

# Pediatric Emergency Department Logistics Suvey

Please answer the following questions with information based on the Calander year 2014. Please be as specific as you are able, You may save your progress and return later if you are unable to complete the survey initially.

Surveys are linked to each institution by the specific link provided in the email.

Your Name

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Your affiliated hospital's name

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**Please complete all questions to the best of your knowledge. For all questions, please respond with data for the entire calendar year 2014 to the best of your ability.**

Does your hospital have an observation unit, or some functional equivalent that either is in the ED or geographically distinctly located elsewhere in the hospital?

- Yes  
 No  
 (Observation Unit)

What is the training of the attending physician in the unit? (please select all that apply)

- Pediatric Emergency Medicine Attendings  
 Pediatric Hospitalists  
 Other  
 (Please check all that apply)

Please describe the observation unit attendings by their area of practice.

\_\_\_\_\_ (Clinical role of observation unit attendings)

Are you able to place a patients in observations status while in the ED?

- Yes  
 No

What is the best description of the most frequent type of discharge instructions that are given to the patients and families at the time of discharge? (please select only one)

- Specific for children  
 General and can be used for patients of all ages  
 Usually entered in by the provider as free text

What is the best description of the most frequent type of discharge instructions that are given to the patients and families at the time of discharge? (please select only one)

- The instructions are commercially available and not edited by our hospital  
 The instructions are commercially available, but they are edited by our hospital extensively  
 Instructions are written entirely by staff at our institution and are not commercially available

How are urgent follow up visits (patient needs to be seen before the next available open clinic visit) in a sub-specialty clinic visits scheduled by patients who are discharged from the ED? (There may be multiple different approaches for different clinical situations, but which is the most common or standard operating procedure?)

- Parents are given contact information and asked to call clinic to get an appointment after departure from the ED  
 The sub-specialty clinic or consultation team will contact the family with the appointment time and date after departure from the ED  
 The emergency department or consultant team schedules the appointment for the family prior to discharge from the ED  
 Other

Please describe the follow up scheduling practice in your ED.

What is the median time from arrival in the ED to a patient's first interaction with a definitive treatment provider (resident, fellow, attending, nurse practitioner, physician assistant, etc.) who can initiate definitive treatment (i.e. door to doctor)?

\_\_\_\_\_ (Median time to provider in minutes)

What is the median length of stay (arrival to discharge completion) for patients discharged from the ED (excluding observation patients)?

\_\_\_\_\_ (Median length of stay in minutes)

What is the median length of stay (arrival to transfer to inpatient service) for patients who are being admitted from the ED?

\_\_\_\_\_ (Median length of stay in minutes)

What is the LWBS rate (patients who leave prior to a medical evaluation by a provider or have left without being seen)?

\_\_\_\_\_  
(Percentage LWBS)

What percentage of patients discharged from your ED return to the ED within 72-hours (72-hour bounce back)?

\_\_\_\_\_  
(Percent of all visits that bounce back)

What percentage of patients discharged from your ED return to the ED within 72-hours and are subsequently admitted (72-hour bounce back to admit)?

\_\_\_\_\_  
(Percentage of all visits that bounce back and are subsequently admitted)

What is the total full time equivalents (FTE) of Pediatric Emergency Medicine attending physicians (Board Certified or Board Eligible) designated for patient care in your ED (total PEM clinical FTE)?

\_\_\_\_\_  
(Clinical FTE of Pediatric Emergency Medicine Attendings)

What is the total full time equivalent (FTE) of non-PEM fellowship trained providers (MD, NP, PA who see patients independently) designated for patient care in your ED (total non-PEM clinical FTE)?

\_\_\_\_\_  
(Non-fellowship trained providers clinical FTE)

What is the percentage of all patients/families who come to the ED that report that they primarily speak a language other than English?

- 0-10%
- 11-20%
- 21-30%
- 31-40%
- 41-50%
- 51-75%
- 75-100%

In your opinion, what is the largest barrier to reducing the number of return visits within 72 hours of discharge from a previous ED visit?

\_\_\_\_\_

In your opinion, what is the best way of reducing the number of the return visits within 72 hours of previous ED visit for the same condition?

\_\_\_\_\_

Additional Comments:

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