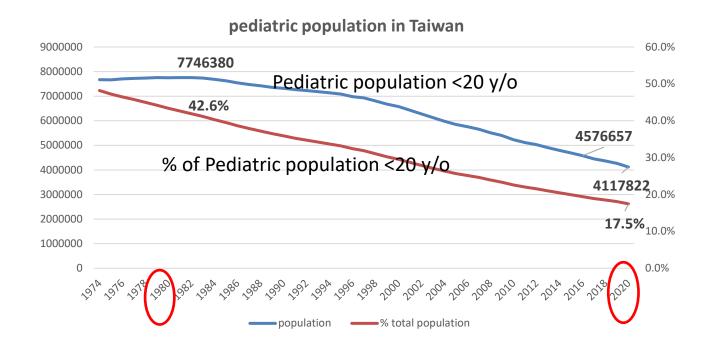
Advancements and Future Directions in Pediatric Critical Care: Perspectives from Taiwan

吳美環 Mei-Hwan Wu, MD, PhD National Taiwan University Children's Hospital, Taipei, Taiwan

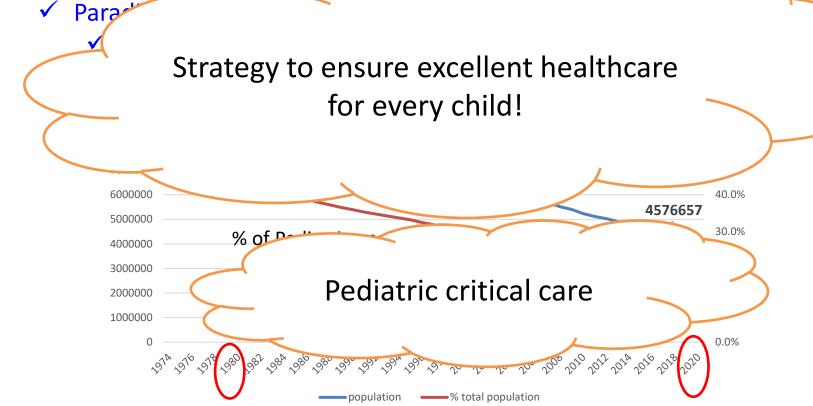


- ✓ Taiwan's population 23,9 million
- ✓ Pediatrics Specialty Profession since 1906 (NTUH)
- ✓ Low birth rate, still unsatisfactory neonate mortality
- ✓ Nationwide health insurance program since 1995, nearly 100% coverage:
 - ✓ Pro: reimbursed health care, waived copayment policy for serious illness, etc.
 - ✓ Con: market-driven dynamics, etc.
- ✓ Paradigm shift of Healthcare workforce:
 - ✓ Pediatric workforce crisis?





- Taiwan's population 23,9 million
- Pediatrics Specialty Profession since 1906 (NTUH)
- Low birth rate, still unsatisfactory neonate mortality
- ✓ Nationwide health insurance program since 1995, nearly 100% coverage:
 - ✓ Pro: reimbursed health care, waived copayment policy for
 - serious illness, etc. Con: market-driven





Dynamic Strategic Approach for Child Health-Driven Pediatric Critical Care

Statistics

- Spectrum of medical needs
- Complex perpetual, critical----

Critical illness

Child health-driven networking

- Education: prevention, recognition, timely and bidirectional referral
- Outcome analysis and sharing

Health care delivery

Child health

Outcome

Hospitals

- Optimized health care
- Child friendly
- Career/team development

NOT marketdriven

Multidisciplinary team:

- Regionalization for high patient volume and time urgency
- Centralization opted by professional transfer, if low patient volume

Medical needs of children

Health promotion

Acute

Healthy child with acute illness

- ES
- Infectious Disease
- Fractures
- Tonsillitis and Otitis
- Appendicitis---

Perpetual Child with low acuity chronic conditions, requiring special

Asthma

care

- Diabetes and endocrine disorder
- Autism
- ADHD----

Complex perpetual

Medically complex children with special health care need

- Congenital Heart Disease
- Cancer
- Major Anomalies
- Transplant---

Critical

Child with critical care need

- Neonatal care:
- Extreme prematurity
- Critical care
- Trauma---

Medical needs of children

Health promotion

Acute

Healthy child with acute illness

Perpetual
Child with low acuity chronic

研究單位:兒研中心(Child Health

Research Center);

資料來源:衞福部資科中心(Health and

Welfare Data Center of Taiwan's Ministry of

Health and Welfare)

• Co

Cancer

Major Anomalies

Transplant---

remacancy

a care

Trauma---

Medical visits in children (0-19): 2017-19

86.8%

Acute

Healthy child with acute illness

- ES
- Infectious Disease
- Fractures
- Tonsillitis and Otitis
- Appendicitis ---

Perpetual

47.7%

Child with low acuity chroconditions, requiring special care

- Asthma
- Diabetes and endocrine disorder
- Autism
- ADHD ---

11.2%

Complex perpetual

Medically complex children with special health care need

- Congenital Heart Disease
- Cancer
- Major Anomalies
- Transplant ----

Critical

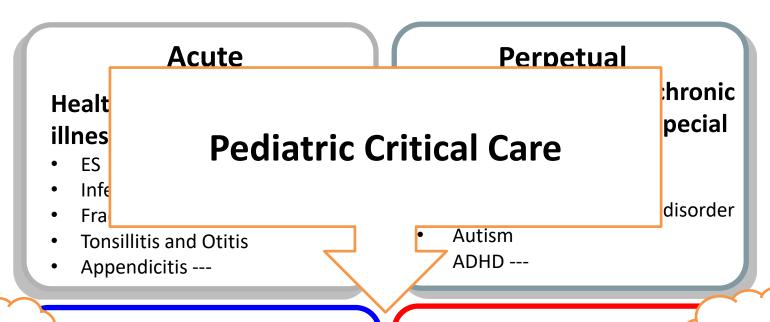
2.4%

Child with critical care need

- Neonatal care:
- Extreme prematurity
- Critical care
- Trauma ---

Courtesy of Child Health Research Center

Medical visits in children (0-19): 2017-19



11.2% **Complex perpetual**

Medically complex children with special to the need

- Low patient no in each category.
- High medical complexity

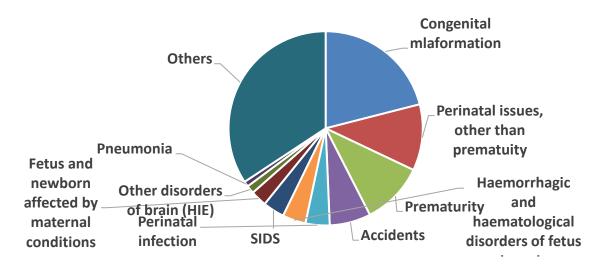
Critical

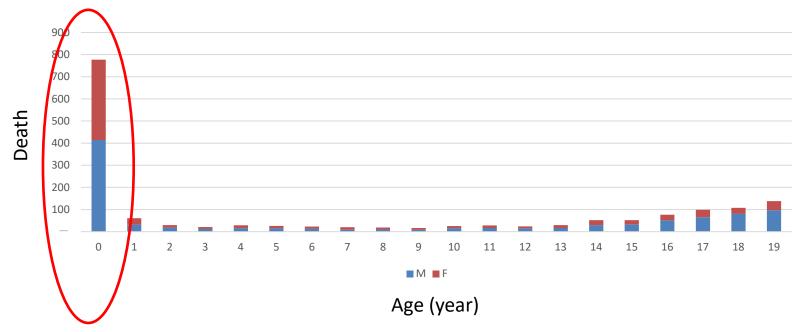
2.4%

Child with critical care need

- · [
- Varied patient no. in each category.
- Moderate to high medical complexity
- Time urgency

Infants, Causes of death, 2019 in Taiwan Mortality 3.83/1000





Medical visits in Infants: 2017-19

83.4%

Acute

Healthy child with acute illness

- ES
- Infectious Disease
- Fractures
- Tonsillitis and Otitis
- Appendicitis----

Perpetual

57.4%

Child with low acuity chroconditions, requiring special care

- Asthma
- Diabetes and endocrine disorder
- Autism
- ADHD---

24.0%

Complex perpetual

Medically complex children with special health care need

- Congenital Heart Disease
- Cancer
- Major Anomalies
- Transplant---

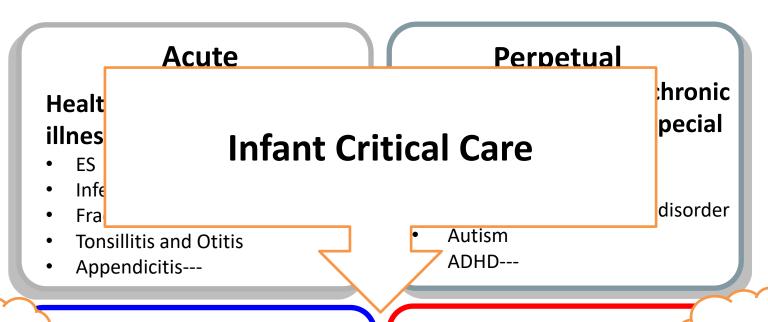
Critical

29.2%

Child with critical care need

- Neonatal care:
- Extreme prematurity
- Critical care
- Trauma---

Medical visits in Infants: 2017-19



24.0% **Complex perpetual**

Medically complex children with special to the need

- Low patient no in each category.
- High medical complexity

Critical

29.2%

Child with critical care need

- D
- Varied patient no. in each category.
- Moderate to high medical complexity
- Time urgency

Community Hospital and Clinics

Medical needs of children

Health promotion

Occasional

Healthy child with self-limited injury or condition

- ES
- Infectious Disease
- Fractures
- Tonsillitis and Otitis
- Appendicitis---

Perpetual

Child with low acuity chronic conditions, requiring special care

- Asthma
- Diabetes and endocrine disorder
- Autism
- ADHD ---

Scope

modification

Simple

prematurity

Complex perpetual

Medically complex children with special health care need

- Congenital Heart Disease
- Cancer
- Major Anomalies
- Transplant ---

Critical

Child with critical care ne

- Neonatal care:
- Extreme prematurity
- Critical care
- Trauma ---

Transportation support

Regional Hospital or Medical center

Medical needs of children

Health promotion

Occasional

Healthy child with self-limited injury or condition

- ES
- Infectious Disease
- Fractures
- Tonsillitis and Otitis
- Appendicitis---

Perpetual

Child with low acuity chronic conditions, requiring special care

- Asthma
- Diabetes and endocrine disorder
- Autism
- ADHD---

Complex perpetual

Medically complex children with special health care need

- Congenital Heart Disease
- Cancer
- Major Anomalies
- Transplant ---

Critical

Child with critical care need

- Neonatal care:
- Extreme prematurity
- Critical care
- Trauma ---

Scope modification

Tertiary Care Children's Hospital Pediatric Tertiary Care Medical Center

Medical needs of children

Health promotion

Occasional

Healthy child with self-limited injury or condition

- ES
- Infectious Disease
- Fractures
- Tonsillitis and Otitis
- Appendicitis---

Perpetual

Child with low acuity chronic conditions, requiring special care

- Asthma
- Diabetes and endocrine disorder
- Autism
- ADHD--

Complex perpetual

Medically complex children with special health care need

- Congenital Heart Disease
- Cancer
- Major Anomalies
- Transplant---

Critical

Child with critical care need

- Neonatal care:
- Extreme prematurity
- Critical care
- Trauma---

Tailored to teams

Children's Hospital with a Mission for Unknown Diagnoses

Medical needs of children

Health promotion

Occasional

Healthy child with self-limited injury or condition

- ES
- Infectious Disease
- Fractures
- Tonsillitis and Otitis
- Appendicitis ---

Perpetual

Child with low acuity chronic conditions, requiring special care

- Asthma
- Diabetes and endocrine disorder
- Autism
- ADHD ---

Complex perpetual

Medically complex children with special health care need

- Congenital Heart Disease
- Cancer
- Major Anomalies
- Transplant ---

Critical

Child with critical care need

- Neonatal care:
- Extreme prematurity
- Critical care
- Trauma ---

Program for Excellence in Child Health Care, MOHW (優化兒童照護計畫) 2021-

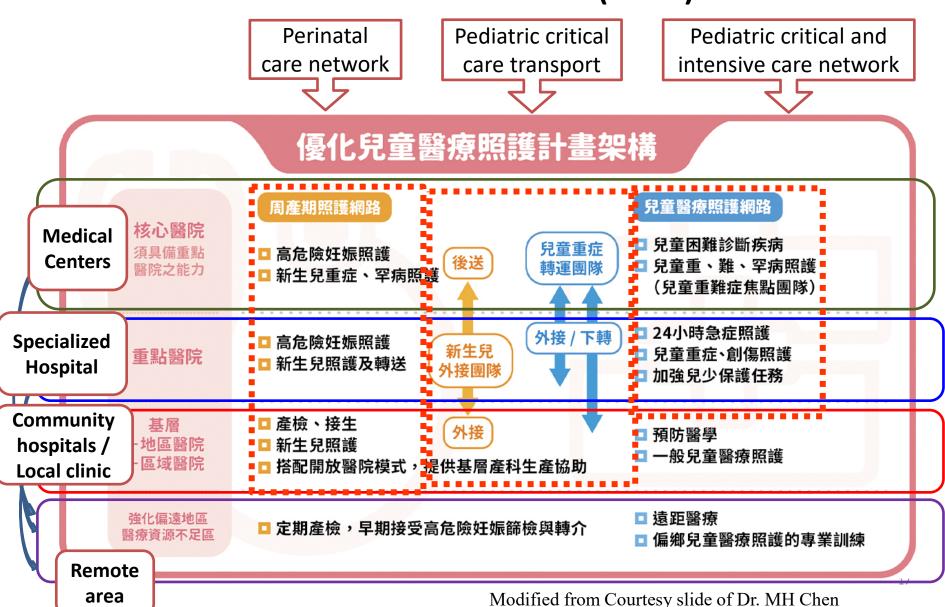
Integrate the perinatal, critical and intensive medical services

Strengthen primary prevention and health promotion

Reduce preventable deaths and disabilities in newborns and children



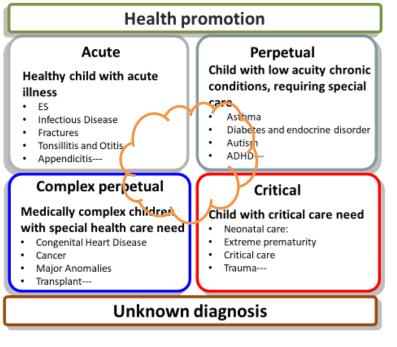
Framework of Program for Excellence in Child Health Care in Taiwan (MOH)



Child Health Care Education



Medical needs of children



- 1. Medical schools' pediatrics curriculum should be comprehensive to cover the scope.
- 2. Residency training should target general pediatrics and the link to care of chronic illness with high medical complexity (joined programs required sometimes).
- 3. Children's hospitals or medical centers serving care to children with high medical complexity, when providing a variety of fellowship training, should be patient-centered in conducting service.
- 4. National policies should be designed to enhance incentives for pediatric critical care.

Future directions:

- Accreditation focuses on optimized child health care: prevention, recognition, regionalization vs centralization by patient population, outcome analysis.
- 2. Reimbursement mechanisms should be robust and dynamically adjusted to sustain a multidisciplinary team dedicated to critical patient care, evolving alongside the advancements in state-of-the-art medical complexities.
- 3. Education to foster timely recognition, referral, and the passion to join critical medical care.
- 4. National policy!

Future directions:

1. Accreditation focuses on optimized child health care: prevention rec

Program for Excellence in Child Health Care in Taiwan will provide us the importance reference of future direction in such a difficult scenario of persistent low birth for so many years.

- 3. Educa. ion, referral, and the passion to join critical medical care.
- 4. National policy!

Advancements and Future Directions in Pediatric Critical Care: Taiwan's Perspectives



吳美環

Mei-Hwan Wu, MD, PhD
National Taiwan University Children's Hospital,
Taipei, Taiwan

