# Understanding pediatric readiness in community emergency departments in Northern California: a mixed methods study

Rachel T. Chan, BS, James P. Marcin, MD MPH, Julia N. Magaña, MD, Sarah C. Haynes, PhD MPH

#### Introduction

- Access to pediatric emergency care is often lacking for children living in rural and underserved communities
- Hospitals in rural communities are generally less prepared to handle pediatric emergencies
- Training and resources were provided to community ED providers through a 7-year UC Davis program (TACTICAL)

## Objectives

- To describe pediatric readiness in community EDs in Northern California
- To identify areas needing improvement in pediatric readiness in community EDs to inform future training and educational programs

### Methods

#### Quantitative Analysis:

- Sample: 25 hospitals that were reached by our program between 2011-2017
- Survey data collected by the National Pediatric Readiness Project
- Repeated measures analysis using multilevel linear regression to examine differences in pediatric readiness scores over time

#### Qualitative Analysis:

- Interviews with ED physicians and nurses from participating TACTICAL hospitals
- Each transcript was coded for themes and subthemes using line by line coding

#### Integration

 Integrated qualitative and quantitative data using joint displays

## Results





- Scores for administration/coordination, personnel, quality improvement, and equipment improved more in intervention hospitals
- Qualitative data support quantitative findings:
  - Respondents report that having a pediatric nurse champion promotes long-lasting quality improvement initiatives
  - Respondents reported having appropriate pediatric equipment

#### Conclusions

- Supporting pediatric nurse champions in community EDs can bring about lasting improvements in pediatric readiness
- Providing funds to purchase pediatric specific equipment improved access to sites' pediatric specific equipment