Guidance note for audit toolkit

Facing the Future: Standards for children in emergency care settings

Introduction

This self-reported audit toolkit should be used by service leads to evaluate how well their children’s emergency service aligns with the guidance provided by the Facing the Future: Standards for children in emergency care settings. The completed toolkit also supports the development of quality improvement and service development in order to meet these standards. The toolkit has been refined following a pilot in a range of settings in August 2018.

We have included a brief service description data sheet that will enable us to help services of similar size and classification share best practice and quality improvement.

The deadline for submission is 1st March 2019. The RCPCH are committed to re-audit these standards in 2021 to inform the revision and update to the 5th edition of standards in 2023.

Who should complete the audit toolkit

We recommend that the audit is completed by the multi-disciplinary emergency care team as a tool for quality improvement. At a minimum, the tool should be completed by the paediatric emergency service lead and the senior nurse. Involvement of a representative of the service management team is recommended. It is likely you will need to liaise with colleagues in other directorates to gain data to certain chapters. For example, to access education and training logs.

How long does it take to complete?

Services that participated in our pilot told us the toolkit took between 3 to 8 hours to complete. This was best done by undertaking an initial ‘sweep’ to review the standards before going out to teams and colleagues to information gather.

How to submit your completed toolkit

Please email your completed toolkits to health.policy@rcpch.ac.uk and we will reply with confirmation of receipt.

How to use the toolkit

The toolkit chapters contain the standards in bold and the suggested metrics that are provided within the Facing the Future document. The suggested metrics are not intended to be prescriptive but should provide services with ideas for where they can draw evidence to demonstrate they are meeting standards, or where further data collection / audit is required to provide the necessary information. Should you feel a more suitable metric is available in your service, please describe it using the ‘current activity’ box.

Written information can be entered using the ‘current activity’ column, with space to embed hyperlinks / documents under the evidence column (if that is useful), and the actions needed to meet the standard and your own timelines and names of the lead responsible for delivering them.
Logic is built into the audit toolkit to automatically calculate the percentage of standards met. Use the drop-down list to mark whether standards are being met / not met / partially met. Choose ‘not applicable’ to the standards that do not apply to your service with a brief rationale explaining this.

We acknowledge that services in the devolved nations may not find the entire suite of standards applicable.

Each chapter is listed by tabs at the bottom of the worksheet.

**Service improvement**

After you have submitted the toolkit to the RCPCH by 1st March 2019, use your audit findings to work with your service management team to prioritise and plan service improvements and business planning for the development of your service.

By providing the College with your service summary information (using the first tab of the toolkit) we will have a clear understanding of the size, capacity and workforce in place to care for children in emergency care settings across the UK. Please contact health.policy@rcpch.ac.uk for queries relating to service improvement.

**Data note**

By participating in this audit, you are agreeing to the terms described in the data note – see page 5.

**Help and support**

For help with using the tool or if you require any support, please get in touch health.policy@rcpch.ac.uk or 0207 092 6095 Monday to Friday, 9am to 5pm.

**Where to find the resources**

Download standards via [www.rcpch.ac.uk/facingthefuture](http://www.rcpch.ac.uk/facingthefuture) and click on ‘For emergency care’.

**Revision history**

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<tr>
<th>Version</th>
<th>Date</th>
<th>Author</th>
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<tr>
<td>1.0</td>
<td>04/12/2018</td>
<td>Melissa Ashe, RCPCH Policy Lead</td>
<td>Approved by RCPCH Intercollegiate emergency standards committee</td>
</tr>
<tr>
<td>1.1</td>
<td>25/02/2019</td>
<td>Melissa Ashe, RCPCH Policy Lead</td>
<td>Updated to include instruction ‘submit audit toolkit to <a href="mailto:health.policy@rcpch.ac.uk">health.policy@rcpch.ac.uk</a>’</td>
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Supporting guidance

This audit toolkit was piloted in August 2018 and as a result of consultation, additional guidance has been provided to support services with meeting the standards outlined below. Should you require clarification for any of the standards, please be in touch via health.policy@rcpch.ac.uk and we will endeavour to update this guidance.

Workforce and training

Every emergency department treating children should complete a workforce review which can inform business planning for service development.

Standard 9: Every emergency department treating children must be staffed with a PEM consultant with dedicated session time allocated to paediatrics

Different emergency care settings have varying models of care for consultant staffing. As a minimum, every emergency department that sees children must have a PEM consultant (RCEM or RCPCH) who has dedicated clinical and SPA time for the children’s emergency department. It is expected that larger departments will evolve more consistent PEM consultant presence.

Standard 10: Every emergency department treating children must be staffed with two registered children’s nurse.

We acknowledge the challenges services face in recruiting registered children’s nurses in all healthcare settings that treat children. We advise those departments that have been unable to recruit sufficient children’s nurses to their nursing establishment to meet the standard of two such nurses on a shift, to ensure that registered adult nurses have acquired knowledge, skills and competencies as outlined in the documents below:

- [https://www.rcn.org.uk/professional-development/publications/pub-005923](https://www.rcn.org.uk/professional-development/publications/pub-005923)
- [http://www.tquins.nhs.uk/download.php?d=tquins/resources/key_documents/NMTNG_Nursing_AHP_Competencies_in_the_Emergency_Department_Paediatric_Level_1_V1_0_April_2016.pdf](http://www.tquins.nhs.uk/download.php?d=tquins/resources/key_documents/NMTNG_Nursing_AHP_Competencies_in_the_Emergency_Department_Paediatric_Level_1_V1_0_April_2016.pdf)

Registered adult nurses who attain the above knowledge, skills and competencies may be able to gain accreditation via experiential learning (APEL) as part of a registered children’s nursing education programme. We recommend that they compile a portfolio of learning to be able to demonstrate attainment of the knowledge, skills and competencies.

We would therefore advise that health organisations work with higher education institutions to ensure programmes are available so that registered adult nurses have the opportunity to undertake dual registration to gain the full range of child focused knowledge, skills and competencies required to look after infants, children and young people.

Standard 11: A minimum of two children’s nurses per shift in dedicated children’s emergency departments must possess recognisable post-registration trauma and emergency training.

Should services struggle to meet this standard, we would suggest the following:

1) The standards should be used to highlight the need for more children’s nurses in your department. This may equate to training needs of established staff or employment of new staff.
2) A service level agreement is established between the emergency department and the children’s wards so that children’s nurses can be rotated between departments when/where the need is greatest.

3) Registered Adults Nurses who are caring for children should be working towards the RCN (2017) Competency framework for ED nursing (Children and Young people) and the National Major Trauma Nursing Group competencies for Children and Young People. A portfolio of evidence to support these competencies should be developed. See links below:


http://www.tquins.nhs.uk/download.php?d=tquins/resources/key_documents/NMTNG_Nursing_AHP_Competencies_in_the_Emergency_Department_Paediatric_Level_1_V1.0_April_2016.pdf

Management of the sick or injured child

Standard 12: Every emergency department treating children must enable their staff to attend annual learning events that are specific to paediatric emergency medicine.

The standard supports multidisciplinary personal professional development. Your metrics should clearly demonstrate personal learning. This may be through appropriate local teaching or through attendance at national paediatric emergency medicine meetings.

Standard 16: All children who are streamed away from an emergency care setting must be assessed by a clinician with paediatric competences and experience in paediatric initial assessment within pre-agreed parameters including basic observations.

Clarification of competence of person streaming away. A range of practitioners may be involved in redirection and initial assessment of ICYP dependent on the service setting. Individual service leads will need to work with service planners (commissioners and health boards), nursing and primary care colleagues to agree key competences and monitoring parameters to ensure these are met to deliver a safe service.

Standard 24: Registered practitioners treating children in the emergency department deliver health promotion and accident prevention advice that is recorded in discharge summary notes.

The emergency department provides key opportunities for discussions about healthy behaviours and wellbeing. Prevention is being prioritised by national health agencies and yet audit data from the toolkit pilot has demonstrated that this standard is poorly met. The Intercollegiate Committee overseeing the standards will work towards developing health promotion questions for clinicians working in emergency care settings.

NHS England has prioritised health promotion as a key priority and the audit pilot has demonstrated that this standard is poorly met. Little resource is needed to meet this standard and this provides opportunities for junior members of the team to improve practice. E-learning is available https://www.e-lfh.org.uk/programmes/making-every-contact-count/
Data note

Why do we collect data?

Completion of this audit is voluntary however we do encourage organisations to submit data as it forms the basis for the improvement of children’s emergency care service delivery and child health policy on a local and national scale. By completing this audit, you are agreeing for the raw data that we collect, which includes personal information about yourself, to be used for the following purposes:

- Provide members and others with data that can be used to benchmark and improve standards at local, regional and national levels.
- Aggregated and anonymised data may be shared with external third parties such as the UK government, the Scottish Government, the Welsh Government and the Northern Ireland Assembly, workforce planning bodies, other Royal Colleges and external researchers in order to campaign for and support child services and for future research purposes.
- Provide a list of paediatric emergency service leads which may be used internally for RCPCH education and research purposes, for example conducting other surveys or inviting leads to educational events.

If you no longer want your personal data to be included in the audit, please contact the health policy team via health.policy@rcpch.ac.uk.

How do we collect data?

Data is collected using the RCPCH Audit Toolkit for Emergency Standards excel spreadsheet. This is self-reported data, submitted by emergency departments treating children across the UK.

Who might we share your information with?

All emergency standards audit data published or shared with third parties is anonymised and aggregated.

Child health service data may be shared internally and externally to provide an understanding of the structure of paediatric services in the UK. For example, we may provide a list of hospitals with inpatient paediatric services.

By participating in the audit you are agreeing to share your personal contact details (work email address) with other participating services. This is to enable the RCPCH health policy team to provide links between services who are looking to share best practice and for quality improvement advice. Your personal contact details will not be shared with organisations outside of the RCPCH.

Your personal data will not be transferred outside of the EEA.

How can I access the information you hold about me?

Under GDPR you have certain rights in regards to the data we hold about you. You can ask us to delete your personal data, change any inaccuracies, restrict what we use your personal data for, or ask us to stop processing your personal data. You can also request that the data we hold about you is given back to you or given to another service provider in a commonly used format. You are entitled to ask for a copy of the data we hold about
you as well. However, there are some restrictions which apply to these requests, such as if we have overriding legal obligation to keep the data.

All personal data will be processed in accordance with data protection legislation and we have a legal duty to protect any information we collect from you. We have measures in place to ensure your data is securely and safely stored. If you have any concerns about the way your personal data is being used, or want to update or rectify the personal data we hold about you, you can contact the Data Protection Officer via email: information.governance@rcpch.ac.uk You do have the right to complain to the ICO if you have concerns about the way your personal data is being handled: casework@ico.org.uk.

11th December 2018