

HARRPS Tool[®] Usage & Copyright

To: Any organization interested in using the HARRPS Tool[®]

From: Children's Mercy HARRPS Research Team (HARRPS@cmh.edu)

High Acuity & Readmission Risk Pediatric Screen (HARRPS) Tool[®] Versions

The original HARRPS Tool[®] was developed and copyrighted in 2018. The tool was developed by a literature review indicating risk factors associated to pediatric readmissions, and a formal research study was used to attribute weighted values to each question within the tool, as well as develop overall risk categories ([click here to view article in the Journal of Pediatric Nursing](#)).

The HARRPS Tool[®] was modified and copyright was added in 2022 following a formal validation research study. This study demonstrated minimal overall risk difference when including versus excluding the admission diagnosis, as well as an adjustment to the overall risk categories. This updated version does not include admission diagnosis and simplifies the risk categories into “low risk” and “at risk” of readmission. *Research manuscript being submitted for publication as of November 2022.*

Either version has relatively high probability of predicting readmission risk when compared to other readmission risk tools available. The decision on what version an organization elects to utilize can be based on preference and clinical implications. Both tools are available below. please reach out to HARRPS@cmh.edu if you are interested in seeing how the tool is built within our Electronic Health Record (EHR) system.

Copyright Usage

Depending on the HARRPS Tool[®] version used, the following copyrights are to be applied to the tool within the EHR. Formal legal notice of the HARRPS Tool[®] can found at the end of this document.

- Original HARRPS Tool[®]:
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- Updated HARRPS Tool[®]:
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HARRPS Tool[®] Options

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Category / Question	Response	Weighted Value
Admitting Diagnosis	Patient has one or more of the following admission diagnoses: Anemia/Neutropenia, Appendectomy, Asthma, Bronchiolitis, Gastroenteritis, Pneumonia, Seizure, Sickle Cell Crisis, Upper Respiratory Tract Infection, or Ventricular Surt	1
	None of the above	0
*Chronic Condition Indicator	4+	3
	3	2
	2	1
	1	0
	0	0
Readmission History	History of 30-day readmission within last 30 days	2
	History of 30-day readmission within last 6 months	1
	None of the above	0
Acuity of Admission	Admitted to intensive care unit (i.e., PICU, NICU, CICU, etc.)	1
	None of the above / Ambulatory visit	0
Insurance Type	Medicaid	1
	Self-Pay	1
	Commercial / Private	0
Count of Home Equipment/Supplies	4+	4
	3	3
	2	2
	1	1
	No equipment/medical supplies in the home	0
Presence of in-home therapy (i.e., PT, OT, Speech)	Yes	1
	No	0
Presence of in-home nursing (skilled or private duty nursing)	Yes	1
	No	0
Total:		(Calculate total from values above)
Low Risk: 0-2 Moderate Risk: 3-6 High Risk: 7+		
* *Chronic Condition Indicator as defined by AHRQ: https://www.hcup-us.ahrq.gov/toolssoftware/chronic_icd10/chronic_icd10.jsp		
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Category / Question	Response	Weighted Value
*Chronic Condition Indicator	4+	3
	3	2
	2	1
	1	0
	0	0
Readmission History	History of 30-day readmission within last 30 days	2
	History of 30-day readmission within last 6 months	1
	None of the above	0
Acuity of Admission	Admitted to intensive care unit (i.e., PICU, NICU, CICU, etc.)	1
	None of the above / Ambulatory visit	0
Insurance Type	Medicaid	1
	Self-Pay	1
	Commercial / Private	0
Count of Home Equipment/Supplies	4+	4
	3	3
	2	2
	1	1
	No equipment/medical supplies in the home	0
Presence of in-home therapy (i.e., PT, OT, Speech)	Yes	1
	No	0
Presence of in-home nursing (skilled or private duty nursing)	Yes	1
	No	0
Total:		(Calculate total from values above)
Low Risk of Readmission: 0-2 At Risk of Readmission: 3+		
* *Chronic Condition Indicator as defined by AHRQ: https://www.hcup-us.ahrq.gov/toolssoftware/chronic_icd10/chronic_icd10.jsp		
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