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Kellie Rorke

Rochester Regional Health, [Kellie.Rorke@rochesterregional.org](mailto:Kellie.Rorke@rochesterregional.org)

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# The Safe Stay Program: For Care of the Pediatric Patient Boarding in the Emergency Department

Kellie Rorke MS, RN-BC, CPEN  
Rochester General Hospital, Pediatric Emergency Department

## Background of Clinical Issue

- Throughput challenges within the hospital can lead to admitted patients awaiting bed placement to board in the Emergency Department.
- Multiple organizations such as the ENA, American College of Emergency Physicians, American Academy of Pediatrics and the Joint Commission have recognized crowding and subsequent boarding of patients in the ED as a problem that needs to be addressed.
- There are often delays in care for admitted boarding patients due to acuity and volume of non-admitted patients within the ED.

## Significance

- Boarding in the ED has been linked with poor patient outcomes.
- Currently within the pediatric ED at RGH there is no existing program to address the care of the admitted patient boarding in the ED.
- Identifying and implementing interventions that improve care for the admitted patient boarding in the pediatric ED, stands to make a positive impact on patient outcomes.
- Improving patient outcomes is beneficial to patients and families as well as staff and the the health care institution.

## Purpose

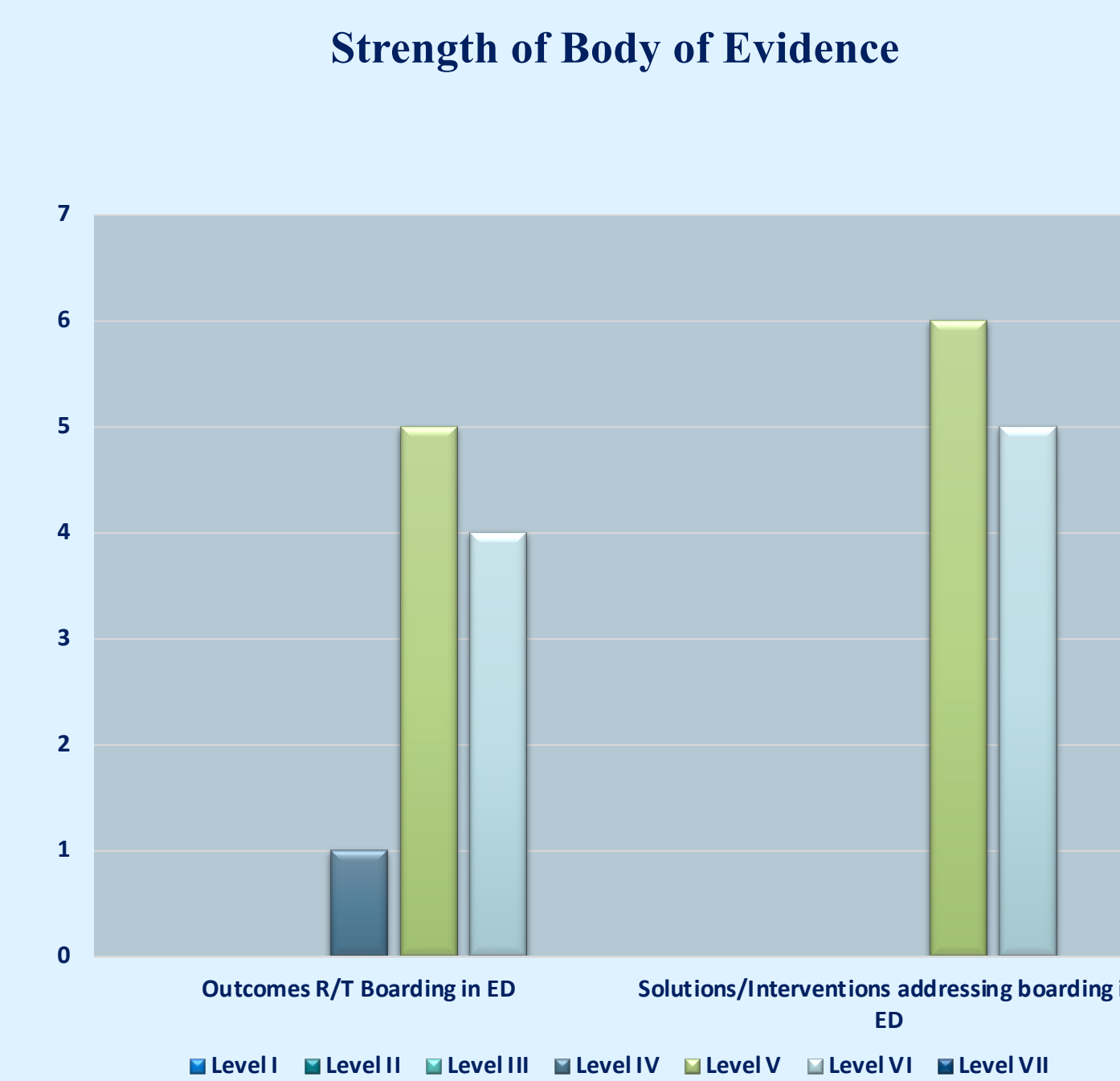
- Purpose of this program is to improve vigilance and safe care provided to pediatric patients boarding in the ED as they await inpatient placement.

## Literature Review

- 18 English language articles published from 2015 to present were included.
- Two predominant themes were identified:
  - Theme 1:** Bottle necking or throughput issues as cause of ED boarding linked to poor patient outcomes.
  - Theme 2:** Strong interdisciplinary communication & collaboration leads to safe and effective care.

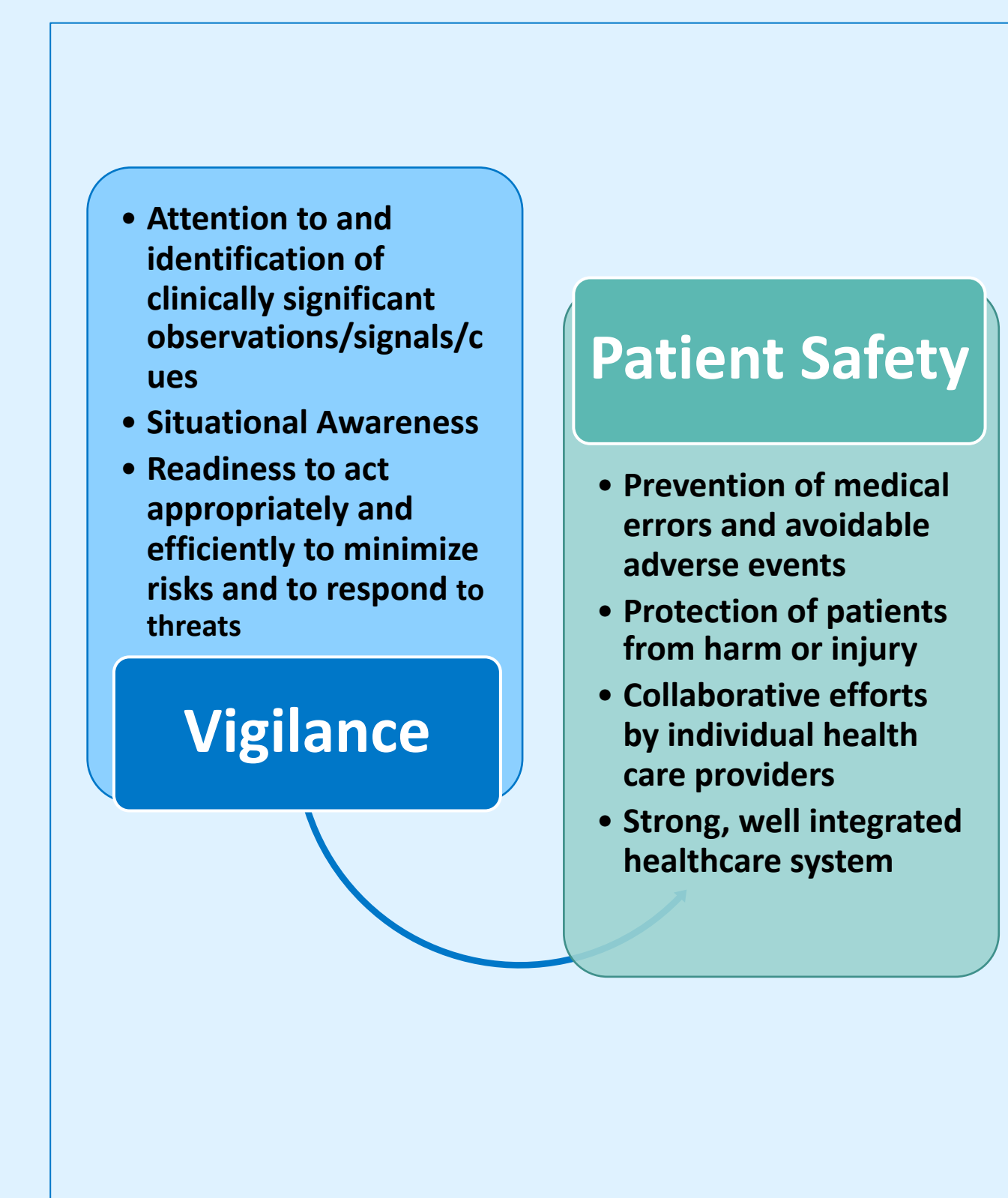
## Strength of Body of Evidence

- Theme 1:** 12 articles ranging from Levels 4-6. Supports correlations between outcomes r/t boarding pediatric patients in the ED and adverse events, increased morbidity & mortality, increased inpatient LOS, & decreased patient/family satisfaction.
- Theme 2:** 13 articles ranging from levels 5 and 6. Supported solutions that can improve outcomes for the pediatric patient boarding in the ED.



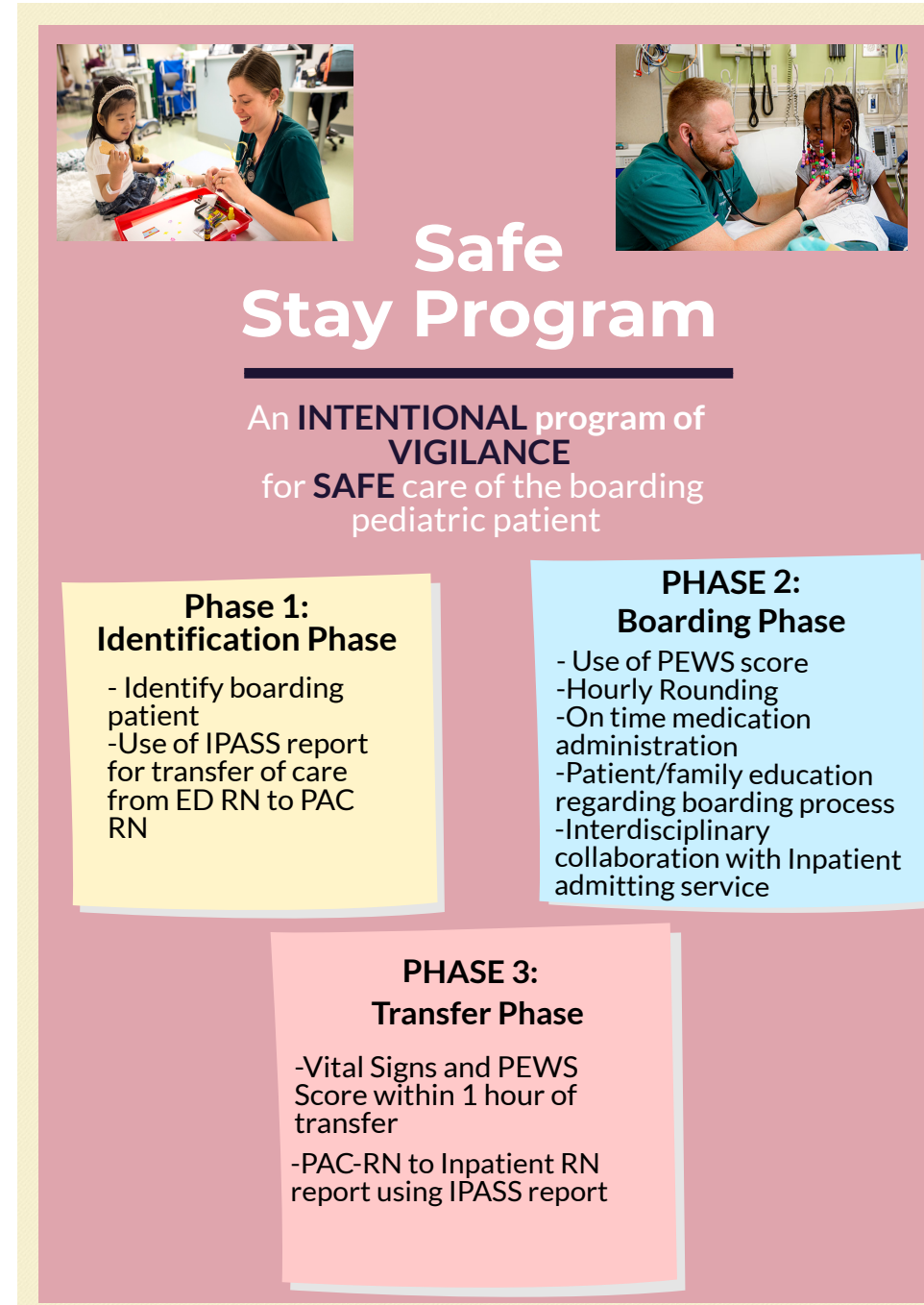
## Conceptual Framework

- Vigilance/patient safety conceptual framework created based on work by Meyer & Lavin 2000 & Morelock, 2016. Depicts combination of nursing vigilance and patient safety creating an environment in which the nurse is continuously anticipating needs of the patient.
- Conceptual model illustrates heightened awareness and safe care for admitted pediatric patients boarding in the ED, thus addressing an identified gap in current care.



## SAFE STAY Program

- Identification Phase:** Initiated after admission to hospital has occurred and has been identified that there are no inpatient beds available. Patient will board in the ED.
- Boarding Phase:** Duration of the patient's inpatient stay that occurs while boarding in the ED.
- Transfer Phase:** Occurs when inpatient bed is available, and the patient is transferred to Inpatient unit.



## Conclusions

- Identifying and implementing interventions that improve care of the identified population can make a positive impact on on patient outcomes.
- Improving patient outcomes is beneficial to patients/families, staff, healthcare institution as well as the community at large,
- Evidence supports the implementation of the Safe Stay Program.

## References

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