

Emergency Department Pediatric Recognition Checklist of Materials

| Documentation Acquired | A. Physician Administration/Pediatric Emergency Care Coordinator (MD, DO, APP) | 9.5 points |
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| | 1. Physician Coordinator's CV or resume showing training and specialty board status (if applicable) | 9.5 points* |
| | 2. Documentation that supports the Physician Coordinator's role in overseeing various administrative aspects of pediatric emergency care (e.g., oversees pediatric quality improvement, collaboration with nursing, ensures pediatric skills of staff, develops pediatric policies and periodically reviews pediatric policies). | |
| B. Nurse Pediatric Emergency Care Coordinator (RN or NP) | | 9.5 points |
| | 1. Nurse Coordinator's CV or resume | 9.5 points* |
| | 2. Documentation that supports the Nurse Coordinator's role in overseeing various administrative aspects of pediatric emergency care (e.g., facilitates continuing education, facilitates pediatric quality improvement activities, and ensures pediatric specific elements are included in staff orientation). | |
| C. Personnel: Physicians | | 5 points |
| | 1. Policy for physician credentialing that requires pediatric-specific competencies for working in the ED (e.g., maintenance of board certification, continuing education requirements, hospital specific competency evaluation) | 2.5points |
| | 2. Policy for physician credentialing includes maintenance of board certification | 2.5 points |
| D. Personnel: Nurses | | 5 points |
| | 1. Policy for nurse credentialing that requires pediatric-specific competencies for working in the ED (e.g., maintenance of specialty certifications, continuing education requirements, hospital specific competency evaluation) | 2.5 points |
| | 2. Policy for nurse credentialing includes maintenance of specialty certifications (e.g., CEN, CPEN) | 2.5 points |
| E. Quality Improvement | | 7 points |
| | 1. Documentation of a Quality Improvement/Performance Improvement Plan for pediatric patients, including: | |
| | a. Patient care review process (chart review) | 1.4 points |
| | b. Identification of quality indicators for children (e.g., timely administration of steroids in acute asthma exacerbation or time to antibiotics in the pediatric sepsis patient) | 1.4 points |
| | c. Collection and analysis of pediatric emergency care data (e.g., admissions, transfers, death in the ED, or return visits) | 1.4 points |
| | d. Development of a plan for improvement in the pediatric emergency care process (e.g., process to ensure that variances in care are addressed through education or training and reassessed for evidence of improvement) | 1.4 points |
| | e. Re-evaluation of performance using outcome-based measures (e.g., how often was pain rapidly controlled or fever properly treated?) | 1.4 points |
| F. Pediatric Patient Safety in the ED | | 14 points |
| | 1. Documentation that all children seen in ED are weighed in kilograms (without conversion from pounds) | 1.5 points* |
| | 2. Documentation that all children's weights are recorded in ED medical records in kilograms only | 1.5 points* |
| | 3. Documentation that temperature, heart rate, and respiratory rate are recorded on all children | 1 point |
| | 4. Documentation that blood pressure monitoring is available for children of all ages based on severity of illness | 1 point |
| | 5. Documentation that pulse oximetry monitoring is available for children of all ages based on severity of illness | 1 point |

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| | 6. Documentation that end tidal CO2 monitoring is available for children of all ages based on severity of illness | 0.5 points |
| | 7. Documentation of a process for notification (manual or automated) of physicians when abnormal vital signs are found | 3 points |
| | 8. Documentation of a process for the use of pre-calculated drug dosing in all children | 3 points |
| | 9. Documentation of a process that allows for 24/7 access to interpreter services in the ED | 0.5 points |
| | 10. Documentation that level of consciousness (e.g., AVPU or GCS) assessed in all children | 0.5 point |
| | 11. Documentation that level of pain is assessed in all children | 0.5 points |
| | G. Policies and Procedures | 17 points |
| | 1. Documentation of a triage policy that specifically addresses ill and injured children | 2 points |
| | 2. Documentation of policies, procedures or plans for pediatric patient assessment and reassessment | 1.5 points |
| | 3. Documentation of policies, procedures, or plans for immunization assessment and management of the under-immunized child | 1.5 points |
| | 4. Documentation of policies, procedures, or plans for child maltreatment | 1.5 points |
| | 5. Documentation of policies, procedures, or plans for death of a child in the ED | 1.5 points |
| | 6. Documentation of policies, procedures, or plans for reduced-dose radiation for CT and x-ray imaging based on pediatric age or weight | 1.5 points |
| | 7. Documentation of policies, procedures, or plans for behavioral issues for children of all ages | 1.5 points |
| | 8. A family-centered care policy involving: | |
| | a. Involving families and caregivers in patient care decision-making | 0.4 points |
| | b. Involving families and caregivers in medication safety processes | 0.4 points |
| | c. Family and guardian presence during all aspects of emergency care, including resuscitation | 0.4 points |
| | d. Education of the patient, family, and caregivers on treatment plan and disposition | 0.4 points |
| | e. Bereavement counseling | 0.4 points |
| | 9. A disaster plan including: | |
| | a. Availability of medications, vaccines (e.g., tetanus and influenza), equipment, supplies, and appropriately trained providers for children in disasters | 0.29 points* |
| | b. Decontamination, isolation, and quarantine of families and children of all ages | 0.29 points* |
| | c. Minimization of parent-child separation and methods for reunited separated children with their families | 0.29 points* |
| | d. All disaster drills include pediatric patients | 0.29 points* |
| | e. Pediatric surge capacity for both injured and non-injured children | 0.28 points* |
| | f. Access to behavioral health resources for children in the event of a disaster | 0.28 points* |
| | g. The care of children with special health care needs, including children with developmental disabilities | 0.28 points* |
| | 10. Documentation of written interfacility guidelines that outline procedural and administrative policies with other hospitals for the transfer of patients of all ages including children in need of care not available at your hospital involving: | 2 points* |
| | a. Defined process for initiation of transfer, including the roles and responsibilities of the referring facility and referral center (including responsibilities for requesting transfer and communication) | |
| | b. Process for selecting the appropriate care facility | |
| | c. Process for selecting the appropriately staffed transport service to match the patient's acuity level (e.g., level of care required by patient or equipment needed in transport) | |
| | | *Unscored but |

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| | d. Process for patient transfer (including obtaining informed consent) | required for recognition |
| | e. Plan for transfer of copy of patient medical record | |
| | f. Plan for transfer of a copy of the signed transport consent | |
| | g. Plan for transfer of personal belongings of the patient | |
| | h. Plan for provision of directions and referral institution | |
| | 11. Documentation of written interfacility transfer agreement(s) with other hospitals for the transfer of patients of all ages including children in need of care not available at your hospital. | *Unscored but required for recognition |
| | H. Equipment and Supplies Management | 33 points |
| | 1. Evidence of process for training all ED staff on the location of all pediatric equipment and medications | 3 points |
| | 2. Evidence of a daily method used to verify the proper location and stocking of pediatric equipment and supplies | 3 points |
| | 3. Evidence of a standardized chart or tool to estimate weight if resuscitation precludes the use of a weight scale (e.g., length-based tape) | 3 points |
| | 4. Monitoring equipment: | |
| | a. Neonatal blood pressure cuff | 0.5 points |
| | b. Infant blood pressure cuff | 0.5 points |
| | c. Child blood pressure cuff | 0.5 points |
| | d. Defibrillator with pediatric and adult capabilities including pads and/or paddles | 0.5 points |
| | e. Pulse oximeter with pediatric and adult probes | 0.5 points |
| | f. Continuous end-tidal CO2 monitoring device | 0.5 points |
| | 5. Resuscitation equipment: | |
| | a. 22 gauge catheter-over-the-needle | 0.5 points |
| | b. 24 gauge catheter-over-the-needle | 0.5 points |
| | c. Pediatric intra-ossus needles | 0.5 points |
| | d. IV administration sets with calibrated chambers or an infusion pump with the ability to regulate rate and volume of infusate (e.g., buretrol) | 0.5 points |
| | 6. Airway equipment: | |
| | a. Endotracheal tubes: cuffed or uncuffed 2.5 mm | 0.575 points |
| | b. Endotracheal tubes: cuffed or uncuffed 3.0 mm | 0.575 points |
| | c. Endotracheal tubes: cuffed or uncuffed 3.5 mm | 0.575 points |
| | d. Endotracheal tubes: cuffed or uncuffed 4.0 mm | 0.575 points |
| | e. Endotracheal tubes: cuffed or uncuffed 4.5 mm | 0.575 points |
| | f. Endotracheal tubes: cuffed or uncuffed 5.0 mm | 0.575 points |
| | g. Endotracheal tubes: cuffed or uncuffed 5.5 mm | 0.575 points |
| | h. Endotracheal tubes: cuffed or uncuffed 6.0 mm | 0.575 points |
| | i. Laryngoscope blades: straight, size 0 | 0.576 points |
| | j. Laryngoscope blades: straight, size 1 | 0.576 points |
| | k. Laryngoscope blades: straight, size 2 | 0.576 points |
| | l. Laryngoscope blades: curved, size 2 | 0.576 points |
| | m. Pediatric-sized Magill forceps | 0.576 points |
| | n. Nasopharyngeal airways: infant-sized | 0.576 points |
| | o. Nasopharyngeal airways: child-sized | 0.576 points |
| | p. Oropharyngeal airways: size 0 | 0.576 points |
| | q. Oropharyngeal airways: size 1 | 0.576 points |
| | r. Oropharyngeal airways: size 2 | 0.576 points |

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| | s. Oropharyngeal airways: size 3 | 0.576 points |
| | t. Stylets for pediatric/infant-sized endotracheal tubes | 0.576 points |
| | u. Bag-mask device, self-inflating (infant/child) | 0.576 points |
| | v. Masks (neonatal size) to fit bag-mask device | 0.576 points |
| | w. Masks (infant size) to fit bag-mask device | 0.576 points |
| | x. Masks (child size) to fit bag-mask device | 0.576 points |
| | y. Simple oxygen face masks: standard infant | 0.576 points |
| | z. Clear oxygen masks: standard child | 0.576 points |
| | aa. Non-rebreather masks: infant-sized | 0.576 points |
| | bb. Non-rebreather masks: child-sized | 0.576 points |
| | cc. Nasal cannulas: infant | 0.576 points |
| | dd. Nasal cannulas: child | 0.576 points |
| | ee. Suction catheters: at least one in range 6-8F | 0.576 points |
| | ff. Suction catheters: at least one in range 10-12F | 0.576 points |
| | gg. Supplies/kit for pediatric patients with difficult airways (e.g., supraglottic airways, needle cricothyrotomy supplies, surgical cricothyrotomy kit, and/or video laryngoscopy) | 0.576 points |
| | I. Hospital Administrator Support | |
| | 1. Letter signed by hospital administrator (chief executive officer, chief operating officer, and/or chief medical officer) supporting Emergency Department Pediatric Recognition. | *Unscored but required for recognition |

Items marked with "*" are required for recognition

Total Points Awarded: