

# 2014 Annual Report

**APPENDICES** 

Paediatric Intensive Care Audit Network



JANUARY 2011 – DECEMBER 2013





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## A. PARTICIPATING ORGANISATION & HOSPITAL CHARACTERISTICS

NHS Trust / Organisation	Participating Hospital	Unit / Ward	Number of ITU beds	Number of HDU beds	Type of unit
Barts and the London NHS Trust	The Royal London Hospital	PCCU	4	2 <sup>1</sup>	General
Birmingham Children's Hospital NHS Trust	Birmingham Children's Hospital	PICU	26	0	General
Brighton & Sussex University Hospitals NHS Trust	The Royal Alexandra Children's Hospital	L8 PICU	1	8 <sup>2</sup>	General
Cambridge University Hospitals NHS Foundation Trust	Addenbrooke's Hospital	PICU	10	3	General
Cardiff & Vale NHS Trust	University Hospital of Wales	PICU	7	0	General
Central Manchester University Hospitals NHS Foundation Trust	Royal Manchester Children's Hospital	PICU	17	12 <sup>3</sup>	General
Great Ormond Street Hospital for Children	Great Ormond Street Hospital for	CCCU	17	0	Cardiac
NHS Trust	Children	PICU & NICU	22	0	General & Neonatal Unit
Guy's & St. Thomas' NHS Foundation Trust	Evelina Children's Hospital	PICU	18	0	General & Cardiac
	Children's University Hospital, Temple Street, Dublin	PICU	9	0	General
HSE (Health Services Executive)	Our Lady's Children's Hospital, Crumlin, Dublin	PICU	18	5	General & Cardiac
Hull & East Yorkshire Hospitals NHS Trust	Hull Royal Infirmary	PICU beds on AITU	2	04	Adult ICU providing General PICU
King's College Hospital NHS Trust	King's College Hospital	PICU	8	8	General & Hepatic & Neurosurgical
Leeds Teaching Hospitals NHS Trust	Leeds General Infirmary	Ward L47	16	0	General & Cardiac
Newcastle Upon Tyne Hospitals NHS	Great North Children's Hospital	PICU	11	0	General & Surgical ICU
Foundation Trust	Freeman Hospital	PICU Freeman	10	0	Cardiothoracic surgery, heart failure, ECMO & ENT
NHS Lothian – University Hospitals Division	Royal Hospital for Sick Children, Edinburgh	PICU	8	6 <sup>5</sup>	General (plus neurosurgical and spinal)
NHS Greater Glasgow and Clyde – Women and Children's Division	Yorkhill Hospital, Glasgow	PICU	17	5	General, Neurosurgical Cardiac & ECMO
Oxford University Hospitals NHS Trust	The John Radcliffe Hospital	PCCU	8	9	General including neurosurgical, craniofacial and major trauma.
Nottingham University Hospitals NHS Trust	Queen's Medical Centre	PICU	6	4 <sup>6</sup>	General (plus regional oncology, major trauma, ENT, paediatric surgery, regional neurosurgical, spinal,

NHS Trust / Organisation	Participating Hospital	Unit / Ward	Number of ITU beds	Number of HDU beds	Type of unit
					supraregional renal service and cleft lip & palate services)
Royal Brompton & Harefield NHS Foundation Trust	Royal Brompton Hospital	PICU	12 <sup>7</sup>	4	Cardiac & Respiratory
Royal Liverpool Children's NHS Trust	Liverpool Alder Hey Children's Hospital	PICU	22	0	General & Cardiac
Sheffield Children's NHS Foundation Trust	Sheffield Children's Hospital	PCCU	9	9 <sup>8</sup>	General (plus major trauma, neurosurgery, ENT, oncology, metabolic, paediatric surgery, spinal)
Southampton University Hospitals NHS Trust	Southampton Children's Hospital	PICU	13	10 <sup>9</sup>	General & Cardiac
South Tees Hospitals NHS Trust	James Cook University Hospital	PICU	4	3 <sup>10</sup>	General
St. George's Healthcare NHS Trust	St. George's Hospital	PICU	5	5 <sup>11</sup>	General, Neurosurgical, Oncology & Paediatric Surgery
Imperial College Healthcare NHS Trust	St. Mary's Hospital	PICU	8	2	General
Belfast Health and Social Care Trust	Royal Belfast Hospital for Sick Children	PICU	12 <sup>12</sup>	0	General
University Hospitals Bristol NHS Foundation Trust	Bristol Royal Hospital for Children	PICU	15 <sup>13</sup>	0	General & Cardiac
	Leicester Royal Infirmary	CICU	914	5 <sup>15</sup>	General
University Hospitals of Leicester NHS Trust	Glenfield Hospital	PICU	12 <sup>16</sup>	0	Cardiac & ECMO
University Hospital of North Staffordshire NHS Trust	University Hospital of North Staffordshire	PICU	6	1	General
	The Harley Street Clinic	PICU	13	5	General & Cardiac
HCA International (non NHS)	The Portland Hospital for Women and Children	PICU	10	0	General

1 ITU/ HDU beds are used flexibly if needed.

2 HDU beds can be flexed up to 10 if needed.

3 12 HDU beds are in separate ward (not submitting data to PICANet).

4 4 HDU beds on separate ward (not submitting data to PICANet) With capacity to ventilate two patients on the Adult ICU.

- 5 At times funded for 10 ITU and 6 HDU beds.
- 6 4 HDU beds temporarily housed on PICU (not submitting data to PICANet).
- 7 ITU/ HDU beds are used flexibly if needed.
- 8 9 HDU beds on separate ward (not submitting data to PICANet)

\*Above data provided by participating hospitals in May/June 2014.

- 9 HDU beds are in 2 separate HDU units (4 Cardiac and 6 General).
- 10 3 HDU beds not staffed or funded (not submitting data to PICANet).
- 11 ITU/HDU beds are used flexibly if needed, can provide 10 ventilated PIC beds during winter surge.
- 12 The unit is anaesthetist-led and only admits patients under 13 years unless remaining under the care of an existing Paediatrician. Increased to 12 beds in June 2013.
- 13 15 staffed ITU beds in 18 space unit.
- 14 9 ITU beds but only 6 staffed.
- 15 5 HDU beds on adjacent ward (not part of PICU and not submitting data to PICANet)
- 16 12 ITU beds but only 7 staffed.

## **B. C**LINICAL ADVISORY GROUP MEMBERSHIP

Name	Position	NHS Trust / Hospital	Period served
Dr Rachel Agbeko	Paediatric Intensivist	Newcastle upon Tyne Hospitals NHS Foundation Trust Great North Children's Hospital	2012 - present
Dr John Alexander	Consultant in Paediatric Intensive Care	University Hospital of North Staffordshire NHS Trust Stoke On Trent City General Hospital	2012 - present
Dr Anthony Chisakuta (shared with Elizabeth McKinty)	Lead Clinician	The Royal Group of Hospitals & Dental Hospital HSS Trust Royal Belfast Hospital for Sick Children	2008 - present
Kathryn Claydon - Smith	Clinical Nurse Specialist	Central Manchester & Manchester Children's University Hospitals NHS Trust Royal Manchester Children's Hospital	2009 - present
Dr Peter Davis (Chair)	Consultant in Paediatric Intensive Care	University Hospitals Bristol NHS Foundation Trust Royal Hospital for Children	2006 - present
Dr Andrew Durward (sharing with Dr Shane Tibby)	Consultant in Paediatric Intensive Care	Guy's & St Thomas' NHS Foundation Trust Evelina Children's Hospital	2002 - present
Dr Hilary Klonin	Consultant in Paediatric Intensive Care	Hull & East Yorkshire Hospitals NHS Trust Hull Royal Infirmary	2002 - present
Tina McClelland	Audit Sister	Royal Liverpool Children's NHS Trust Alder Hey Hospital	2006 - 2014
Dr Jillian McFadzean (representing Scotland)	Consultant in Paediatric Intensive Care	NHS Lothian – University Hospitals Division Edinburgh Royal Hospital for Sick Children	2005 - present
Elizabeth McKinty (shared with Anthony Chisakuta)	Sister	The Royal Group of Hospitals and Dental Hospital HHS Trust Royal Belfast Hospital for Sick Children	2008 - present
Dr Cathy McMahon	Consultant in Paediatric Intensive Care	Our Lady's Children's Hospital, Crumlin, Dublin 12 & The Children's University Hospital, Dublin	2011 - present
Lesley Molony	Information Officer	Southampton Universities Hospital NHS Trust Southampton Children's Hospital	2013 - present
Dr Roddy O'Donnell	Consultant in Paediatric Intensive Care	Cambridge University Hospitals NHS Foundation Trust Addenbrooke's Hospital	2002 - present
Dr Paula Lister	Consultant Paediatric Intensivist	Great Ormond Street Hospital for Children NHS Trust Great Ormond Street Hospital for Sick Children	2012 - present
Dr John Pappachan (shared with Peter Wilson)	Anaesthetics and Paediatric Intensive Care Medicine	Southampton Universities Hospital NHS Trust Southampton Children's Hospital	2012 - present
Dr Nazima Pathan (shared with Roddy O'Donnell)	Consultant in Paediatric Intensive Care	Cambridge University Hospitals NHS Foundation Trust Addenbrooke's Hospital	2012 - present

Dr Adrian Plunkett	Consultant Paediatric Intensivist	Birmingham Children's Hospital NHS Trust Birmingham Children's Hospital	2012 - present
Dr Padmanabhan Ramnarayan	Consultant	Great Ormond Street Hospital NHS Trust Children's Acute Transport Service	2012 - present
Dr Kay Rushforth	Senior Sister	Leeds Teaching Hospitals NHS Trust Leeds General Infirmary	2012 - present
Dr Shane Tibby (Shared with Dr Andrew Durward)	Consultant in Paediatric Intensive care	Guys and St Thomas Foundation Trust Evelina Children's Hospital	2011 - present
Dr Allan Wardhaugh (representing Wales)	Consultant in Paediatric Intensive Care	Cardiff & Vale NHS Trust University Hospital of Wales	2004 - present
Dr Peter Wilson (shared with John Pappachan)	PICU Consultant	Southampton Universities Hospital NHS trust Southampton Children's Hospital	2011 - present

## C. STEERING GROUP MEMBERSHIP

Name	Position	Organisation	Representation	Period Served
Sue Burkin	Lead Nurse	Sheffield Children's Hospital	PICS Nurse Managers Group	2013 - present
Dr Anthony Chisakuta (shared with Mark Terris)	Lead Clinician	Belfast Health and Social Care Trust Royal Belfast Hospital for Sick Children	Northern Ireland	2008 - present
Dr Mark Darowski	Consultant Paediatric Anaesthetist	Leeds Teaching Hospitals NHS Trust Leeds General Infirmary PICU	Royal College of Anaesthetists	2002 - present
Dr Peter Davis	Consultant in Paediatric Intensive Care	University Hospitals Bristol NHS Foundation Trust Bristol Royal Hospital for Children	Chair of PICANet CAG	2011 - present
Julia Grace	National Commissioner	NHS England	National Commissioner for PIC CRG	2013 - present
Dr Michael Marsh	Consultant in Paediatric Intensive Care	Southampton University Hospitals NHS Trust Southampton Children's Hospital PICU	Royal College of Paediatrics and Child Health	2002 - present
Dr Jillian McFadzean	Consultant in Anaesthesia & Intensive Care / PA	NHS Lothian – University Hospitals Division Edinburgh Royal Hospital for Sick Children	Edinburgh Royal Hospital for Sick Children	2005 - present
Dr Kevin Morris	Consultant in Paediatric Intensive Care	Birmingham Children's Hospital NHS Trust Birmingham Children's Hospital PICU	Chair of Paediatric Intensive Care Society	2006 - present
Professor John Newton (Chair)	Regional Director of Public Health	South Central Strategic Health Authority	Public Health England	2009 - present
Dr Mark Peters	Clinical Unit Chair	Great Ormond Street Hospital for Children Great Ormond Street Hospital, London	Chair of Paediatric Intensive Care Society Study Group	2008 - present
Laura Reekie	Data Manager	NHS Lothian – University Hospitals Division Edinburgh Royal Hospital for Sick Children	Database Representative	2005 - present
Lucy Lloyd Scott	Casemix Programme Manager	Intensive Care National Audit & Research Centre (ICNARC)	Intensive Care National Audit & Research Centre (ICNARC)	2002 - present
Dr Mark Terris (shared with Anthony Chisakuta)	Consultant Anaesthetist	Belfast Health and Social Care Trust Royal Belfast Hospital for Sick Children	Northern Ireland	2012 - present
Dominique Gray Williams	Audit Co-ordinator	Welsh Health Specialised Services Committee	Welsh Health Specialised Services Committee	2003 - present
Lucy Wheeler	Parent	N/A	Parent representation	2011 - present
Dr Peter Wilson	Clinical Director for Child Health	Southampton Children's Hospital	PICS Secretary	2011 - present

## D. PIC FAMILIES GROUP MEMBERSHIP

Name	Position	Organisation	Period Served
Dr John Alexander	Consultant in Paediatric Intensive Care	University Hospital of North Staffordshire	2010 - 2013
Fiona Bickell	Retrieval Nurse Practitioner	South Thames Retrieval Service	2010 - present
Sarah Bundy	Family Liaison Sister	Birmingham Children's Hospital	2010 - present
Dr Gillian Colville	Clinical Psychologist	St George's Hospital	2009 - present
Helene Craddock	Senior Staff Nurse	Bristol Royal Hospital for Children	2011 - present
Angela Danjelo	Lay Representative	N/A	2013 - present
Clare Dorrian	Staff Nurse	John Radcliffe Hospital, Oxford	2013 - Jan 2014
Professor Elizabeth Draper	Principle Investigator	PICANet	2009 - present
Debra Ehala	Sister	Great North Children's Hospital	2009 - present
Kate Foden	Sister	University Hospital of North Staffordshire	2013 - present
Phillip Hudnott	Audit Nurse	Manchester Children's Hospital	2011 - present
Dr Hilary Klonin	Consultant in Paediatric Intensive Care	Hull Royal Infirmary	2009 - present
Caroline Lamming	Research Nurse	PICANet	2009 - present
Sally Bolsover	Critical Care Sister	Sheffield Children's Hospital	2011 - present
Shelley Marsh	Lay Representative	N/A	2011 - present
Tina McClelland	Audit Sister	Alder Hey Children's Hospital	2009 - June 2014
Petra Schroff	Family Liaison Nurse	Great Ormond Street Hospital for Children	2011 - present
Adam Tansey	Lay Representative	N/A	2011 - present

## E. DATA COLLECTION FORM

## PICA PICANet // Paediatric Intensive Care Audit Network // Data Collection Form Admission

Patient details (or hospital label)	
Family name	NHS number (or CHI number)
	Tick if patient is not eligible for NHS no.
First name	Case note number
Address	
Address	Date of birth (dd/mm/yyyy)
	Indicate if date of birth is
Postcode	Estimated Anonymised Unknown
	Sex
	Male Female Ambiguous Unknown
Ethnic category (refer to categories on back page)	Gestational age at delivery (if patient is under 2 years old)
	weeks
GP practice code	Birthorder Multiplicity
	of L
Admission details	
Date and time of admission to unit (dd/mm/yyyy)	Source of admission
	Samehospital Clinic
	🗌 Otherhospital 🔲 Home
Admission number	Care area admitted from (includes transfers in)
	🗌 X-ray/endoscopy/CT scanner 🔄 ICU / PICU / NICU
	Recoveryonly Ward
Type of admission to unit Planned—following surgery	HDU (step up/step down unit) Theatre and recovery
Unplanned_following surgery	Other intermediate care area A& E
Planned-other	Retrieval / transfer
Unplanned_other	
	Retrieved / transferred by
Previous ICU admission (during current hospital stay)	Own team Specialist non-PIC team
	🗌 Other specialist PIC team 🔄 Non-specialist team
None	Transportteam
Unknown	
Diagnoses and procedures	
Primary diagnosis for this admission:	
Other reasons for this admission:	
outer reasons for this dumission.	
Operations and procedures performed during this admission	n:
C o-morbidity:	
www.plcaletorg.ik PICANet	tAdmission data collection form · Version 8.4· December 2013 · Copyright © 2013 University of Leeds

#### Daily interventions

and ventilatory       Invasive ventilation Non-invasive ventilation Non-invasive ventilation Non-invasive ventilation Non-invasive ventilation Advanced ventilation Advanced ventilation Nasopharyngeal Tracheostomy ca Supplemental ox Upper airway obs Apnoea requiring Acute severe asth Arterial line monit External pacing Central venouspi Continuous in fus Bolus IV fluids (>K Cardio-pulmonary Extracorporeal mi Ventricular assist Aortic balloon pui Renal         Peritoneal dialysis Haemofiltration Plasma exchange         Invasive ventilation Advanced ventilation External pacing Central venouspi Continuous in fus Bolus IV fluids (>K Cardio-pulmonary Extracorporeal mi Ventricular assist Aortic balloon pui Plasma filtration Plasma exchange	G monitoring se oximetry tion via endotracheal tube tion via tracheostomy tube entilatory support il atory support (jet ventilation) il atory support (o scillatory ventilation)	Code 99 50 73 51 52 53 56 56 55 13 09 57											
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Renal Peritoneal dialysis Pasma filtration Plasma exchange Incuro- logical Poly Intraventricular ca	usion of in otrope, vasodilator or prostaglandin	06	-		+	+	+	+	⊢	$\vdash$		$\vdash$	+
Cardio-pulmonary Extracorporeal m Ventricular assist Aortic balloon pur Peritoneal dialysis Haemofiltration Haemodialysis Plasma filtration Plasma exchange ICP-intracranial p Intraventricular ca	(>80 ml/kg/day) in addition to maintenance IV fluids	63	-		+	+	+	+	⊢	$\vdash$		$\vdash$	+
Renal Peritoneal dialysis Aortic balloon pur Peritoneal dialysis Haemofiltration Haemodialysis Plasma filtration Plasma exchange IcP-intracranial p Intraventricular ca		64	-		+	+	+	+	⊢	+			+
Renal Peritoneal dialysis Aortic balloon pur Peritoneal dialysis Haemofiltration Haemodialysis Plasma filtration Plasma exchange ICP-intracranial p Intraventricular ca	membrane oxygenation (ECMO)	65	-		+	+	+	+	⊢	$\vdash$			+
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Haemodialysis Plasma filtration Plasma exchange ICP-intracranial p Intraventricular ca		16	-		+	+	+	+	⊢	$\vdash$		$\vdash$	+
Plasma filtration Plasma exchange Ileuro- logical		66	-		+	+	+	+	⊢	⊢		$\vdash$	+
Plasma exchange INeuro- ICP-intracranial p Intraventricular ca	Π	67	-		+	+	+	+	⊢	⊢		$\vdash$	+
Intraventricular ca		67	-	$\square$	+	+	+	+	┢	$\vdash$		$\vdash$	+
ogical Intraventricular ca	- La recelure recatifering	68				+	+	+	-	-			+
	catheter or external ventricular drain	69	-	$\square$	+	+	+	+	⊢	$\vdash$	$\vdash$	$\vdash$	+
Metabolic Diabetic ketoacid			_		_	-	+	-	-	-			-
	idosis (DKA) requiring continuous in fusion of in sulin	70											
Other Exchangetransfu	stusion	04				Т	Т	Т	Г				
Intravenousthrom	ombolysis	71					$\top$		Γ				
Extracorporeal liv	liver support using molecular absorbent recirculating system	n (MARS) 72					Τ	Τ	Γ				
Patient nursed in	in single occupancy cubide (state reason for isolation below	(†) †74											
High cost Medical gases Ba	Band 1 - nitric oxide	X841			Т	Т	Т	Т	Г	Γ			Т
drugs Surfactant	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	X842			+	+	+	+	$\vdash$	$\vdash$			+
†If patient nursed in single of			-					-		-	_		-

PIM2 applies to observations recorded between the first face-to- face contact with ICU doctor <b>until one hour after admission</b> . Always use the first recorded measurement during this time period.	Is evidence available to assess past medical history?  Yes No  If yes, tick all that apply
Elective admission Tick if this is an elective admission	Cardiac arrest before ICU admission
Main reason for PICU admission Asthma Bronchiolitis Croup Obstructive sleep apnoea Recovery from surgery Diabetic ketoacidosis Other (none of the above)	Cardiomyopathyormyocarditis Severe combined immune deficiency Hypoplasticleft heart syndrome Leukaemia or lymphoma after first induction Liver failure main reason for ICU admission Admitted following cardiacbypass Spontaneous cerebral haemorrhage Neurodegenerative disorder Human Immunodeficiency Virus (HIV)

PICANet 2014 Annual Report Appendices

Day	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47 -	48	49	50	51	52	2 53	3 54	4 55	
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Intu	Intubation At the time of arterial														Yes No Pupil reaction																												
	Yes			N	D						npli													Bo	th	fixe	da	nd	dila	ateo	1												
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Clinical trial	Custom fields
Is the patient on a clinical trial?  Yes (specify name of trial) No	Field name Field value
Growth measurements (if required by your unit)	
Height	
Weight	
Abdominal circumference	
Discharge information	
Status at discharge from your unit	
Discharged for palliative care	
Yes No	
Date and time of discharge (dd/mm/yyyy hh:mm)         Image: Image (dd/mm/yyyy hh:mm)         Image: Image (dd/mm/yyyy hh:mm)	
Date and time of death (dd/mm/yyyy hh:mm)	Comments
Destination following discharge from your unit	
Hospice Other hospital PICU	
Ward	
C Other	
Follow-up 30 days post-discharge from your unit	Form completed by
Alive Dead Unknown	
Date of death (dd/mm/yyyy)	Ethnic categories
	White—British, Irish, Any other White background* Mixed—White and Black Caribbean, White and Black African,
Location	White and Asian, Any othermixed background*
Normal residence Same hospital [] ICU	Asian or Asian British – Indian, Pakistani, Bangladeshi, Any other Asian background*
Hospice Otherhospital PICU	Black or Black British – Caribbean , African , Any other Black background*
	Chinese
	Any other ethnic group*
SCBU	Not stated – if the patient had been asked and had declined Unknown – if the patient had not been asked
☐ Other	* Specify ethnicity alongside category
Contact us · picanet@leeds.ac.uk	
Jodie Batchelor Lee Norman	Caroline Lamming Phil McShane

Jodie Batchelor	LeeNorman	Caroline Lamming	Phil McShane
Projectofficer	Database manager	Research nurse	Statistician
(0113) 343 8125	(0113) 343 8125	(0116) 252 5414	(0113) 343 8304
j.a.batchelor@leeds.ac.uk	l.j.norman@leeds.ac.uk	crl4@leicester.ac.uk	p.mcshane@leeds.ac.uk

## F. PARENT INFORMATION LEAFLET

### What does PICANet do?

PICANet collects information on all children who are admitted to a paediatric (children's) intensive care unit. You don't need to do anything for your child to be included.

#### Why is PICANet important?

The information that we collect for PICANet is helping to find out the best ways to treat and care for children who are ill, so that intensive care services can be better planned for and provided.

#### How is PICANet funded?

Funding is provided by the Healthcare Quality Improvement Partnership, Health Commission Wales Specialised Services, NHS Lothian – University Hospitals Division / NHS Greater Glasgow and Clyde – Women and Children's Division, Belfast Health and Social Care Trust and The Harley Street Clinic.

#### What information is needed?

PICANet collects exactly the same information on all children cared for in paediatric intensive care units.

Personal details, like name and date of birth, help us to follow your child's progress, if they are moved to another paediatric intensive care unit. Information about your child's care, treatment and condition is also collected.

We can use your postcode to help plan future paediatric intensive care services in your area.

#### How is information collected?

A member of staff records details about your child's condition or illness onto a form from information in their medical notes. This information is then put onto a computer, sent to the University of Leeds and kept there on a computer.

#### Will the information be safe?

We send all information in a very safe way and keep it stored confidentially on a main computer, which is kept in a safe room. No-one can see the information, unless it is their job to do so.

There is no way at all that your child can be identified in any of our reports.

## What will the information be used for?

We use the information to help us write reports and to decide what further information on children's intensive care is needed to help hospitals plan for the

#### future.

Because we collect a lot of information, it means that we can look at what is happening all over the country and not just in this hospital.

We have linked up with the Office of National Statistics, so that we can see how your child's health is, after they have left the intensive care unit.

#### What have we found out so far?

During the past few years, we have shown that over 18,000 children are admitted to paediatric intensive care units in England, Wales, Scotland and Northern Ireland each year. Almost half of these children are less than one year old. This type of information is useful, because it helps the hospitals and the people who plan health services to know what to expect and to be better prepared.

### Does my child have to be included?

If you do not want information on your child included in PICANet, please tell the nurse or doctor caring for your child. Your decision will not alter the care your child receives in this, or any other hospital.

## Where can I get more information?

If you have any questions about PICANet you can:

- ask your child's nurse or doctor for more information
- visit the PICANet website (see below)
- email PICANet (see below)
- contact a member of the PICANet team on one of the telephone numbers below

## **PICANet** contact information:

### Caroline Lamming

PICANet Research Nurse PICANet Department of Health Sciences University of Leicester 22 -28 Princess Road West Leicester LE1 6TP

crl4@leicester.ac.uk 2 0116 252 5414 Principal investigators:

#### Professor Elizabeth Draper

PICANet Department of Health Sciences University of Leicester 22 -28 Princess Road West Leicester LE1 6TP

🕾 0116 252 5468

#### **Dr Roger Parslow**

PICANet Paediatric Epidemiology Group Centre for Epidemiology & Biostatistics The Leeds Institute of Genetics, Health & Therapeutics University of Leeds 8.49 Worsley Building Leeds, LS2 9JT

🕾 0113 343 4856

Email: picanet@leeds.ac.uk

Website: www.picanet.org.uk





## Paediatric Intensive Care Audit Network

Information leaflet for parents, families and guardians of children admitted to paediatric intensive care



Drawn by Zoe aged 8

Version 5.3 Oct 2012

## G. DATA VALIDATION FORM

		PICANet data validation audit	
	PICU name	Visited by	Date of visit
	Variable	Visit value	Discrepancy
Admission	Case note number		
Ad	Date of admission		
	Time of admission	± 30 minutes is acceptable	
	Previous ICU admission	ICU PICU NICU None Notknown	
	Retrieval / transfer	Yes No	
	Retrieved / transferred by	Own team Other specialist team (PICU) Other specialist team (non-PICU) Non-specialist team Not known	
	Care area admitted from	<ul> <li>X-ray, endoscopy, CT scanner or similar</li> <li>Recovery only</li> <li>HDU (step up / step down unit)</li> <li>Other intermediate care area (not ICU / PICU / NICU)</li> <li>ICU / PICU / NICU</li> <li>Ward</li> <li>Theatre and recovery</li> <li>A &amp; E</li> </ul>	
Diagnoses	Primary diagnosis for this admission		
nission	Elective admission	☐ Yes ☐ No	
PIM/PIM2 - Reason for admission	Main reason for admission	<ul> <li>Asthma</li> <li>Bronchiolitis</li> <li>Croup</li> <li>Obstructive sleep apnoea</li> <li>Recovery from surgery</li> <li>Diabetic ketoacidosis</li> <li>Other (none of the above)</li> </ul>	

Continued over...

	Variable	Visit value	Discrepancy
ysiology	Systolic blood pressure	mmHg ±5 mmHg is acceptable	
PIM/PIM2 - Physiology	Blood gas in first hour?	☐ Yes ☐ No	
PIMA	Arterial PaO <sub>2</sub>		
	FiO <sub>2</sub>		
	Intubation	Ves No	
	Headbox	☐ Yes ☐ No	
	Base excess (arterial/capillary)	±	
	Lactate (arterial/capillary/venous)	) mmol/l	
	Mechanical ventilation	☐ Yes ☐ No	
	СРАР	Yes No	
	Pupil reaction	<ul> <li>Both fixed and dilated</li> <li>Other reaction</li> <li>Not known</li> </ul>	
Interventions	Invasive ventilation	☐ Yes ☐ No	
Inte	Invasive ventilation days	Start date         Stop date           /	
	Non-invasive ventilation	☐ Yes ☐ No	
	Non-invasive ventilation days	Start date         Stop date           /	
Discharge	Date of discharge		
	Time of discharge	±30 minutes is acceptable	

## H. DATA VALIDATION REPORT

(This report was used throughout the reporting period of this publication but has been superseded by the web based system self validating reports)

### The Royal Hospital

#### Key to clinical code errors

Value(s):

READ code followed by READ code description followed by the text recorded in the unit notes e.g. XSDOK- Bronchiolitis [respiratory distress]

#### Example errors:

A) (no code) - (no description) [(no notes)], this means nothing has been supplied.

B) X44vY - [ASD], this means an invalid READ code and no READ code description have been supplied.

C) 00000 - [abdominal tumour resection], this means no READ code and no READ code description have been supplied.

Admission number 200421	Casenote number 233X	Admitted on 12/02/2004	PICANet ID 450
Reason	Variable(s)	Value(s)	Comment
Missing primary reason	Primary reason for admission	(No code) - (No desription) [(No notes)]	Must have a primary reason for admission recorded
Admission number 200462	Casenote number 433RX	Admitted on 15/04/2004	PICANet ID 552
Reason	Variable(s)	Value(s)	Comment
Missing value	Intubation		
Missing value	Number of days intubated		
Admission number 200479	Casenote number 756X	Admitted on 01/05/2004	PICANet ID 660
Reason	Variable(s)	Value(s)	Comment
Incorrect concept domain	Primary reason for admission	X20UN - Nissen fundoplication [Nissen fundoplication]	Primary reason must be a disorder
Missing value	Follow-up status		
Admission number 2004111	Casenote number 999X	Admitted on 16/12/2004	PICANet ID 1273
Reason	Variable(s)	Value(s)	Comment
Incongruent value	Hospital location	Normal residence / Ward	Discharge destination not hospital but hospital location recorded
Logic error	Admission date / Discharge date	12/03/2003 / 10/03/2003	Please check dates; cannot be discharged before admitted
Missing value	Unit discharge status	Not known	Status at discharge from your unit expected (Alive or Dead)

## I. MONTHLY ADMISSION REPORT

																			YEAF	r / MC	NTH																		
Organisation							2011													2012													2013						
		2		4				8			11			1	2	3	4	5	6	7	8		10			Total	1	2	3	4	5	6	7	8	9 10			Total	Grand Total
A	45		60			40		47	57	56	60	48	614		46	48	55	44	50	53	63	47	48	58	60		44	44	67	56	55	60	57	46	51 60	_			3864
В	18		14	14		7	14	8	14	10	3	20	147	14	12	14	16	9	12	25	8	24	27	29	17		22	11	17	18	12	11	14	4	29 26			254	1216
С	24		27	19		23		15	18	17	28	29	265	26	27	29	27	26	24	32	19	22	28	32	27		21	25	25	27	28	17	20	18	10 24			264	1696
D	75		77	54		62	52	39	54	53	74	72	737	65	71	78	71	63	56	68	52	61	68	71	53		68	48	71	57	56	44	52	51	49 40	_		648	4324
E1	87		69	61	96	96		78	73	79	100	99	991	92	87	86	79	83	81	76	66	68	80	75	74		91	86	88	76	85	75	75	80	70 83			985	5846
E2	67		59			70		75	72	69	49	66	794	65	66	65	71	79	64	73	77	66	76	67	63		64	59	65	63	75	68	74	67	69 77			827	4906
F	121	105	103	95	100	98		78	93	98	125	125	1243	118	104	107	96	132	103	100	87	92	122	128	98		118	92	107	107	115	93	107	81	106 106	_	113	1234	7528
G		5	1	1	1	3	4	4	1	1		2	23	2	3	2	1	1			4	3	2	1	1	20	3	2	3	1	3	1			4	2	1	20	126
Н	51		55			38		41	56	47	50	69	588	49	46	65	48	53	51	64	48	39	56	73	69		42	55	48	57	59	56	62	46	53 65	_		658	3814
<u> </u>	82		85	69		63		49	65	70	67	88	833	81	73	88	68	77	60	71	73	64	72	76	73		91	72	70	56	75	56	58	67	72 74			874	5166
K1/K3	55		63	34		44		52	39	57	50	56	592	41	42	32	48	55	45	53	44	43	50		43		44	43	45	36	44	52	57	36	43 43			556	3410
К2	30		24	26		35		25	35	45	27	33	355	23	35	34	34	28	27	22	21	25	24	33	22		27	28	33	30	24	23	25	28	34 27	_		332	2030
L	33		31	26		19		25	23	22	34	32	329	25	35	29	24	36	17	23	19	19	33	32	30		29	23	27	27	24	24	13	25	24 34			324	1950
M	32		36			34		14	35	22	30	36	356	44	42	52	30	44	30	36	33	35	27	47	40		39	40	33	35	39	33	28	17	11 32			371	2374
N	25		19			15		11	23	24	20	25	240	25	15	24	20	17	56	67	58	76	62	67	65		64	61	65	59	64	51	73	59	77 80	_		794	3172
0	54		49			62		69	68	62	65	58	674	55	46	49	39	56	61	62	66	47	68	62	49		58	34	44	61	53	46	67	73	53 57			649	3966
P	89 35		99 44	85 43		94 44		79 40	83 63	96 61	93 41	113 60	1102 533	117 49	105 38	43	36	102 45	85 40	116 43	94 27	90 31	99 45	87 56	96 60		106 35	100 49	96 36	79 45	88 52	82 38	73 41	80 35	88 92 41 51	_		1097 517	6750 3126
Q2	76		82	43 80		44 88		85	86	73	86	92	982	82	73	43 64	87	45 90	62	43 80	80	66	43 75	79	71		75	76	89	45 95	66	76	86	68	80 89			995	5772
R	29		30			21		14	24		16	92 19	256		22		9	12	10	9	80 7	10	14	15	17		13	70	13	95 19	14	9	11	00	14 11			138	1126
<u>з</u> т	52		50	39		40		30	45	46	32	41	501	32	55	57	41	44	46	48	40	28	46	49	43		49	38	39	41	39	46	49	48	51 49			547	3154
<u> </u>	24		31	30		20		16	29	30	22	26	293	18	28	26	27	30	28	32	29	26	32	32	33		31			27	21	26	29	25	22 29			338	1944
v	111		104	91		105		112	104	99	108	115	1275		106	100	105	98	115	124	136	139	139		128		108					120	98	89	101 114				8076
Ŵ	74		52			54		51	52	63	58	59	686	68	64	66	51	59	53	57	36	52	53	57	66		62	52	62	50	58	66	51	44	49 60			671	4078
X1	37		32			25		29	30	27	36	25	348		38	40	31	41	25	37	38	48	38	35	45		30	30	41	44	45	37	36	46	40 38			458	2504
X2	22		35			28		33	50	33	43	49	412		37	48	40	39	46	39	26	35	29	43	32		34	36	29	34	26	19	27	26	24 34			359	2448
Y	48	43	46	35	32	55	39	40	33	32	35	36	474	30	41	50	34	36	47	55	42	40	45	39	35		43	40	38	45	40	39	35	36	47 50	46	38	497	2930
Z	40	32	36	32	30	42	31	33	41	36	33	35	421	26	27	26	31	30	26	34	33	32	19	40	29	353	29	24	29	33	32	24	31	25	34 32	33	41	367	2282
ZA	87	73	79	67	69	84	67	88	75	60	79	77	905	88	85	93	66	90	72	71	84	78	77	85	81	970	88	79	76	84	98	83	78	79	107 110	108	97	1087	5924
ZB	35	40	49	33	31	35	24	37	38	40	45	38	445	51	36	40	44	41	29	34	24	41	40	39	32	451	43	40	39	32	29	33	38	33	30 48	42	35	442	2676
ZC	82	82	86	72	77	76	83	81	93	98	105	85	1020	88	86	99	84	89	101	102	89	84	90	96	88	1096	103	77	89	100	104	91	97	85	81 95	84	88	1094	6420
ZD	50	48	62	46	37	39	38	33	31	37	48	51	520	51	50	42	35	39	37	42	35	40	49	50	43	513	45	47	43	42	43	34	45	47	31 42	28	56	503	3072
ZE	26	38	28	28	43	56	48	38	34	38	50	29	456	22	25	33	29	54	41	50	34	41	39	35	39	442	43	24	41	47	50	53	49	43	45 30	36	28	489	2774
ZF																																1			3	21	13	38	76
Total	1716	1597	1717	1448	1538	1615	1533	1469	1637	1620	1712	1808	19410	1735	1666	1761	1547	1742	1600	1798	1592	1612	1772	1872	1722	20419	1762	1567 1	728 1	710 1	748 1	1587	1656 1	1511	1636 1809	1808	1909	20431	120520

## J. DATA STATUS REPORT

\* This is an example report only

Organisation	First	Last	First Edit	Last Edit	Events	Events With		Warnings	Errors	Total
<b>.</b>	Event	Event			1000	No Errors	Values			Errors
A		29/12/2012			1833	1832		0		4
В		31/12/2012			834	834	0	0		0
С		30/12/2012			847	847	0	0		0
D		31/12/2012			2236	2233	9	0		9
E1		31/12/2012			2890	2890		0	-	0
E2		31/12/2012			2401	2401	0	0		0
F		31/12/2012			3730	3112	571	81	0	652
G		27/12/2012			83	83	0	0		0
Н		31/12/2012			1853	1851	5	0	0	5
l		31/12/2012			2481	2480	1	0	0	1
J	04/01/2010	05/08/2010	10/05/2012	10/05/2012	78	46	73	6		79
K1	01/01/2010	31/10/2010	21/05/2012	23/05/2013	216	153	67	6		73
K2	01/01/2010	31/12/2012	11/02/2013	07/05/2013	1045	1045	0	0		0
K3	01/01/2010	31/12/2012	21/06/2011	23/05/2013	1542	1542	0	0	0	0
L	01/01/2010	31/12/2012	17/10/2011	04/06/2013	987	977	10	0	0	10
M	01/01/2010	31/12/2012	01/11/2011	09/05/2013	1189	1188	11	0	0	11
N	01/01/2010	30/12/2012	26/09/2012	28/03/2013	1041	1041	0	0	0	0
0	01/01/2010	31/12/2012	20/02/2012	16/05/2013	2078	2075	6	0	0	6
Р	01/01/2010	31/12/2012	10/04/2013	10/04/2013	3448	3448	0	0	0	0
Q1	07/01/2010	30/12/2011	20/04/2012	20/04/2012	192	77	542	75	4	621
Q2	01/01/2010	31/12/2012	06/10/2011	02/04/2013	1480	1480	0	0	0	0
R	01/01/2010	31/12/2012	09/12/2011	10/05/2013	2820	2820	0	0	0	0
S	01/01/2010	22/12/2012	10/10/2011	05/06/2013	636	635	4	0	0	4
Т		29/12/2012			1523	1426	101	0	0	101
U	01/01/2010	31/12/2012	19/01/2012	23/05/2013	967	967	0	0	0	0
V	01/01/2010	31/12/2012	22/03/2012	06/06/2013	3994	3958	29	7	0	36
W	01/01/2010	31/12/2012	15/08/2012	28/03/2013	2042	2042	0	0	0	0
X1		31/12/2012			1167	1103	64	0	0	64
X2		30/12/2012			1190	1187	20	1		21
Y		31/12/2012			1442	1442	0	0		0
Z		31/12/2012			1209	1209	0	0	0	0
ZA		31/12/2012			2819	2819	0	0		0
ZB		31/12/2012			1346	1344	18	0		18
ZC		31/12/2012			3110	3110	0	0		0
ZD		31/12/2012			1521	1521	0	0		0
ZE		30/12/2012			1017	1017	0	0		0
Total					37463	36516		168		1576

## PUBLICATIONS

Journal	Title	Authors
Pediatrics (2004) <b>113</b> 1653-1657	Trends in the incidence of severe retinopathy of prematurity in a geographically defined	Hameed B, Shyamanur K, Kotecha S, Manktelow B, Woodruff G, Draper ES &
	population over a 10-year period	Field D
Archives of Disease in Childhood (2005) <b>90</b> 380-387	Neuropsychological and educational problems at school age associated with neonatal encephalopathy	Marlow N, Rose AS, Rands CE & Draper ES
Archives of Disease in Childhood	Epidemiology of traumatic brain injury in	Parslow RC, Morris KP, Tasker RC,
(2005) <b>90</b> 1182-1187	children receiving intensive care in the UK	Forsyth RJ & Hawley C
British Medical Journal (2005)	Paediatric cardiac surgical mortality after	Parry GJ, Draper ES & McKinney P
<b>330</b> 43 (1 January)	Bristol: details of risk adjustment tools were not given (letter)	
British Medical Journal (2005) <b>330</b> 877-879 (16 April)	A feasibility study of signed consent for the collection of patient identifiable information for a national paediatric clinical audit database	McKinney PA, Jones S, Parslow R, Davey N, Darowski M, Chaudhry B, Stack C, Parry G, Draper ES for the PICANet Consent Study Group
European Journal of Obstetrics, Gynecology & Reproductive Biology (2005) <b>118</b> 272-274	Presentation of the European project models of organising access to intensive care for very preterm births in Europe (MOSAIC) using European diversity to explore models for the care of the very preterm babies.	Zeitlin J, Papiernik E, Breart G, Draper E & Kollee L
Prenatal Diagnosis (2005) <b>25</b> 286-291	Population based study of the outcome following the antenatal diagnosis of cystic hygroma	Howart ES, Draper ES, Budd JLS, Konje J, Kurinczuk JJ & Clarke M
Emergency Medical Journal (2006) <b>23</b> 519-522	Emergency access to neurosurgery in the United Kingdom	Tasker RC, Morris KP, Forsyth RJ, Hawley CA, Parslow RC, on behalf of the UK Paediatric Brain Injury Study
Intensive Care Medicine (2006) <b>32</b> (9) 1458	Organ donation in paediatric traumatic brain injury	Morris KP, Tasker RC, Parslow RC, Forsyth RJ, Hawley CA
Intensive Care Medicine (2006) <b>32</b> (10) 1606-1612	Monitoring and management of intracranial pressure complicating severe traumatic brain injury in children	Morris KP, Forsyth RJ, Parslow RC, Tasker RC, Hawley CA on behalf of the UK Paediatric Traumatic Brain Injury Study Group and the Paediatric Intensive Care Society Study Group
Pediatrics (2006) <b>117</b> 733-742	Assessment and optimisation of mortality prediction tools for admissions to paediatric intensive care in the United Kingdom	Brady AR, Harrison D, Black S, Jones S, Rowan K, Pearson G, Ratcliffe J, Parry GJ; UK PICOS Study Group
Archives of Disease in Childhood Fetal & Neonatal Ed (2007) <b>92</b> 356-360.	Mortality patterns of very preterm babies: a comparative analysis of two European regions in France and England	Draper ES, Zeitlin J, Field DJ, Manktelow BN, Truffert P.
Paediatric Intensive Care Medicine, (2008) <b>9</b> (1) 8-14	Prediction of raised intracranial pressure complicating severe traumatic brain injury in children: implications for trial design	Forsyth RJ, Parslow RC, Tasker RC, Hawley CA, Morris KP. On behalf of the UK Paediatric Traumatic Brain Injury Study Group and the Paediatric Intensive Care Society Study Group
British Medical Journal (2008) <b>336</b> 7655	Survival of extremely preterm babies in a geographically defined population: prospective cohort study of 1994-9 compared to 2000-5.	Field DJ, Dorling JS, Manktelow B, Draper ES
American Journal of Epidemiology, (2008) <b>167</b> 485- 491.	Recreational drug use: a major risk factor for gastroschisis?	Draper ES, Rankin J, Tonks A, Abrams K, Field DJ, Clarke M, Kurinczuk JJ
Archives of Disease in Childhood (2009) <b>94</b> 210 - 215	Epidemiology of Critical III Children in England and Wales: incidence, mortality, deprivation and ethnicity	Parslow RC, Tasker RC, Draper ES, Parry GJ, Jones S, Chater T, Thiru K, McKinney P, on behalf of PICANet
British Medical Journal (2009) <b>338</b> b1749	Institutional Performance (letter)	McShane P, Draper ES, McKinney P, Parslow R

Pediatric Critical Care Medicine 27 Feb 2009.	Hyperglycemia and insulin therapy in the critically ill child.	Nayak P, Lang H, Parslow RC, Davies P, Morris KP, on behalf of UK Paediatric Intensive Care Society Study Group.
Diabet. Med, 2010; 27, 705–708	Paediatric intensive care admissions for acute diabetic complications.	Burns MR, Bodansky HJ, Parslow RC
Acta Paediatr, 2010 99(8):1186- 119.1	Deprivation, ethnicity and prematurity in infant respiratory failure in PICU in the UK.	O'Donnell DR, Parslow RC, Draper ES
Palliative Med (September 2010) <b>6</b> 608-615	Palliative care discharge from paediatric intensive care units in Great Britain.	Fraser LK, Fleming T, Miller M, Draper ES, McKinney PA, Parslow RC
Archives of Disease in Childhood [2010] doi:10.1136/adc.2009.178269	Place of Death and Palliative Care following discharge from Paediatric Intensive Care Units.	Fraser LK, Miller M, Draper ES, McKinney PA, Parslow RC
Multiple Sclerosis [Sep 27 <sup>th</sup> 2010] Doi:10.1177/1352458510382554	Inflammatory Demyelination Working Group and the Paediatric Intensive Care Audit Network. Severe Acute Disseminated Encephalomyelitis: A Paediatric Intensive Care population based study	M Absoud, R C Parslow, E Wassmer, C Hemingway, H P Duncan, C Cummins, M J Lim On behalf of The UK & Ireland Childhood CNS Inflammatory Demyelination Working Group and PICANet
Lancet <b>376</b> (9742):698-704.	Effect of specialist retrieval teams on outcomes in children admitted to paediatric intensive care units in England and Wales: a retrospective cohort study.	Ramnarayan P, Thiru K, Parslow RC, Harrison DA, Draper ES, Rowan KM.
Br J Neurosurg [2011] Feb 25(1):68-77.	Severe Head Injury in Children: intensive care unit activity and mortality in England and Wales.	Tasker RC, Fleming TJ, Young AER, Morris KP, Parslow RC.
Anaesthesia 2012 doi:10.1111/j.1365- 2044.2012.07159.x	Anaphylaxis admissions to UK critical care units between 2005-2009	B Gibbison D Harrison P McShane C Haddow A Sheikh J Soar
Archives of Disease in Childhood 2011; <b>96</b> :Suppl 1 A90	Tracheostomy in children admitted to Paediatric Intensive Care	Dora Wood, Philip McShane, Peter Davis
Intensive Care Medicine, online 1 <sup>st</sup> , 9 <sup>th</sup> May 2012	International comparison of the performance of the paediatric index of mortality (PIM) 2 score in two national data sets.	Stéphane Leteurtre, Bruno Grandbastien, Francis Leclerc, Roger Parslow and Groupe Francophone de Réanimation et Urgences Pédiatriques, <i>et al.</i>
Intensive Care Med 38(12):2042- 2046 Dec 2012	The relationship between blood lactate concentration, the Paediatric Index of Mortality 2 (PIM2) and mortality in paediatric intensive care.	Morris KP, McShane P, Stickley J, Parslow RC
The Journal of Pediatrics [April 2013] (in press DOI: 10.1016/j.jpeds.2013.03.061)	Effects of Out-of-Hours and Winter Admissions and Number of Patients per Unit on Mortality in Pediatric Intensive Care	Phil McShane, Elizabeth S. Draper, Patrician A. McKinney, Jillian McFadzean, Roger C. Parslow on behalf of PICANet
Pediatric Critical Care Medicine [2013] DOI: 10.1097/PCC.0b013e31829760cf	Paediatric Index of Mortality 3: An Updated Model for Predicting Mortality in Pediatric Intensive Care	Lahn Straney, Archie Clements, Roger C. Parslow, Gale Pearson, Frank Shann, Jan Alexander, Anthony Slater, for the ANZICS Paediatric Study Group and PICANet
PLOS ONE [December 20, 2013] doi:10.1371/ journal.pone.0085278	Linkage, Evaluation and Analysis of National Electronic Healthcare Data: Application to Providing Enhanced Blood-Stream Infection Surveillance in Paediatric Intensive Care	Katie Harron, Harvey Goldstein, Angie Wade, Berit Muller-Pebody, Roger Parslow, Ruth Gilbert
The New England Journal of Medicine. [January 9, 2014] (doi:10.1056/NEJMoa1302564)	A Randomized Trial of Hyperglycemic Control in Pediatric Intensive Care.	Duncan Macrae, F.R.C.A., Richard Grieve, Ph.D., Elizabeth Allen, Ph.D., Zia Sadique, Ph.D., Kevin Morris, M.D., Johr Pappachan, F.R.C.A., Roger Parslow, Ph.D., Robert C. Tasker, M.D., and Diana Elbourne, Ph.D. for the CHiP Investigators
Health Technology Assessment	A clinical and economic evaluation of Control	Duncan Macrae, Richard Grieve,

Volume 18 Issue 26 April 2014	of Hyperglycaemia in Paediatric intensive care	Elizabeth Allen, Zia Sadique, Helen Betts,				
DOI 10.3310/hta18260	(CHiP): a randomised controlled trial	Kevin Morris, Vithayathil John				
		Pappachan, Roger Parslow, Robert C				
		Tasker, Paul Baines, Michael Broadhead,				
		Mark L Duthie, Peter-Marc Fortune,				
		David Inwald, Paddy McMaster, Mark J				
		Peters, Margrid Schindler, Carla				
		Guerriero, Deborah Piercy, Zdenek				
		Slavik, Claire Snowdon, Laura Van Dyck				
		and Diana Elbourne				

#### Abstracts

Abstract	Title	Authors
Health Protection Agency (HPA)	Mortality, deprivation and ethnicity of	Parslow RC, Tasker RC, Chater T, Davey
Annual Conference, 12-15	critically ill children in England and Wales:	N, Draper ES, Jones S, Parry GJ &
September 2005, Warwick (oral	preliminary findings from the Paediatric	McKinney PA.
presentation)	Intensive Care Audit Network (PICANet)	
European Society for Paediatric and	Mortality, deprivation and ethnicity of	Parslow RC, Tasker RC, Chater T, Davey
Neonatal Intensive Care (ESPNIC)	critically ill children in England and Wales:	N, Draper ES, Jones S, Parry GJ, Thiru K
annual conference, 15-17	preliminary findings from the Paediatric	& McKinney PA.
September 2005, Antwerp (oral	Intensive Care Audit Network (PICANet)	
presentation)		
Developmental Medicine and Child	Design of randomized controlled trials of the	Forsyth RJ, Morris K, Parslow RC,
Neurology (2005) <b>47</b> (Suppl 101) 4	management of raised intracranial pressure	Hawley C & Tasker RC
(Subbi 101) +	in paediatric traumatic brain injury	hawley e & fusker he
5 <sup>th</sup> World Congress on Pediatric	Infants admitted to paediatric intensive care	Parslow RC, McKinney PA, Draper ES,
-	with acute respiratory failure in England and	O'Donnell R
Critical Care, 24-28 June 2007,	Wales	O Donnen K
Geneva, Switzerland (oral	Wales	
presentation)		
5 <sup>th</sup> World Congress on Pediatric	Collecting national data for clinical audit:	Parslow RC, McKinney PA, Draper ES,
Critical Care, 24-28 June 2007,	The Paediatric Intensive Care Audit Network	Thiru K
Geneva, Switzerland (poster	in Great Britain	
presentation)		
5 <sup>th</sup> World Congress on Pediatric	Admission to PICU with severe bronchiolitis	O'Donnell DR, Parslow RC, McKinney
Critical Care, 24-28 June 2007,	and acute respiratory failure after preterm	PA, Draper ES
Geneva, Switzerland (poster	birth is associated with a longer duration of	
presentation)	stay and a higher incidence of apnoeas but	
	not mortality	
5 <sup>th</sup> World Congress on Pediatric	Severe bronchiolitis is associated with the	O'Donnell DR, Parslow RC, McKinney
Critical Care, 24-28 June 2007,	annual UK winter increase in PICU	PA, Draper ES
Geneva, Switzerland (poster	admissions and prolonged stay compared	
presentation)	with other diagnoses	
5 <sup>th</sup> World Congress on Pediatric	Hyperglycaemia and insulin therapy in UK	Nayak P, Morris KP, Parslow RC
Critical Care, 24-28 June 2007,	paediatric intensive care units	
Geneva, Switzerland (poster		
presentation)		
5 <sup>th</sup> World Congress on Pediatric	The effect of missing data on PIM-predicted	Emsden S, Baines P, McClelland T,
Critical Care, 24-28 June 2007,	SMR	Parslow RC
Geneva, Switzerland (oral		
presentation)		
5 <sup>th</sup> World Congress on Pediatric	Clinical information system utilisation in	Ramnarayan P, Thiru K, Rowe S on
Critical Care, 24-28 June 2007,	paediatric intensive care: A UK perspective	behalf of pan Thames Health
Geneva, Switzerland (poster		Informatics Group
presentation)		
The 15th Annual Public Health	Licing Data to Inform Commissioning of	Sidbu & Down & & Thirty K
	Using Data to Inform Commissioning of	Sidhu S, Rowe S & Thiru K
Forum, Edinburgh International	Paediatric Intensive Care	
Conference Centre, 28-29 March		
2007, Edinburgh (poster		
presentation)		
HSRN and NIHR SDO Programme	Workforce wellbeing in paediatric intensive	Coleby D, Tucker J, Draper E, Parry G,
joint annual conference. 4 & 5 June	care units with and without extended	McKee L, Skatun D, Davey N, Darowski

2008, Manchester (oral	nursing roles.	М
presentation) EASD Rome, 44th Annual Meeting of the European Association for the Study of Diabetes Rome, 7-11 September 2008 (Oral Presentation)	Title: Intensive care admissions for acute diabetic complications of children and adolescents in England and Wales.	Bodansky HJ, Parslow RC, Feltbower RG, McKinney PA.
PICS Annual Meeting, Holland House, Cardiff. 20 <sup>th</sup> November 2008	PIM Recalibration	Parslow RC
Royal College of Paediatrics and Child Health Conference 2009 30th March-2nd April 2009 – York. (Poster presentation)	Exploring Gender Ratios in Child Mortality and Severe Illness in an Ethnically Mixed Population.	Robin L, Oddie S, Parslow RC.
6th World Congress on Paediatric Critical Care, 13 <sup>th</sup> -17 <sup>th</sup> March 2011 (oral presentation)	Paediatric Index of Mortality (PIM) score performance is improved by inclusion of admission blood lactate concentration.	P McShane, R C Parslow, J Stickley, K P Morris
6th World Congress on Paediatric Critical Care, 13 <sup>th</sup> -17 <sup>th</sup> March 2011 (oral presentation)	Increased mortality for long-stay patients on PICU: PIM2 is not predictive	D. Wood, P. McShane, P. Davis
6th World Congress on Paediatric Critical Care, 13 <sup>th</sup> -17 <sup>th</sup> March 2011 (poster presentation)	Tracheostomy On The Paediatric Intensive Care Unit.	D. Wood; P. McShane; P. Davis
6th World Congress on Paediatric Critical Care, 13 <sup>th</sup> -17 <sup>th</sup> March 2011 (poster presentation)	Implications Of Data Quality And Interface Problems Between Audit Management Systems On Mortality Outcome Of PICU	A.Deep , P McShane R.C Parslow
6th World Congress on Paediatric Critical Care, 13 <sup>th</sup> -17 <sup>th</sup> March 2011 (oral presentation)	Cardiac Arrest Requiring Intensive Care Admission: A United Kingdom Epidemiology Study.	B. Scholefield; H. Duncan; P. McShane; R. Parslow; R. Tasker; F. Gao; K. Morris
6th World Congress on Paediatric Critical Care, 13 <sup>th</sup> -17 <sup>th</sup> March 2011 (mini oral presentation)	Use Of A National PICU Database To Inform The Design Of A Post-Cardiac Arrest Intervention Study - The Cold-Pack Study (Post Arrest Cooling In Kids).	B. Scholefield; H. Duncan; P. McShane; R. Parslow; R. Tasker; F. Gao; K. Morris
22 <sup>nd</sup> ESPNIC Medical and Nursing Annual Congress, 2 <sup>nd</sup> – 5 <sup>th</sup> Nov 2011 Hannover. (oral presentation)	Hospital admissions and mortality of children admitted to paediatric intensive care in the UK - a linkage study	P. Mc Shane, R.C. Parslow, P.A. Mc Kinney, E.S. Draper
22 <sup>nd</sup> ESPNIC Medical and Nursing Annual Congress, 2 <sup>nd</sup> – 5 <sup>th</sup> Nov 2011 Hannover. (oral presentation)	Lactate predicts mortality in a multicentre population in paediatric intensive care	P. McShane, S. Leteurtre, R.C. Parslow, F. Leclerc, E.S. Draper
22 <sup>nd</sup> ESPNIC Medical and Nursing Annual Congress, 2 <sup>nd</sup> – 5 <sup>th</sup> Nov 2011 Hannover. (oral presentation)	H1N1 influenza in paediatric intensive care in the UK and Ireland	R.C. Parslow, P. McShane, P. Lister, P.A. Mc Kinney, E.S. Draper
92 <sup>nd</sup> British Association Dermatologists meeting, 3 <sup>rd</sup> – 5 <sup>th</sup> July 2012(poster presentation)	Children with dermatological conditions admitted to paediatric intensive care: analysis of national clinical audit database	S George, D Harrison, P McShane, Kamal Patel, C Darley
24 <sup>th</sup> ESPNIC Annual Meeting, Rotterdam, 12 <sup>th</sup> -15 <sup>th</sup> June 2013 (Oral Presentation)	Weight-for-age distribution and case-mix adjusted outcomes of 14,205 critically ill children	N.J. Prince, K. Brown, R.C. Parslow, M.J. Peters

### Presentations

Meeting/Conference	Venue	Date	Presentation Title	PICANet Team Attendees
NW Paediatric Intensive Care	Dunkenhalgh	23/06/2004	PICANet: Results of national	Sam Jones & Roger
Seminar (North West	Hotel, Clayton-le-		activity	Parslow
Specialised Commissioning	Moors, Lancashire			
Group)				
PICANet AGM	London	24/06/2004	Presentation of National	PICANet Team
			report	
Welsh National	Royal Welsh	28/07/2004	PICANet: Presentation of	Liz Draper & Nicky Davey
Commissioning Advisory	Showground,		National and Welsh report	
Board Meeting	Builth Wells			
Strategic Issues in Health	University of St	02/09/2004	Collection of personally	Sam Jones
Care Management, Sixth	Andrews		identifiable information for a	

International Conference			national clinical database: how feasible is it to obtain signed consent?	
PICS SG	Cambridge University	09/09/2004	PICANet: How can it be used for research and audit?	Nicky Davey, Sam Jones, Roger Parslow & Krish Thiru
Confidential Enquiry into Maternal and Child Health	London	08/03/2005	National Paediatric Intensive Care Database (PICANet)	Liz Draper
Intensive Care National Audit & Research Centre (ICNARC): Eight Annual Meeting of the Case Mix Programme	Savoy Hotel, London	13/04/2005	Why is it important to include information on paediatric admissions in the new Case Mix Programme Dataset?	Sam Jones
Pan Thames Report Update: Commissioning Consortium	London	06/05/2005	PICANet: Update on Pan Thames data quality for commissioning	Krish Thiru & Sam Jones
Paediatric Intensive Care Study Day	Royal Manchester Children's Hospital	10/05/2005	The epidemiology of critical illness in children	Roger Parslow
Trent PIC commissioners	QMC, Nottingham	12/05/2005	PICANet: Presentation of National report 2003-2004	Liz Draper
Paediatric Intensive Care Trainee Meeting	Royal Liverpool Children's Hospital (Alder Hey)	13/05/2005	Role of PICANet and the relevance of the national audit to the clinical community	Nicky Davey & Sam Jones
PICANet AGM	London	24/05/2005	Presentation of National report	PICANet Team
NORCOM, TRENTCOM & LNR PIC commissioners	Leicester	13/06/2005	PICANet in LNR, Trent & South Yorkshire PCTs	Liz Draper
Health Protection Agency (HPA) annual conference	Warwick	12/09/2005	Mortality, deprivation and ethnicity of critically ill children in England and Wales: preliminary findings from PICANet	Roger Parslow
Paediatric Critical Care Network Board (East Leeds PCT)	Leeds	06/10/2005	PICANet: Presentation of national data and relevance to commissioning	Tricia McKinney
Welsh National Commissioning Advisory Board Meeting	Lamb and Flag Hotel, Llanwenarth, Abergavenny	11/10/2005	PICANet: Presentation of National and Welsh Report	Gareth Parry
PICANet AGM	Perinatal Institute, Birmingham	29/06/2006	Presentation of the National Report	PICANet Team
Pan Thames Commissioners Meeting	London	28/07/2006	Pan Thames PICANet Report 2004-2005	Krish Thiru, Tricia McKinney
Paediatric Intensive Care Society Scientific Meeting	Glasgow	16 & 17/11/2006	PICU Health Informatics	Krish Thiru
University of Leicester,	Department of Health Sciences. University of Leicester	14/03/2007	The UK Paediatric Traumatic Brain Injury Study	Roger Parslow
Pan Thames Commissioners PbR Roadmap	ASIA House	14/06/2007	PICANet and the PCCMDS	Roger Parslow
Exploiting Existing Data for Health Research	University of St Andrews	19/09/2007	Privacy preserving record linkage	Tom Fleming
PICANet AGM	Leeds University Business School	04/07/2007	Presentation of the National Report	PICANet Team
PICANet Annual Meeting	Bristol Children's Hospital	06/11/2008	Revision and recalibration of PIM2 for great Britain	Roger Parslow
PICS Annual meeting	Holland House Cardiff	20/11/2008	The PICANet Report	Roger Parslow

PICS Annual Meeting	Holland House, Cardiff	20/11/2008	Clinical Information systems in UK PIC: Opportunities and challenges on behalf of the UK PIC Health Informatics Group (poster)	Krish Thiru
National Clinical Advisory Group (NCAAG)	London	24/06/2009	PICANet; its origins structures and outputs.	Roger Parslow
PICS Annual Meeting	Cambridge	3 & 4/09/2009	The PICANet Report	Liz Draper
PICANet AGM	Institute of Child Health, London	12/11/2009	Presentation of the National Report	PICANet Team
2010 International Trauma Care Conference	Park Inn, Telford	13/05/2010	PICANet Data	Roger Parslow
PICS SG Summer Meeting	Lord's Cricket Ground, London	09/07/2010	H1N1 – How should we use our data?	Roger Parslow
PICANet AGM	Perinatal Institute, Birmingham	14/10/2010	Presentation on National Report	Roger Parslow/ Liz Draper
PICANet AGM	Thackray Medical Museum, Leeds	11/10/2011	Presentation on National Report	Roger Parslow/ Liz Draper
PICANet AGM	John Foster Hall, University of Leicester	18/10/2012	Presentation on National Report	Roger Parslow/ Liz Draper
24 <sup>th</sup> ESPNIC Annual Meeting	Rotterdam, Netherlands	12- 15/06/2013	Presentation on 'Epidemiology of paediatric and neonatal intensive care'	Liz Draper
PICANet AGM	University Hospitals Bristol Education centre,	13/11/2013	Presentation on National Report	Roger Parslow/ Liz Draper

## L. STAFFING STUDY DATA COLLECTION FORMS

WEEK COMMENCIN 18 <sup>th</sup> November 201	G – 3	PICU Staffing Study 2013 A study of occupancy & nursing and medical staffing provision									PLEASE COMPLETE:- Hospital	Site ID
PICA	Nurs	ing Establ	Unit									
FIVA	1.000	ing Establi	Form completed by	:								
-lll- Net		<ul> <li>Please see instructions overleaf</li> <li>Please complete every column, insert zero if no staff at this grade</li> </ul>									(print name)	
Bands of Nursing Staff	1. Nursing establishment W.T.E. Exclude supernumerary student nurses, receptionists, audit staff/ data clerks, housekeepers	2. No. of persons currently in post	3. Combi W.T. of pers currently	E.	nur	4 No. of sp ses with intensiv qualific	ecialis paedia e care	atric c	or deg re b child	5. of registered ren's nurses RSCN ree or diploma cognised y NMC in iren's branch of mursing	6. No. with Valid Paediatric Resuscitation Training	7. No. with Valid Advanced Paediatric Resuscitation Training
Band 2 - 4												
Band 5												
Band 6												
Band 7												
8 Modern Matron												
8 Nurse Consultant												
9 Nurse Consultant - higher level Other please specify details-												
i.e. Agency / Bank (state Band)					_			_				
2.								_				
3.												
Does your unit have the follow	wing persons in post: (pl	ease tick appropriate box)					N	io. in pos	st	Please return i	n FREEPOST envelope sup	plied to:-
1. Family Care Sister?				NO		YES				University of I	ning, PICANet Research N Leicester, Dept. of Health S	
2. Discharge co-ordinato	r?			NO		YES				LE3296,	Road West, Leicester LE1	
3. Practice Educator?				NO		YES				ьу 29/11/2	013	

PICANet Staffing Study 2013/Nursing Establishment & Staffing Info v1.3 16/10/2013

## PICU Staffing Study 2013



## HOW TO FILL IN THE Nursing Establishment and Staffing Information Form

This form applies to the designated paediatric intensive care unit in your hospital. Only count HDU if located in the same unit and staffed by the PICU shift staffing roster. The form collects information on both STAFF and skill mix.

Each PICU should complete one copy of this form. Every section should be completed once on the first day of the staffing study (Please enter zeros to show you have not missed a column).

COUNTING STAFF - DIFFERENT GROUPS OF STAFF

Only count the staff included in the establishment to deliver clinical care to patients. EXCLUDE clerical staff, research and audit staff/data clerks, receptionists, housekeepers and supernumerary student nurses

- 1. The current combined, whole time equivalent, funded nursing establishment of persons working at this grade to give clinical care. Include all clinical nursing staff, any link nurses employed to give clinical care, any learners or nurses in training but only if not supernumerary.
- 2. The overall total number of (persons) on your PICU currently in post at this grade.
- 3. The combined whole time equivalents of staff currently in post at this grade i.e. a nurse working part time may only be 0.5 WTE.
- The number of specialist nurses with a paediatric nursing intensive care qualification currently in post. Include all specialist nurses in PIC with a
  critical care course qualification (equivalent to the former ENB 415).
- The number of registered children's nurses currently in post to give clinical care. Include all nurses with an RSCN or degree or diploma in children's branch nursing recognised by the NMC.
- 6. The number of nurses currently in post with valid Paediatric Resuscitation training or equivalent
- 7. The number of nurses currently in post with valid Advanced Paediatric Resuscitation training or equivalent

If you have any additional queries please contact: Caroline Lamming tel: 0116 252 5414 or email:crl4@leicester.ac.uk

We advise you to retain a photocopy of the completed form.

Using the FREEPOST envelope supplied, please return the completed forms by FRIDAY 29th NOVEMBER 2013 to:-

Caroline Lamming PICANet Research Nurse University of Leicester, Dept. of Health Sciences, FREEPOST LE3296 22-28 Princess Road West, Leicester LE1 7ZE



## PICU Staffing Study 2013 A study of occupancy & mirsing and medical staffing provision

## Medical Establishment Information

Please see instructions overleaf

Please complete every column, insert zero if no staff at this grade

Type of Medical staff	l. Medical establishment W.T.E.	2. No. of staff currently in post	3. Combined W.T.E. of staff currently in post	4. No. with valid APLS/EPLS training
Foundation Year 1 -2				
ST1-3 Paediatrics				
ST4-8 Paediatrics				
ST1-3 Anaesthesia				
ST4-8 Anaesthesia				
Associate Specialist/Staff Grade				
Consultant Paediatric Intensivists				
Consultant Paediatricians				
Consultant Anaesthetists				
Other Consultants working on PICU				

Any other medical staff included in establishment on PICU Insert grade			
1.	Grade:		
2.	Grade:		
3.	Grade		

	Site ID	
Hospital		
Unit		
Form completed by (print name) Email address		-

#### Please return in FREEPOST envelope to:-

Caroline Lamming, PICANet Research Nurse University of Leicester Department of Health Sciences, FREEPOST LE3296 22-28 Princess Road West, Leicester LE1 7ZE ву 29/11/2013

PICANet Staffing Study 2013/ Medical Establishment v1.3 08/10/2013

PICU Staffing Study 2013



HOW TO FILL IN THE Medical Establishment Information Form

This form applies to the designated paediatric intensive care unit in your hospital. Only count HDU if located in the same unit and staffed by the PICU shift staffing roster. The form collects information on both STAFF and skill mix.

Each PICU should complete one copy of this form. Every section should be completed once on the first day of the staffing study. (Please enter zeros to show you have not missed a column)

#### COUNTING STAFF - DIFFERENT GROUPS OF STAFF

Only count the staff who deliver or are on call to deliver clinical care to patients. EXCLUDE supernumerary medical students etc.

- 1. The current combined, whole time equivalent, funded medical establishment of persons working at this grade. Include all medical staff but only if <u>NOT</u> supernumerary.
- 2. The overall total number of staff (persons) on your PICU currently in post at this grade.
- 3. The combined whole time equivalents of staff currently in post at this grade i.e. a doctor working half time will be 0.5 WTE.
- 4. The shift pattern of staff at this grade e.g. 12 hour shifts to cover a 24 hour period.
- 5. The number of doctors currently in post with valid Advanced Paediatric Life Support, European Paediatric Life Support or equivalent.

If you have any additional queries please contact: Caroline Lamming tel: 0116 252 5414 or email:crl4@leicester.ac.uk

We advise you to retain a photocopy of the completed form.

Using the FREEPOST envelope supplied, please return the completed forms by FRIDAY 29<sup>TH</sup> NOVEMBER 2013 to:-

Caroline Lamming PICANet Research Nurse, University of Leicester, Dept. of Health Sciences, FREEPOST LE3296, 22-28 Princess Road West, Leicester LE1 7ZE



#### Occupancy/ Nursing & Medical Log A

Please complete at 12 noon on Wednesday 20/11/2013

Please see notes for completion overleaf

Baads of Narring staff	No. on duty at 12 noon	Total number with PIC qualification	Grade: of Medical staff	Nn. on duty at 12 noon	Na. on call at 12 noon
Baad 2-4			Frondation Years 1-2		
Read &			STI-3 equivalent		
Band 6			ST4-8 equivalent	-	
Baad 7			Accordante Specialist Seuff Grade		
Road 8 Moders Matros			Cont. Paedistrie Intendicti		
Band S Ners Countrat			Coundrast Predictriciant		
Boad 9 Name Consultant higher level			Counditat		
Other places specify details- i.e. Agency (Bank tecl. hand			Advanced Nurse Practitioner		
2			Other medical staff Co PICU, perfit speciality		
2			£		
*			i.		
Nurse available for retrieval			A ::		
Number of Nursing staff off sick.		6	Number of Medical unif all tick		

Additional	Number of hads a	-	No. of	1.1	So, of Bed	1	Renton for clorare	
Information to be	Compared on company on Party		bedi	Open A accupied	Open & empty	Classed	the property infection	
collected at	ICU designated			1000				
12 noon	HDU designated					-		
	Total number of children in the unit	No Lev IV	el l	No. Lev	el .	No. Level II	No. Level I	
PLLeis ochdes Borpetal Cas Form complete (prior name) Contact tell, no Ennell address	d by:		5.0	• ID		- CPUDER	Internet in REEPOST envelope to sector available CASINE Research Neu- per of Bach Science REEPOST LESSIN 22 Process Read West, science LEI 72E 5 29/11/2013	



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#### Occupancy/ Nursing & Medical Log C

Flease complete at 12 noon on Sunday 24/11/2013
 Flease see notes for completion overleaf

Bandt of Nurting staff	Na. on duty at 12 norm	Total number with PIC qualification	Grades of Medical staff	No. on daty at 12 norm	No. on call at 12 area
Band 1+4			Foundation Years 1-2		
Band #			STI-3 equivalent		
Baad 6			ST4-8 equivalent		
Boad 7			Americate Specialist Stuff Grade		
Boad 8 Meders Metros			Cont. Paediatric Intencivity		
Boad S Narie Coundtoni			Convoltant Paediatriciant		
Boad 9 Name Coandinat higher level			Conveltont		
Other please specify details- (a . Aprecy / Benit incl. hand			Advanced Nurse Practitioner		
4			Other modical staff: Co FICU, perfs operation		orbing on
2			1		
1			1		
Nurse available for retrieval			1		
Number of Nursing staff aff tick			Number of Medical staff off sick		U J

Additional	Number of heds on PICU		No. of fended		ve. of Bed	Resona for classare		
Information to be		Summer of boar on Proc.		Open & eccupied	Open & empty	Cleind	is sobust inferior,	
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12 noon	HDU designated							
	Total anather of children in the unit	No Lev IV	à l	No. Lev	el	No. Level	Na. Lend I	
PERST COMPLI Hospital Unit Form romplete (prior name) Contact tell, no Email address:	al by:		Sa		_	FR. Car PIC Usi Dep FR: 281 Le	are return in EEPOST orrelope to: vine Learning, ANet Research Nurse versity of Leisenter, rol (Nauh) Sources, EEPOST LES236, 22 Princers Road Wen, userier LES 72E, 29/11/2013	

PECADler Staffing Study 2013 Daily Log C v 1.3 18/39/2013



Occupancy/ Nursing & Medical Log B

• Please complete at 12 midnight on Weds 20/11/2013

Please see notes for completion overleaf

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Bands o Nurring v		No. on duty at 12 midnight		aunder de PSC liferation	Grader of Media unif		dical	Nu. on duty at 12 midnight	No. on call at 12 midnight	
Boad 2-4					Found					
Boad 6	_		-	-		aquivales	1			
Brad 6	_	-	-	_	574.8	equivales			-	
Band 7	_	-	-	-		Amorine Specialize			-	
Road S Made	a Matria	-	-		Seaff Cant	irade Pasdintri			-	
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Other please specify in Approx (Book in	detail-				Adves	and Nurb				
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Nurse available retrieval	for				2					
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Additional	1000	1870.	00000	No. of			3	Ranna	for domes	
Information	Number	of heds on	NCU	funded bad:	Open A	Open A	Clased	14.000	La stributs, infectore, staff shortage	
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12 midnight	HDU des									
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Unit					-		1 1	SCAMer Re	orach Nati	
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(print name) Contact tell an									LE3296, 22 Read West	
Email address	_							Leiderter Li		

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Occupancy/ Nursing & Medical Log D

Please complete at 12 midnight on Sunday 24/11/2013
 Please see notes for completion overleaf

Bands of Nursing staff	No. on duty of 12 midnight	Total number with PSC qualification	Grade: of Medical stuff	No. on duty at 12 midnight	No. on coll at 12 midaight
Band 2-4			Foundation Years 1-3		
Sand F			STI-3 equivalent		
Band 6			ST4-8 equivalent	-	
Boad 7			Americane Specialist Seaff Gende		
Boad 8 Moders Matros			Cont. Paedistric Intentivites		
Boad 8 Name Coundant			Conculturat Prediatricings		
Boad 9 Name Coaraiteat higher level			Consultant		
Other please specify detail- is agency dend incl hand	10 - 10	1	Advanced Nurse Practitioner		
1.			Other medical staff Co PICU, peop operation		orking on
÷			4		
1			2		
Nurse available for retriet al			1		
Number of Nursing stuff off sick			Number of Medical maff off tick		

Additional Information to be collected at 12 midnight No. of funded body No. of Beds Open & Open & Closed ecugied empty Reason for close in close states Number of bods on FICU KU designated HDU & Total number of children in the unit No. Level IV Na. Level I No. Local II No. Level III PLACE COMPLETE Site ID Place return in FREEPOST envelope to: Hospital. PRESERVED annuage to-Carolose Lamming. PICANet Research Naras, University of Leisenter, Dept. of Health Sciences, PREEPOST Leis296, 22-31 Primers: Rood West, Leisenter LE1 72E. Unit Form completed (print name) Contact tel. no. Enal address by 29/11/2013

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## PICU Staffing Study

## November 2013

### HOW TO FILL IN THE Occupancy/Nursing & Medical Log

This form applies to the designated paediatric intensive care unit in your hospital. Only count HDU if located in the same unit and staffed by the PICU shift staffing roster. The form collects information on both *STAFF and skill mix* and *OCCUPANCY and illness severity* by actual counts on the unit at noon and midnight

EVERY section of the form should be completed by the nurse in charge of the unit at the time and date specified

Please complete every column, insert zero if no staff at this grade

#### COUNTING STAFF - DIFFERENT GROUPS OF STAFF

#### NURSING STAFF

Only count the staff on duty to deliver clinical care to patients. INCLUDE nurse in charge and runner EXCLUDE clerical staff, receptionists, housekeepers and supernumerary student nurses

 The <u>overall total number</u> of nurses on duty <u>at this time</u> to give clinical care. Include all clinical nursing staff, any link nurse present giving clinical care, any learners or nurse in training but only if not supernumerary.

2. The number of nurses with a nationally paediatric nursing intensive care qualification on duty at this time to give clinical care. Include all specialist nurses in PIC with a critical care course qualification: equivalent to the former ENB 415.

3. The number of nurses on duty and included in the duty numbers who are also available for retrieval. Where the retrieval service is integrated into the PICU nurse(s) may have clinical duties until required for retrieval.

NOTE only count YOUR CLINICAL NURSE MANAGER for example, if on the unit at noon or midnight giving clinical care. (includes on ward round)

#### MEDICAL STAFF

Count the number of medical staff on duty and the number on call at the specified time. SICKNESS

Count the number of staff who were rostered for duty but off sick at specified time.

COUNTING INFANTS/CHILDREN - DIFFERENT GROUPS OF CHILDREN

Count the overall total children on your unit <u>at this time</u>. INCLUDE any children being retrieved in or transferred out from your unit at this time by staff from your shift roster

Count the number of children receiving each Level of Care I to IV (adhere to the PICS Standard Appendix 1, levels of care and dependency)

If you have any additional queries please contact: Caroline Lamming tel: 0116 252 5414 or email:crl4@leicester.ac.uk

Using the FREEPOST envelope supplied, please return the completed forms by FRIDAY 29TH NOVEMBER 2013 to:-

Caroline Lamming PICANet Research Nurse, University of Leicester, Dept. of Health Sciences, FREEPOST LE3296, 22-28 Princess Road West, Leicester LE1 7ZE

PICANet Staffing Study 2013/Daily Log D v 1.3 16/10/2013

## PICU Staffing Study 2013

A study of occupancy & mursing and medical staffing provision



## Other Professionals Survey Form

- Applies to the designated PICU in your hospital
- Please complete every column, insert zero if no staff at this grade or access to this service
- If you have any queries please contact Caroline Lamming 0116 252 5414 or email <u>crl4@leicester.ac.uk</u>

1.	2.		3.	4.
Type of	Please tick if your unit		number	Please tick if
Staff	has dedicated		sions per i.e. half	attends the daily clinical
	time	day =	l session	round
Paediatric Pharmacist				
Paediatric Physiotherapist				
Paediatric Dietician				
Play Specialists				
Any other staff group working on PICU				
1.				
2.				
Please tick the boxes below if your PI	CU has the follow	ving:-		
5.	6. Access to service	Time	7. dedicated	8. Time dedicated
••			PICU	to paediatrics
Type of Service	in hospital	to	FICU	
	in hospital	to	nee	services
Interfaith support	in nospital	to	FIC U	
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PICANet Staffing Study 2013/Other Professionals Survey Form v1.3 08/10/2013





## **PICU Staffing Study 2013** A study of occupancy, nursing and medical staffing provision

Advanced Practice Practitioner (APP) Establishment Information

Site ID\_\_\_\_\_ PLEASE COMPLETE:-Hospital Unit Form completed by: (print name)

- Please see instructions overleaf
- Please complete every column, insert zero if no staff at this grade
- If your unit DOES NOT employ Advanced Practice Practitioners

please tick this box and return the form

	1.	2.	3.	4.	5.		6.		7.	8.
Bands of Advance Practitioners	A.P.P establishment W.T.E.	No. of persons currently in post	Combined w.t.e. of persons currently in post	Number educated to Masters level	Number currently in training		Proportion o w.t.e. d to nursing/r research rota	medical or	Is/are person(s) included on Nursing (N) or Medical (M) establishment? Please insert	No. with Valid Advanced Paediatric Resuscitation Training or
						Nursing	Medical	Research	N or M or both	equivalent
Band 8										
Band 7										
Band 6										
Other (please state Band)										
Additional information:					(Please tick app	opriate box)	Please r	eturn in FREEP	OST envelope supplied to	K-
Do you include the w.t.e. for the A.P.P.s in your calculation for the number of qualified nurses per funded bed? (please tick box) Any additional comments:			Caroline Lamming, PICANet Research Nurse, University of Leicester, Dept. of Health Sciences, FREEPOST LE3296, 22-28 Princess Road West, Leicester LE1 6TP							
							ву 29/	11/2013		

PICANet Staffing Study 2013 APP Establishment & Staffing Info v 1.1\_17/10/2013



## HOW TO COMPLETE THE Advanced Practice Practitioner Establishment Form

This form applies to the **designated paediatric intensive care unit** in your hospital. **Only count HDU** if located in the same unit and staffed by the PICU shift staffing roster. The form collects information on both *STAFF and skill mix*.

#### • If your unit DOES NOT employ APP's please tick the box on the form and return.

Each PICU should complete one copy of this form. Every section should be completed once on the first day of the staffing study (Please enter zeros to show you have not missed a column).

#### COUNTING STAFF - DIFFERENT GROUPS OF STAFF

This is a separate count of Advanced Practice Practitioners (APPs) who will also be recorded on the nursing or medical establishment form to reflect funding source

- 1. The current combined, whole time equivalent, funded establishment of persons working at this grade to give clinical care. Include APPs who are qualified and those in training but only if not supernumerary.
- 2. The overall total number of persons on your PICU currently in post at this grade.
- 3. The combined whole time equivalents of staff currently in post at this grade i.e. an APP employed part time may be 0.5 wte.
- 4. The number of APPs who have attained a Master's degree.
- 5. The number of APPs currently in training.
- 6. Proportion of w.t.e's attributed to the nursing or medical rota.
- 7. Identifies whether APPs are included in the nursing or medical establishment, insert N(nursing) or M(medical) or both if applicable.
- 8. The number of APPs currently in post with valid Advanced Paediatric Life Support, European Paediatric Life Support or equivalent.

If you have any additional queries please contact: Caroline Lamming tel: 0116 252 5414 or email:crl4@leicester.ac.uk You are advised to retain a photocopy of the completed form.

Using the FREEPOST envelope supplied, please return the completed forms by FRIDAY 29th NOVEMBER 2013, to:-

Caroline Lamming PICANet Research Nurse University of Leicester, Dept. of Health Sciences, FREEPOST LE3296 22-28 Princess Road West, Leicester LE1 7ZE

PICANet Staffing Study 2013 APP Establishment & Staffing Info v 1.1\_17/10/2013

## M. DATA REQUESTS SINCE LAST ANNUAL REPORT (TO DECEMBER 2013)

More detailed information can be requested from picanet@leeds.ac.uk

Request date	Name	Position & Place of Work	Data requested	Date Provided	Data Provided by	What has been/will be done with the data?
16/12/13	Dr Aarjan Snoek	Research Fellow, GOSH	ASTHMA A. Patients admitted to PICU with final diagnosis of asthma that were intubated and ventilated on PICU. (1) What was the duration of ventilation? (2) What was duration of PICU stay? (median and IQR and ranges for both) B. Patients admitted to PICU with a final diagnosis of viral-induced wheeze that were intubated and ventilated on PICU. What was the duration of ventilation? What was duration of PICU stay? (median and IQR and ranges for both). To Compare median duration ventilation and PICU stay to national average.	23/01/13	Phil McShane	Compare own practice to national practice
08/12/13	Dora Wood	SpR, Great Ormond Street Hospital	TEENAGE ADMISSIONS For children aged 12 years and older at admission : age at admission length of stay admission PIM2 score year admitted sex source of admission admission type primary diagnosis outcome invasive ventilation tracheostomy ECMO vasoactive therapy renal support ICP device	16/01/14	Lee Norman	Initial feasibility information for study to compare outcomes of teenagers admitted to adult and paediatric intensive care units.
05/12/13	Dominique Gray-Williams	Specialised Commissioner, Welsh Health Specialised Services	TRANSPORT DATA We would like data with regards to the transport set for the transport services from Bristol and Cardiff (if possible NWTS as well. Specifically for each month number of retrievals alongside bed occupancy and numbers of admissions. Highest grade of medic and nurse for each retrieval i.e 10 retrieval consultant 12 SPR etc, for each team (Cardiff and Bristol) Number of critical incidents for each team. Outcomes of retrievals for each team. Measures against PICS retrievals standards for each team. Median journey time. Median Age and total ages i.e no >1yrs etc. Is it possible to identify out of areas retrievals for each team? All requests to be viewed for each team.	11/12/13	Lee Norman	Review of current service for Commissioning of PIC retrieval service for Wales
26/11/13	Alexandra Harris	RP Student, University of Leeds	CARDIAC AND RESPIRATORY ADMISSIONS All Cardiac and Respiratory admissions, identified separately under 1 year of age. Year and month of admission. Local authority: code and name. Primary Care Organisation: code and name. Length of stay: days. Invasive ventilation:	05/12/13	Lee Norman	University undergraduate research project as part of the second year of MBChB medicine degree.

			yes or no. Sex: male or female.			
21/11/13	Anna Springett	Research Assistant (BINOCAR), Queen Mary University of London	CONGENITAL ANOMALIES Data on children admitted to any unit coded with a congenital anomaly (ICD-10 'Q' codes and/or the word 'syndrome' in the text field) or metabolic disorders (ICD-10 E70-E90). Q90-Q91 for NDSCR		Phil McShane	Used in surveillance and research of congenital anomalies
01/11/13	Dr Jo Lumsden	PICU Consultant Leeds General Infirmary	ATRIAL ISOMERISM Our impression is that we have a particularly high number of patients with atrial isomerism in Leeds. I would like to know how many patients with atrial isomerism have been admitted to Intensive care in the other Paediatric Intensive Care Units in the UK over the last 10 years i.e. I would like to know the number for each centre. I also need to know how many of them were readmissions.	29/11/13	Lee Norman	inform the department/ improve our management of this subgroup of patients
29/10/13	Scott O'Brien / David Inwald	Senior Charge Nurse at St Mary's PICU	PIM2R PIMs 2 Score, ICU LOS, Age, Gender, Principle diagnosis. Pre-existing co- morbidities, ICU admission source, Retrieval/transfer, Type of admission: planned/unplanned/surgical/other, Source of admission, Outcome: dead/alive. For all patients admitted to all NHS PICU's in the UK: 01/01/2007 – 31/12/2012	28/11/13	Phil McShane	Publish Findings Final dissertation project
21/10/13	Dominic Gair	Information Design Consultant, Health and Social Care Information Centre	HRGs Data is required for grouping so comparisons can be made at the type and frequency of HRGs generated. A copy of data that has been grouped already by PICANet would also be useful to compare results of the data being grouped by PICANet and then being grouped separately by the HSCIC. This request should mirror a request made by my former colleague Peter Broughton made in November 2012.	05/11/13	Lee Norman	Present analysis to the Paediatric Critical Care Expert Working Group
21/10/13	Vicky Banks	Clinical Outcomes Manager GOSH	PIM2R PIM2r scores for all GOSH admissions	05/11/13	Lee Norman	Internal use

16/10/13	Samantha	Staff Nurse/ Audit	PERTUSSIS	07/11/13	Phil	Share with Public Health England
	Norris	Nurse, Sheffield Children's Hospital NHS Trust	Data required for patients admitted with pertussis/ whooping cough between the dates $01/01/2011 - 31/12/2013$ .		McShane	and Centre for Infectious Disease Surveillance Control
			Initials, DOB, PICANet event number and admission date if possible to be able to track notes for review			
10/10/13	Matt Gasson	Trainee ANP PCC, John Radcliffe, Oxford	RISK ADJUSTMENT Number of patients expected to die on PICU (as per PICANET risk adjustment methodology) in time period – months 7/8/9 2013	10/10/13	Phil McShane	CQUIN
02/10/13	Wendy McCabe (Claire Westrope)	Audit Clerk, Leicester Royal Infirmary	PERTUSSIS Patients with diagnosis of pertussis, Leicester Royal Infirmary CICU	04/10/13	Phil McShane	Internal assessment
30/09/10	Sam Norris	Staff Nurse, Sheffield Children's Hospital NHS Trust	MORTALITY Predicted and actual mortality for unit for July-Sept 2013	18/10/13	Phil McShane	Quality Dashboard
01/10/13	John Alexander	Clinical Lead, University Hospital of North Staffordshire	SMR 3 monthly SMR reports for UHNS	30/10/13	Lee Norman	Dashboard data for commissioners
27/09/13	Alison Conchie	Service Manager Leeds Teaching Hospitals NHS Trust	ECMO The postcodes area of all patients who received ECMO in England (Not full postcode just the prefix which allows identification of the geographical area) Final data made with local data only.	01/10/13	Phil McShane	Interval trust assessment as to the viability of developing an ECMO service
19/09/13	Colin Ridyard	Research Assistant, CHEME, Bangor University,	CATCH TRIAL Data pertaining to patients in CATCH trial: Randomisation number, admission and discharge dates, transfer details and HRGs. Episode start dates and end dates, too, if available. Multiple lines of data per patient are acceptable.	21/10/13	Phil McShane	Publish (anonymised and aggregated data only) in a medical or health economic journal

18/09/13	John Pappachan	Consultant Paediatric Intensivist, University Hospital Southampton	NIHR call for an RCT of surfactant in bronchiolitis. Type of admission = Unplanned – other, Gestational Age, Other reasons for this admission, Co- morbidity, PCCMDS contains HFOV or ECMO; YES/NO, PCCMDS days of invasive ventilation via endotracheal tube and/or trachesotomy tube, Main reason for PICU admission = Bronchiolitis, Arterial PaO2, FiO2, LOS PICU, LOS hospital.	25/09/13	Phil McShane	Apply for NIHR funding for an RCT
03/09/13	Emer Aldridge	Clinical Nurse Manager, Children's University Hospital, Dublin.	BED OCCUPANCY 2013 Bed Occupancy Figures by month for Children's University Hospital, Dublin.	24/09/13	Phil McShane	Clarifying internal data
29/08/13	Damien Pryor	Cardiff and Vale UHB - Critical Care	REFERRALS of general paediatric patients from hospitals which refer to PICU in Cardiff (Royal Gwent Hospital, Neville hall hospital, Royal Glamorgan hospital, Princess of Wale hospital (Bridgend), Prince Charles Hospital (Merthyr Tydfil), Morriston Hospital (Swansea), Withybush Hospital, West Wales hospital (Carmarthen) and Bronglais (Aberystwyth). 2011-2012	Awaiting completed form	Phil McShane	
18/08/13	Julie Lewis	ST7 Paediatrics (Paediatrician in training), Royal Belfast Hospital for Sick Children	PERTUSSIS Number of admissions to PICU in Belfast with Pertussis. Number of northern Ireland children sent to other UK ICUs with Pertussis Mortality from Pertussis in PICU northern Ireland/northern Ireland children in ICUs.	21/08/13	Phil McShane	Include it in a dissertation for Oxford University. May publish it in a paper.
30/07/13	Imdad Rahman	Clinical Data Analyst, Great Ormond Street Hospital	PIM2R PIM2R scores for all GOSH data	30/07/13	Phil McShane	Validation with in-house databases
24/07/13	lain Macintosh	Director PICU, University Hospital Southampton	RISK ADJUSTMENT The number of patients expected to die in PICU in University Hospital Southampton as per PICANet risk adjustment methodology. April 2011- March 2012.	24/07/13	Phil McShane	PICU Dashboard

#### UNIVERSITY OF LEEDS

ROGER PARSLOW PHIL MCSHANE THOMAS FLEMING SARAH FLEMING LEE NORMAN JODIE BATCHELOR

PICANet School of Medicine University of Leeds Worsley Building Leeds LS2 9JT

R.C.PARSLOW@LEEDS.AC.UK 0113 343 4856

#### UNIVERSITY OF LEICESTER

Elizabeth Draper Caroline Lamming Caroline Lovett Martin Perkins Alun Evans

PICANet DEPARTMENT OF HEALTH SCIENCES UNIVERSITY OF LEICESTER 22-28 PRINCESS ROAD WEST LEICESTER LEICESTER LE1 6TP

> MSN@LEICESTER.AC.UK 0116 252 3200

## www.PICANet.org.uk PICANet@leeds.ac.uk





