Paediatric Intensive Care Audit Network (PICANet)

1. Objectives

PICANet aims to establish a secure and confidential high quality clinical database of paediatric intensive care activity in the United Kingdom. The objectives are to:

- Identify best practice.
- Monitor supply and demand.
- Monitor and review outcomes of treatment episodes.
- Facilitate strategic health care planning and quantify resource requirements.
- Study the epidemiology of critical illness in children.

2. Management structure

PICANet has formalised links to the clinical community via a Clinical Advisory Group. A Steering Group monitors the progress of the project, and provides professional advice. This group comprises of members of the paediatric intensive care clinical community, a representative from the voluntary sector, and representatives from other appropriate bodies offering a broad range of expertise in public health, epidemiology and other health related disciplines.

3. Benefits of PICANet for the clinical community

Benefits of a national audit database will be wide-ranging.

Comparability – For the first time, a high quality core dataset of demographic and clinical data on all paediatric admissions to PICUs will be available. The data will be collected systematically, validated and held in a secure, common database. Comparisons for each unit with the national picture can be reported.

An evidence base – An evidence base on outcomes, processes and structures will be available at a national level and permit planning for future practice, research and interventions. Clinical data on diagnosis and severity will enable outcome assessments to be based on large samples.

Support and training – The PICANet team provide technical expertise, ongoing support, and staff training for data collection. Data validation is also an integral part of the project. Further details of the support structure are described in the attached document.

Software / **manuals** / **data collection forms** – These documents are provided to ensure consistent data collection. Input from the clinical community has resulted in an agreed standardised dataset that will simplify data capture and return. The software has been specifically designed for the paediatric intensive care environment, and data can be securely sent to a central server via NHSNet.

Feedback - Each unit will receive a quarterly report on their own data and an annual report on aggregated data. Information can be aggregated at different levels. On a wider scale, information will be made available to the Clinical Advisory Group, Steering Group, Paediatric Intensive Care Society (PICS), the Department of Health and the Specialist Health Service Commission for Wales. Dissemination of findings to the clinical community will ensure that appropriate actions are taken.

Patient benefits – The existence of a national database with data regularly provided to those delivering care allows performance indicators to be robustly compared. Patients, parents and families are then assured that the optimum level of care is available. Views of these user groups are represented on the PICANet Steering Group via the charity 'Action for Sick Children'.

4. Contacts

PICANet is co-ordinated by the Universities of Leeds and Leicester.

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