Pediatric Hospitalists in Community Hospitals

WHO ARE WE, WHERE ARE WE AND WHAT DO WE DO?
Many hospitalists are working in a community setting
  - Number and scope of practice not previously quantified

Community hospitalists underrepresented in SOHM

Distribution of pediatric beds and availability of services outside of tertiary care center not well known
Why this is important

- Community hospitalist can be a very different job than a hospitalist at a tertiary care center
- Better understanding of community hospitalists will help shape fellowship curriculum
- Likely more out there than we think
- Will demonstrate number of scope of community hospitalists to help advocate for community hospitalists in pediatric hospitalist medicine
- Many not connected with AAP/SOHM; opportunities for outreach
Methods

- Concept/goals of census projects developed at PHM pre-conference in 2014
- Developed survey questions with input from several leaders in community PHM
- Sent REDCap survey to listservs
- Recruited volunteers via listservs; recruited student/resident help
- Volunteers collected survey data in their area
- Hired paid research assistant to help finish the work with support of the AAP SOHM
- Initially focused only on community hospitalists only; project eventually expanded to include tertiary centers as well
Survey Questions

- Is the hospital considered a pediatric tertiary care referral center and/or a children’s hospital?
- Distance (in miles) to nearest referral center
- How many FTE Pediatric Hospitalist does your group have dedicated to covering the hospital?
- Is this hospitalist group or hospital affiliated with a children’s hospital or university?
- Which of the following duties do the pediatric hospitalists have:
  - Newborn Nursery, Delivery Attendance/Resuscitations, Inpatient Care, Level I/II/III NICU, PICU, Intermediate Level Care, Primary ED Coverage, ED consultations, Subspecialty/Surgical Co-management, Sedation Services, Transport, Other
- What is the average daily census on the pediatric hospitalist service?
- Do you have access to pediatric sub-specialists?
  - In-house or by phone
- Do you have access to pediatric surgeons?
  - In-house or by phone
- What do you consider are the primary issues facing pediatric community hospitalists?
Collection Methods

- Provided volunteers with list of hospitals (from the American Hospital Directory)
- Personal contacts
- Calling hospitals directly to determine if there are pediatric hospitalists
  - Charge nurse or secretary in ED, labor and delivery or pediatric floor
- Contacting hospitalists via phone, email or fax
- Entering survey data online
Challenges

- Defining a hospitalist
- What to include in survey
  - What is important to know?
  - Comprehensive info vs survey length
- Finding comprehensive list of hospitals
- Technical issues
- Lack of response (no returned calls/emails)
- People unwilling to answer
- Incomplete surveys
- Time consuming
Community PHM Data (so far)

- Approx 7600 hospitals screened for PHM
- 739 hospitals identified as having PHM services
- 469 Hospitals with PHM responded to survey
  - 316 Community, 153 Tertiary/Children’s
- 422 FTEs: 285 in community setting
  - Mean in community setting = 4.2
Community PHM Data

Distance (in miles) to nearest referral center

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<th>Total Count (N)</th>
<th>Missing</th>
<th>Unique</th>
<th>Min</th>
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Lowest values: 0, 1, 1, 1, 1.7
Highest values: 500, 550, 560, 600, 600
CPHM: Affiliation +/- Residents?

- No without residents: 38.4%
- No with residents: 13.9%
- Yes without residents: 24.8%
- Yes with residents: 22.8%
What is the average daily census on the pediatric hospitalist service at [hospital_name]? (Excluding well babies and critical care)  

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<tr>
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<td>47 (14.9%)</td>
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Lowest values: 0, 0, 0, 0, 0  
Highest values: 25, 26, 50, 75, 100
- Newborn Nursery (70.9%)
- Delivery attendance/resuscitations (43.4%)
- Inpatient care (88.6%)
- Level I NICU (12.7%)
- Level II NICU (27.8%)
- Level III NICU (3.5%)
- PICU (6.3%)
- Intermediate Level Care (19.9%)
- Primary ED Coverage (14.9%)
- ED Consultations (73.4%)
- Subspecialty/Surgical Co-management (48.7%)
- Sedation services (17.4%)
- Transport (4.7%)
- Other (7%)
CPHM: “Other” Hospital Duties

- Some clinic (7)
- Long term inpatient care - subacute care (2)
- PA student supervision
- Outpatient infusions / chemo (3)
- Medical management of inpatient psych
- Adolescent Detox Unit
- Outpatient procedures (VCUG caths)
- Circumcisions
CPHM: Subspecialists In house / On-call?

- None: 43.9%
- Some / 1-3: 36.5%
- Many / 3-6: 13%
- Most / Full Complement: 6.7%
CPHM: Subspecialists Available By Phone?

- None: 60.6%
- Some / 1-3: 21.2%
- Many / 3-6: 12.5%
- Most / Full Complement: 5.7%
CPHM: Pediatric Surgeons On-call?

73.6% NO
26.4% YES
What do you consider are the primary issues facing pediatric community hospitalists?

- 1. Justification/Finances (27)
- 2. Lack of Subspecialty MDs/Services (23)
- 3. Maintaining Skills, Knowledge (14)
- 4. Staffing (11)
- 5. Functioning in an Adult System (9)
- 6. Decreasing Number of Admissions (8)
- 7. Respect/Status (8)