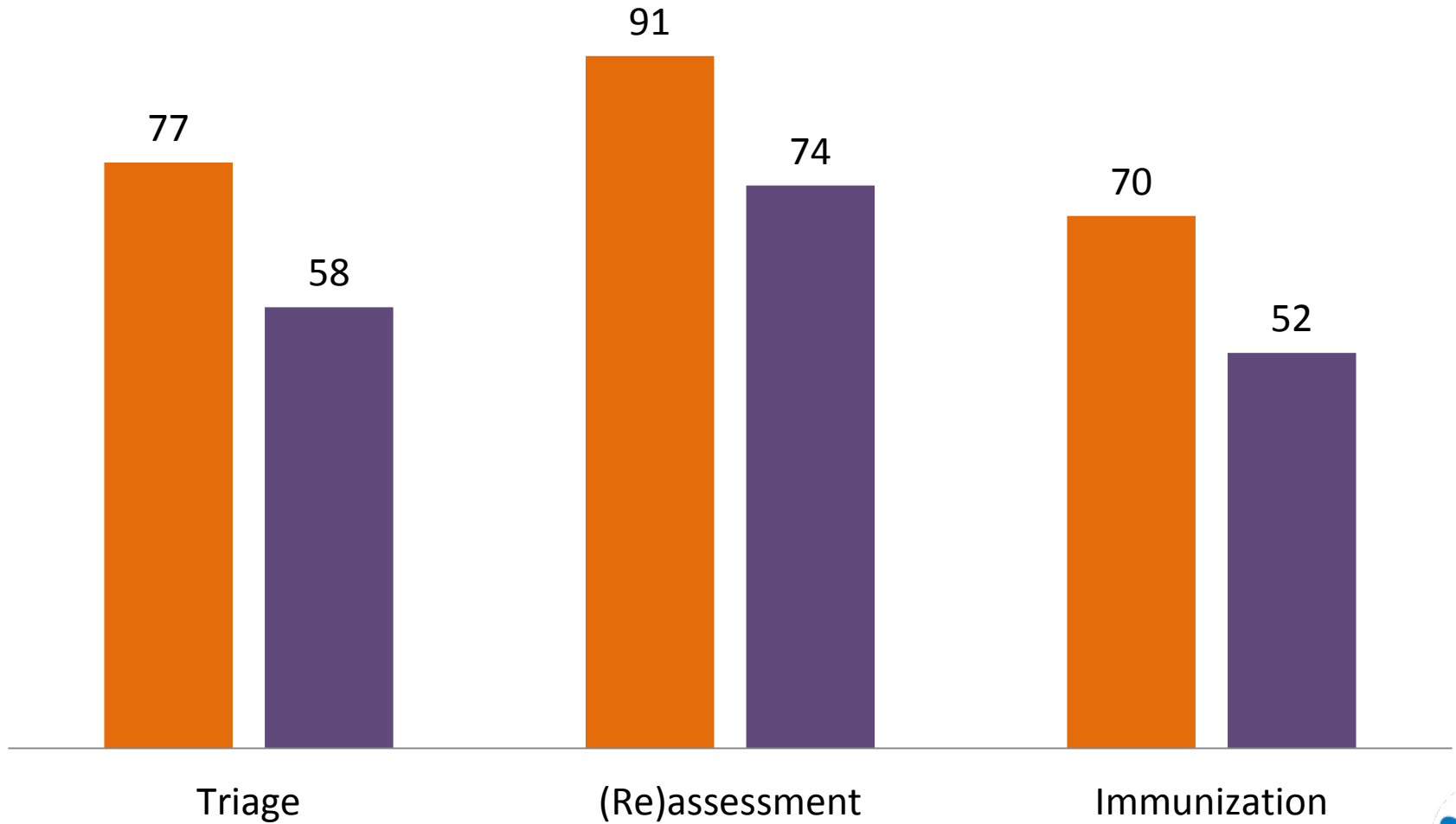
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Guidelines

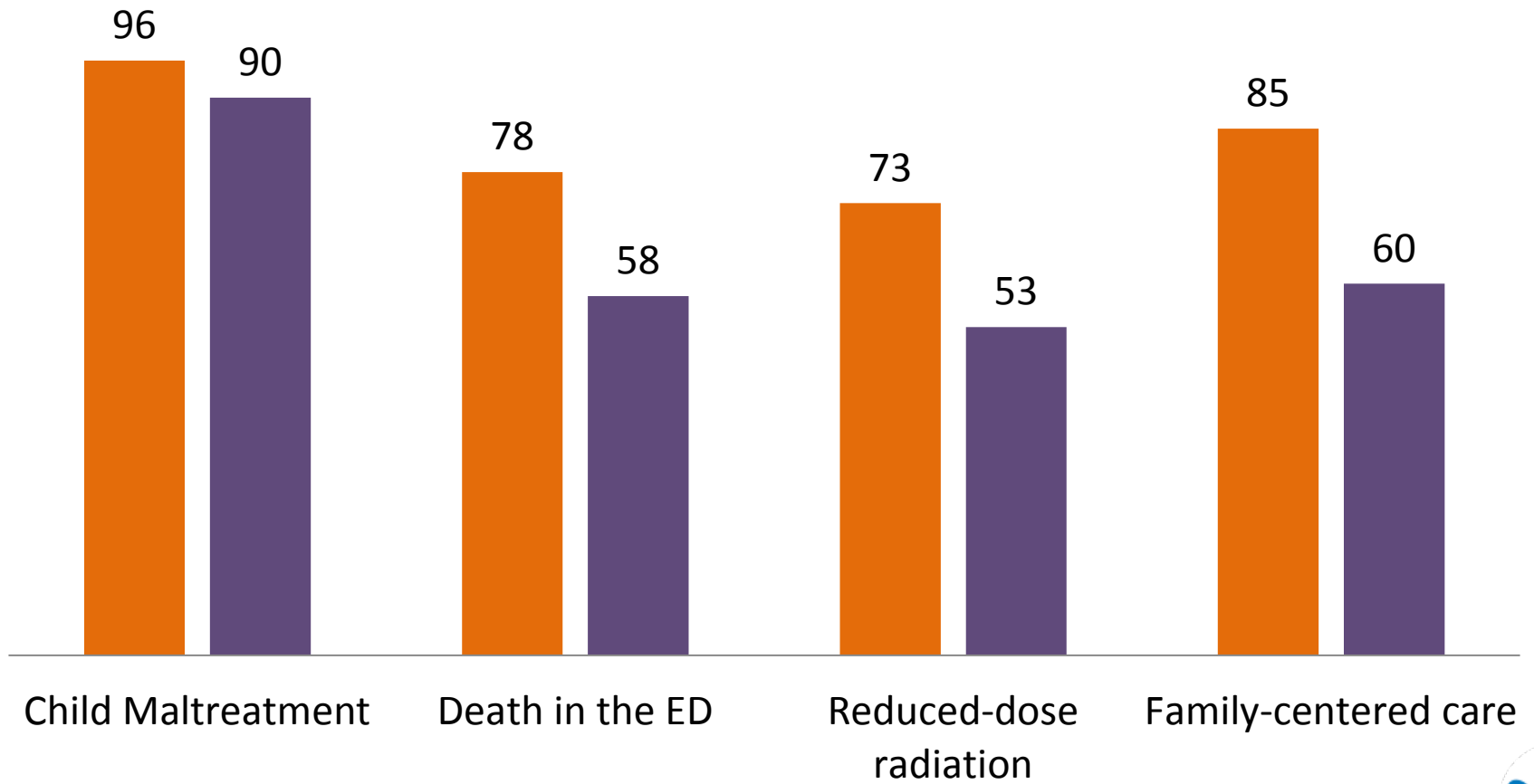
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Guidelines

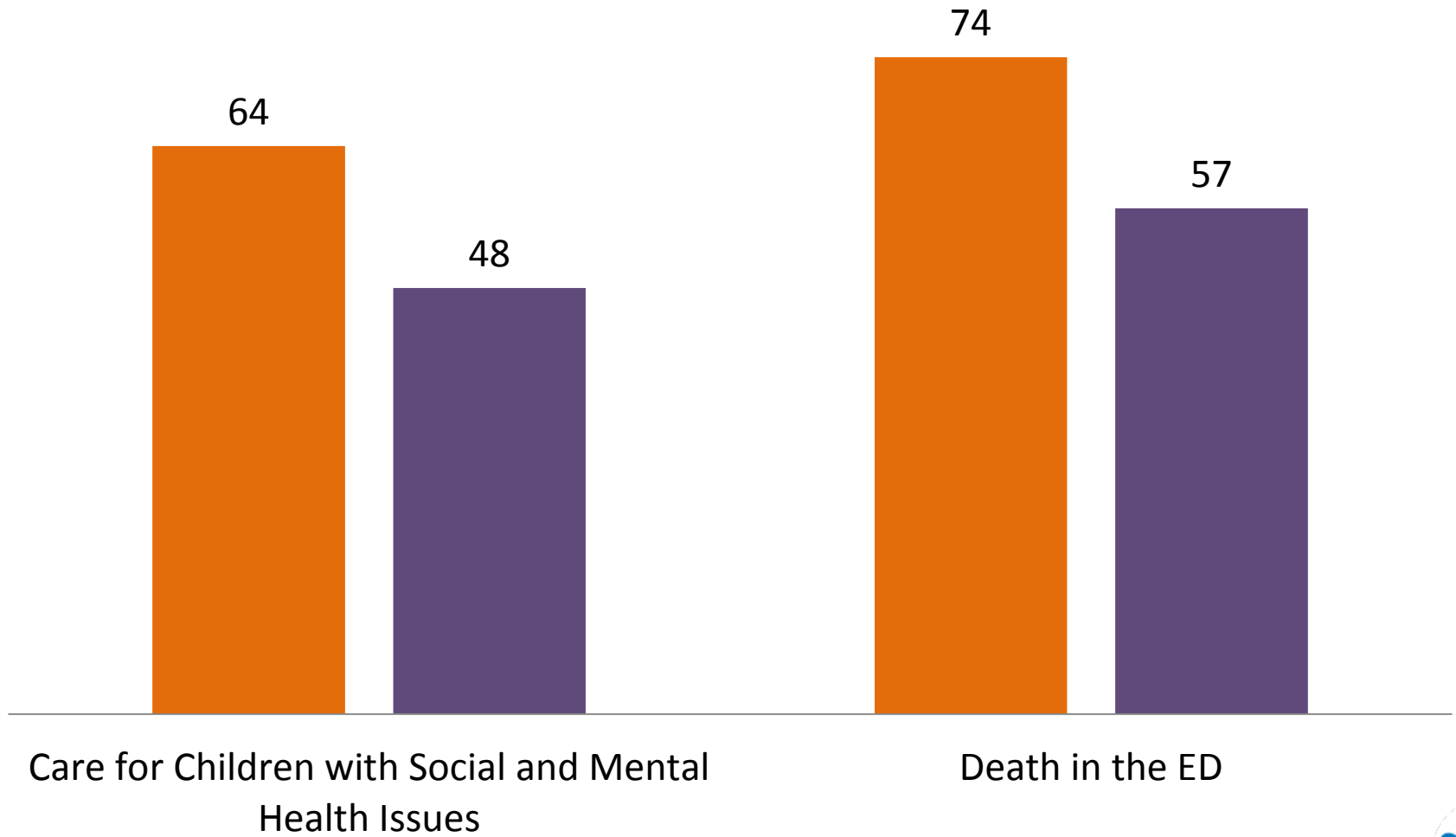
■ Tennessee ■ Nation





Policies and Procedures

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Guidelines

■ Tennessee ■ Nation

70



47



Hospital Disaster Plan Addresses Issue Specific to the Care of Children





Guidelines

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91



71



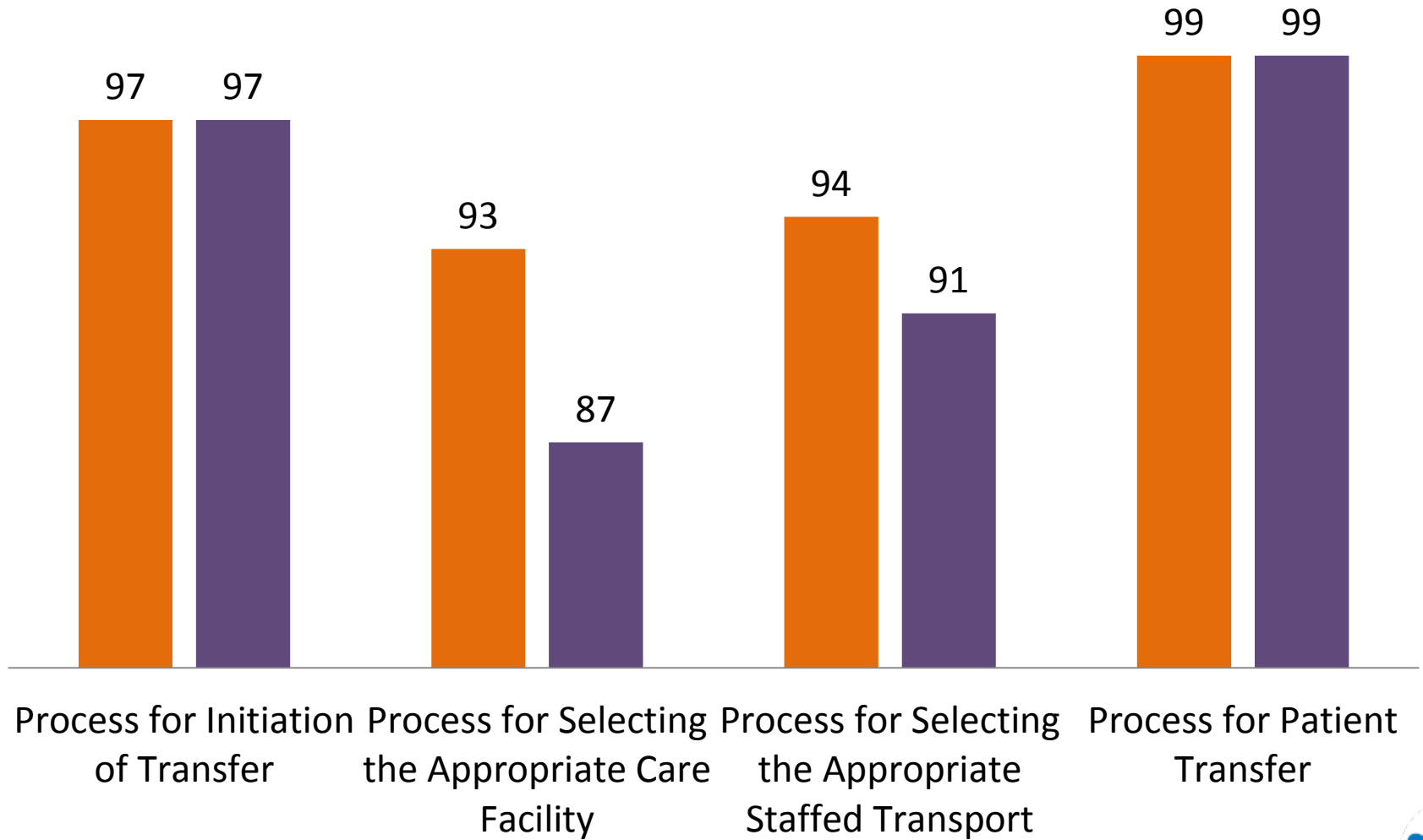
Inter-facility Guidelines





Safety

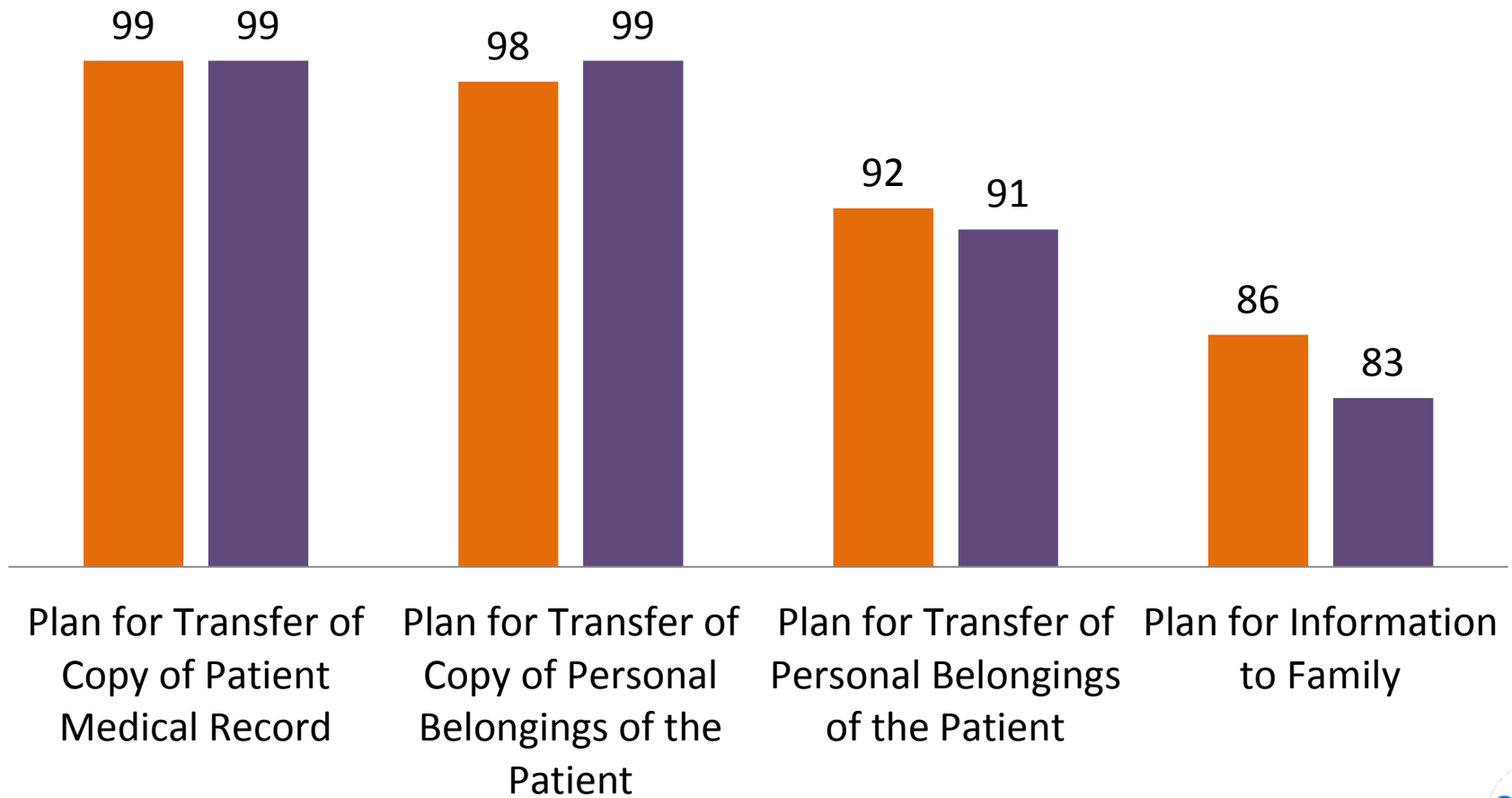
■ Tennessee ■ Nation





Guidelines

■ Tennessee ■ Nation





Agreements

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89



68



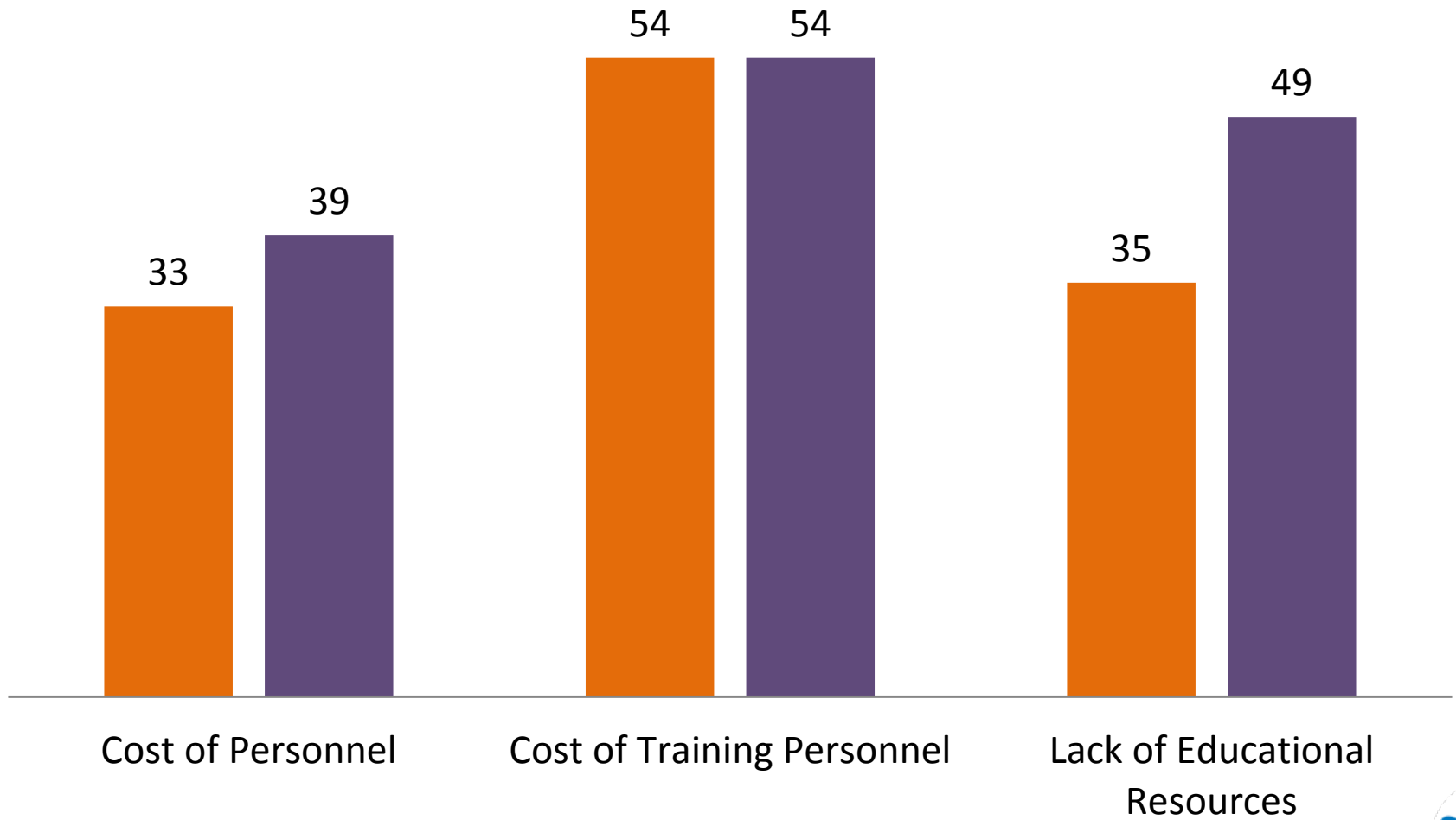
Inter-facility Agreements





Barriers

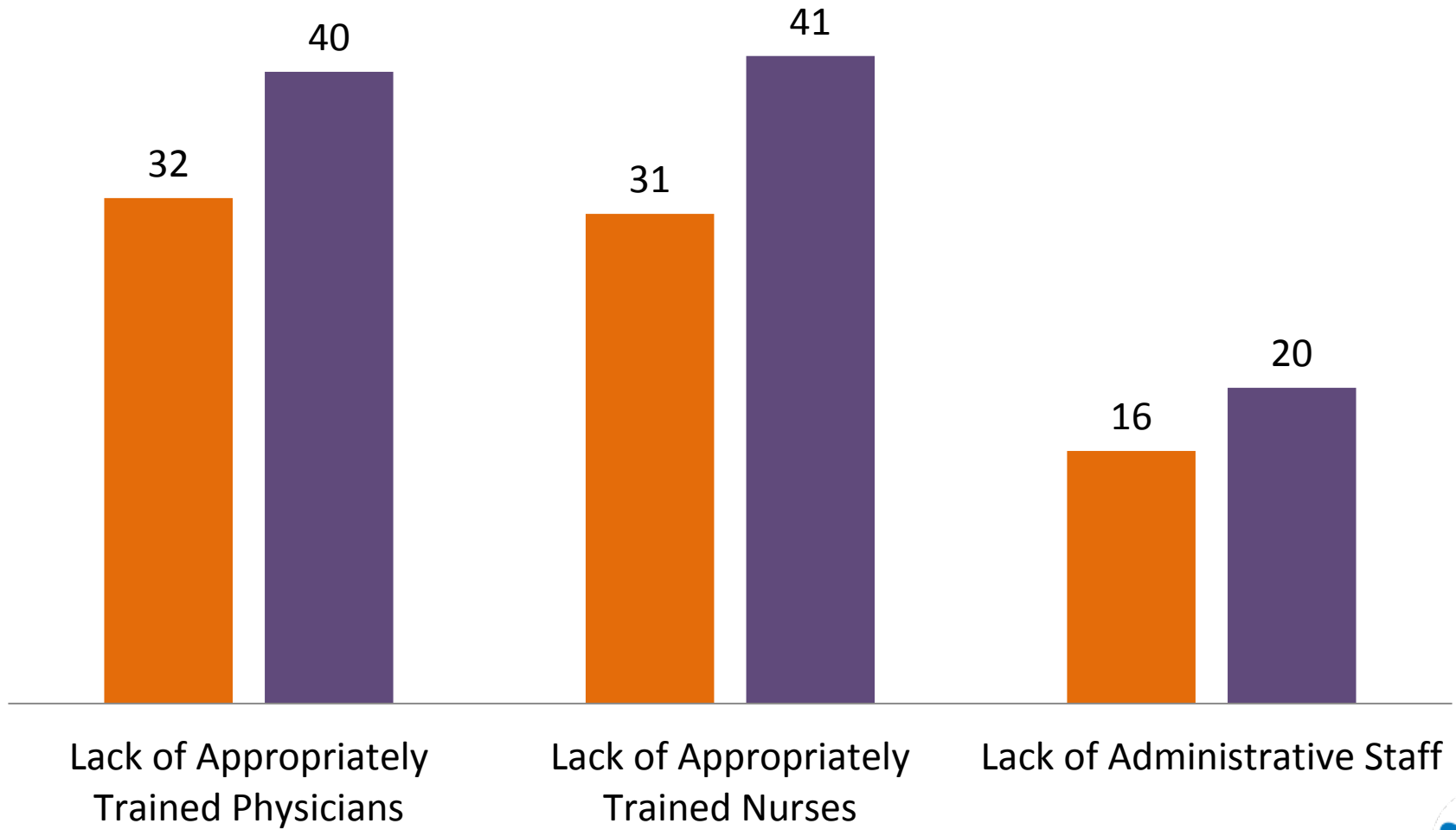
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Barriers

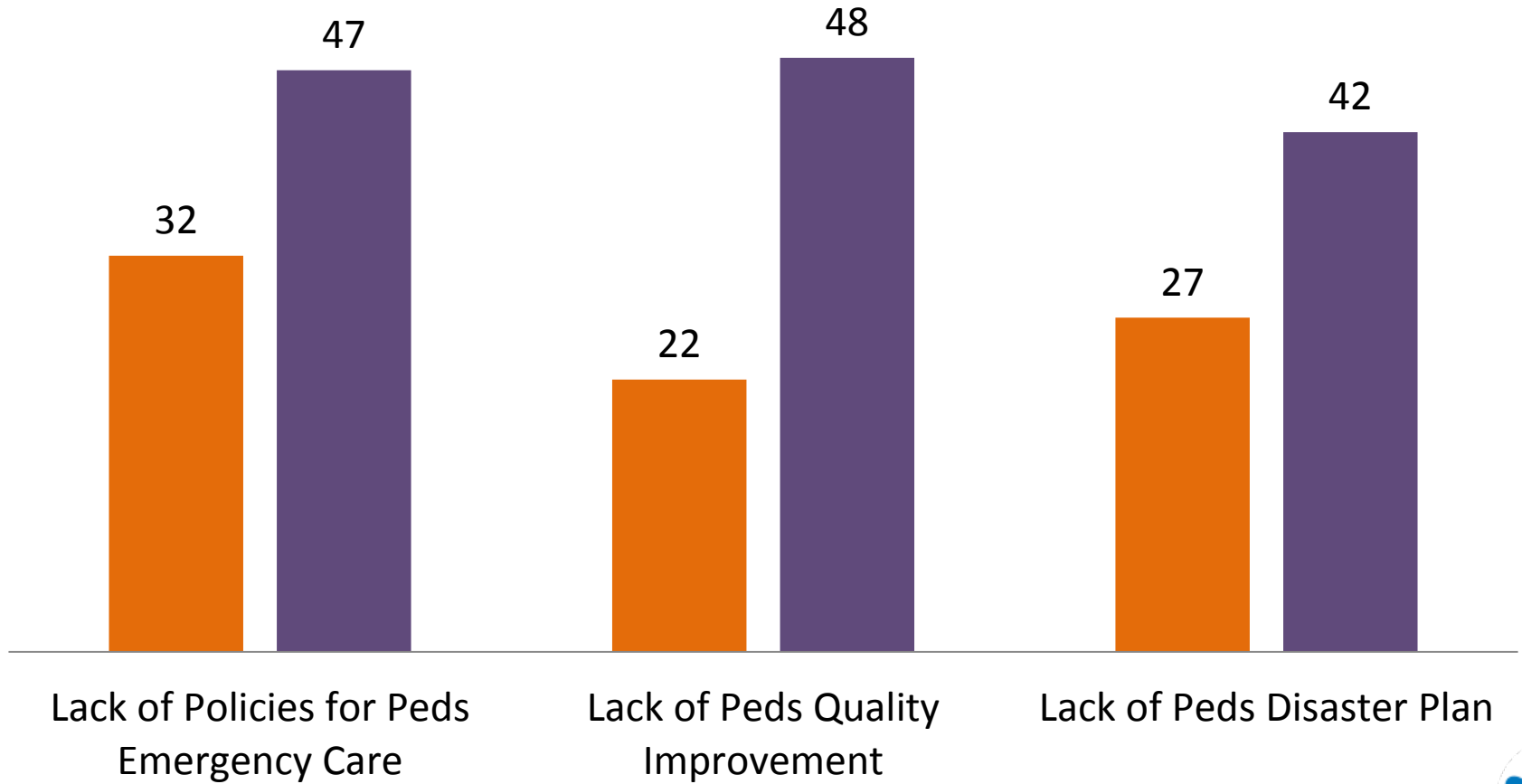
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Barriers

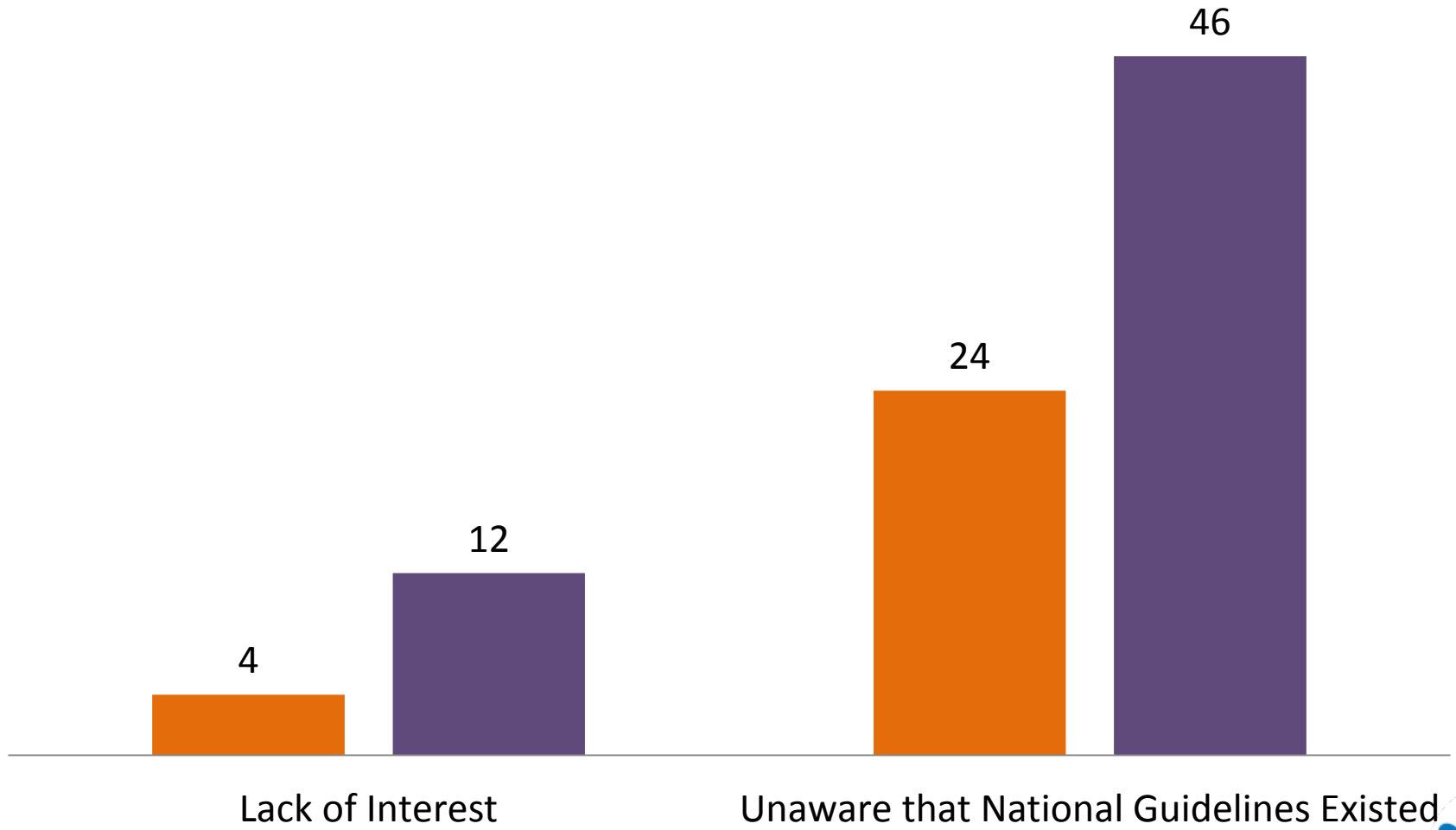
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Barriers

■ Tennessee ■ Nation



Tennessee's EDs are poised to become Peds Ready



Steps to Success

- Engagement
 - Benchmarking
 - Tool to start discussion
- Analysis
 - Strengths & weaknesses
- Strategic Interventions
 - QI Model-
 - Plan, Do, Study, Act





Improvement is a Journey



As the TN CoPEC:

- Acknowledge that “Pediatric Categorization”-has lead to an improved infrastructure
- Support quality pediatric care with pediatric clinical champions
- Engage those that did not participate
- Set achievable goals that resonates with EDs (plan/do)
- Support data collection and evaluation of the EMS-C system (study/act)





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