

Standard Operating Procedure: Clinical: Referral Pathway for Children under 16 Years with Surgical Symptoms- Shared Care arrangements.

Document Type	Standard Operating Procedure
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Owner	Trust Lead for Paediatric Surgical Services
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Approved by	Paediatric Governance Group Paediatric Surgical Services Group Surgical Specialities Governance Group Surgery & Cancer Divisional Board
Superseded documents	None
Relevant regulations / legislation / guidelines	None

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Version Control			
Date	Version Number	Change Details	Approved by
	1	New Document	
March 2020	2	Update to procedure pathway and responsibilities duties (see sign off sheet)	

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Exceptions to this pathway:

The sick child, of any age, in the Emergency Department with;

- Major trauma
- High chance of referral to tertiary centre
- Time critical Surgical pathology e.g.
 - Testicular torsion
 - Post tonsillectomy Bleed

Immediate review by:

- Paediatric team
 - Specialty Surgical team
- As required
- Anaesthetic review

Children under 5 years

Refer to Paediatric Team for:

Admission
Initial management
IV access
Prescription
e-discharge

Specialty Surgical review as requested

Children with a surgical abdomen to be referred directly to Alder Hey hospital

Ongoing clinical care coordinated by paediatric team
Specialty Surgical review as required

Children 5 - 11 years

Refer to General or Specialty Surgical Team for:

Admission
Initial management
IV access
Prescription
e-discharge

PEWS < 3
All children to be reviewed by paediatric team on the ward round

Ongoing clinical care coordinated by specialty surgical team
Daily paediatric review

Children 12 years and over

Refer to General or Specialty Surgical Team for:

Admission
Initial management
IV access
Prescription
e-discharge

PEWS < 3
Paediatric review requested if helpful to management of the child

Ongoing clinical care coordinated by specialty surgical team
Paediatric review as required

PEWS ≥ 3
All children to be reviewed by paediatric team (ST3 or above) within 2 hours

Responsibility for cannulation and prescribing of fluid and drugs:

Children under 5 years: Paediatric team
Children 5 years and over: Surgical team with support from the paediatric team if specialist input required.

MCHT Specialty Surgical Teams:

Orthopaedics
Urology
ENT
Ophthalmology

1. INTRODUCTION / PURPOSE

Mid Cheshire Hospitals NHS Foundation Trust (MCHFT) is a provider of General Surgery of Childhood (GSC) (Non-specialised surgical services in children performed by all surgical disciplines) and General Paediatric Surgery (GPS) (Non-specialised children's surgery performed by specialist paediatric surgeons or by surgeons who primarily operate on adults but have appropriate experience in paediatric surgery). The overriding principles of delivering this care are to ensure that it is performed safely, by competent staff and as close to the patient's home as possible.

There has been a decline in the provision of GPS/GSC at a local level in recent years with an increased burden on tertiary providers and an impact on timely local care for patients.

The Royal Colleges of Surgery and the Federation of Surgical Specialist Associations make a number of actions to establish and improve the provision of GPS/GSC.

They suggest shared care arrangements with surgical teams and local paediatricians providing a multidisciplinary approach when a child with potential surgical problems is admitted to a general hospital

It is the policy of MCHFT that no one will be discriminated against on grounds of age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex or sexual orientation. The Trust will provide interpretation services or documentation in other mediums as requested and necessary to ensure natural justice and equality of access.

2. SCOPE

This standard operating procedure (SOP) supports the shared care by paediatric and surgical teams of children under the age of 16 years admitted with surgical symptoms. It provides a pathway for referral and defines which clinical group is responsible for receiving and coordinating the referral and which group is responsible for admitting the child. These referral pathways are appropriate for referrals from both primary care and from the Emergency Care department.

3. PROCEDURE

Refer to Process pathway 3a and "Responsibilities" below

4. DEFINITIONS

General Surgery of Childhood (GSC) - Non-specialised surgical services in children performed by all surgical disciplines.

General Paediatric Surgery (GPS) - Non-specialised children's surgery performed by specialist paediatric surgeons or by surgeons who primarily operate on adults but have appropriate experience in paediatric surgery.

Specialised Surgery in Children - A large and diverse group including all specialised surgical services in children.

Specialist Paediatric Surgery - As one single and specific surgical specialty contained within the wider group of Specialised Surgery in Children.

MCHT Specialty Surgical Teams – Clinical teams providing specialist (non general) paediatric surgery:

- Orthopaedics
- Urology
- ENT
- Ophthalmology

5. RESPONSIBILITIES / DUTIES

All staff working within the Trust has an individual responsibility to be aware of the contents of any clinical guideline/standing operating procedures which may be relevant to their clinical practice.

5.1 Paediatric team

The Paediatric team will be responsible for:

- Receiving referrals of all children under 5 years.
- Admitting all children under 5 years.
- Referring to General Surgery (for advice and shared care) all children with suspected surgical abdomen
- Referring to appropriate Surgical team (for advice and shared care) all children with specialty specific symptoms
- Urgent review of the critically sick child in the Emergency Department
- Insertion of cannulas in all children under 5 years
- Prescribing of fluids and drugs in all children under 5 years
- Daily reviews of all surgical patients under 12 years of age
- Urgent review of surgical patients with PEWS of 3 or more in the event of concerns from nursing staff
- Communication with the surgical team in Alder Hey when there is a need for a surgical opinion or transfer.
- Comprehensive, documented handover to surgical team when paediatric input no longer required

5.2 General Surgical team

The General Surgical team will be responsible for:

- Receiving referrals of all children 5 years and over with surgical symptoms

- Admitting children 5 years and over with general surgical symptoms
- Reviewing children of any age when requested by paediatric team
- Urgent review of the critically sick child in the Emergency Department
- Daily review of surgical children
- Urgent review of surgical children with PEWS of 3 or more or in event of a nursing concern
- Insertion of cannulas in all children 5 years and over, with support from paediatric team as required
- Prescribing of fluids and drugs in all children 5 years and over with support from paediatric team as required
- Timely completion of discharge paperwork including take home medications
- Comprehensive, documented handover to paediatric team when surgical input no longer required

5.3 Specialty Surgical teams

The Specialty Surgical teams (Orthopaedics, Urology, ENT and Ophthalmology) will be responsible for:

- Receiving referrals of children 5 years and over with specialty specific symptoms.
- Admitting children 5 years and over with specialty specific symptoms.
- Reviewing children of any age when requested by paediatric team
- Urgent review of the critically sick child in the Emergency Department
- Daily review of surgical children with specialty specific symptoms
- Urgent review of surgical children with PEWS of 3 or more or in event of a nursing concern
- Insertion of cannulas in all children with specialty specific symptoms of 5 years and over, with support from paediatric team as required
- Prescribing of fluids and drugs in all children with specialty specific symptoms of 5 years and over with support from paediatric team as required
- Timely completion of discharge paperwork including take home medications
- Comprehensive, documented handover to paediatric team when surgical input no longer required

5.4 Referring teams

The Emergency Care team will be responsible for:

- Referring children to admitting teams in line with this guidance

The Hospital switchboard will be responsible for:

- Referring all children under 5 years to the Paediatric on call registrar
- Referring children 5 years and over with surgical symptoms to the appropriate on call specialty team

6. ASSOCIATED DOCUMENTS

None

7. CONSULTATION AND COMMUNICATION WITH STAKEHOLDERS

This guideline has been developed in consultation with:

- Trust Lead for Paediatric Surgical Specialties
- Paediatric Lead for General Surgery
- Consultant Paediatrician - Clinical Lead
- Paediatric Lead for Emergency Care
- Matron for Paediatrics
- Children's and Adolescent Unit Ward Manager
- Divisional Board - Surgery and Cancer
- Divisional Board - Women and Children
- Divisional Quality Lead – Women and Children
- Paediatric Governance Group
- Surgical Specialties Governance groups
- Paediatric Surgical Services Group
- Emergency Care Governance Group
- Governance.policies@mcht.nhs.uk

8. MONITORING AND REVIEW

Process for monitoring compliance with all of the above requirements, review of results and subsequent monitoring of action plans.

Adverse incidents relating to this standard operating procedure should be reported via the Trust Incident Reporting System, such incidents will be investigated and managed in accordance Trust Policy '*Incident Investigation Learning and Improving Procedure*'.

Monitoring compliance requirements for this standard operating procedure, as a minimum will include:

Standard / process / issue required to be monitored	Monitoring and Audit			
	Process for monitoring e.g. audit	Responsible individual /group	Frequency of monitoring	Responsible Group
Review of the process of this document based on any previous hot spots of clinical incidents.	If there are any deviances from this document found, these are escalated to the Consultant Paediatrician, – Clinical Lead for further review	Consultant Paediatrician, – Clinical Lead	Ongoing	Paediatric Governance Group
Regular review of the process of this document.	Guideline to be reviewed in line with MCHFT standards	Divisional Quality Lead	3 yearly	Paediatric Governance Group

9. INTERNAL AND EXTERNAL REFERENCES

Working together to improve the local delivery of the General Surgery of Childhood Statement of Intent 2018. Royal College of Surgeons of England.

<https://www.rcseng.ac.uk/library-and-publications/rcs-publications/docs/working-together-to-improve-the-local-delivery-of-the-general-surgery-of-childhood/>

Provision of Paediatric Surgery and Anaesthesia.

<http://hinfra/trust-info/policies-guidelines-sops-and-pathways/policies-and-sops-download-page/?q=provision+of+>

10. APPROVAL

Approving Group: Paediatric Governance Group – Approved 22.04.2020

Paediatric Surgical Services Group – Approved 03.03.2020

Surgical Specialities Governance Group

Surgery & Cancer Divisional Board – Approved 24.04.2020

Date of Approval: April 2020

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