

Background and Learning Needs

Pediatric intermediate care nurses in large academic children's hospitals care for patients with rare, complex, and evolving conditions. Rapid changes in patient acuity, institutional policies, and evidence-based practices require nurses to continuously adapt clinical knowledge and decision-making at the bedside.

Traditional education modalities, including classroom-based sessions and asynchronous online learning, provide foundational knowledge but may not adequately support real-time, case-driven learning needs within fast-paced inpatient environments. A local, unit-based needs assessment identified gaps between scheduled education offerings and the immediate clinical questions that arise during daily care delivery, particularly for nurses working nights, weekends, and rotating shifts. These findings highlighted the need for a supplemental, workflow-integrated approach where just-in-time education aligned with current clinical demands.

Educational Objectives

This unit-based initiative aimed to implement a staff-driven, just-in-time education model that integrates concise, evidence-informed learning into daily pediatric inpatient nursing workflow. Following participation, nurses were able to:

- Access diagnosis-specific educational content aligned with current patient acuity, institutional policies, and evidence-based practices at the point of care
- Apply evidence-informed learning to support clinical reasoning and decision-making in complex pediatric inpatient scenarios
- Participate in and lead brief, unit-based educational huddles, fostering shared ownership of learning and peer-to-peer knowledge dissemination

Description of Educational Offering

- Each week, topics are selected based on real-time census trends, staff requests, and charge nurse insights.
- The Professional Development Practitioner conducts a deep evidence and policy review, distilling key content into a refined, templated learning brief.
- Topics are delivered in 10-minute huddle sessions each day for one week and reinforced by charge and resource nurses to reach night, weekend, and rotating staff.
- Each completed topic is added to an accessible reference book kept at the charge desk.

Key Points/ Program Highlights

Despite the complexity of 24/7 inpatient staffing, the just-in-time education model engaged over **90% of nursing staff**. Almost 40% of educational topics were from frontline staff requests and over 20% were from real-time patient census trends, supporting relevance and responsiveness to daily clinical needs.

The model required minimal additional resources and integrated seamlessly into existing workflow through **brief huddles** and a centralized, unit-owned reference repository. This approach supported timely access to evidence-informed information and promoted shared ownership of learning across nursing roles.

The structure of the program demonstrates **feasibility** and **scalability** across pediatric inpatient units and offers a replicable framework for academic children's hospitals caring for diverse and medically complex populations.

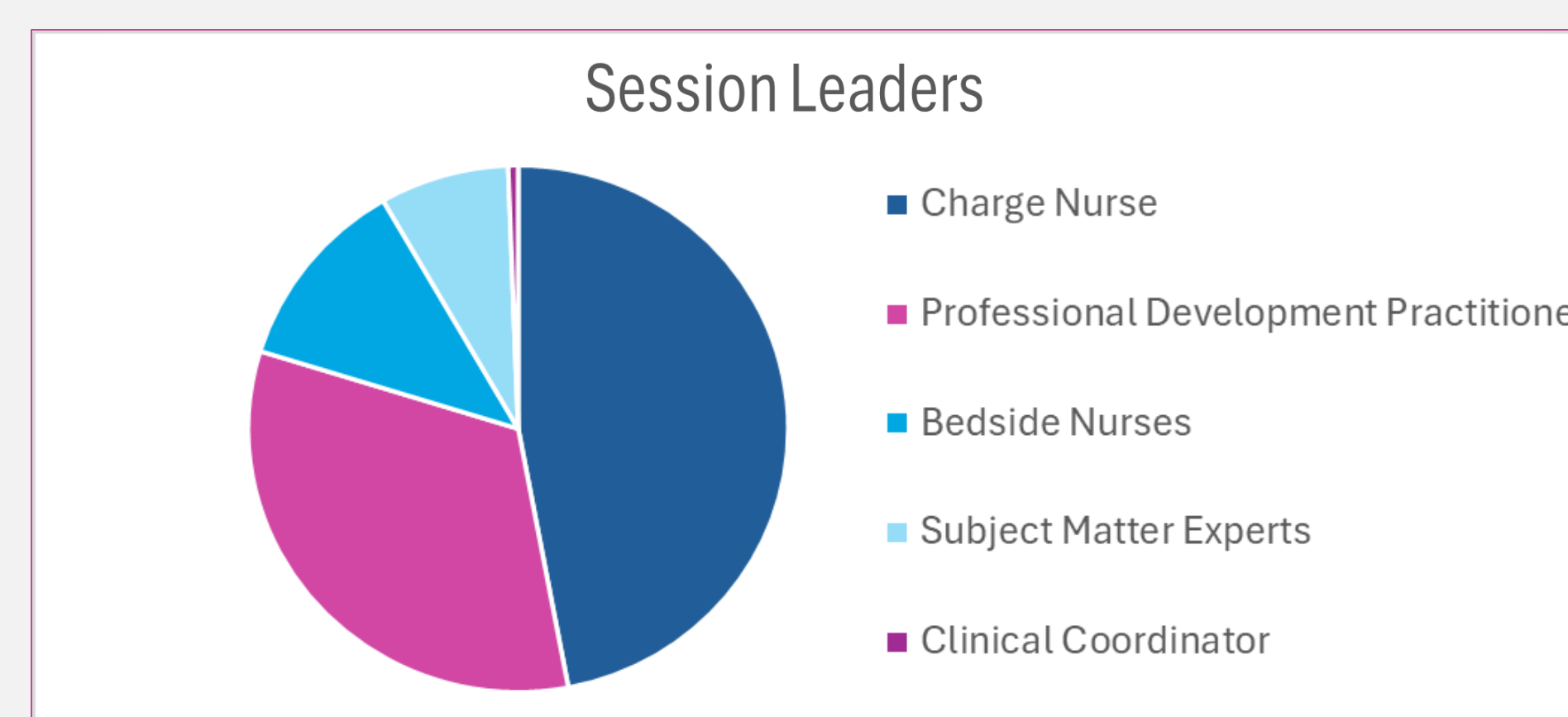


Figure 1. Education delivery was distributed across multiple nursing roles, reinforcing shared ownership.

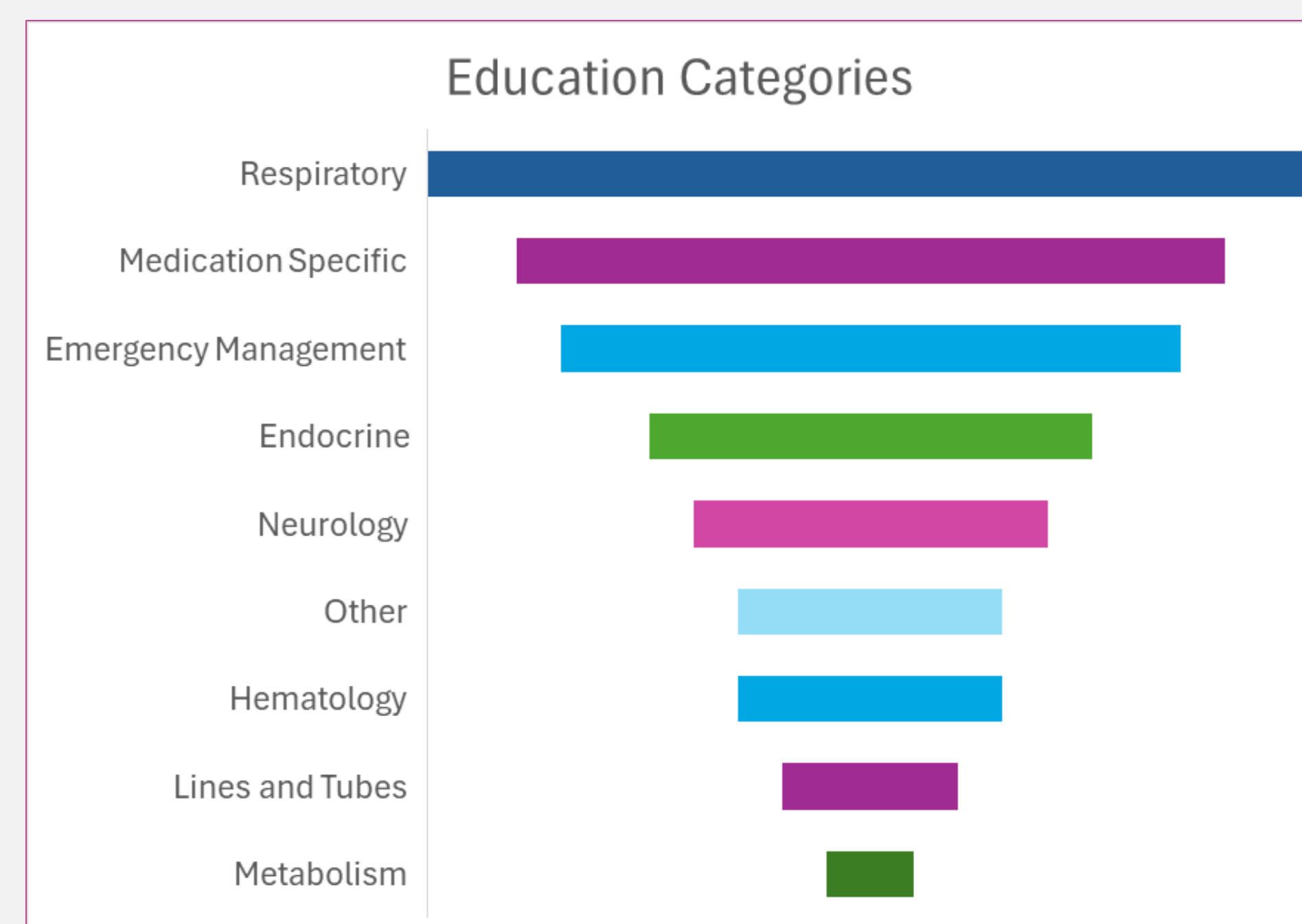


Figure 2. Education topics reflected the diverse patient population cared for in the PIMCU.

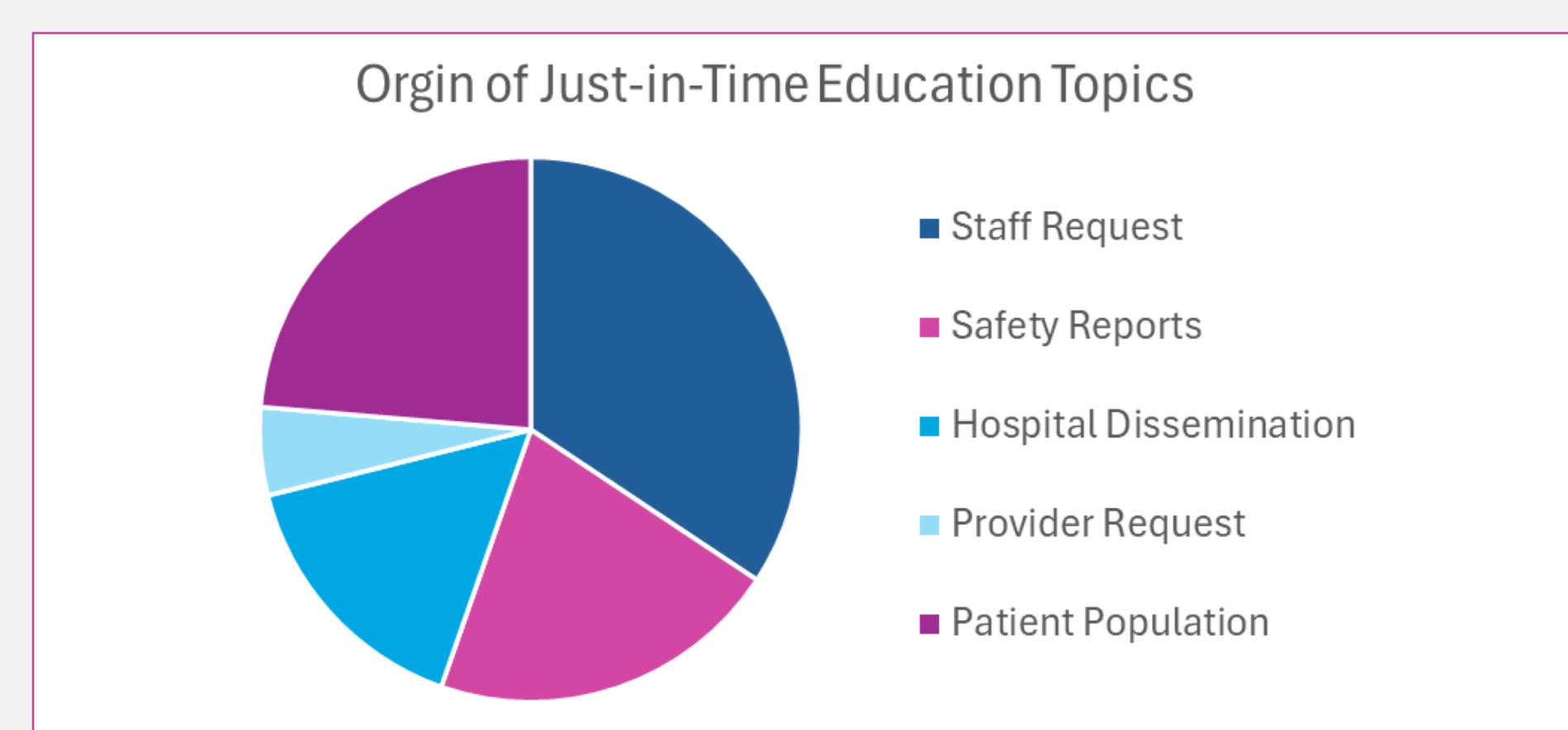


Figure 3. Educational topics were primarily identified through frontline-driven and real-time clinical inputs.

Next Steps

Future directions include continued refinement of topic selection based on emerging clinical needs and staff feedback. Planned enhancements focus on engaging frontline nurses to develop subject matter expertise, strengthening interdisciplinary participation, evaluating longitudinal engagement trends, and exploring opportunities to formally assess the model's impact on nurse confidence and clinical readiness.

Acknowledgements and References

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References