

# Priorities for Pediatric Patient Safety Research

Hoffman et al. (2019)

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## For which topic were research priorities identified?

pediatric patient safety

## In which location was the research priority setting conducted?

North America - USA

## Why was it conducted at all?

Developing a research agenda that is focused on the priorities of key stakeholders may expedite implementation and dissemination. Research priorities for patient safety in pediatrics have not been studied. Children have different needs to ensure that their health care is safe (eg, weight-based medication dosing).<sup>1</sup> There may be unique priorities for patient-safety research in pediatrics that differ from broader priorities.

## What was the objective?

to identify the highest-priority patient-safety research topics among pediatric clinicians, health care leaders, and families

## What was the outcome?

a ranking list of 24 research topics

## How long did the research prioritization take?

July 2015 - December 2016

## Which methods were used to identify research priorities?

interview; survey

## How were the priorities for research identified exactly?

Step 1: collecting research priorities: elicitation survey: experts were asked: For children in the hospital, what is the most important and urgent learning opportunity for hospital staff regarding patient safety? What information do you think is needed to make healthcare safer for patients in the hospital?, additionally participants were asked: Are there any additional urgent learnings that you would like clinical staff to have in order to improve patient safety for children?, 167 research topics suggested. Step 2: data processing: research topic reviewed, grouping of identical topics resulting in 49 unique topics. Step 3: interim ranking: key stakeholder panel asked to rate each topic resulting in list of top 24 ranked items. Step 4: prioritization survey: participants were asked to rate each topic. Step 5: interviews: with 7 health system executives to highlight priority areas

## Which stakeholders took part?

Pediatric clinicians, health care leaders, and families. Elicitation survey: 107 participants. Interim prioritization: 6 participants (the parent of a child with a chronic disease, a physician health system leader, a nurse leader and safety researcher, a physician safety researcher, a pharmacist patient-safety leader, and a quality improvement consultant). Prioritization survey: 74 participants. Interview: 7 health system executives.

## How were stakeholders recruited?

The Children's Hospitals Solutions for Patient Safety Network (SPS) is a network of >130 children's hospitals, grounded in learning health system concepts, working together to eliminate harm due to health care. Using SPS e-mail listservs, invitations were sent out to site leads at each participating SPS hospital. To invite parents, 20 invitations were e-mailed using listservs that included parent advisory groups and parents. A snowball sampling was employed, asking participants (parents and SPS leaders) to forward the invitational e-mail and survey link to interested colleagues, friends, and parents. For the interviews, a purposive sample of pediatric health system leaders was selected to include both female and male nurse and physician leaders from throughout the country and larger and smaller health systems.

## Were stakeholders actively involved or did they just participate?

Stakeholders were mere participants of the research prioritization process; they were not actively involved in the process.