PICA Net

Paediatric Intensive Care Audit Network

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Newsletter Issue 6 (August 2003)

Software developments

By now you should all have received the new version of the PICANet data entry software (PICANet DE v1.4). The main development is that the export facility, which allows you to send your data electronically via NHSNet, is now live.

You have 3 choices of how you send your data to us.

- Via NHSNet
- Via email
- On floppy disc by post

In all cases the data will be encrypted.

Another new feature is the ability to copy conditions and codes required at 'Diagnoses at discharge' from 'Reasons for admission to your unit', as the feedback we received stated that these were often the same.

In addition, we are in the process of distributing a further update that will allow you to copy and paste directly from the NHS Clinical Terms Browser, should you need to add a new code for diagnosis on admission or at discharge.

If you are unsure about exporting data or using the copy facility please contact Nicky, Roger or Sam.

We want your data!

To allow PICANet to produce your unit reports on a regular basis we need your data. We hope that you will send data once a week with a simple click of your mouse! You will receive a reminder if we have received no data from you for one month.

www.picanet.org.uk

We have now got our own website - why not log on and take a look? There are password protected sections so that you will be able to access documents such as minutes from the Clinical Advisory Group and Steering Group meetings.

You can email all of us through the site. Any ideas always welcomed.

Regional meetings

During our visits to you all it was suggested by many of you that a regional update day might be useful. This would give you the opportunity to meet up with the PICANet team and staff from other PICANet units. We would welcome ideas as to what format these meetings might take and what issues you would like to see discussed.

If you are interested in attending a regional meeting please let a member of the team know so that we can look at where best in the country to hold them, as this will be dependent on who can attend.

Children requiring long term ventilation

We have received a query regarding children who are receiving long-term ventilation in a transitional care unit. If these children subsequently require admission to a PICU, for whatever reason, what should their "Source of admission" be recorded as?

As these children reside in the transitional care unit this could theoretically be seen, as "Home" as PICANet's definition of home is "the normal place of residence for the child". A custom field could then be created, or a brief comment recorded to indicate that the admission is from a transitional care unit (this would allow both units themselves and PICANet to monitor such admissions).

Clinical coding

It is fair to say that this has seems to have caused the most problems. In particular, we are frequently being asked why diagnoses are being collected at both admission and at discharge. This was something that was requested by the Clinical Advisory Group, as a way of tracking any changes in diagnosis made on the PICU. In light of the fact that the diagnoses recorded at discharge are often the

same as those recorded at admission, we are looking at the possibility of having just one diagnosis section with four subsections: 'Primary diagnosis', 'Other reasons', 'Procedures' and 'Co-morbidity'. This would also make it much clearer about where to record procedures, which has also caused some confusion. The issue will be discussed at the next Clinical Advisory Group meeting in September, and we will keep you updated.

In the meantime, Primary reason for admission should always be the underlying cause, and any operations/procedures should be recorded under other reasons for admission. Any procedures not recorded at admission should be recorded in the 'Other diagnoses at discharge from your unit' section (the software validation will produce an error message as it is expecting a disorder rather than procedure, but do not worry about this for the time being).

Diagnosis coding reports

This is probably the most difficult area in the dataset to complete: as units are allowed to add their own codes from the NHS Clinical Terms Browser, we will be providing feedback reports to you on your clinical coding performance.

These reports will summarise episodes where:

- Correct clinical codes have been added from the NHS Browser
- Data is missing
- Codes or terms are incorrectly spelt
- Codes have been added that exist in the PICANet clinical code database
- Primary reason for admission is a procedure (see point above)
- Codes and terms do not correspond with text in the "notes" section.

Where data needs adding or altering you will be asked to do this locally in your unit. The software will automatically prompt you to re-export the updated episodes.