

Supplementary Table. Representative quotes describing processes and outcomes related to hospital admission valued by parents of children admitted through emergency departments and via direct admission.

Domains and associated themes	Representative quotes	
	Admission through ED	Direct admission
Domain 1. Effective clinical care		
A. Clinical improvement	<i>I would definitely say it is more the quality of the care. 'Cause if I was getting amazing care and I just had to wait all day, I would. It would not matter to me as long as my son was being treated and being take care of. (Participant B6, community hospital)</i>	<i>The admission would go well when we find out what's wrong with her, and she gets treated...I think anybody else would say the same, because if you're sick you want to get well (Participant B4, community hospital)</i>
B. Healthcare team expertise	<i>You don't want a moron doing radiology tests, you want someone that actually knows about pediatricians, pediatrics. You want someone that's competent. I think that's the biggest thing, if you have the wrong person reading it or doing it, that's how they make mistakes, the costs go up. (Participant A3, community hospital)</i>	<i>In a hospital, you want it to be the best one and known for the best rankings and all that jazz... I wouldn't want to be in a hospital that is like, "meh"... You want to be in a hospital that is like a really good hospital. Like you feel you are in perfectly good hands. (Participant C10, children's hospital)</i>
Domain 2. Efficiency		
A. Avoid unnecessary hospitalizations	<i>The only thing is that there is a chance that you're going home when you get into admitted to the ER. There's a chance. There's a fifty, fifty split whether she bounces back and does well and we can go home...That's really the most ideal because we don't have to stay overnight and we can be home and recuperating at home. (Participant A9, community hospital)</i>	
B. Avoid unnecessary clinical encounters	<i>He came by ambulance but he went into the ER first and then got admitted to the floor. But even though we knew he was coming it was like an unnecessary step it seemed like at that point in time to have to come to the ER when the pediatrician was saying "you need to be admitted"...That was a tough admission. (Participant B1, community hospital)</i>	<i>It's better because you'll be seen by just the one doctor as opposed to several different doctors, so at least I know that he's being cared for and that one particular doctor knows what's going on with him. (Participant A2, community hospital)</i>
C. Avoid unnecessary testing	<i>I had brought a copy of the x-ray with me, but they wanted their own copy. So then they took another one and then they saw it on the film and went, "Yes. She is going to have to be admitted." So if I had my dream admission, the pediatrician... would have called somebody here and said, "This is what I saw on the x-ray. I'm e-mailing you a copy of it. Pull it up on your screen. He or she would have pulled it up on the screen and said 'Yes, I concur. Have them come to Floor 7 and check in at the desk and we will have the room ready.'" That would have been my perfect admission. (Participant C9, children's hospital)</i>	

Domain 3. Safety & security		
A. Safe physical environment	<i>Cause you know, they have more equipment to help in case of emergency... I know if I go to the Doctor's Office... they don't have everything... every medication and stuff that can open her airway like the Emergency. They have it all here. (Participant B9, community hospital)</i>	<i>I think it's important that the little ones be... kind of blocked off from everything 'cause I remember I was older but coming here to the emergency room to see some people with possible drug overdose and stuff like that. And I don't want that around my kid all the time. (Participant B2, community hospital)</i>
B. Low nosocomial infection risk	<i>You are exposed to other things down there that you know...so you are already coming in compromised because you are ill. And then there are all these other sick people around you. So I think there is an inherent risk of being exposed to other things. (Participant C9, children's hospital)</i>	<i>Well, also when it is a Direct Admission, you are not waiting in a waiting room with all these other people who have other issues... You are directly taken to your room and all the other children who are there, are properly contained. So I'm not really worried that she is going to get the flu or something else from the others. Where as in the ER, you are always kind of worried. Like are we going to pick something up along the way? (Participant D10, children's hospital)</i>
Domain 4: Timeliness		
A. Rapid diagnosis and treatment	<i>Sometimes the good thing is you get a lot of the tests a lot faster because it is in the ER and they need to get results pretty quickly to determine where they need to go from there. That is kind of a real benefit. That's why my doctor sent him to the ER too. (Participant D9, children's hospital)</i>	<i>I feel like when they're directly admitted you get taken care of faster than versus emergency room, where if they're busy taking care of actual emergencies. She's not considered a fatal emergency, so it's a little longer process. But when you're directly admitted you get, I feel like you get faster attention from the doctor. (Participant D1, children's hospital)</i> <i>I just feel like she gets better quicker because she doesn't have to wait for so long... We go to the hospital and I know she will have an IV in her in an hour versus if we go to the emergency room it could be three to four hours before she has that IV. (Participant A9, community hospital)</i>
B. Rapid bed placement	<i>I mean there are times when she was admitted like for the stomach virus, there wasn't a bed for her for two days. She was in the ER. And like why would you admit somebody and not have a bed for them? It's just crazy. (Participant C7, children's hospital)</i>	<i>We don't want to go through the emergency room and wait all that long... We had established a plan with his pediatrician now that we call them up and they expect us. We go right in. (Participant A8, community hospital)</i>
Domain 5. Patient- and family-centered care		
A. Respect for parents perspectives	<i>Parents are pretty credible and I find sometimes they don't really take parents at their word. And I know they have to double check, but sometimes what you are saying doesn't matter. If it didn't come right out of the mouth of the Doctor... they could be a little bit more understanding. A lot of parents are aware of what's happening. (Participant C8, children's hospital)</i>	<i>If they weren't going to admit her I was going to push for it. She needed to be admitted. We weren't getting any better... and I knew that she was starting to get dehydrated and she was in a lot of pain. And I was glad the pediatrician... agreed to admission because otherwise I would have pushed for it. (Participant A9, community hospital)</i>
B. Effective	<i>With Parents: There was not any communication as far as how long it would be,</i>	<i>With Parents: But I guess just more communication... but there hasn't been a ton of</i>

<p>communication</p>	<p><i>who's next or anything to the waiting room. There's really no patient liaison for the waiting room that exists. (Participant A3, community hospital)</i></p> <p>Among healthcare team: <i>Well, he called in to the emergency department first, because they had seen us last week. And he spoke with the doctor that saw us that night and he said, "Oh, I remember her. Okay, yeah, send her right over, we'll be waiting." But then when I got here, I'm a little confused because... they were kind of like, "Why are you back?" ... they were completely shocked that I was even there again... That was a little upsetting because... her pediatrician had called here and said, "Yep, they're waiting for you." And then I got here, and they had no idea what the story was. (Participant D1, children's hospital)</i></p>	<p><i>that... . (Participant C10, children's hospital)</i></p> <p>Among healthcare team: <i>It's almost like the doctors don't even debrief each other... if I just worked a shift and I know what's going on with this patient I'm going to back-brief you so that when you come in you know what's going on... . (Participant D2, children's hospital)</i></p>
<p>C. Privacy/atmosphere</p>	<p><i>The fact that it was just us in the room, that was very nice that there wasn't other patients in the room with her. You know, cause she didn't have to witness other people getting procedures done to them. (Participant D10, children's hospital)</i></p> <p><i>And, one thing about the emergency room is the waiting room there's really no area in the waiting room that is pediatric-centered. It was really just neutral. That surprised me because we did see a lot of pediatric patients in the emergency room. They need an area, different wallpaper, different TV with kid stuff on it. I didn't see that. . (Participant A3, community hospital)</i></p>	<p><i>... I'm making a generalization, but from our experience, when you're in an ER situation people are just more stressed out, which is obvious. Like how could you not be? ...It's not as comfortable as a hospital room on a floor... Because there are just so many people, you know. And you might be on a stretcher with like curtains between each of you... Whereas, this is much more comfortable in terms of knowing like you're coming right from a doctor's office to a hospital room that's ready for you, there's a bed, there's a nurse ready to come help you with needs. She might have other patients but she's not running around like an ER nurse. (Participant B3, community hospital)</i></p>
<p>D. Convenience</p>	<p><i>They sent the person to me, to register. At the hospital, in the past, you have to register first before you're seen. And it was nice that she just wheeled right in there with her computer. And took care of all of that, while he was getting the care he needed. So...so that was nice. To not have to worry about sitting there with a sick child. . (Participant C2, children's hospital)</i></p>	<p><i>Usually what we do is we go to his pediatrician just cause we feel it's more convenient. We don't want to go through the emergency room and wait... (Participant A8, community hospital)</i></p>
<p>E. Low out-of-pocket costs</p>	<p><i>Unless he is there because of an emergency... I don't see why you would go through an ER to get admitted. Why? That is an expensive way...Or it certainly seems more expensive. (Participant C12, children's hospital)</i></p>	<p><i>I mean, luckily, you know, our insurance covers everything, but having been in situations in the past where your insurance doesn't cover everything. And if you're staying overnight admission, that's going to be a different bill coming to you than if you just had like a treatment and you went home. (Participant B3, community hospital)</i></p>