



**Colorado Pediatric
Preparedness for the
Emergency Room**



LETTER OF COMMITMENT

Hospital Name:

Date:

This letter of commitment confirms that our hospital is committed to participating in the Colorado Pediatric Preparedness for the Emergency Room (COPPER) program to improve our emergency department's capacity for and quality of pediatric emergency care.

By committing to participating in the COPPER program, we understand that:

- We will need to submit an application for COPPER recognition and an accompanying COPPER checklist affirming that we have met the criteria for the chosen tier of recognition to the best of our ability
- We will be required to complete a site survey with the COPPER survey team (this may be virtual or in-person)
- We may be asked to participate in annual COPPER meetings or workshops
- We may be asked to serve as a resource for other hospitals considering applying for COPPER recognition
- This signed letter of commitment, once submitted with the COPPER application and accompanying checklist, will be followed by instructions from COPPER representatives regarding next steps such as scheduling a site survey and uploading documents for the site survey
- We can reach out to the COPPER program team at any time with questions, concerns, or requests for assistance
 - Program Manager – Stacey Quesada, MPH, stacey.quesada@cuanschutz.edu
 - Director – Kathleen Adelgais, MD, MPH, kathleen.adelgais@childrenscolorado.org

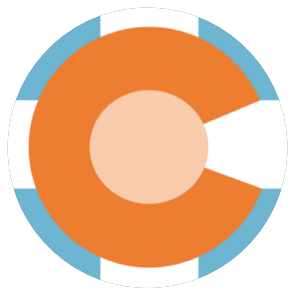
Roles and Responsibilities of the COPPER Point of Contact:

- I agree to serve as our hospital's point of contact for the COPPER program
- I will complete and submit the COPPER application and checklist and will upload the required documentation necessary for site surveyors to assess our ED's level of pediatric readiness
- I will annually update the Medical Director, ED Nursing Director (if applicable), and Hospital Administrator contact information for the COPPER program
- Should I need to vacate my position or transfer responsibilities to another point of contact, I will notify the COPPER program

Roles and Responsibilities for ED Leadership (Medical and/or Nursing Directors):

- I agree to support the activities required of the COPPER point of contact, and perhaps other ED staff, to apply for and obtain COPPER recognition
- I will allow time for our hospital's COPPER point of contact and other necessary ED staff to complete COPPER program materials as well as participate in conference calls and site surveys as required

SIGNATURES**COPPER Point of Contact Name:****Sign Here:****Date:****ED Medical Director Name:****Sign Here:****Date:****ED Nursing Director (if applicable):****Sign Here:****Date:****Hospital Administrator Name:****Sign Here:****Date:****Hospital Administrator Title:**



Colorado Pediatric Preparedness for the Emergency Room (COPPER)

www.emsccolorado.com/copper

WHAT IS COPPER?

Colorado Pediatric Preparedness for the Emergency Room (COPPER) is a voluntary pediatric readiness recognition program for Colorado emergency departments. The program has two tiers of recognition: Pediatric Prepared and Pediatric Advanced. The main difference between the two tiers is the presence of a physician Pediatric Emergency Care Coordinator (PECC), which is required for Pediatric Advanced but not for Pediatric Prepared. COPPER was developed by EMS for Children Colorado in collaboration with several statewide partners. The program strives to help emergency departments achieve a higher level of pediatric readiness by providing key resources, support, and education. For more information on COPPER, or to participate in the program, go to www.emsccolorado.com/copper.

MISSION

To help Colorado emergency departments ensure the delivery of safe, competent, and effective pediatric care by providing resources, support, guidance, and site verification.

VISION

All Colorado emergency departments will have the capability to provide safe, competent, and effective pediatric emergency care.

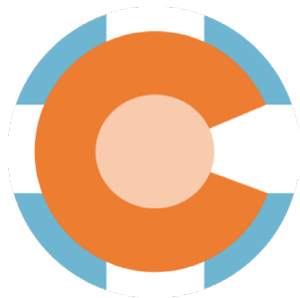
WHY DID WE DEVELOP COPPER?

- 69.4% of children seeking emergency care are cared for in emergency departments (EDs) that see fewer than 15 pediatric patients per day.¹
- The 2013 National Pediatric Readiness Assessment results affirmed the importance of pediatric readiness recognition programs. Hospitals recognized as being pediatric ready scored 22-24 points higher on the assessment.¹
- Presentation to hospitals with a high pediatric readiness score is associated with decreased mortality.²
- Approximately half of EDs lack a physician or nurse PECC. The presence of a PECC is strongly correlated with improved pediatric readiness.¹
- 55% of EDs report the absence of a quality improvement (QI) plan in which they address pediatric care. Among those with a QI plan, 41.7% lack specific pediatric quality indicators.¹
- In the absence of participation in a pediatric verification program, trauma center status is not predictive of higher pediatric readiness scores.¹
- Approximately half of hospitals report lacking disaster plans that include specific care needs for children.¹
- Children can't decide their circumstances or where they live. They cannot influence how the emergency medical system works when they are ill or injured... but, TOGETHER, WE CAN.

For more information:

Stacey Quesada, MPH
EMS for Children Colorado
Program Manager

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303-724-2565
www.emsccolorado.com



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HOW DOES IT WORK?

1

If your hospital is interested in obtaining COPPER recognition, we recommend using the [COPPER checklist](#) to perform an initial self assessment. Use the results of the self assessment to help you decide the level of recognition you want to apply for and to identify the gaps that you will need to address to meet the criteria for that level of recognition.

2

Use the [resources](#) available from the COPPER program and the national EMS for Children [pediatric readiness toolkit](#) to help your hospital address the gaps identified in step 1. If you have questions or would like assistance addressing gaps, please feel free to contact the EMS for Children Colorado program manager using the information provided at the bottom of this page.

3

Submit the online [COPPER application, letter of commitment, and checklist](#).

4

A representative of the COPPER program will contact you to schedule a consultative visit.

5

COPPER team members will conduct an in-person or virtual consultative visit to review various aspects of your ED's pediatric readiness.

6

COPPER team members will follow up with your ED to award COPPER recognition or to provide recommendations for improvement.

WHO DEVELOPED COPPER?



For more information:

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Program Manager

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REFERENCES

1. Remick, K., Gausche-Hill, M., Joseph, M. M., Brown, K., Snow, S. K., Wright, J. L., ... & EMERGENCY NURSES ASSOCIATION Pediatric Committee. (2018). Pediatric readiness in the emergency department. *Pediatrics*, 142(5).
1. Ames, S. G., Davis, B. S., Marin, J. R., Fink, E. L., Olson, L. M., Gausche-Hill, M., & Kahn, J. M. (2019). Emergency department pediatric readiness and mortality in critically ill children. *Pediatrics*, 144(3), e20190568.

DISCLAIMER

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