



News Articles, AAP Policy

Policy offers guidance for acute care services delivered outside the medical home

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While the Academy continues to assert that the pediatric medical home is the ideal place for children to receive nonemergent acute care, accessibility, convenience and market trends are leading families to seek out alternate settings. Within the framework that all children deserve to have safe and appropriate care, the Academy brought together pediatric stakeholders from different care settings to create the policy statement *Nonemergency Acute Care: When It's Not the Medical Home*.

The policy does not address acute care in the emergency department nor is it intended to encourage patient/family use of these alternate venues.

It recommends that pediatricians create local and regional responses to increase appropriate access to care for children in their communities and to work so that all care is safe and of high quality. This may include innovative ways to offer extended hours, develop integrated telehealth programs extending the medical home beyond the office walls and working with appropriate pediatric resources in the community to ensure adequate access.

Wherever children access the health care system, there must be communication with the medical home, according to the policy, which is available at <https://doi.org/10.1542/peds.2017-0629> and will be published in the May issue of *Pediatrics*.

The policy emphasizes that to provide safe care, entities delivering acute care services need to have an appropriate scope of practice that is aligned with their pediatric expertise, and this information should be transparent to the community.

In addition, the policy states that retail-based clinics, telehealth services not directly connected with the medical home and acute care services that lack pediatric expertise should *not* provide care to children younger than 2 years. There are little data on delivery of acute care services for children in these settings, and the policy outlines recommendations for a research agenda so that evidence-informed guidance can be developed and adjusted as warranted.

Core principles for delivery of acute nonemergent care outside the medical home include:

- maximizing continuity with the medical home, including rapid communication;
- providing care based on the best available evidence with clearly defined and transparent limits of scope of service;
- ensuring staff have pediatric training and experience to provide the scope of services;
- establishing protocols for transitions of care during emergencies, after hours and when care is outside the entity's scope of service; and
- implementing strategies for continuous assessment of quality of care and patient safety.

Patients and families deserve to know - from a trusted and transparent source - what constitutes safe care for many common acute visits. An appendix to the policy excerpts a page from HealthyChildren.org that advises parents on the basics of safe and evidence-based care for common maladies, with links to selected guidelines. Pediatricians are encouraged to share this information with families and care providers in their community.

The policy is from the AAP Committee on Practice and Ambulatory Medicine, Committee on Pediatric Emergency Medicine, Section on Telehealth Care, Section on Emergency Medicine Subcommittee on Urgent



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Dr. Kressly, a lead author of the policy, is a member of the AAP Task Force on Pediatric Practice Change.