

The September 7 presentation given at Rady Childrens Hospital by Dr. Saleh in the Emergency Department was a good discussion of the benefits to children of having a Child Life specialist prepare the child and the family for coping with procedures and treatments for emergent conditions.

The roles of the Child Life specialist assist with the following needs:

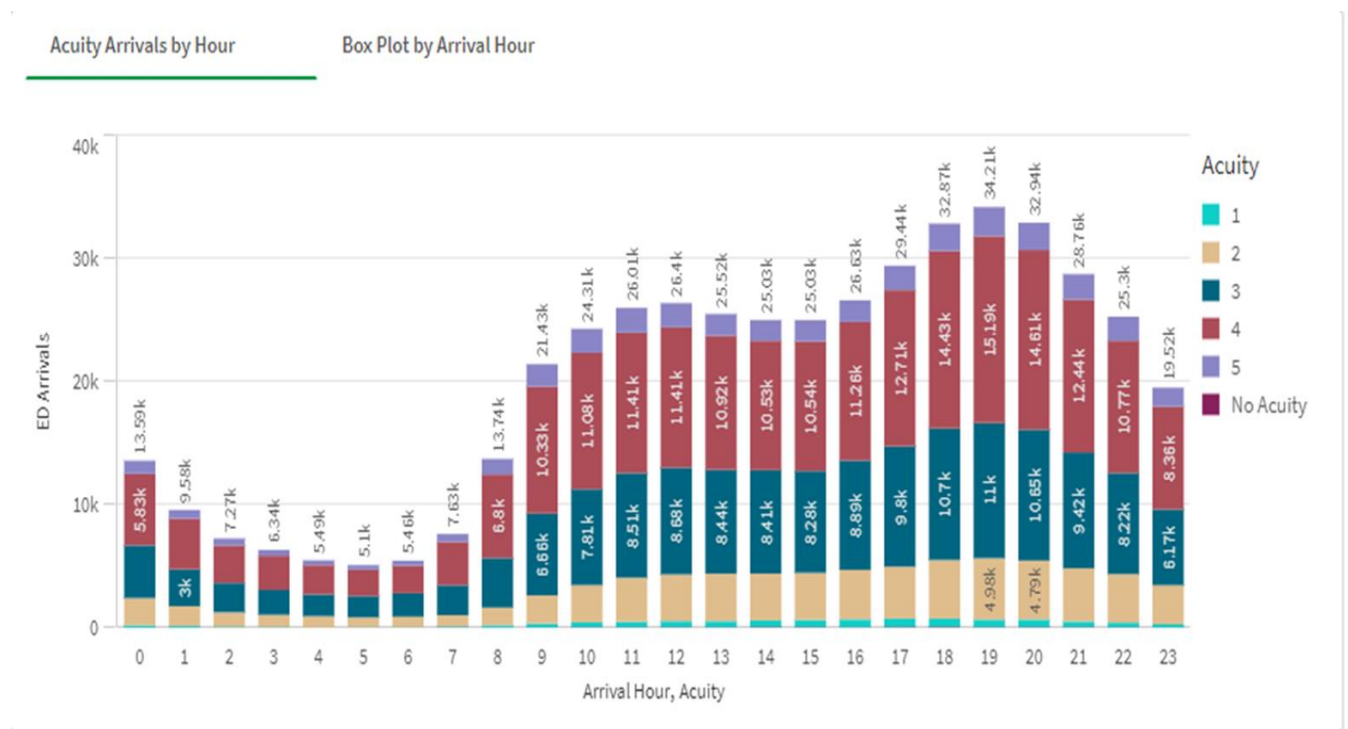
- Teach patients and family to develop a plan and procedures to help promote coping skills for a more positive outcome.
- Use medical play to help children and their families become familiar with equipment and increase understanding of the experience to reduce stress.
- Provide Trauma/Code support to engage the patient in relaxation techniques throughout trauma exam and procedures, in addition to debriefing trauma event and providing emotional support.
- Assist with Transfer/Admission preparation to age-appropriate information and education to patient and families regarding transfer to other units for inpatient stays and/or surgery.
- Use Play toward each child to keep them distracted, increase feelings of control, encourage feelings of normalization, and enhance coping during the emergency department visit.
- Provide Advocacy for play to help children cope with the hospital environment, keep them distracted, increase feelings of control, encourage feelings of normalization, and enhance coping during the emergency department visit.
- Facilitate assistance with New Diagnosis education and emotional support to assist with coping with the new diagnosis.
- Provide emotional support, and developmentally appropriate explanations/resources and support to parents and siblings of patients for bereavement.

The Emergency Department has one FTE for Child Life services at this time and due to the rise in emergency department patient visits can benefit greatly from adding a second person trained with these skills. These personnel can use their tools to help with the following procedures in the ER and calm the children and parents for a more successful outcome and reduced medications such as sedatives. Some of these procedures are:

- Laceration Repairs-sutures and staples
- Orthopedic related procedures with sedation for reduction/casting, or non-sedated with digital block
- Peripheral IV placement
- Splinting
- Imaging- CT/MRI/Ultrasound
- Surgery Prep
- Nasogastric tube placement
- EKG
- Wound care
- Lab work
- Abscess that requires incision & drainage

- Lumbar punctures
- Trauma patients
- New Diagnosis
- Enemas
- Medicine Administration
- Intranasal medication

Daily Acuity Levels at the hospital have been historically high as seen in this chart and with the increase in numbers require additional Child Life staffing to provide optimum services to help make the emergency department procedures work more smoothly and with reduced anxiety on the part of the child and the parents. Acuity Levels indicate the level of care based on the patient needs based on the severity of an illness or mental condition.



In summary, the goal of the hospital is to:

- Add another FTE – increase ED Child Life coverage from 9a-2a, 7 days/week
- Improve patient outcomes, experience, satisfaction scores, reduce costs associated with medications for sedations.