Committee Name: Committee on Hospital Care

Committee Vision:
COHC is the Academy’s advocacy and policy arm to address global issues regarding the care of the child and family on the general pediatric ward (i.e. medical, surgical).

Committee Mission:
To collaborate with AAP members, pediatric specialists, families, national organizations and hospital providers to develop and disseminate standards, policies, guidelines, and expert advice supporting the delivery of safe and effective patient- and family-centered hospital care of children in conjunction with the patient’s medical home.

Committee Chairperson: Jennifer Jewell, MD, FAAP
Chairperson’s email: [redacted]
Committee Manager: Niccole Alexander, MPP
Manager’s email: nalexander@aap.org

I. Describe the Committee’s accomplishments, challenges and successes (1-page executive summary).

Accomplishments/Success:

Addition of a Family Member: The COHC received a grant from the Family Partnerships Network. The grant, Family Partnerships in AAP National Committees Friends of Children Project, funds a parent to engage as a liaison with the COHC. The COHC is unwavering in its belief that our family liaison, Karen Castleberry, has enriched our conversations and has added meaning to the work we do. We hope this program continues for our committee and is offered to other interested Committees, Sections, and Councils.

The Joint Commission: Dr. Mike Leonard is the COHC/AAP representative to TJC. He serves as a member of the Hospital and Critical Access Hospital Accreditation Programs (HAP) Professional and Technical Advisory Committee (PTAC). Additionally, he works directly with TJC's Patsy Buckburg to educate surveyors about pediatric-related subjects. In exchange for exposing surveyors and TJC leadership to these educational experiences, the COHC (on behalf of the AAP) intends to be a clearinghouse for new and updated TJC pediatric standards and a sounding board for obstacles with interpreting and implementing current standards. The relationship with TJC is thriving. Linking the AAP and TJC encourages collaboration/understanding and decreases the perceived punitive role that TJC has experienced in the past.

ALF: The Chair offered two short sessions at ALF, "Shining Star" and a report on our 2016 strategic planning session.
Outreach to Chapters and Districts: The COHC, in collaboration with the SOHM, offers a service to review and to assist Chapter and District leadership with problem-solving hospital-based difficulties. This opportunity is used sparingly.

Face-to-Face Meetings: The COHC had two in-person meetings in 2016-2017. The first meeting (September 2016) was in Portland, Maine and included a tour and discussion with a hospital administrator at The Barbara Bush Children’s Hospital; the second meeting (March 2017) was at AAP headquarters in Elk Grove. In-person meetings are well-attended, reinvigorate our unity as a committee, and reinforce our impact on patients, families, and AAP providers. The importance of having our fall meeting at a member's hospital allows the COHC to observe best practices "in action" and to identify areas that need the committee’s attention.

Transitions from children's hospitals to adult facilities: The COHC has partnered with the SOHM and the AAP Transitions Group to include facility transitions in the revised "Supporting the Health Care Transition from Adolescence to Adulthood in the Medical Home" statement. Assessing the breadth and relevance of this issue involved contacting multiple AAP and external groups.

Inpatient Measures: Members of the COHC and the SOHM have engaged AAP leadership in discussions about developing and implementing inpatient quality and safety measures. The COHC plans to proactively identify these metrics, in an effort to assure that outside entities select reasonable, measurable, and useful inpatient quality and safety measures.

Policy Statements: The COHC continues to revise a number of statements; a new intent on direct admissions to inpatient units has been submitted. Because many AAP policy statements, technical reports, and clinical reports involve hospitals and hospitalized patients, the COHC assists many other internal and external groups with their guidelines, statements, and reports.

Media Assistance: Members of the COHC occasionally are asked to speak at the AAP's request to the media about specific topics.

Improved communication: Between face-to-face meetings, the Chair has sent monthly emails or has conducted monthly phone conferences to discuss the committee's on-going projects. This enhanced communication has increased productivity and has assured ongoing member engagement.

Challenges:

In March 2017, one of the COHC’s most-valued members resigned to assume a leadership position as the District VI Vice-Chair. She represented the interests of rural providers who function in office- and hospital-based settings. Her experience will be difficult to replicate. In the meantime, we have requested that our liaison from the Section on Surgery become a voting committee member until a permanent replacement begins in July 2018.

The COHC would like to develop reasonable, measurable, and useful inpatient quality measures to be endorsed by the AAP and utilized by the payors, administrators, and other organizations that compare hospitals. The COHC, the SOHM, and the AAP leadership are discussing the details of this project.

2. Balanced Scorecard (current fiscal year).

See attached
3. **Balanced Scorecard (next fiscal year).**

   See attached

4. **Assistance to AAP Committees, Councils and Sections.**

   The COHC collaborates on and reviews multiple statements from other Committees, Councils, and Sections. The liaisons from the Sections on Hospital Medicine, Critical Care, and Surgery provide insight into a broad range of hospital issues. The COHC and the Family Partnership Network are working to demonstrate the added value that patient/caregiver involvement in Committees, Councils, and Sections provide. The COHC was one of 4 committees to receive a grant from the Family Partnership Network in the winter of 2016; the grant funds a parent liaison to participate in all COCH activities for 18 months. The COHC and the Family Partnership Network intend to use this opportunity to demonstrate that the unique perspective a parent/caregiver provides to committees is invaluable and unrecognized.

   The Committee also developed a webinar with the Disaster Preparedness Advisory Council, “Who’s on First? Handoff Strategies in the Children’s Hospital,” that outlines how hospitals can improve the handoff process between providers/departments in the inpatient setting. The webinar was part of the AAP Children’s Hospitals and Preparedness Webinar Series.

5. **Assistance to other external organizations (e.g., reviewing documents, endorsing statements, etc.).**

   The COHC partners regularly with TJC to assist with surveyor education at the annual TJC conference (2 lectures) and via monthly webinars (2 webinars per year). The process to identify speakers and topics is conducted between TJC (Patsy Buckburg), AAP staff (Niccole Alexander), and the AAP representatives to TJC’s Hospital and Critical Access Hospital Accreditation Programs (HAP) Professional and Technical Advisory Committee (PTAC) (Leonard and Jewell). In addition to these general pediatric educational sessions, the COHC works with TJC to develop, implement, and update TJC standards. Drs. Leonard and Jewell participate in the quarterly Hospital and Critical Access Hospital Accreditation Programs (HAP) Professional and Technical Advisory Committee (PTAC) calls with TJC leaders. The appointed representatives from COHC function to link the AAP and TJC.

   The COHC works with the Child Life Council to maintain an updated version of the "Child Life Services" policy statement and with the Institute for Patient- and Family-Centered Care to maintain an updated version of the "Patient- and Family-Centered Care and the Pediatrician's Role" policy statement.

   The COHC appraises AAP Chapters and Districts of its on-going activities. COHC requests that Chapters and Districts alert COHC and/or SOHM via Niccole Alexander to pressing and/or complex issues in their local environments.

   Members of the COHC are asked to discuss hospital-related topics with media outlets on an as needed basis.

6. **List any grants/contracts the Committee has (secured or pending) with funder, principal investigator, and dates.**

   N/A
7. List any issues and suggestions the Committee wishes to bring to the attention of the Board of Directors.
   
   a. Invite and fund all interested committees and councils to have family member or patient liaisons.
   
   b. Assure Niccole Alexander continues to be the COHC staff person.
   
   c. Determine the process and content for inpatient pediatric quality and safety measures.

8. Provide list of statements in progress.

   See balanced scorecard