

Sites responding (Note: N<72 for some questions due to missing/unknown responses):

#### **PC4 2022 Hospital Survey Results**

Generated April 2022

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**List of contributing sites** 

**Section 1: CICU Staffing and Organizational Structure** 

**Section 2: Heart Center Structure** 

**Section 3: Training and Quality Improvement Activities** 

**Section 4: Practice patterns** 



#### Sites responding (Note: N<72 for some questions due to missing/unknown responses):

Obs	Site
1	Advent Health for Children
2	Advocate Children's Hospital
3	Aga Khan Hospital for Women and Children
4	Ann & Robert H. Lurie Children's Hospital of Chicago
5	Arkansas Children's Hospital
6	Atrium Health - Levine Children's Hospital - Sanger Heart & Vascular Institute
7	Barbara Bush Children's Hospital at Maine Medical
8	Boston Children's Hospital
9	Cedars Sinai Medical Center
10	Children's Hospital Colorado
11	Children's Hospital and Medical Center in Omaha
12	Children's Hospital at Oklahoma University
13	Children's Hospital of Michigan
14	Children's Hospital of New Orleans
15	Children's Hospital of Orange County
16	Children's Hospitals and Clinics of Minnesota
17	Children's Mercy Hospital
18	Children's National Medical Center
19	Children's of Alabama
20	Children's Healthcare of Atlanta
21	Children's Hospital Los Angeles
22	Children's Hospital of Philadelphia
23	Children's Hospital of Pittsburgh of UPMC
24	Children's Hospital of Wisconsin
25	Children's Medical Center of Dallas
26	Cincinnati Children's Hospital Medical Center
27	Cleveland Clinic Children's Hospital
28	Cohen Children's Medical Center of New York at Northwell Health
29	Cook Children's Hospital
30	Dell Children's Medical Center



#### Sites responding (Note: N<72 for some questions due to missing/unknown responses):

Obs	Site
31	Doernbecher Children's Hospital at OHSU
32	Driscoll Children's Hospital
33	Duke Children's Hospital and Health Center
34	Golisano Children's Hospital, University of Rochester
35	Helen DeVos Children's Hospital, Spectrum
36	Icahn School of Medicine at Mount Sinai
37	Joe DiMaggio Children's Hospital
38	Johns Hopkins All Children's Hospital
39	Johns Hopkins Children's Center
40	Loma Linda University Children's Hospital
41	Lucile Packard Children's Hospital Stanford
42	Medical City Children's Hospital
43	Medical University of South Carolina Children's Hospital
44	Methodist LeBonheur Children's Hospital
45	Monroe Carell Jr. Children's Hospital at Vanderbilt
46	Nationwide Children's Hospital
47	Nemours Children's Hospital, Orlando
48	Nemours/Alfred I. DuPont Hospital for Children
49	New York Presbyterian Columbia
50	New York Presbyterian Cornell
51	Nicklaus Children's Hospital
52	Norton Children's Hospital
53	Ochsner Medical Center
54	Orlando Health, Arnold Palmer Hospital for Children
55	Phoenix Children's Hospital
56	Primary Children's Hospital
57	Rady Children's Hospital - San Diego
58	Riley Children's Hospital
59	Seattle Children's Hospital
60	St. Joseph's Children's Hospital



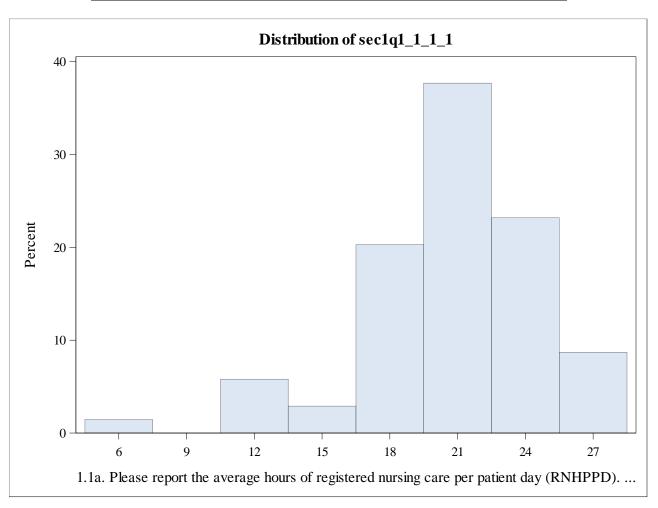
#### Sites responding (Note: N<72 for some questions due to missing/unknown responses):

Obs	Site
61	St. Louis Children's Hospital
62	Texas Children's Hospital
63	The Hospital for Sick Children
64	UH Rainbow Babies and Children's Hospital
65	UNC Children's Hospital
66	University of California San Francisco Benioff Children's Hospital
67	University of Kentucky HealthCare
68	University of Michigan C.S. Mott Children's Hospital
69	University of Minnesota Masonic Children's Hospital
70	University of Virginia Children's Hospital
71	Valley Children's Hospital
72	Yale New Haven Children's Hospital



2022 Hospital Survey Results
Section 1: CICU Staffing and Organizational Structure

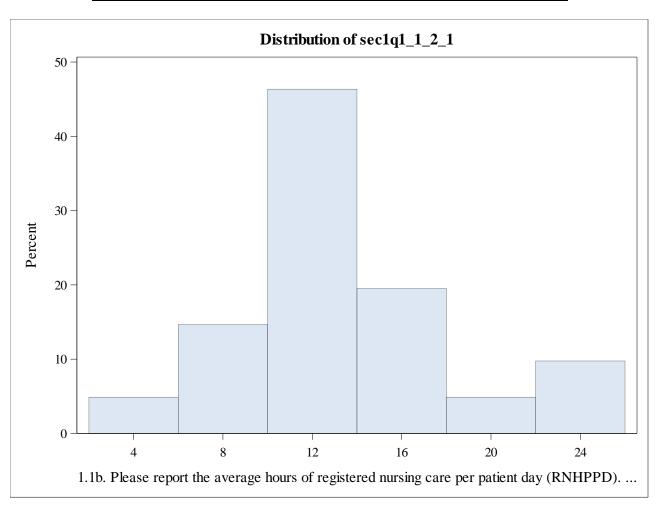
Sec	Sec1q1_1_1_1 1.1a. Please report the average hours of registered nursing care per patient day (RNHPPD) Cardiac Intensive Care Units						
N	Minimum	25th Pctl	50th Pctl	75th Pctl	Maximum	Mean	Std Dev
69	6.0	18.0	21.0	23.0	28.1	20.6	4.2





2022 Hospital Survey Results
Section 1: CICU Staffing and Organizational Structure

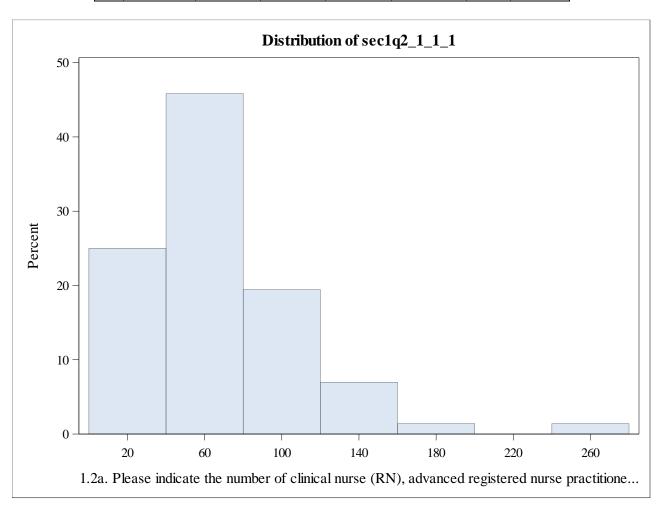
	Sec1q1_1_2_1 1.1b. Please report the average hours of registered nursing care per patient day (RNHPPD) Cardiac Ward/Step Down Units						
N	Minimum	25th Pctl	50th Pctl	75th Pctl	Maximum	Mean	Std Dev
41	2.0	10.7	12.0	15.0	24.0	13.1	5.0





2022 Hospital Survey Results
Section 1: CICU Staffing and Organizational Structure

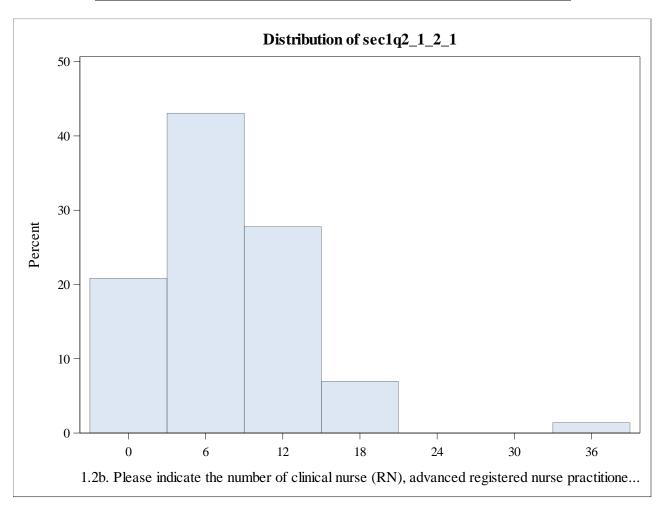
	Sec1q2_1_1_1 1.2a. Please indicate the number of clinical nurse (RN), advanced registered nurse practitioner (FTE RNs)							
I	N Minimum 25th Pctl 50th Pctl 75th Pctl Maximum Mean Std D							Std Dev
7	2	8.0	40.6	57.5	85.4	266.0	66.0	41.4





2022 Hospital Survey Results
Section 1: CICU Staffing and Organizational Structure

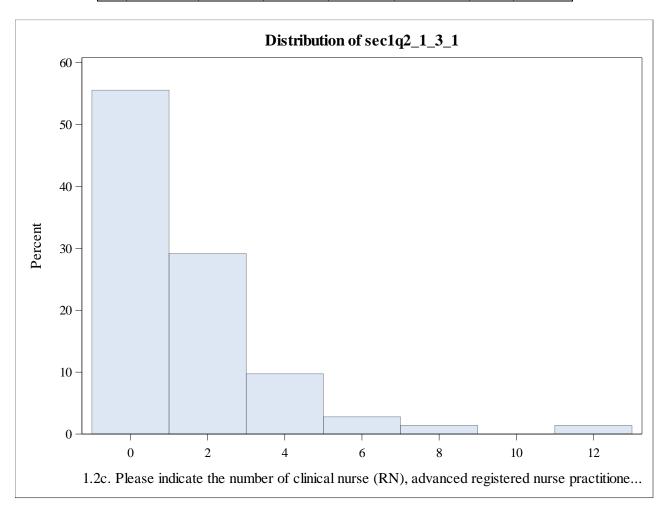
S	Sec1q2_1_2_1 1.2b. Please indicate the number of clinical nurse (RN), advanced registered nurse practitioner (FTE ARNPs or APRNs)							
N	Minimum	25th Pctl	50th Pctl	75th Pctl	Maximum	Mean	Std Dev	
72	0.0	3.0	6.0	10.0	36.0	7.1	5.9	





2022 Hospital Survey Results
Section 1: CICU Staffing and Organizational Structure

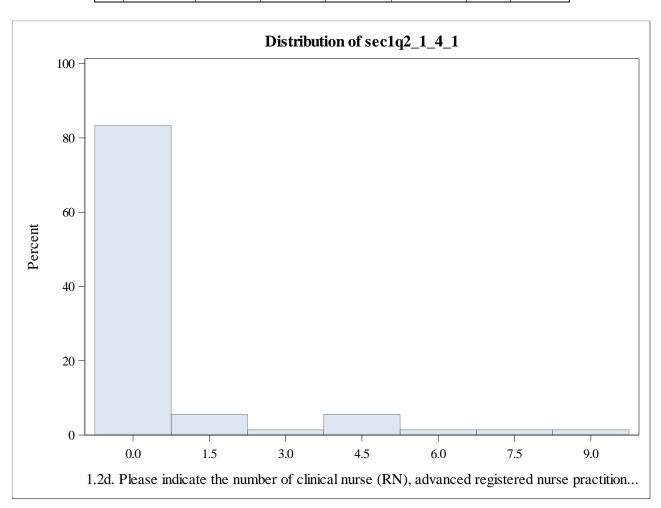
	Sec1q2_1_3_1 1.2c. Please indicate the number of clinical nurse (RN), advanced registered nurse practitioner (FTE PAs)							
N	N Minimum 25th Pctl 50th Pctl 75th Pctl Maximum Mean Std De							
72	0.0	0.0	0.0	2.0	12.0	1.3	2.0	





2022 Hospital Survey Results
Section 1: CICU Staffing and Organizational Structure

S	Sec1q2_1_4_1 1.2d. Please indicate the number of clinical nurse (RN), advanced registered nurse practitioner (Hospitalists)							
N	N Minimum 25th Pctl 50th Pctl 75th Pctl Maximum Mean Std De							
72	0.0	0.0	0.0	0.0	9.0	0.7	1.9	

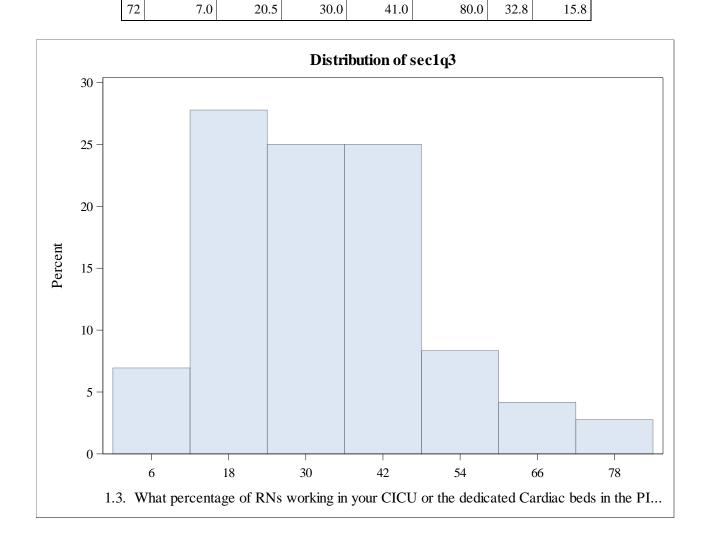




2022 Hospital Survey Results
Section 1: CICU Staffing and Organizational Structure

Sec1q3 1.3. What percentage of RNs working in your CICU or the dedicated Cardiac beds in the PICU have less than 2 years of cardiac critical care experience as of October 31, 2022?

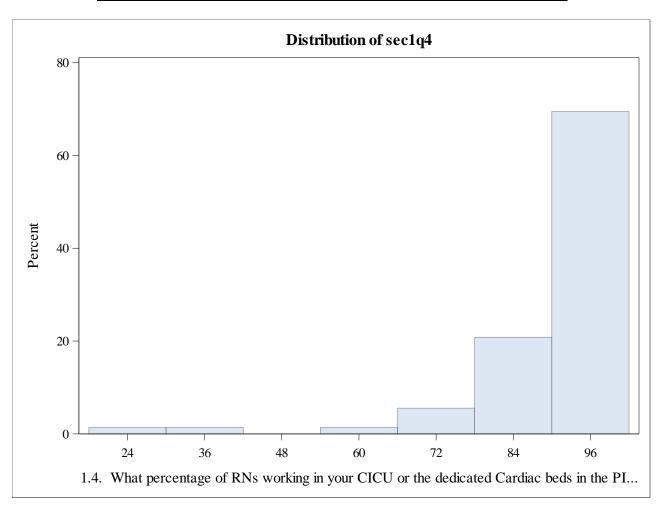
N Minimum 25th Pctl 50th Pctl 75th Pctl Maximum Mean Std Dev





2022 Hospital Survey Results
Section 1: CICU Staffing and Organizational Structure

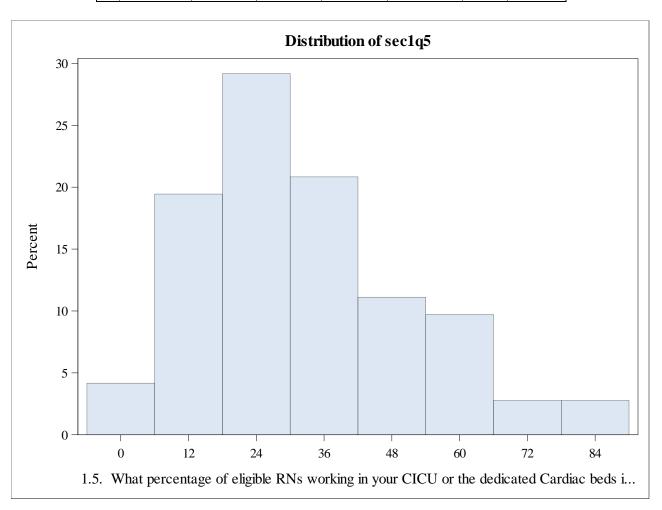
	Sec1q4 1.4. What percentage of RNs working in your CICU or the dedicated Cardiac beds in the PICU have a BSN or higher as of October 31, 2022?								
N	N Minimum 25th Pctl 50th Pctl 75th Pctl Maximum Mean Std Dev								
72	21.0	88.0	94.5	98.0	100.0	90.1	13.0		





Sec1q5 1.5. What percentage of eligible RNs working in your CICU or the dedicated Cardiac beds in the PICU had the CCRN certification for critical care nursing from the American Association of Critical-Care Nurses (AACN) as of October 31, 2022?

N	Minimum	25th Pctl	50th Pctl	75th Pctl	Maximum	Mean	Std Dev
72	0.0	18.0	26.5	43.0	89.0	31.4	19.4





Sec1q6 1.6. Please describe the physician staffing model for the intensive care unit that receives cardiac patients.							
sec1q6 Frequency Percent Cumulative Cumula Frequency Percent Frequency Percent							
<b>Dedicated CICU</b>	59	81.94	59	81.94			
Mixed unit	8	11.11	67	93.06			
Other	5	6.94	72	100.00			

1.6.TEXT. Please describe the physician staffing model for the intensive care unit that receives cardiac patients.					
sec1q6_TEXT	Frequency	Percent	<b>Cumulative Frequency</b>	Cumulative Percent	
Daytime service attending that will care cardiac patients. At night, there is an ICU attending that will take care of both cardiac and non-cardiac ICU	1	25.00	1	25.00	
Dedicated CICU attending coverage during the day, 7 days a week. Night coverage shared with PICU attendings so that one attending covers the CICU and PICU at night.	1	25.00	2	50.00	
Dedicated CICU during daytime 7 days per week. One ICU attending caring for cardiac patients and non-cardiac ICU patients at night.	1	25.00	3	75.00	
Dedicated sub-units in our PICU (14 beds) and NICU (17 beds) of cardiac intensivists who care of patients admitted with primary CV diagnosis while on service.	1	25.00	4	100.00	



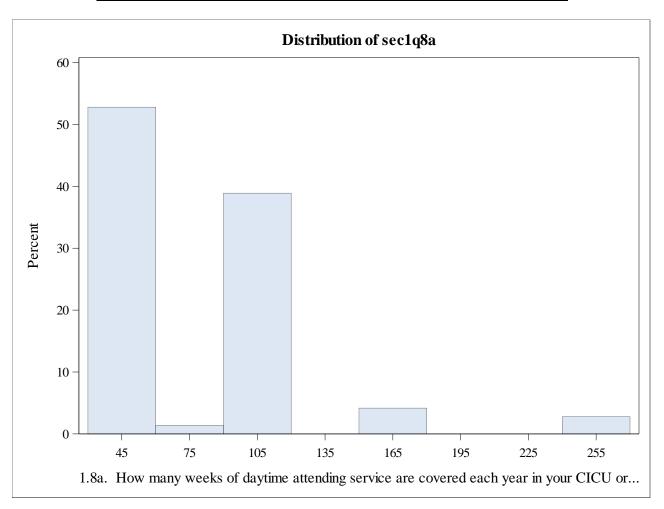
Sec1q7 1.7. What is the training background of the Medical Director of your cardiac critical care program?						
sec1q7 Frequency Percent Cumulative Frequency						
BC/BE in Pediatric Cardiology	3	4.17	3	4.17		
BC/BE in Pediatric Critical Care	23	31.94	26	36.11		
Double boarded or eligible in Pediatric Critical Care and Cardiology	17	23.61	43	59.72		
Pediatric Cardiology with additional 4th year training	8	11.11	51	70.83		
Pediatric Critical Care with additional 4th year training	14	19.44	65	90.28		
Other	7	9.72	72	100.00		

1.7.TEXT. What is the training background of the Medical Director of your cardiac critical care program?							
sec1q7_TEXT	Frequency	Percent	Cumulative Frequency	Cumulative Percent			
BC in Pediatric Critical Care and Pediatric Anesthesia with >20-year experience with cardiac critical care	1	14.29	1	14.29			
Co-directors: - double boarded pediatric critical care and cardiology- pediatric cardiology with additional 4th year training	1	14.29	2	28.57			
Experience >15 years	1	14.29	3	42.86			
PICU with > 10 years experience in CICU	1	14.29	4	57.14			
Pediatric Critical Care	1	14.29	5	71.43			
Pediatric critical care medicine fellowship	1	14.29	6	85.71			
We currently alternate Medical Director every 6 months between three of us (1 is BC in PCC with 15 years CICU experience, one is BC PCC with extra year, one is Ped Cardiology with extra year)	1	14.29	7	100.00			



2022 Hospital Survey Results
Section 1: CICU Staffing and Organizational Structure

C	-		our CICU	•	ne attending cated Cardi	4			
N	N Minimum 25th Pctl 50th Pctl 75th Pctl Maximum Mean Std Dev								
72	72 52.0 52.0 52.0 104.0 260.0 82.7 42.4								

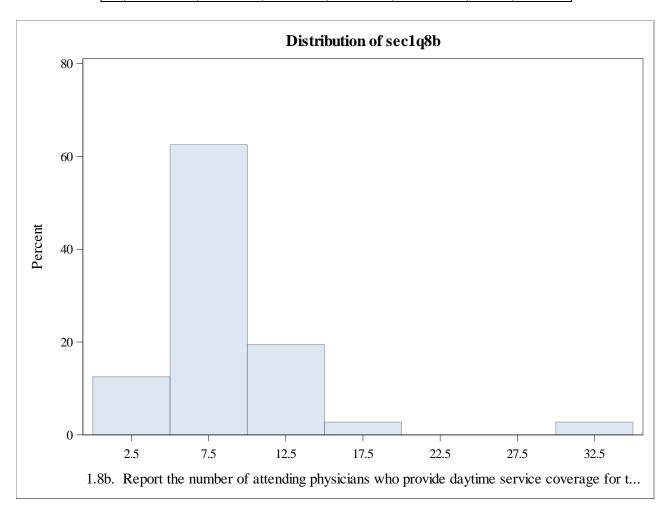




2022 Hospital Survey Results
Section 1: CICU Staffing and Organizational Structure

Sec1q8b 1.8b. Report the number of attending physicians who provide daytime service coverage for the cardiac critical care patients in your ICU setting (CICU or PICU).

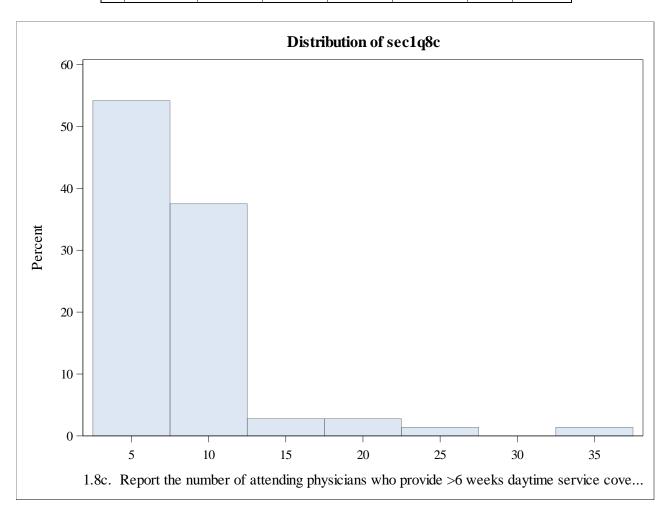
N Minimum 25th Pctl 50th Pctl 75th Pctl Maximum Mean Std Dev
72 1.0 6.0 7.5 9.5 34.0 8.3 5.3





Sec1q8c 1.8c. Report the number of attending physicians who provide >6 weeks daytime service coverage for the cardiac critical care patients in your ICU setting (CICU or PICU) during the current calendar year.

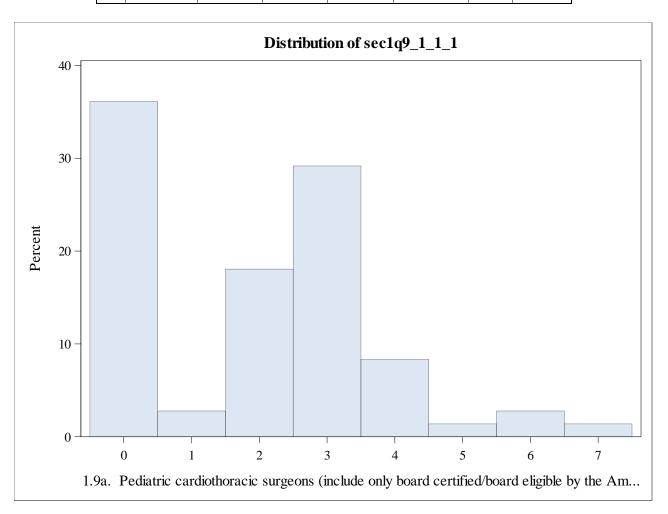
	•	Ο \		, 0			•
N	Minimum	25th Pctl	50th Pctl	75th Pctl	Maximum	Mean	Std Dev
72	3.0	5.0	7.0	9.0	35.0	8.0	4.8





Sec1q9\_1\_1\_1 1.9a. Pediatric cardiothoracic surgeons (include only board certified/board eligible by the American Board of Thoracic Surgery or equivalent for surgeons trained outside the US, with a fellowship or other training in pediatric and congenital heart surgery)

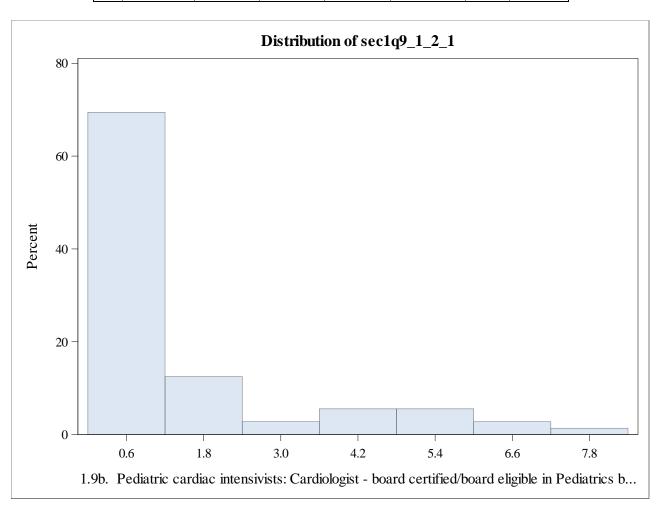
			U		0 0,		
N	Minimum	25th Pctl	50th Pctl	75th Pctl	Maximum	Mean	Std Dev
72	0.0	0.0	2.0	3.0	7.0	1.9	1.7





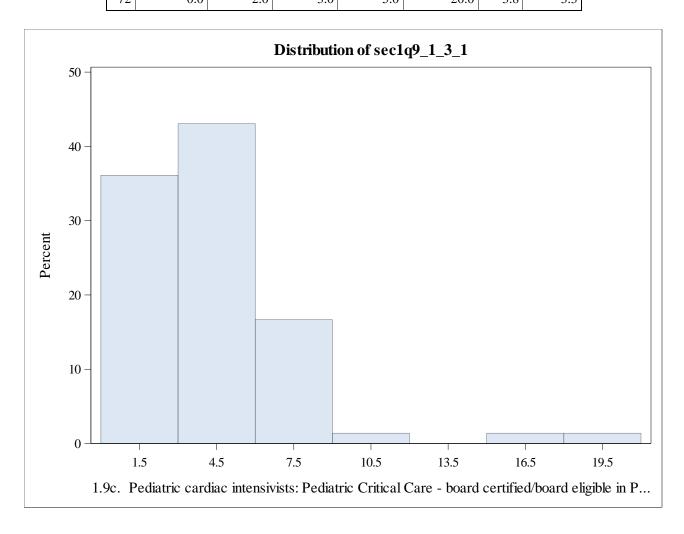
Sec1q9\_1\_2\_1 1.9b. Pediatric cardiac intensivists: Cardiologist - board certified/board eligible in Pediatrics by the American Board of Pediatrics, with subspecialty certification/eligibility in Pediatric Cardiology, plus 1 year of additional specific training in pediatric cardiac intensive care, or > 10 years of experience as a dedicated pediatric cardiac intensivist

	=	=					
N	Minimum	25th Pctl	50th Pctl	75th Pctl	Maximum	Mean	Std Dev
72	0.0	0.0	1.0	2.0	8.0	1.4	1.9





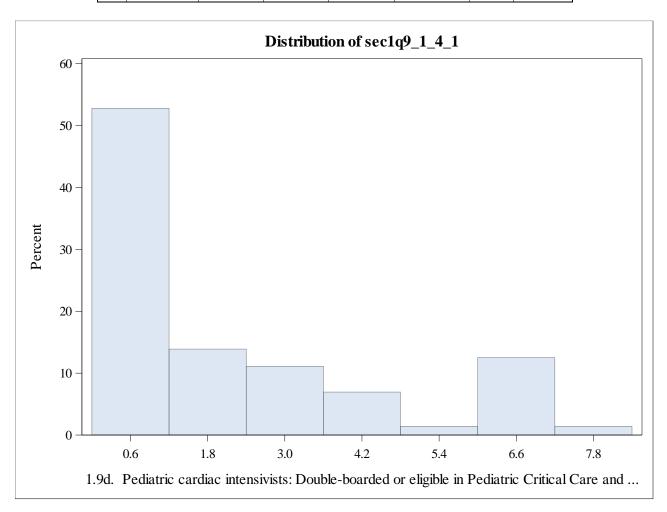
Sec1q9\_1\_3\_1 1.9c. Pediatric cardiac intensivists: Pediatric Critical Care - board certified/board eligible in Pediatrics by the American Board of Pediatrics, with subspecialty certification/eligibility in Pediatric Critical Care, plus 1 year of additional specific training in pediatric cardiac intensive care or > 10 years of experience as a dedicated pediatric cardiac intensivist Minimum | 25th Pctl | 50th Pctl 75th Pctl | Maximum | Mean | Std Dev 72 0.0 2.0 3.0 5.0 20.0 3.8 3.3





2022 Hospital Survey Results
Section 1: CICU Staffing and Organizational Structure

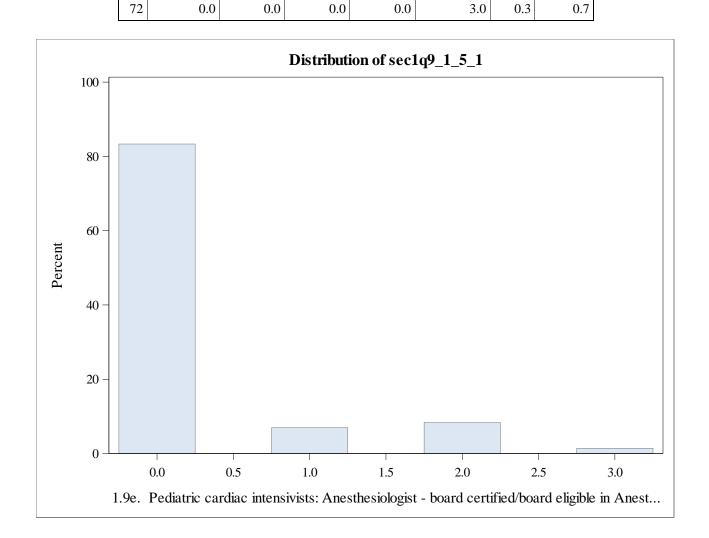
Se	Sec1q9_1_4_1 1.9d. Pediatric cardiac intensivists: Double-boarded or eligible in Pediatric Critical Care and Pediatric Cardiology							
N	N Minimum 25th Pctl 50th Pctl 75th Pctl Maximum Mean Std Dev							
72	0.0	1.0	1.0	3.0	8.0	2.2	2.1	





Sec1q9\_1\_5\_1 1.9e. Pediatric cardiac intensivists: Anesthesiologist board certified/board eligible in Anesthesia by the American Board of
Anesthesia, with at least 6 months of additional training in pediatric
cardiac anesthesia, and 1 year of additional training in pediatric cardiac
intensive care, or > 10 years of experience as a dedicated pediatric cardiac
intensivist

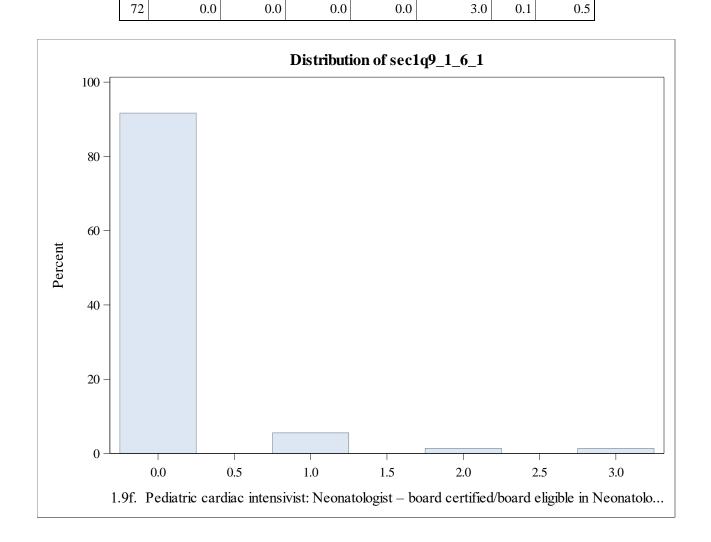
N Minimum 25th Pctl 50th Pctl 75th Pctl Maximum Mean Std Dev





Sec1q9\_1\_6\_1 1.9f. Pediatric cardiac intensivist: Neonatologist – board certified/board eligible in Neonatology by American Board of Pediatrics, with additional board certification in Pediatric Cardiology and/or Pediatric Critical Care Medicine, or 1 year of additional training in pediatric cardiac intensive care, or > 10 years of experience as a dedicated pediatric cardiac intensivist

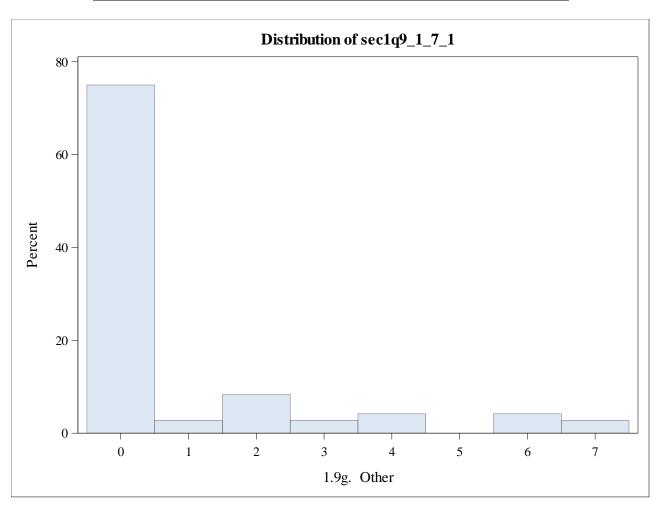
N Minimum 25th Pctl 50th Pctl 75th Pctl Maximum Mean Std Dev





2022 Hospital Survey Results
Section 1: CICU Staffing and Organizational Structure

	Sec1q9_1_7_1 1.9g. Other							
N	N Minimum 25th Pctl 50th Pctl 75th Pctl Maximum Mean Std De							
72	72 0.0 0.0 0.0 0.5 7.0 0.9 1							





Sec1q10a 1.10a. Does your hospital have cardiothoracic surgical residents and/or fellows in-house 24/7?							
sec1q10a	q10a Frequency Percent Cumulative Cumulative Percent						
Yes	13	18.06	13	18.06			
No	59	81.94	72	100.00			

Sec1q10b 1.10b. Are there Attending Cardiac Surgeons in-house 24/7?							
sec1q10b	sec1q10b Frequency Percent Cumulative Cumulative Percent						
No	72	100.00	72	100.00			

Sec1q11 1.11. Does your center provide 24-hour inhouse attending physician/intensivist coverage every day to the cardiac-specific ICU?							
sec1q11	sec1q11 Frequency Percent Cumulative Cumulative Percent						
Yes	64	88.89	64	88.89			
No	8	11.11	72	100.00			

Sec1q12 1.12. Do you have nights covered by physicians who do not regularly care for the cardiac critical care patients in your ICU setting (CICU or PICU)?				
sec1q12	Frequency	Percent	<b>Cumulative Frequency</b>	Cumulative Percent
Yes	20	27.78	20	27.78
No	52	72.22	72	100.00



Sec1q13 1.13. Does the attending covering the cardiac critical care patients in your ICU setting (CICU or PICU) cover additional units at night? Cumulative **Cumulative** sec1q13 **Frequency Frequency Percent Percent** 18 25.00 18 25.00 Yes No 54 75.00 72 100.00

Sec1q14\_1 1.14a. Which group(s) of front-line providers takes in-house overnight call covering the cardiac critical care patients in your ICU setting (CICU or PICU) at your hospital - Pediatric Cardiology Fellows

sec1q14_1	Frequency	Percent		Cumulative Percent
Yes	40	55.56	40	55.56
No	32	44.44	72	100.00

Sec1q14\_2 1.14b. Which group(s) of front-line providers takes in-house overnight call covering the cardiac critical care patients in your ICU setting (CICU or PICU) at your hospital - Pediatric Critical Care Medicine Fellows

sec1q14_2	Frequency	Percent		Cumulative Percent
Yes	54	75.00	54	75.00
No	18	25.00	72	100.00

Sec1q14\_3 1.14c. Which group(s) of front-line providers takes in-house overnight call covering the cardiac critical care patients in your ICU setting (CICU or PICU) at your hospital - Hospitalists (BC/BE physicians not in an ACGME Fellowship)

sec1q14_3	Frequency	Percent		Cumulative Percent
Yes	7	9.72	7	9.72
No	65	90.28	72	100.00



Sec1q14\_4 1.14d. Which group(s) of front-line providers takes in-house overnight call covering the cardiac critical care patients in your ICU setting (CICU or PICU) at your hospital - NPs/PAs

sec1q14_4	Frequency	Percent		Cumulative Percent
Yes	44	61.11	44	61.11
No	28	38.89	72	100.00

Sec1q14\_5 1.14e. Which group(s) of front-line providers takes in-house overnight call covering the cardiac critical care patients in your ICU setting (CICU or PICU) at your hospital - Surgical Residents/Fellows

sec1q14_5	Frequency	Percent		Cumulative Percent
Yes	3	4.17	3	4.17
No	69	95.83	72	100.00

Sec1q14\_6 1.14f. Which group(s) of front-line providers takes in-house overnight call covering the cardiac critical care patients in your ICU setting (CICU or PICU) at your hospital - Other Residents (please specify)

sec1q14_6	Frequency	Percent		Cumulative Percent
Yes	7	9.72	7	9.72
No	65	90.28	72	100.00



pediatrics, anesthesia, emergency medicine

### 2022 Hospital Survey Results Section 1: CICU Staffing and Organizational Structure

1.14f.TEXT. Which group(s) of front-line providers takes in-house overnight call covering the cardiac critical care patients in your ICU setting (CICU or PICU) at your hospital - Other Residents Cumulative **Cumulative** Frequency sec1q14f\_TEXT **Frequency Percent Percent** NICU rotators and Pediatric Cardiology Fellows are always on call with 1 14.29 1 14.29 a Pediatric Critical Care Medicine Fellow Pediatric Anesthesia 1 14.29 2 28.57 1 3 **Pediatric residents** 14.29 42.86 1 14.29 4 **Pediatrics** 57.14 1 5 14.29 71.43 pediatric residents pediatric, med/peds, emergency medicine 1 14.29 6 85.71

Sec1q14\_7 1.14g. Which group(s) of front-line providers takes in-house overnight call covering the cardiac critical care patients in your ICU setting (CICU or PICU) at your hospital - Other Clinicians (please specify)

14.29

7

100.00

nospital - Other Chincians (piease specify)						
			Cumulative	Cumulative		
sec1q14_7	Frequency	Percent	Frequency	Percent		
Yes	13	18.06	13	18.06		
No	59	81.94	72	100.00		



Which group(s) of front-line providers takes in-house overnight call covering the cardiac critical care 1.14g.TEXT. patients in your ICU setting (CICU or PICU) at your hospital - Other Clinicians Cumulative **Cumulative** sec1q14g\_TEXT **Frequency Percent Frequency Percent** 4th Year Fellows in CICU (prior training in PCCM or Pediatric 1 7.69 1 7.69 Cardiology) 7.69 **Attending CVICU MDs** 1 2 15.38 1 7.69 3 23.08 Attending Physician/Intensivist 4 BC/BE in pediatric critical care 1 7.69 30.77 1 5 7.69 38.46 CICU attendings 1 7.69 6 Fellows are not independent, only with hospitalist backup 46.15 1 7 7.69 53.85 **Intensivists** 1 7.69 8 61.54 None 1 7.69 9 69.23 None of the above (only intensivists take overnight call) 1 7.69 10 76.92 PICU attendings only at this time Pediatric CICU fellows (PICU/Card/NICU BC/BE in non-ACGME 1 7.69 11 84.62 CICU fellowship) 1 12 92.31 **Pediatric Critical Care Attendings** 7.69 1 7.69 13 100.00 attending physicians

1.14.Combine1\_2 Which group(s) of front-line providers takes inhouse overnight call covering the cardiac critical care patients in your ICU setting (CICU or PICU) at your hospital - Pediatric Cardiology Fellows and Pediatric Critical Care Medicine Fellows

sec1q14Combine1_2	Frequency	Percent		Cumulative Percent
Yes	56	77.78	56	77.78
No	16	22.22	72	100.00



1.14.Combine3\_4 Which group(s) of front-line providers takes inhouse overnight call covering the cardiac critical care patients in your ICU setting (CICU or PICU) at your hospital - Hospitalists (BC/BE physicians not in an ACGME Fellowship) and NPs/PAs

sec1q14Combine3_4	Frequency	Percent	Cumulative Frequency	Cumulative Percent
Yes	45	62.50	45	62.50
No	27	37.50	72	100.00

Sec1q15 1.15. Does your cardiac critical care program have a dedicated nursing staff (distinct staffing/scheduling from another ICU)?

4 45	1		Cumulative			
sec1q15	Frequency	Percent	Frequency	Percent		
Yes	57	79.17	57	79.17		
No	15	20.83	72	100.00		

Sec1q16\_1 1.16a. Please describe your hospital's approach to nurse staffing challenges - Hospital-based float pool or other float capability available to meet staffing needs

sec1q16_1	Frequency	Percent	Cumulative Frequency	Cumulative Percent
Yes	70	97.22	70	97.22
No	2	2.78	72	100.00

Sec1q16\_2 1.16b. Please describe your hospital's approach to nurse staffing challenges - Local agency provides nurses on an "as-needed' basis

sec1q16_2	Frequency	Percent		Cumulative Percent
Yes	9	12.50	9	12.50
No	63	87.50	72	100.00



Sec1q16_3 1.16c. Please describe your hospital's approach to nurse staffing challenges - Travel nursing contracts					
sec1q16_3	1q16_3 Frequency Percent Cumulative Cumu				
Yes	66	91.67	66	91.67	
No	6	8.33	72	100.00	

Sec1q16_4 1.16d. Please describe your hospital's approach to nurse staffing challenges - Other					
sec1q16_4	Frequency	Percent		Cumulative Percent	
Yes	13	18.06	13	18.06	
No	59	81.94	72	100.00	



1.16d.TEXT. Please describe your hospital's approach to nurse staffing challenges.						
sec1q16_TEXT	Frequency	Percent	<b>Cumulative Frequency</b>	Cumulative Percent		
Also pooling among PICU and CICU nursing staff	1	7.69	1	7.69		
Bonus pay for overtime	1	7.69	2	15.38		
Bonus-pay programInternal agency contracts	1	7.69	3	23.08		
Capacity for NICU, PICU and Cardiology Ward nurses that complete a training program allowing them to also work within Cardiac ICU	1	7.69	4	30.77		
Heart center float pool	1	7.69	5	38.46		
Internal ICU Travel Nursing Contracts	1	7.69	6	46.15		
Internal contracts and critical staffing pay	1	7.69	7	53.85		
Onboarding travelers, comprehensive benefit package with "conversion" bonus for travelers that convert to staff.	1	7.69	8	61.54		
Overtime	1	7.69	9	69.23		
Overtime, Retention Bonus, Part Time and Supplemental RNs increasing hours	1	7.69	10	76.92		
Premium pay (overtime, extra pay per hour) as well as an internal staffing plan	1	7.69	11	84.62		
RN bonuses for picking up extra shifts	1	7.69	12	92.31		
uptrained cardiac progressive nurses	1	7.69	13	100.00		

Sec1q17 1.17. Does your ICU have a clinical pharmacist who is assigned to the unit?					
sec1q17	Frequency	Percent		Cumulative Percent	
Yes	72	100.00	72	100.00	

Sec1q18 1.18. Does your ICU have a dietitian/nutritionist who is assigned to the unit?						
sec1q18	18 Frequency Percent Cumulative Frequency Percent					
Yes	68	94.44	68	94.44		
No	4	5.56	72	100.00		



Sec1q19 1.19. Are Speech/Swallowing/Occupational Therapy consultation services utilized by your cardiac critical care program for oral motor skill therapy and evaluations of aspiration risk?

sec1q19	Frequency	Percent	<b>Cumulative Frequency</b>	Cumulative Percent
Yes	71	98.61	71	98.61
No	1	1.39	72	100.00

Sec1q19a 1.19a. Does this team get consulted on all patients < 30 days of age?

r						
sec1q19a	Frequency	Percent	Cumulative Frequency	Cumulative Percent		
Yes	41	57.75	41	57.75		
No	30	42.25	71	100.00		

Sec1q20 1.20. Does your ICU have a formalized feeding protocol for neonates (< 30 days of age)?

sec1q20	Frequency	Percent		Cumulative Percent	
Yes	59	81.94	59	81.94	
No	13	18.06	72	100.00	

Sec1q20a 1.20a. Is the feeding protocol dedicated to:					
sec1q20a Frequency Percent Frequency Perce					
Postoperative enteral nutrition	12	20.34	12	20.34	
Both	47	79.66	59	100.00	



2022 Hospital Survey Results
Section 1: CICU Staffing and Organizational Structure

Sec1q21 1.21. Does your ICU have dedicated respiratory therapists who are assigned to the unit?					
sec1q21	Frequency	Percent		Cumulative Percent	
Yes	60	83.33	60	83.33	
No	12	16.67	72	100.00	

Sec1q22 1.22. Does your center deliver babies or have an attached delivery center?					
sec1q22	Frequency	Percent	Cumulative Frequency	Cumulative Percent	
Yes	55	76.39	55	76.39	
No	17	23.61	72	100.00	

Sec1q23 1.23. Who term newborns	with congen	•	-	
			Cumulative	Cumulative

sec1q23	Frequency	Percent		Cumulative Percent
CICU	34	47.22	34	47.22
NICU	10	13.89	44	61.11
Both CICU/NICU	24	33.33	68	94.44
Other	4	5.56	72	100.00



#### 1.23.TEXT. Where are the majority of late pre-term and/or full-term newborns with congenital heart disease cared for pre-operatively? - Other Cumulative **Cumulative** sec1q23\_TEXT **Frequency Percent Frequency Percent** Admitted in CICU only postoperatively 1 25.00 1 25.00 2 1 50.00 CCCU or cardiology ward (Cardiology ward accepts pre-operative 25.00 patients on PGE for certain lesions) Dedicated cardiac sub-unit of the NICU - infant cardiac unit 1 25.00 3 75.00 Initial admission to NICU. If surgery planned in neonatal period, 1 25.00 4 100.00 transfer to CICU within 48 hours.

Sec1q24_1 1.24a. For cardiac patients in the NICU, who provides primary coverage? - CICU Attending				
sec1q24_1	Frequency	Percent		Cumulative Percent
Yes	1	1.39	1	1.39
No	71	98.61	72	100.00

Sec1q24_2 1.24b. For cardiac patients in the NICU, who provides primary coverage? - NICU Attending				
sec1q24_2	Frequency	Percent		Cumulative Percent
Yes	67	93.06	67	93.06
No	5	6.94	72	100.00

Sec1q24_3 1.24c. For cardiac patients in the NICU, who provides primary coverage? - Other				
sec1q24_3	Frequency	Percent		Cumulative Percent
Yes	7	9.72	7	9.72
No	65	90.28	72	100.00



# 2022 Hospital Survey Results Section 1: CICU Staffing and Organizational Structure

1.24c.TEXT. For cardiac patients in the NICU, who provides primary coverage?						
sec1q24_TEXT	Frequency	Percent	Cumulative Frequency	Cumulative Percent		
Cardiology	1	14.29	1	14.29		
Cardiology consult service	1	14.29	2	28.57		
Heart Center NICU Care Model: NICU babies are on the heart center with NICU providing primary coverage and cardiology following.	1	14.29	3	42.86		
NICU Attending with CICU consulting service	1	14.29	4	57.14		
Neonatal cardiac intensivist (NICU + extra cardiac year)	1	14.29	5	71.43		
No NICU cardiac patients	1	14.29	6	85.71		
Pediatric cardiology consults	1	14.29	7	100.00		

Sec1q25 1.25. Does your hospital have an in-patient rehabilitation/ technology-dependent patient unit that is independent of the Cardiac ICU and accepts patients from the Cardiac ICU?					
sec1q25	Frequency	Percent	<b>Cumulative Frequency</b>	Cumulative Percent	
Yes	24	33.33	24	33.33	
No	48	66.67	72	100.00	

Sec1q25a 1.25a. Does your electronic medical record consider this transfer a hospital discharge?						
sec1q25a	Frequency	Percent		Cumulative Percent		
Yes	13	54.17	13	54.17		
No	11	45.83	24	100.00		



# 2022 Hospital Survey Results Section 1: CICU Staffing and Organizational Structure

Sec1q25b 1.25b. Do you count time spent in the rehabilitation/technology-dependent unit towards hospital length of stay?					
sec1q25b	Frequency	Percent		Cumulative Percent	
Yes	12	50.00	12	50.00	
No	12	50.00	24	100.00	



# 2022 Hospital Survey Results Section 1: CICU Staffing and Organizational Structure

1.26.TEXT. Please provide any comments you may have concerning this section.						
sec1q26_TEXT	Frequency	Percent	Cumulative Frequency	Cumulative Percent		
For question #25, there is a pediatric rehab facility close by that has a unit for medically fragile/tech dependent patients that we refer to, but it is not part of our hospital.	1	8.33	1	8.33		
For the RNHPPD section, we cannot provide an accurate breakdown. In our unit, the patients often stay physically in the PICU and are cared by the same nurses starting from POD 0 until often when they leave as our acuity generally facilitates short stays. Our POD 0 patients are 1:1 and then can be paired once extubated and off a pressor/stable	1	8.33	2	16.67		
Information on nursing experience and credentialing applies to core staff only - it does not include travelers.	1	8.33	3	25.00		
RNHPPD is average for both ICU and stepdown/acute care because our unit is admission to discharge	1	8.33	4	33.33		
Speech generally consults on all neonates with the exception of those previously feeding at home, thoracotomies, etc., who feed without difficulties	1	8.33	5	41.67		
The RNHPPD total of 15.07 includes both CICU and stepdown. Our unit houses both areas of care and the total number can't be separated.	1	8.33	6	50.00		
We are the front line providers	1	8.33	7	58.33		
We do not have data on "Percentage of nurses who have CCRN certification". It was compulsatory to enter a number, so I entered zero. However, we do not have data on this.	1	8.33	8	66.67		
We used to have a dietician assigned to us, but at the time of this survey we didn't and still don't.	1	8.33	9	75.00		
for 8B, I assume the scale was # of attgs on any given day, rather than total \$ of staff who provide daytime coverage throughout the academic or calendar year.for 10a & 10b, both can be in house if clinically needed, but both typically take call from home and don't stay in house unless necessary for clinical activity.	1	8.33	10	83.33		
patients are admitted to NICU initially and then transition to PCICU based on acuity and surgical scheduling.	1	8.33	11	91.67		
yes we have independent technology unit that accepts cardiac patients but that happens very rarely	1	8.33	12	100.00		

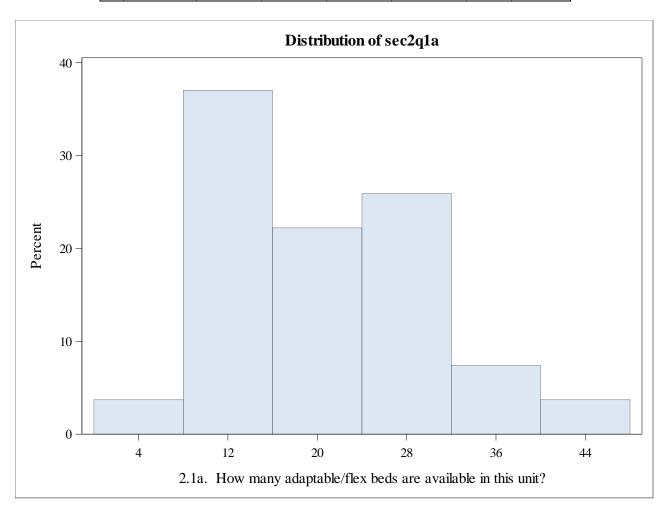


Sec2q1 2.1. Does your hospital have an adaptable/flex bed model?					
sec2q1	Frequency	Percent	Cumulative Frequency	Cumulative Percent	
Yes	27	37.50	27	37.50	
No	45	62.50	72	100.00	



2022 Hospital Survey Results Section 2: Heart Center Structure

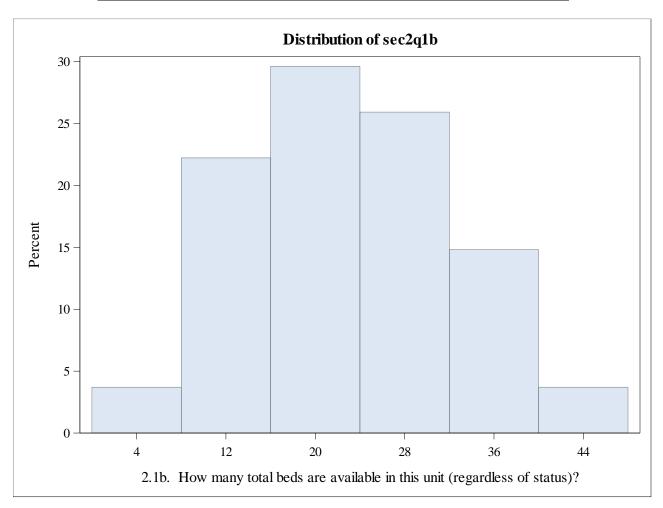
Se	Sec2q1a 2.1a. How many adaptable/flex beds are available in this unit?							
N	Minimum	25th Pctl	50th Pctl	75th Pctl	Maximum	Mean	Std Dev	
27	6.0	12.0	19.0	24.0	44.0	19.1	9.4	





2022 Hospital Survey Results Section 2: Heart Center Structure

Sec	Sec2q1b 2.1b. How many total beds are available in this unit (regardless of status)?							
N	Minimum	25th Pctl	50th Pctl	75th Pctl	Maximum	Mean	Std Dev	
27	6.0	15.0	21.0	30.0	44.0	21.9	9.1	





Sec2q1c_1 2.1ca. What factors and who determines how patients get assigned to bed locations - Nursing ratio						
sec2q1c_1	Frequency	Percent		Cumulative Percent		
Yes	18	25.00	18	25.00		
No	54	75.00	72	100.00		

Sec2q1c_2 2.1cb. What factors and who determines how patients get assigned to bed locations - Defined clinical criteria						
sec2q1c_2	Frequency	Percent	<b>Cumulative Frequency</b>	Cumulative Percent		
Yes	21	29.17	21	29.17		
No	51	70.83	72	100.00		

Sec2q1c_3 2.1cc. What factors and who determines how patients get assigned to bed locations - Rounding team						
sec2q1c_3	Frequency	Percent	Cumulative Frequency			
Yes	16	22.22	16	22.22		
No	56	77.78	72	100.00		

Sec2q1c_4 2.1cd. What factors and who determines how patients get assigned to bed locations - Surgical team						
sec2q1c_4	Frequency	Percent	Cumulative Frequency	Cumulative Percent		
Yes	7	9.72	7	9.72		
No	65	90.28	72	100.00		



Sec2q1c_5 2.1ce. What factors and who determines how patients get assigned to bed locations - Other							
sec2q1c_5	Frequency	Percent		Cumulative Percent			
Yes	3	4.17	3	4.17			
No	69	95.83	72	100.00			

2.1ce.TEXT. What factors and who determines how patients get assigned to bed locations?								
sec2q1c_TEXT	Frequency	Percent		Cumulative Percent				
Charge nurses make all decisions regarding bed locations	1	33.33	1	33.33				
Medical Director	1	33.33	2	66.67				
Proximity to nursing station and other ICU patients; severity of illness. This is not our primary CICU unit that accepts most of our post-op ICU patients/ECMO. We use this unit for ICU patients that may have a quick turnaround to/back to acute care.	1	33.33	3	100.00				

Sec2q2 2.2. Does your hospital have a cardiac step- down or acute care cardiology unit?							
sec2q2	Frequency	Percent		Cumulative Percent			
Yes	44	61.11	44	61.11			
No	28	38.89	72	100.00			

Sec2q2a 2.2a. Does your CICU and acute care unit share some nurses?							
sec2q2a	Frequency	Percent		Cumulative Percent			
Yes	26	59.09	26	59.09			
No	18	40.91	44	100.00			



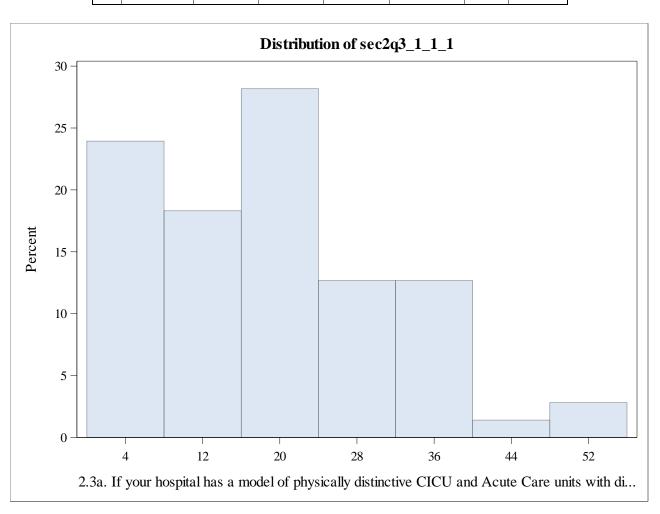
Sec2q2b 2.2b. Do cardiac intensivists (physicians who provide daytime service coverage in the CICU) also attend on patients in the stepdown/acute care unit?

sec2q2b	Frequency	Percent		Cumulative Percent
Yes	7	15.91	7	15.91
No	37	84.09	44	100.00



Sec2q3\_1\_1\_1 2.3a. If your hospital has a model of physically distinctive CICU and Acute Care units with distinct rounding teams and geographic locations, please answer the following: How many dedicated physical beds are available for admission to your cardiac critical program (this does not include beds that are not available due to staffing reasons, but the number of physical bed spaces)?

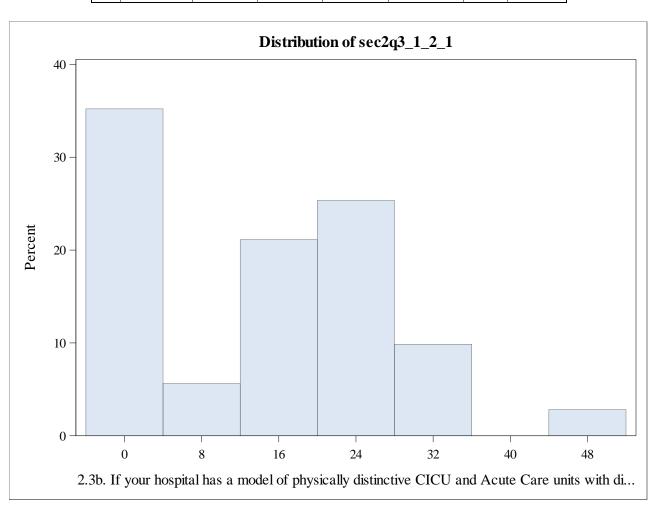
N	Minimum	25th Pctl	50th Pctl	75th Pctl	Maximum	Mean	Std Dev
71	0.0	10.0	18.0	24.0	54.0	17.5	12.9





Sec2q3\_1\_2\_1 2.3b. If your hospital has a model of physically distinctive CICU and Acute Care units with distinct rounding teams and geographic locations, please answer the following: How many dedicated physical beds are available for the Acute Care Unit?

N	Minimum	25th Pctl	50th Pctl	75th Pctl	Maximum	Mean	Std Dev
71	0.0	0.0	14.0	24.0	48.0	14.0	12.7





Sec2q4 2.4. If your hospital has a mixed ICU (patients admitted for both cardiac and non-cardiac care), what is the maximum number of potential physical beds available for CICU patients?

sec2q4	Frequency	Percent	<b>Cumulative Frequency</b>	Cumulative Percent
Please provide number below	14	19.44	14	19.44
N/A	58	80.56	72	100.00

2.4.TEXT. If your hospital has a mixed ICU (patients admitted for both cardiac and non-cardiac care), what is the maximum number of potential physical beds available for CICU patients?

-								
sec2q4_TEXT	Frequency	Percent		Cumulative Percent				
12	4	28.57	4	28.57				
19	1	7.14	5	35.71				
20	5	35.71	10	71.43				
22	1	7.14	11	78.57				
37	1	7.14	12	85.71				
43	1	7.14	13	92.86				
8	1	7.14	14	100.00				

Sec2q5 2.5. Is there a dedicated recovery unit that is generally only used for pediatric cardiac patients within your hospital facility (separate from the CICU or other inpatient wards) where care can be provided for patients prior to or immediately after interventional or radiologic procedures requiring sedation?

sec2q5	Frequency	Percent	Cumulative Frequency	Cumulative Percent
Yes	34	47.22	34	47.22
No	38	52.78	72	100.00

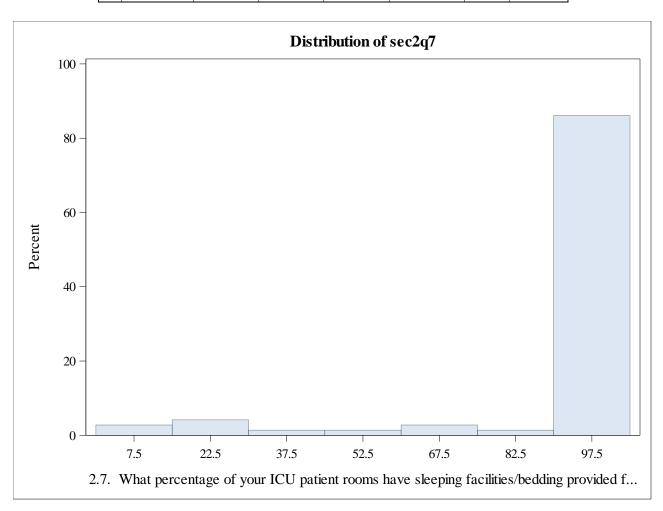


Sec2q6 2.6. Are families invited to participate on rounds?						
sec2q6	Frequency	Percent	Cumulative Frequency	Cumulative Percent		
Yes	72	100.00	72	100.00		



2022 Hospital Survey Results Section 2: Heart Center Structure

Se	Sec2q7 2.7. What percentage of your ICU patient rooms have sleeping facilities/bedding provided for families to sleep inside?							
N	Minimum	25th Pctl	50th Pctl	75th Pctl	Maximum	Mean	Std Dev	
72	0.0	100.0	100.0	100.0	100.0	91.2	24.2	

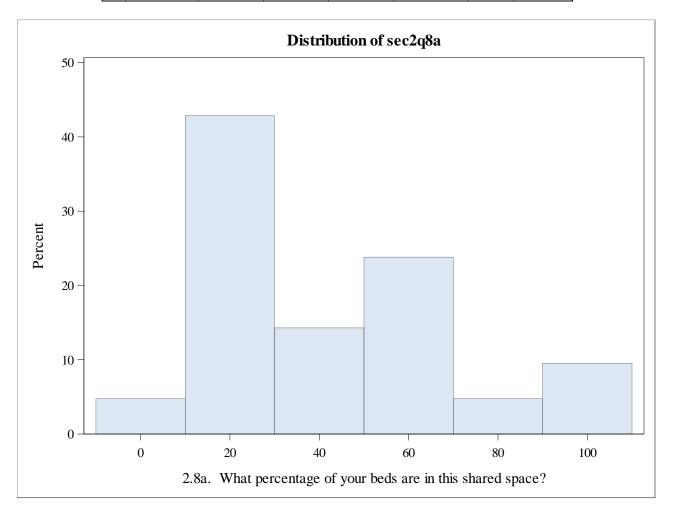




2022 Hospital Survey Results Section 2: Heart Center Structure

Sec2q8 2.8. Does the physical environment within the CICU include beds that are in a shared space?					
sec2q8	Frequency			Cumulative Percent	
Yes	21	29.17	21	29.17	
No	51	70.83	72	100.00	

S	Sec2q8a 2.8a. What percentage of your beds are in this shared space?								
N	N Minimum 25th Pctl		50th Pctl 75th Pctl		Maximum	Mean	Std Dev		
21	5.0	17.0	40.0	53.0	100.0	40.4	29.2		





Sec2q9 2.9. Is there a pulmonary hypertension specialist and/or team available for in-patient consultation?					
sec2q9	Frequency	Percent	Cumulative Frequency	Cumulative Percent	
Yes	60	83.33	60	83.33	
No	12	16.67	72	100.00	

Sec2q10 2.10. Is there a dedicated heart failure/transplant team that rounds on CICU patients 5 days a week or more?				
sec2q10	Frequency	Percent		Cumulative Percent
Yes	49	68.06	49	68.06
No	23	31.94	72	100.00

Sec2q11 2.11. Is there a BC/BE Adult with Congenital Heart Disease (ACHD) physician at your center?						
sec2q11			Cumulative Frequency			
Yes	61	84.72	61	84.72		
No	11	15.28	72	100.00		

Sec2q12 2.12. Is there a dedicated ECMO team of physicians and/or perfusionists/specialists, that round on CICU patients receiving ECMO therapies?					
sec2q12	Frequency	Percent		Cumulative Percent	
Yes	52	72.22	52	72.22	
No	20	27.78	72	100.00	



Sec2q13 2.13. Does your institution have a formal palliative care team/PACT team available for in-patient consultation for CICU patients?					
sec2q13	Frequency	Percent		Cumulative Percent	
Yes	69	95.83	69	95.83	
No	3	4.17	72.	100.00	

Sec2q14 2.14. Does your cardiac ward (or general wards where cardiac patients are cared for) use an objective warning score or other system for nurses to chart clinical deterioration?					
sec2q14	Frequency	Percent	Cumulative Frequency	Cumulative Percent	
Yes	55	76.39	55	76.39	
No	17	23.61	72	100.00	

Sec2q15 2.15. Does your hospital offer ECMO in the setting of active cardiac arrest (E-CPR)?						
sec2q15	Frequency	Cumulative Percent				
Yes	67	93.06	67	93.06		
No	5	6.94	72	100.00		

Sec2q16 2.16. Does your Heart Center have a Diversity Equity and Inclusion (DEI) committee or champion overseeing processes and modifying practice(s)?					
sec2q16	Frequency	Percent	<b>Cumulative Frequency</b>	Cumulative Percent	
Yes	32	44.44	32	44.44	
No	40	55.56	72	100.00	



Sec2q17 2.17. Does your ICU have a DEI Champion/leader overseeing processes and modifying practice(s)?					
sec2q17	Frequency	Percent	Cumulative Frequency	Cumulative Percent	
Yes	30	41.67	30	41.67	
No	42	58.33	72	100.00	



2.18.TEXT. Please provide any comments you may have concerning this section.					
sec2q18_TEXT	Frequency	Percent	<b>Cumulative</b> <b>Frequency</b>	Cumulative Percent	
#3 is N/A, but we had to put 0	1	8.33	1	8.33	
8 of the beds counted in the CICU count are flex beds that are used as either CICU or Acute Care beds depending on volume of each service.	1	8.33	2	16.67	
For question three, we do not have a physically distinct acute care unit. Step down and ICU share the same 44 bed space.	1	8.33	3	25.00	
Fortunately for our unit, one of our cardiothoracic surgeons is the former VP of DEI for the hospital and current executive director for gender equity within the department of Diversity, Equity, and Inclusion, so although she is not a formal Heart Center committee leader, she is in every sense of the word a champion for DEI within the Heart Institute.	1	8.33	4	33.33	
Heart Center and ICU do not have specific committees for DEI but the hospital does	1	8.33	5	41.67	
Our PICU has a DEI representative and the department of pediatrics does as well. Dont have a "heart center" per se	1	8.33	6	50.00	
Question 3 does not apply to our center, but mandated a response.	1	8.33	7	58.33	
The organization has a DEI Committee but there is not one specifically in the Heart Center or the ICU.	1	8.33	8	66.67	
Wanted to further clarify our cardiac units. We have a 12 bed CICU unit that is the main unit for ICU-level pre-op/post-op patients and very sick cardiac ICU patients who may require mechanical circulatory support. We also have a 21-bed acuity adaptive/flex unit that can house ICU and acute care patients. Typically, all of our acute care cardiac patients are roomed on that unit and only our sub-acute patients or patients that only need ICU care for short periods of time are roomed there but can handle main CICU overflow and post-op patients if required.	1	8.33	9	75.00	
We have 22 beds for CICU and PICU. 12 beds are dedicated for CICU only. However, multiple factors can lead to a temporary increase that spills into the PICU and visa versa	1	8.33	10	83.33	
We have a DEI committee for the entire children's hospital. They are actively engaged with the medical director. However there isn't one person dedicated to the heart program or ICU.	1	8.33	11	91.67	



2.18.TEXT. Please provide any comments you may have concerning this section.					
sec2q18_TEXT	Frequency	Percent		Cumulative Percent	
We have a single 20 bed unit for the PICU and CVICU. On paper, one side of the unit has 10 beds for the CVICU and the other has 10 beds for the PICU. In reality, the bed spaces are simply assigned to whichever patient needs the room based on acuity and context so there is plenty of "flex" back and forth. We also have a "satellite" area of the PACU where we can place up to four patients between the two services. If that sounds confusing it's because it is.	1	8.33	12	100.00	



Sec3q1_1 3.1a. Please tell us whether your hospital has the following programs - On-site critical care nursing course					
sec3q1_1	Frequency	Percent		Cumulative Percent	
Yes	53	73.61	53	73.61	
No	19	26.39	72	100.00	

Sec3q1_2 3.1b. Please tell us whether your hospital has the following programs - Mandatory PALS/ACLS training for ICU nurses				
sec3q1_2	Frequency	Percent		Cumulative Percent
Yes	70	97.22	70	97.22
No	2	2.78	72	100.00

Sec3q1_3 3.1c. Please tell us whether your hospital has the following programs - Teamwork and communication programs				
sec3q1_3	Frequency	Percent		Cumulative Percent
Yes	60	83.33	60	83.33
No	12	16.67	72	100.00

Sec3q1_4 3.1d. Please tell us whether your hospital has the following programs - Tuition reimbursement for nursing/ancillary staff					
sec3q1_4	Frequency	Percent	Cumulative Frequency	Cumulative Percent	
Yes	62	86.11	62	86.11	
No	10	13.89	72	100.00	



Sec3q1_5 3.1e. Please tell us whether your hospital has the following programs - Centralized orientation program for newly hired nurses					
sec3q1_5	Frequency	Percent		Cumulative Percent	
Yes	67	93.06	67	93.06	
No	5	6.94	72	100.00	

Sec3q1_6 3.1f. Please tell us whether your hospital has the following programs - Unit-based preceptorship program for nurses new to the field				
sec3q1_6	Frequency	Percent	<b>Cumulative Frequency</b>	
Yes	70	97.22	70	97.22
No	2	2.78	72	100.00

Sec3q1_7 3.1g. Please tell us whether your hospital has the following programs - Resiliency Programs for staff					
sec3q1_7	Frequency	Percent		Cumulative Percent	
Yes	61	84.72	61	84.72	
No	11	15.28	72	100.00	

Sec3q1_8 3.1h. Please tell us whether your hospital has the following programs - Bereavement Program					
sec3q1_8	Frequency	Percent	Cumulative Frequency		
Yes	62	86.11	62	86.11	
No	10	13.89	72	100.00	



Sec3q2\_1 3.2a. Please tell us whether your CICU has the following quality improvement activities - Clinical quality data are shared at least quarterly with front-line staff

Cumulative Cumulative Percent Frequency Percent

sec3q2_1	Frequency		<b>Cumulative Frequency</b>	Cumulative Percent
Yes	66	91.67	66	91.67
No	6	8.33	72	100.00

Sec3q2\_2 3.2b. Please tell us whether your CICU has the following quality improvement activities - Adverse event reporting system

sec3q2_2	Frequency		<b>Cumulative Frequency</b>	
Yes	72	100.00	72	100.00

Sec3q2\_3 3.2c. Please tell us whether your CICU has the following quality improvement activities - A quality and safety committee that reports to the hospital's board

sec3q2_3	Frequency		<b>Cumulative Frequency</b>	Cumulative Percent
Yes	66	91.67	66	91.67
No	6	8.33	72	100.00

Sec3q3\_1 3.3a. Does your CICU and/or Heart Center have the following individuals - Quality officer (CICU based)

sec3q3_1	Frequency	Percent		Cumulative Percent
Yes	48	66.67	48	66.67
No	24	33.33	72	100.00



Sec3q3\_2 3.3b. Does your CICU and/or Heart Center have the following individuals - Quality officer (Heart center based [shared leadership with Surgery and Cardiology])

sec3q3_2	Frequency	Percent	<b>Cumulative Frequency</b>	Cumulative Percent
Yes	52	72.22	52	72.22
No	20	27.78	72	100.00

Sec3q3\_3 3.3c. Does your CICU and/or Heart Center have the following individuals - Data analysts/programmers

sec3q3_3	Frequency	Percent	<b>Cumulative</b> <b>Frequency</b>	Cumulative Percent
Yes	47	65.28	47	65.28
No	25	34.72	72	100.00

Sec3q3\_4 3.3d. Does your CICU and/or Heart Center have the following individuals - Statisticians

8						
sec3q3_4	Frequency		<b>Cumulative Frequency</b>	Cumulative Percent		
Yes	29	40.28	29	40.28		
No	43	59.72	72	100.00		

Sec3q4\_1 3.4a. Does your CICU and/or Heart Center have any of the following conferences - Conferences to review important quality metrics (HACs)

sec3q4_1	Frequency	Percent	<b>Cumulative Frequency</b>	Cumulative Percent
Yes	65	90.28	65	90.28
No	7	9.72	72	100.00



Sec3q4\_2 3.4b. Does your CICU and/or Heart Center have any of the following conferences - Conferences to review morbidities and mortalities (including Cardiac arrest) Cumulative **Cumulative Percent** sec3q4\_2 **Frequency Percent Frequency** 100.00 72 100.00 72 Yes

Sec3q4a_1 3.4ba. At which level are the M and M conferences held - CICU based					
sec3q4a_1	Frequency	Percent		Cumulative Percent	
Yes	39	54.17	39	54.17	
No	33	45.83	72	100.00	

Sec3q4a_2 3.4bb. At which level are the M and M conferences held - Heart center based					
sec3q4a_2	Frequency	Percent		Cumulative Percent	
Yes	68	94.44	68	94.44	

Sec3q5 3.5. Do you have dedicated cardiac critical care program simulation resources (equipment colocated in unit, in-situ simulation rooms, etc.)?				
sec3q5	Frequency	Percent	Cumulative Frequency	Cumulative Percent
Yes	47	65.28	47	65.28
No	25	34.72	72	100.00

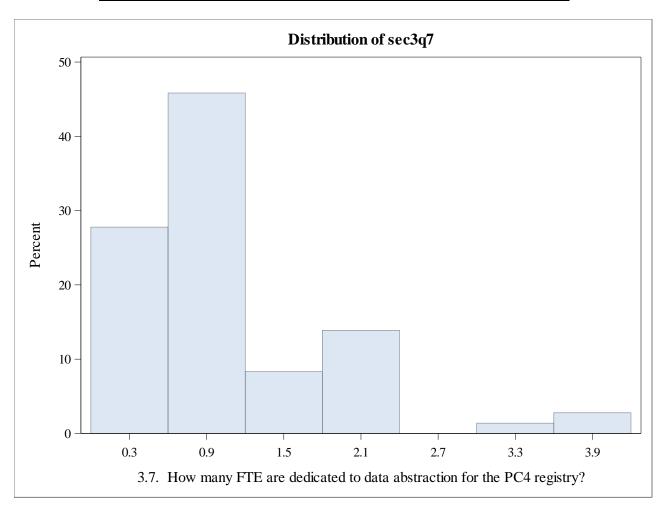


Sec3q6 3.6. Do you conduct Simulation exercises on a regular basis in your unit?					
sec3q6	Frequency	Percent		Cumulative Percent	
Yes	55	76.39	55	76.39	
No	17	23.61	72	100.00	



2022 Hospital Survey Results
Section 3: Training and Quality Improvement Activities

Sec3q7 3.7. How many FTE are dedicated to data abstraction for the PC4 registry?							
N	Minimum	25th Pctl	50th Pctl	75th Pctl	Maximum	Mean	Std Dev
72	0.0	0.5	1.0	1.2	4.0	1.1	0.7





Sec3q8_1 3.8a. What is the training background of PC4 data abstractors at your institution - RN					
sec3q8_1	Frequency	Percent		Cumulative Percent	
Yes	54	75.00	54	75.00	
No	18	25.00	72	100.00	

Sec3q8_2 3.8b. What is the training background of PC4 data abstractors at your institution - RT					
sec3q8_2	Frequency	Percent		Cumulative Percent	
Yes	3	4.17	3	4.17	
No	69	95.83	72	100.00	

Sec3q8_3 3.8c. What is the training background of PC4 data abstractors at your institution - MD					
sec3q8_3	Frequency	Percent	Cumulative Frequency	Cumulative Percent	
Yes	10	13.89	10	13.89	
No	62	86.11	72	100.00	

Sec3q8_4 3.8d. What is the training background of PC4 data abstractors at your institution - APP					
sec3q8_4	Frequency	Percent	Cumulative Frequency		
Yes	10	13.89	10	13.89	
No	62	86.11	72	100.00	



Sec3q8_5 3.8e. What is the training background of PC4 data abstractors at your institution - non-clinical					
sec3q8_5	Frequency	Percent	Cumulative Frequency		
Yes	21	29.17	21	29.17	
No	51	70.83	72.	100.00	

3.9.TEXT. Please provide any comments you may have concerning this section.					
sec3q9_TEXT	Frequency	Percent	Cumulative Frequency	Cumulative Percent	
1.0 FTE PC4 data abstractor RN0.2 FTE PC4 data abstractor non- clinical	1	14.29	1	14.29	
I am the Director of Quality for the service line, however, we do not have a separate, non-clinical, person dedicated to the role of Quality Officer.	1	14.29	2	28.57	
NYP-Weill Cornell shares data abstraction with NYP-Columbia. The data abstractors are hired by NYP Columbia and abstract for both campuses. The background for these data abstractors is RN. The FTE dedicated to Cornell abstraction is estimated above	1	14.29	3	42.86	
Our FTE for abstraction is allocated to PC4, PAC3, CNOC	1	14.29	4	57.14	
Simulation resources are shared with the general pediatric critical care team.	1	14.29	5	71.43	
We do not require ACLS but do require PALS	1	14.29	6	85.71	
for #7, the 4FTEs also cover additional registries, not able to estimate the #/% of FTE just for PC4	1	14.29	7	100.00	



Sec4q1 4.1. Is there a standard of care for sedation assessment and documentation in your unit?				
sec4q1	Frequency	Percent	Cumulative Frequency	Cumulative Percent
Yes	71	98.61	71	98.61
No	1	1.39	72	100.00

Sec4q2 4.2. Is there a standard of care for delirium assessment and documentation in your unit?				
sec4q2	Frequency	Percent		Cumulative Percent
Yes	60	83.33	60	83.33
No	12	16.67	72	100.00

Sec4q3 4.3. Is there a standard of care for withdrawal syndrome assessment and documentation in your unit?				
sec4q3	Frequency	Percent		Cumulative Percent
Yes	71	98.61	71	98.61
No	1	1.39	72	100.00

Sec4q4 4.4. Does your institution routinely perform vascular ultrasounds around the time of removal of central catheters (arterial or venous) even if there is no clinical suspicion for thrombosis?				
sec4q4	Frequency	Percent		Cumulative Percent
Yes	3	4.17	3	4.17
No	69	95.83	72	100.00



Sec4q5 4.5. Does your institution routinely perform pre-operative cranial ultrasound in neonates for clinical surveillance?				
sec4q5	Frequency	Percent		Cumulative Percent
Yes	61	84.72	61	84.72
No	11	15.28	72	100.00

Sec4q6 4.6. Does your institution routinely perform post-operative cranial ultrasound in neonates for clinical surveillance?				
sec4q6	Frequency	Percent	Cumulative Frequency	Cumulative Percent
Yes	13	18.06	13	18.06
No	59	81.94	72	100.00

Sec4q7 4.7. Does your institution routinely perform continuous EEG monitoring in post-operative neonates for clinical surveillance?				
sec4q7	Frequency	Percent	Cumulative Frequency	Cumulative Percent
Yes	21	29.17	21	29.17
No	51	70.83	72	100.00

Sec4q8 4.8. Does your institution routinely perform continuous EEG monitoring in post-operative patients (non-neonates) for clinical surveillance?				
sec4q8	Frequency	Percent	Cumulative Frequency	Cumulative Percent
Yes	1	1.39	1	1.39
No	71	98.61	72	100.00



Sec4q9 4.9. Does your institution perform CT/MRI to assess for neurologic injury in pre- operative neonates?						
sec4q9 Frequency Percent Cumulative Cumulative Percent Frequency Percent Frequency Percent Per						
Yes, for clinical surveillance/standard of care	15	20.83	15	20.83		
Yes, for research purposes only	3	4.17	18	25.00		
No	54	75.00	72	100.00		

Sec4q10 4.10. Does your institution perform CT/MRI to assess for neurologic injury in post- operative neonates?					
sec4q10	Frequency	Percent		Cumulative Percent	
Yes, for clinical surveillance/standard of care	17	23.61	17	23.61	
No	55	76.39	72	100.00	

Sec4q11 4.11. Does your institution routinely perform a screening upper airway evaluation (formal

laryngoscopy or vocal cord ultrasound by ENT specialists, with or without swallow study) in neonate after arch repair to assess for vocal cord dysfunction, regardless of clinical suspicion? Cumulative **Cumulative** sec4q11 **Frequency Percent Frequency Percent** 27 37.50 27 37.50 Yes No 45 62.50 72 100.00



Sec4q12 4.12. Does your institution routinely perform a screening upper airway evaluation (formal laryngoscopy or vocal cord ultrasound by ENT specialists, with or without swallow study) in all neonates who have NOT undergone arch repair to assess for vocal cord dysfunction, regardless of clinical suspicion?

sec4q12	Frequency	Percent		Cumulative Percent
Yes	1	1.39	1	1.39
No	71	98.61	72	100.00

Sec4q13a 4.13a. Does your institution routinely require a code status order on admission for those under 18 years of age (i.e., full code, limitations to care, DNR/DNI)?

sec4q13a	Frequency	Percent		Cumulative Percent
Yes	42	58.33	42	58.33
No	30	41.67	72	100.00

Sec4q13b 4.13b. Does your institution routinely require a code status order on admission for those 18 years of age or older (i.e., full code, limitations to care, DNR/DNI)?

sec4q13b	Frequency	Percent	<b>Cumulative Frequency</b>	Cumulative Percent
Yes	47	65.28	47	65.28
No	25	34.72	72	100.00

Sec4q14 4.14. Does your CICU have a dedicated time each weekday where the attending intensivist(s) and attending surgeon(s) round together?

sec4q14	Frequency	Percent		Cumulative Percent
Yes	63	87.50	63	87.50
No	9	12.50	72	100.00



4.15.TEXT Please provide any comments you may have concerning this section.					
sec4q15_TEXT	Frequency	Percent	Cumulative Frequency	Cumulative Percent	
CT/MRI is only performed if there is clinical suspicion of neurologic injury. Studies are not done if there is no suspicion of neurologic injury. Head US is performed on all neonates preoperatively. We perform head US daily in neonates on ECMO.	1	12.50	1	12.50	
For question 6: We would routinely perform postoperative HUS if there was a clinical abnormality on a preoperative HUS or ongoing clinical concerns. For question 10: We would routinely utilize head CT/MRI as a screen imaging modality if there is a clinical concern. For question 13b. We are mandated to ask all patients > 18 years for code status but are not required to have a response from the patient.	1	12.50	2	25.00	
Most patients over 18 being admitted are postoperative or heart failure, so full code. For patients with potential of limiting care this is generally clarified on admission	1	12.50	3	37.50	
Multidisciplinary grand rounds take place in person once a week and teleconferences take place twice weekly.	1	12.50	4	50.00	
Question 10 is misleading, if indicated we will pursue these tests but not without pretest probability	1	12.50	5	62.50	
Regarding question 7, we have recently acquired two CFM monitors to facilitate EEG monitoring in post-operative neonates given institutional resource limitation to provide full EEG monitoring for these patients. Regarding questions 9 and 10, we do not routinely perform CT/MRI to assess for neurologic injury in pre-/post-operative neonates, but obviously use these modalities whenever there is clinical concern for neurologic injury.	1	12.50	6	75.00	
We do not routinely perform preop head imaging (CT/MR) in neonates but would perform as needed and more routinely in HLHS neonates.	1	12.50	7	87.50	
We routinely perform post-operative cranial ultrasound in neonates who went on ECMO after their cardiac surgery for clinical surveillance.	1	12.50	8	100.00	