

Good afternoon. My name is Allison Martineau and I am here today to discuss the acuity tool as it relates Pediatric ICU's. I have been a Pediatric ICU nurse for 16 years, 11 of which have been here, at The Floating Hospital for Children at Tufts Medical Center.

While many of the factors from an adult acuity tool may carry over to a pediatric tool, there is also criteria specific to pediatric patients and their families. Delivering family based patient care is, at times, a challenge in itself. Having family members at the bedside and participating in care can be very helpful and aid a child in dealing with the traumatic experience of being hospitalized. However, at times, family dynamics can be time consuming and potential barriers to care. The acuity tool criteria must include allowances for medical histories of Autism, mental limitations, emotional issues, abuse, and social circumstances which add to the complexity of the patient's care. There are also many age specific considerations, especially when family is not available to engage in care. Coordinating any one of the processes of admitting, discharging, educating, and integrating the various services involved in just one patient's care can easily become pervasive. It is all too common that while these tasks are being completed for one patient, the needs of the other patients are overlooked. Designating criteria within the tool that encompasses these processes is imperative.

It is not possible to meet the standards of care for the growing complexity of a pediatric ICU patient given previous staffing patterns. Meeting the basic care needs in addition to the pediatric and family specific needs is a challenge. Interventions, such as suctioning, repositioning, feeding, drawing labs, titrating and administering medications, calculating fluid balance, collecting vital signs, acquiring IV access and basic assessments are delayed. Criteria including the necessary frequency and complexity of these interventions is of paramount consideration while determining staffing needs.

The most significant aspect of any acuity tool will be the staff nurse's ability to assess a patient and effect an immediate change in their level of care as needed. As bedside nurses, we are the first to notice even the slightest shift in a patient's status. That is the great responsibility bedside nurses carry, therefore we should also have the authority to change staffing levels in the best interest of our patients.

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