

Emergency (non-elective) procedures in children and young people: Anaesthetic questionnaire

A. Introduction

What is this study about?

The aim of this study is to identify good practice and remediable factors in the delivery of care provided to children and young people (CYP) (0-18th birthday) undergoing emergency (non-elective) procedures under anaesthetic or sedation.

Inclusions

CYP aged 0 to 18 years, undergoing an emergency (non-elective) procedure.

Patients have been sampled for inclusion across two time frames:

- Time frame 1: Monday 17th June 00:00 – Sunday 30th June 23:59 2024
- Time frame 2: Monday 12th February 00:00 – Sunday 25th February 23:59 2024

Who should complete this questionnaire?

This questionnaire should be completed by the anaesthetist responsible for the patient at the time of procedure.

Please do not include any patient identifiers in the free text boxes

Questions or help

If you have any queries about this study or this questionnaire, please contact: eps@ncepod.org.uk or telephone 020 7251 9060.

CPD accreditation

Consultants who complete NCEPOD questionnaires make a valuable contribution to the investigation of patient care. Completion of questionnaires also provides an opportunity for consultants to review their clinical management and undertake a period of personal reflection. These activities have a continuing medical and professional development value for individual consultants. Consequently, NCEPOD recommends that consultants who complete NCEPOD questionnaires keep a record of this activity which can be included as evidence of internal/self directed Continuous Professional Development in their appraisal portfolio.

About NCEPOD

The National Confidential Enquiry into Patient Outcome and Death (NCEPOD) reviews healthcare practice by undertaking confidential studies, and makes recommendations to improve the quality of the delivery of care, for healthcare professionals and policymakers to implement. Data to inform the studies are collected from NHS hospitals and Independent sector hospitals across England, Wales, Northern Ireland and the Offshore Islands. NCEPOD are supported by a wide range of bodies and the Steering Group consists of members from the Medical Royal Colleges and Specialist Associations, as well as observers from The Coroners Society of England and Wales, and the Healthcare Quality Improvement Partnership (HQIP).

Impact of NCEPOD

Recommendations from NCEPOD reports have had an impact on many areas of healthcare including:

Development of the NICE 'Acutely ill patients in hospital guideline' (CG50) – 'An Acute Problem' (2005).

Appointment of a National Clinical Director for Trauma Care – 'Trauma: Who Cares?' (2007).

Development of NICE Clinical Guidelines for Acute Kidney Injury, published 2013 – 'Adding Insult to Injury' (2009).

Development of ICS Standards for the care of adult patients with a temporary Tracheostomy, published 2014 – 'On the right trach?' (2014).

Development of guidelines from the British Society of Gastroenterology: diagnosis and management of acute lower gastrointestinal bleeding, published 2019 – 'Time to Get Control' (2015).

Development of the British Thoracic Society's Quality Standards for NIV, published 2018 – 'Inspiring Change' (2017).

1. Grade of clinician completing the questionnaire

- Consultant
- Specialty and associate specialist (SAS)
- Trainee with CCT
- Senior specialist trainee (ST5+ or equivalent)
- Senior specialist trainee (ST3/4 or equivalent)
- Junior specialist trainee (ST1& ST2 or CT equivalent)
- Advanced nurse practitioner
- Advanced clinical practitioner
- Specialist nurse (Nurse consultant, Nurse practitioner, Clinical nurse specialist)
- Senior staff nurse

If not listed above, please specify here...

2. Please use the box below to provide a brief summary of this case, adding any additional comments or information you feel relevant. You should be assured that this information is confidential. NCEPOD attaches great importance to this summary. Please give as much information as possible about the care of this patient.

C. Patient details

1a. Did the patient undergo an emergency (non-elective) procedure under anaesthetic or sedation during this admission?

- Yes No Unknown

If this patient did not undergo a procedure during this admission, please return this questionnaire to your Local Reporter (hand your assignment back) who will notify NCEPOD

1b. What procedure did the patient undergo?

2a. Age at time of procedure

 Years

Value should be no more than 17

2b. Was the patient less than one year of age at the time of the procedure?

- Yes No Unknown

2c. If answered "Yes" to [2b] then:

If YES, were they born at less than 37 weeks gestation?

- Yes No Unknown

2d. If answered "Yes" to [2b] and "Yes" to [2c] then:

If YES, what was the gestational age at birth?

Unknown

3. Sex

- Male Female Other Unknown

4. Ethnicity

- White British/White - other
 Black/African/Caribbean/Black British
 Asian/Asian British (Indian, Pakistani, Bangladeshi, Chinese, other Asian)
 Mixed/Multiple ethnic groups
 Unknown

If not listed above, please specify here...

5a. Did the patient have any comorbidities?

- Yes No Unknown

5b. If answered "Yes" to [5a] then:

If YES, what were these?

5c. If answered "Yes" to [5a] then:

If YES, which specialties other than the surgical team, were involved in managing the comorbidities?

6. Did the patient have any communication difficulties? (Please tick all that apply)

- | | |
|---|---|
| <input type="checkbox"/> Language difficulties | <input type="checkbox"/> Hearing difficulties |
| <input type="checkbox"/> Other communication difficulties | <input type="checkbox"/> None |
| <input type="checkbox"/> Unknown | |

Please specify any additional options here...

7. Did the patient have any learning difficulties?

- Yes No Unknown

8. Did the patient have any physical disability?

- Yes No Unknown

D. Arrival at this hospital

1. Mode of admission:

- Self referral (via the emergency department) 111 referral
 GP referral Transfer from another hospital
 Unknown

If not listed above, please specify here...

If transferred from another hospital

2. If answered "Transfer from another hospital" to [1] then:

What was the reason for the transfer to this hospital? (Please tick all that apply)

- No surgeon competent to undertake procedure
 No anaesthetist competent to anaesthetise patient
 No emergency surgical services at the referring site
 No appropriate critical care bed or facilities
 Unknown

Please specify any additional options here...

3. If answered "Transfer from another hospital" to [1] then:

Was there a deterioration in the patient during transfer?

- Yes No Unknown

4. What was the physiological status of the patient on arrival?

- Stable Unstable Unknown

E. Pre-operative care

1. Were formal Paediatric Early Warning Scores used for the patient preoperatively?

- Yes No Unknown

2. Did you consider the patient to be high risk?

- Yes No Unknown

3a. Was any organ support used prior to surgery?

- Yes No Unknown

3b. If answered "Yes" to [3a] then:

If YES, what was used? (Please tick all that apply)

- Respiratory support Circulatory support Renal support Unknown

Please specify any additional options here...

4. Was the pre-procedure preparation of the patient adequate?

- Yes No Unknown

5a. Was the patient seen by an anaesthetist prior to the procedure?

- Yes No Unknown

5b. If answered "Yes" to [5a] then:

If YES, what was the date of the first anaesthetist review prior to surgery?

- Unknown

5c. If answered "Yes" to [5a] then:

If YES, what was the time of the first anaesthetist review prior to surgery?

- Unknown

5d. If answered "Yes" to [5a] then:

If YES, what was the grade of the anaesthetist?

- Consultant
 Specialty and associate specialist (SAS)
 Trainee with CCT
 Senior specialist trainee (ST5+ or equivalent)
 Senior specialist trainee (ST3/4 or equivalent)
 Junior specialist trainee (ST1& ST2 or CT equivalent)
 Anaesthesia associate
 Unknown

If not listed above, please specify here...

Please save the questionnaire as you work through this section

1a. What was the category of urgency of surgery?

- Immediate (Immediate life, limb or organ-saving intervention – resuscitation simultaneous with interve
 Urgent (Intervention for acute onset or clinical deterioration of potentially life-threatening conditions, f
 Expedited (Patient requiring early treatment where the condition is not an immediate threat to life, lim
 Unknown

If not listed above, please specify here...

1b. What was the proposed time frame for procedure commencement from the time of booking?

- <1 hour < 6 hours <24 hours >24 hours
 Unknown

2a. Was any other urgency categorisation system for surgery used?

- Yes No Unknown

2b. If answered "Yes" to [2a] then:

J4b. If YES, what did you use

3a. What was the date of the theatre booking?

Unknown

3b. What was the time of the theatre booking?

Unknown

3c. What was the grade of clinician who made the theatre booking?

- ST3+ or equivalent and above CT2- or equivalent and below Unknown

If not listed above, please specify here...

3d. What was the specialty of the clinician who made the theatre booking?

- General surgery Specialist surgery Paediatric surgery
 General medicine Specialist medicine Paediatric medicine
 Anaesthetics Interventional radiologist Unknown

If not listed above, please specify here...

**3e. If answered "Specialist surgery" to [3d] then:
If SPECIALIST SURGERY please specify**

**3f. If answered "Specialist medicine" to [3d] then:
If SPECIALIST MEDICINE please specify**

4a. How was the booking communicated to theatre? (Please tick all that apply)

- Electronic form Telephone call Anaesthetist bleep Unknown

Please specify any additional options here...

4b. To whom was the booking communicated? (Please tick all that apply)

- Theatre coordinator Emergency surgery coordinator
 Supervising anaesthetist Unknown

Please specify any additional options here...

5a. In your opinion, was the patient booked under the correct category of urgency?

- Yes No Unknown

5b. If answered "No" to [5a] then:

If NO, what categorisation of urgency should the patient have been booked as?

- Immediate (Immediate life, limb or organ-saving intervention – resuscitation simultaneous with interve
 Urgent (Intervention for acute onset or clinical deterioration of potentially life-threatening conditions, f
 Expedited (Patient requiring early treatment where the condition is not an immediate threat to life, lim
 Unknown

If not listed above, please specify here...

6a. How long was the patient NBM for food prior to the procedure?

Hours Unknown

6b. Was the patient 'Sip until Send' prior to theatre?

- Yes No Unknown

6c. If answered "No" or "Unknown" to [6b] then:

If NO, how long was the patient NBM for fluid prior to the procedure?

Hours Unknown

7. What type of anaesthetic was used? (Please tick all that apply)

- General Regional Local Sedation
 Unknown

Please specify any additional options here...

8. What was the grade of the anaesthetist giving the anaesthetic?

- Consultant
 Staff grade/Associate specialist
 Trainee with CCT
 Senior specialist trainee (ST5+ or equivalent)
 Senior specialist trainee (ST3/4 or equivalent)
 Junior specialist trainee (ST1& ST2 or CT equivalent)
 Unknown

If not listed above, please specify here...

9a. Was there a delay from booking the case to the start of the procedure?

- Yes No Unknown

9b. If answered "Yes" to [9a] then:
If YES, how long was the delay?

minutes Unknown

9c. If answered "Yes" to [9a] then:
If YES, what was the reason for the delay? (Please tick all that apply)

- | | |
|--|---|
| <input type="checkbox"/> Theatre not available | <input type="checkbox"/> Appropriate staff availability |
| <input type="checkbox"/> Staff handover | <input type="checkbox"/> Staff breaks |
| <input type="checkbox"/> Anaesthetic delay | <input type="checkbox"/> Surgical delay |
| <input type="checkbox"/> Emergency workload | <input type="checkbox"/> Patient not ready |
| <input type="checkbox"/> Unknown | |

Please specify any additional options here...

9d. If answered "Yes" to [9a] and "Theatre not available" to [9c] then:
If THEATRE NOT AVAILABLE, please give further information

9e. If answered "Yes" to [9a] and "Appropriate staff availability" to [9c] then:
If APPROPRIATE STAFF NOT AVAILABLE, please give further informaiton

9f. If answered "Yes" to [9a] then:
If YES, was the urgency of the case escalated to the theatre team?

- Yes No Unknown

9g. If answered "Yes" to [9a] and "Yes" to [9f] then:
If YES, was the theatre escalation process activated?

- Yes No Unknown

**9h. If answered "Yes" to [9a] and "Yes" to [9f] and "Yes" to [9g] then:
If YES, what action was taken?: (please tick all that apply)**

- Opened additional theatre Stopped elective theatre None
 Unknown

Please specify any additional options here...

10. If the procedure was not undertaken in a stand alone tertiary paediatric centre, was the consultant responsible for the case on a paediatric specialty rota?

- Yes
 No
 Unknown
 Not applicable - undertaken in a stand alone tertiary paediatric centre

11. Was a WHO anaesthetic and surgical check list performed?

- Yes No Unknown

G. Post operative care

1a. Did the patient go to a dedicated paediatric recovery bay following surgery?

Yes

No

Unknown

1b. If answered "No" to [1a] then:

If NO, where were they recovered?

General recovery area

Unknown

If not listed above, please specify here...

1a. N2a. Was a serious incident declared in this case?

- Yes No Unknown

1b. If answered "Yes" to [1a] then:

N2c. If YES, was this investigated?

- Yes No Unknown

1c. If answered "Yes" to [1a] and "Yes" to [1b] then:

N2d. If YES, what was the learning

1a. In your opinion could the care of this patient have been improved in any way?

Yes

No

Unknown

1b. If answered "Yes" to [1a] then:

If YES, please give further details

2a. Was there anything else that led to a delay to this CYP in getting to theatre?

Yes

No

Unknown

2b. If answered "Yes" to [2a] then:

If YES, please give further details:

1. Please use this space should you wish to provide further details on any of the answers you have provided (please include the question number)

THANK YOU FOR TAKING THE TIME TO COMPLETE THIS QUESTIONNAIRE

By doing so you have contributed to the dataset that will form the report and recommendations due for release in early 2026