Emergency (non-elective) procedures in children and young people: Surgical 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 clinician who undertook the 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).

B. Clinician details & structured commentary

ta. Grade of clinician completin	g the questionnaire	
Consultant		
Specialty and Associate Spe	ecialist (SAS)	
Trainee with CCT	, , , , , , , , , , , , , , , , , , , ,	
Senior specialist trainee (ST	5+ or equivalent)	
Senior specialist trainee (ST	•	
•		
O Junior specialist trainee (ST:	·	
O Advanced nurse practitione		
Advanced clinical practition		
Specialist nurse (Nurse cons	sultant, Nurse practitioner, Clin	nical nurse specialist)
Senior staff nurse		
	6.1	
If not listed above, please speci	ty nere	
lb. Speciality of clinician compl	eting the questionnaire	
	Specialist surgery	Paediatric surgery
General medicine	O Specialist medicine	Paediatric medicine
Interventional radiologist	•	O vacaname meaning
O micer ventional radiologist	O omanomin	
If not listed above, please speci	fy here	
	,	
comments or information yo	ou feel relevant. You should iches great importance to t	f this case, adding any additional l be assured that this information this summary. Please give as much

C. Patient details 1. Did the patient undergo an emergency (non-elective) procedure under anaesthetic or sedation during this admission? Ores 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 NCEPO

	e did the patient under	yo:	
3. What was the o	diagnosis?		
a. Age at time of	procedure		
		Years	
Value should be no n	nore than 17		
o. Was the patien	it less than one year of	age at the time of the	procedure?
O Yes	O No	O Unknown	
	es" to [4b] then: ey born at less than 37	weeks gestation?	
O Yes	○ No	Unknown	
	es" to [4b] and "Yes" to as the gestational age a		
		☐ Unkno	own
5. Sex			
O Male	Female	Other	O Unknown
6. Ethnicity			
White BritishBlack/African	/White - other n/Caribbean/Black British		
O Asian/Asian F	British (Indian, Pakistani, Ba	angladeshi, Chinese, othe	er Asian)
Mixed/Multip			
O Black/African	n/Caribbean/Black British British (Indian, Pakistani, Ba	angladeshi, Chinese, othe	er Asian)

	D. Prior to arrival in l	hospit	al
1a. Ap	proximately what date did the symptoms start?		
1b. Ap	proximately what time did the symptoms start?		Unknown
			Unknown
	om whom did the patient seek advice (prior to act that apply) NHS 111 GP Urgent treatment centre Another hospital NA - presented directly to the emergency department Unknown		ion to this hospital)? (Please tick
Ple	ase specify any additional options here		

E. Arrival at this (the operating) hospital

Is this hospital:				
 A stand alone tertiary paediatric centre A tertiary paediatric centre in a Trust/Hea A University Teaching Hospital in a Trust/ A District General Hospital which delivers Unknown 	Health Board which delivers surgical care to children			
If not listed above, please specify here				
. Where was the patient first seen on arri	ival at this hospital?			
Paediatric emergency department Children's assessment unit (CAU) Medical admissions unit (MAU) Specialist surgical ward Specialist medical ward	 Adult emergency department Surgical admissions unit (SAU) General surgical ward General medical ward Unknown 			
If not listed above, please specify here				
O GP referral O Unknown	Transfer from another hospital			
If not listed above, please specify here				
transferred from another hospital If answered "Transfer from another hospital Please provide the name of the transfer any clinician names	pital" to [3a] then: ring Trust/Health Board. Please do not provide			
. If answered "Transfer from another hosp	pital" to [3a] then: this hospital? (Please tick all that apply)			
No surgeon competent to undertake proc No anaesthetist competent to anaesthetis No emergency surgical services at the ref No appropriate critical care bed or facilitie Unknown	cedure se patient ferring site			
Please specify any additional options here				

1. Were all relevant investigations performed? O Yes O No O Unknown 2a. Were there any delays in performing investigations? O Yes O No O Unknown 2b. If answered "Yes" to [2a] then: If YES, did this result in delayed treatment? O Yes O No O Unknown

F. Initial assessment on arrival

G. Admission to the ward 1. Was the patient admitted to a ward prior to going to theatre? Yes Unknown If NO, please go to Section H 2a. If answered "Yes" to [1] then: Was the patient jointly under the care of a paediatrician and a surgeon? Yes No Unknown 2b. If answered "Yes" to [1] and "No" to [2a] then: If NO, which teams were involved and how?

		H. Pre-ope	erative care	
1.	Did you consider the	patient to be high risk?	,	
	O Yes	O No	O Unknown	
2a.	Was a management p	lan written following tl	ne initial asses	sment?
	O Yes	O No	O Unknown	
2b.	If answered "Yes" to If YES, did this includ	[2a] then: e: (please tick all that a	apply)	
	☐ Fasting ☐ Unknown	☐ Monitoring v	ital signs	☐ Urgent referral to a surgeon
	Please specify any addit	ional options here		
3a.	Was the patient command young people?	nenced on a dedicated	pathway for e	mergency surgery in children
	O Yes	O No	O Unknown	
3b.	If answered "No" to [3 If NO, was the patient	Ba] then: t commenced on any ot	her surgical pa	athway?
	O Yes	O No	Unknown	
Зс.	If answered "No" to [3 If NO (not commence young people), should	d on a dedicated pathw	ay for emerge	ncy surgery in children and
	O Yes	O No	O Unknown	

I. Treatment plan 1a. Were you aware of any delays in decision-making? O Yes (No O Unknown 1b. If answered "Yes" to [1a] then: If YES, did this impact on the care of the patient? O No O Yes Unknown 2a. Were you aware of any inappropriate delay in treatment (excluding time to procedure)? O Yes (No Unknown 2b. If answered "Yes" to [2a] then: If YES, in your opinion did this impact on the care of the patient? Yes O No O Unknown 3. In your opinion, was there adequate shared decision-making between the patient, family and professionals? O No Yes Unknown

J. Surgery

Please save the questionnaire as you work through this section

Qunknown 2a. What was the date of the theatre booking? Unknown 2b. What was the time of the theatre booking? Unknown 2c. What was the grade of clinician who made the theatre booking? ST3+ or equivalent and above	1a.	What was the cate	gory of urgency of su	irgery?	
Urgent (Intervention for acute onset or clinical deterioration of potentially life-threater		() Immediate (Imme	ediate life, limb or orgai	n-saving intervention – res	uscitation simultaneous with interv
Expedited (Patient requiring early treatment where the condition is not an immediate Unknown If not listed above, please specify here 1b. What was the proposed time frame for procedure commencement from the time booking? <1 hour			-	-	
Unknown If not listed above, please specify here		-		·	_
If not listed above, please specify here Ib. What was the proposed time frame for procedure commencement from the time booking?			t requiring early treating	ient where the condition is	s not an infinediate threat to me, in
1b. What was the proposed time frame for procedure commencement from the time booking? < 1 hour		Unknown			
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booking?		If not listed above, pl	ease specify here		
booking? <1 hour					
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Unknown Unkn			O < 6 hours	O <24 hours	O >24 hours
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Unknown					
2c. 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 2d. 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	2b.	What was the time	of the theatre booki	ng?	
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3b. If answered "Yes" to [3a] then: If YES, was this followed?		_	_		
If YES, was this followed?			O	O STIKITOWIT	
	3b.				
		If YES, was this foll	owed?		
		() Yes	O No	Unknown	
		_	•	•	

☐ Electronic for	m 🔲 Te	elephone call	☐ Anaesthetist bleep ☐ Unknown	
Please specify an	y additional o	otions here		
b. To whom was t	he booking c	ommunicate	d? (Please tick all that apply)	
☐ Theatre coord☐ Supervising a	dinator		ncy surgery coordinator	
Please specify an	y additional o	otions here		
_			under the correct category of urgency?	
O Yes	O No		O Unknown	
b. If answered "No If NO, what cat			nould the patient have been booked as?	
Immediate (II O Urgent (Inter-		ite onset or cli	inical deterioration of potentially life-threatening cond	
O Urgent (Inter	vention for acu atient requiring	g early treatmo	inical deterioration of potentially life-threatening conc ent where the condition is not an immediate threat to	lition
Urgent (Inter Expedited (Pa Unknown	vention for acu atient requiring	g early treatmo	•	litions
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Urgent (Inter- Expedited (Pa Unknown If not listed above	vention for act	g early treatmonify here	ent where the condition is not an immediate threat to	lition
Urgent (Inter- Expedited (Pa Unknown If not listed above a. Were you awar Yes b. If answered "Yes	e of any dela states to [6a] th	g early treatments ify here ys in booking en:	ent where the condition is not an immediate threat to g the case?	lition
Urgent (Inter- Expedited (Pa Unknown If not listed above a. Were you awar Yes Sb. If answered "Yes	e of any dela sties to [6a] the sthe reason	g early treatments ify here ys in booking en:	ent where the condition is not an immediate threat to g the case? Unknown	lition
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Urgent (Inter- Expedited (Pa Unknown If not listed above Ga. Were you awar Yes Sb. If answered "Yes If YES, what wa Unable to cor Surgical team	e, please spec e of any dela o No es" to [6a] the is the reason ntact theatre in delay	g early treatments ify here ys in booking en: for the dela	g the case? Unknown Unable to contact anaesthetist	lition
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<i>,</i> c.	what was the grade of chilici	an who periormed the proced	aure:			
	Consultant					
	Specialty and associate speci	ialist (SAS)				
	Trainee with CCT					
	O Senior specialist trainee (ST5	5+ or equivalent)				
	O Senior specialist trainee (ST3	3/4 or equivalent)				
	O Junior specialist trainee (ST18)					
	O Advanced nurse practitioner	,				
	Advanced clinical practitione	r				
	Specialist nurse (Nurse consultant, Nurse practitioner, Clinical nurse specialist)					
	() Unknown	, , , , , , , , , , , , , , , , , , , ,	,			
	O STANIONII					
	If not listed above, please specify	y here				
7d.	What was the specialty of the	e clinician who performed the	procedure?			
	○ General surgery	Specialist surgery	Paediatric surgery			
	Interventional radiology	O Unknown	9			
	9	9				
	If not listed above, please specify	y here				
7 _	If answered "Specialist surge	ery" to [7d] then:				
,	If SPECIALIST SURGERY pleas					
	_					
8a.	Was there a delay from booki	ing the case to the start of th	e procedure?			
-	-	_	e procedure.			
	O Yes O No	O Unknown				
8b.	If answered "Yes" to [8a] the If YES, was the urgency of the		re team?			
	O Yes O No	Unknown				
۵,	If answered "Yes" to [8a] and	l "Yos" to [8h] than:				
oc.	If YES, was the theatre escala					
	O Yes O No	Unknown				
84	If answered "Yes" to [8a] and	- "Yes" to [8h] and "Yes" to [9	cl then:			
ou.	If YES, what action was taken					
	☐ Opened additional theatre	☐ Stopped elective theatre	☐ None			
	Unknown	_ эторров отоенто иновите				
	Please specify any additional opt	ions here				
9.	If the procedure was not und consultant responsible for the		ary paediatric centre, was the			
	_	e case on a paediatric specia	ity iota:			
	O Yes					
	○ No					
	O Unknown					
	O Not applicable - undertaken i	in a stand alone tertiary paediatr	ic centre			

K. Post operative care

1a.	What was the first wa	rd location	of the patie	ent after recov	ery?			
	Paediatric general wasAdult surgical wardPaediatric HDU	Ŏ	Adult genera Paediatric in Adult HDU	al ward tensive care	Paediatric surgical wardAdult intensive careUnknown			
	If not listed above, please specify here							
		Please add ward specialty (if applicable)						
1b.	Please add ward specialty (if applicable)							
2a.	At any stage during the level of care was requi		cedure peri	od, was it con	sidered that an upgrade in the			
	O Yes	O No		O Unknown				
2b.	If answered "Yes" to [7 If YES, was/did this up		ne level of c	are:				
	O Provided on-site	O Require	ed a transfer	O Unknown				
	If not listed above, please	e specify he	re					
3a.	Did the patient suffer	any compl	ications dur	ing the peri-o	perative period?			
	O Yes	O No		O Unknown				
3b.	If answered "Yes" to [3 If YES, were the comp	_	anaged app	propriately?				
	O Yes	O No		O Unknown				
Зс.	If answered "Yes" to [3] Were any of the comp		voidable?					
	O Yes	O No		O Unknown				
3d.	If answered "Yes" to [3 Did any of the complic	_	ur as a resu	It of a delay in	access to theatre?			
	O Yes	O No		Unknown				
3e.	If answered "Yes" to [3 Did any of the complic		ult in a retu	rn to theatre?				
	O Yes	O No		O Unknown				
3f.	If answered "Yes" to [3 With the benefit of hir preoperative action?	_	uld the com	plication(s) ha	ive been avoided by			
	O Yes	O No		O Unknown				
3g.	If answered "Yes" to [3 With the benefit of hir escalation of the process.	ndsight, co	uld the com	plication(s) ha	ive been avoided by active			
	O Yes	O No		O Unknown				

L. Coordination of care during the whole admission1. Could the patient or parents and carers ask for rapid review from a critical care outreach team (24/7) if they had concerns?

Unknown

O Yes

O No

M. Discharge and follow-up arrangements 1. What was the outcome of this admission? O Patient discharged alive O Patient died O Unknown

1a. Was a serious incident declared in this case? Yes No Unknown 1b. If answered "Yes" to [1a] then: If YES, was this investigated? Yes No Unknown 1c. If answered "Yes" to [1a] and "Yes" to [1b] then: If YES, what was the learning?

N. Audit and learning

O. Overall 1a. In your opinion could the care of this patient have been improved in any way? O 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? O Yes O No O Unknown 2b. If answered "Yes" to [2a] then: If YES, please give further details:

P. Additional information

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