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17TH ANNUAL CHILD HEALTH RESEARCH DAYS

# Nutrition for a Changing World

The Science of Nourishing the Next Generation

## CHRD 2021: Abstract & Poster Submission Form

### Submitter Name

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### Research Category:

- Basic Science
- Clinical
- Community Health / Policy

### What was your role in the project?

- Design
- Perform Experiments
- Analyze Data
- Write Abstract

### Presenter Status:

- Undergraduate Students
- Masters Student
- PhD Student
- Post-Doctoral Fellows
- Residents
- Non-Trainee

**Title**

Evaluation of baseline pediatric readiness of emergency departments in Manitoba, Canada

**Background**

Recent evidence suggests an inverse association between pediatric readiness of emergency departments (EDs) and mortality.

**Objective**

To assess the baseline pediatric readiness of EDs across Manitoba to care for acutely ill and injured children.

**Methods**

A cross-sectional survey study was conducted in 2019-2020 using a validated pediatric readiness research checklist to obtain information on the 6 domains of EDs in Manitoba. The domains included patient care coordination, ED staffing and training, quality improvement, patient safety, policies and procedures, pediatric equipment/supplies. Eligible EDs were the EDs that managed acutely ill patients from (0-17th birthday), except for psychiatric cases (that was up to the 18th birthday). We performed a descriptive analysis using the weighted pediatric readiness score (WPRS) based on a 100-point scale. The factors that are associated with WPRS were examined in linear regression models.

**Results**

We had 34 of the 42 eligible EDs participated in the study with a participation rate of 81%. Only 29 (69%) EDs completed the survey. The overall median WPRS (/100) was 52.34 (interquartile range [IQR] =10.44). The scores on pediatric care coordination, ED staffing/training and quality improvement were below average in most EDs. The ED volume ( $\beta=0.21$  95%CI 0.03 to 0.38) and the capacity of ED to manage pediatric trauma patients after stabilizing them ( $\beta=0.17$  95%CI 0.02 to 0.33) were directly associated with WPRS. Other factors such as (capacity to receive pediatric patients from the nursing station,  $\beta=0.20$  95%CI -0.13 to 0.17, and capacity to admit pediatric patients that visited the ED,  $\beta=-0.02$  95%CI -0.19 to 0.14) were not statistically significantly associated with WPRS.

**Conclusion**

The pediatric readiness of EDs across Manitoba is average, and there is a need to improve some of the domains of the EDs. The data suggests that the ED volume is strongly associated with the WPRS.

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- For each author, please click "[+] Add Item" and provide the author's information

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