



Health and Social
Care Board

Performance Management and
Service Improvement Directorate

Ms Tricia Finlay
Standards and Guidelines Unit
DHSSPS

Health and Social Care Board
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Our Ref: LMCM169
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Dear Ms Finlay,

RQIA Review – Reducing the risk of hyponatraemia when administering intravenous infusions to children.

Further to your recent request for an update on the Implementation of the recommendations of the above review by HSC Trusts, please find attached below the current position as reported by Trusts. As outlined in my previous correspondence in July 2011, significant progress has been made by all Trusts in implementing the recommendations. Where there has not yet been full implementation, the actions planned are set out below.

- Potential for the complete removal of No. 18 solution;
 - All trusts have reported compliance with this recommendation and that this product is no longer stocked.
- Development of a competency assessment tool on the administration of intravenous fluids;
 - Belfast and Western Trusts have reported full compliance.
 - Southern Trust has a competency framework for nurses on prescription, administration, monitoring and review of IV fluids for children and young people.
 - Northern Trust anticipates that the competency assessment tool that they have identified will be implemented initially in paediatrics by the end of June 2012 followed by a roll out to staff caring for children in adult wards.

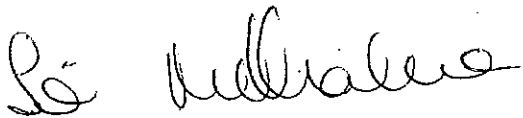
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- o South Eastern Trust refers to the need for a regional approach.
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Further work is required in respect of this recommendation and it is proposed that a review of the tools in use is undertaken by the HSC Policy Collaborative with a view to harmonising practice across the region.

- Development of a strategy to ensure there is collaborative clinical management between paediatric and adult clinicians for the administration of intravenous fluids to children in adult wards; and
 - o All Trusts have reported compliance with this recommendation.
- Training and assessment of staff in the administration of intravenous fluids to children;
 - o All Trusts have reported significant progress against this recommendation. However, most Trusts have flagged up the issue of ongoing training requirements.
 - o Belfast Trust – relevant staff have received training including medical trainees (e-learning), nursing staff in RBHSC and nursing staff in relevant adult areas.
 - o Northern Trust – medical trainees in paediatrics undertake mandatory training, multi-disciplinary training provided – 4 or 5 sessions annually.
 - o South Eastern Trust – awareness sessions provided for medical and nursing staff. All medical trainees complete e-learning, this is also provided to nursing staff in relevant areas.
 - o Southern Trust – Training is provided for relevant staff. Staff who have not received training are prohibited from administering fluids.
 - o Western Trust report full compliance.
 - o It is proposed that additional work with Trusts is required to ensure that the training provided by Trusts is consistent across the region (e-learning module available to all), that all relevant staff access this training and that audits take place to ensure the requirements are being met.
- Standardisation of paediatric IV fluid prescription and fluid balance charts
 - o The HSC Policy Collaborative has recently finalised the development of a regional IV prescription and fluid balance chart.

- All Trusts, including those who have reported compliance against this recommendation will be asked to provide an update on the actions taken to ensure the regional chart is disseminated and implemented and the associated timescales.
- Dissemination of learning from adverse incidents.
 - Trusts have confirmed arrangements are in place to ensure that incidents are reported and that the learning from incidents is appropriately shared within Trusts and across Trusts as required.

Yours sincerely



LOUISE McMAHON
Director of Performance Management and Service Improvement

Cc Mr John Compton, Chief Executive, HSC Board
Dr Carolyn Harper, Executive Medical Director/Director of Public Health, PHA