

Lamont, Jennifer

From: Campbell, Karen
Sent: 03 November 2011 21:02
To: Scullion, Sean
Subject: IV fluid management children in adult wards

Sean
Please see below.

I assume the items were considered in the GAIN guidance.

Karen



GAIN



GAIN guidelines

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Lamont, Jennifer

Subject: FW: Hyponatraemia and fluid guidelines - summary of actions re adult guidelines

From: Harper, Carolyn

Sent: 15 January 2009 09:41

To: Livingstone, Jim; Bradley, Martin; Livingston, Heather; Campbell, Karen; Bradley, Martin; Woods, Paddy; Galloway, David; Porter, Nicola

Cc: Ferrin, Sean; 'McCarthy, Miriam'; Scullion, Sean; Timoney, Mark; Taylor, Diane; Browne, Andrew; Mooney, Jennifer; Lawson, Elaine; Baird, Billy; Craughwell, Eva; Morrow, Norman; Donnelly, Martin; McBride, Michael; 'McAloon, Jarlath'; 'Peter Crean'; 'Ian Young'; 'Johnston, Julian (BFT)'; 'Tom Trinick'; 'robin davidson'; 'Steen, Heather (RGH)'; 'peter.maxwell@

Subject: Hyponatraemia and fluid guidelines - summary of actions re adult guidelines

Colleagues

CMO, Heather Livingston and I met with Ian Young and Peter Maxwell pre-Christmas re the GAIN guidelines on hyponatraemia/fluid prescribing in adults. Following discussion it was agreed that GAIN would proceed with adult guidelines for patients age 16+ and they hope to have those ready early in 2009. (Relating to a separate query regarding the interpretation of age 16, Dr McAloon who chaired the paediatric group has confirmed that the paed guidelines from 2007 are intended for up to the 16th birthday and therefore the adult guidelines will apply from the 16th birthday. The age cut-off for the paediatric and adult guidelines will be clarified when the guidelines are issued & they will be issued together).

It was also agreed that to support medical staff in adult wards in prescribing fluids using the paediatric guidelines (mostly for the age group 13 to up to the 16th birthday):

1. Trusts would be asked to admit children up to their 16th birthday and likely to need IV fluids, to paediatric wards as much as possible, recognising that some hospitals will not have capacity to accommodate all <16 yr olds in paediatric wards
2. Within adult wards, Trusts would be asked to cohort 13 to <16 year olds as much as possible, recognising that their clinical condition/requirements is the overriding priority re placement
3. Senior advice should be readily available to any junior doctor seeking advice in prescribing fluids, particularly for those <16 but also for adults, whatever ward they may be in
4. Undergrad medical training should include fluid prescribing in children as well as adults, emphasising the need to seek senior advice
5. The medical school should be asked to consider ways in which to expose future F1s to fluid prescribing during work shadowing
6. Induction for F1 doctors should include prescribing fluids in 13-<16 year olds, emphasising the need to seek senior advice
7. Clinical teams should audit compliance with GAIN guidelines on hyponatraemia/fluid prescribing routinely on randomly selected cases and on all near misses and adverse incidents relating to fluid prescription, particularly for those <16

Subsequent to the meeting and in discussion with Jim Livingstone and Karen Campbell, the following were also agreed:

8. The issue of training nurses in the administration of fluids should be raised with relevant organisations to explore if further action is required

9. When the adult guidelines are available, GAIN will be asked to issue the <16 and 16+ guidelines together. The paediatric guidelines will be clarified to show that they apply up to the 16th birthday and the adult guidelines will show that they apply from the 16th birthday.

10. SQS will coordinate the follow-up action outlined above, through relevant colleagues as appropriate.

Thank you for your support in taking this forward
Carolyn

From: McBride, Michael

Sent: 01 December 2008 18:01

To: Livingstone, Jim; Bradley, Martin; Morrow, Norman

Cc: Ferrin, Sean; McCormick, Andrew; McKee, Christine; 'McCarthy, Miriam'; Harper, Carolyn; Livingston, Heather; Donnelly, Martin; Scullion, Sean; Timoney, Mark; Taylor, Diane; Robinson, Philip; Porter, Nicola; Browne, Andrew; Mooney, Jennifer; Lawson, Elaine; Baird, Billy; Craughwell, Eva

Subject: RE: URGENT *** Submission re RQIA review into NPSA Safety Alert 22: Reducing the risk of hyponatraemia when administering intravenous fluids to children

Content.

Many thanks

Jim/Heather,

In respect of the summary of findings; para 4 and 6 in respect of clinical practice and training

Further to recent correspondence from the Belfast Trust and Professor Ian Young, can you please provide urgent clarification of current position following discussions with GAIN around concerns of potential vulnerabilities associated with having separate guidance for adults and children especially in circumstances where children are nursed on adults wards.

Heather I believe you were leading on this contact.

Dr Michael McBride
Chief Medical Officer
DHSSPS NI
Room C5.15
Castle Buildings
Stormont Estate
Upper Newtownards Road
BELFAST
BT4 3SQ

Tel: [REDACTED]
Email: Michael.McBride [REDACTED]

From: Livingstone, Jim

Sent: 01 December 2008 17:47

To: McBride, Michael; Bradley, Martin; Morrow, Norman

Cc: Ferrin, Sean; McCormick, Andrew; McKee, Christine; 'McCarthy, Miriam'; Harper, Carolyn; Livingston, Heather; Donnelly, Martin; Scullion, Sean; Timoney, Mark; Taylor, Diane; Robinson, Philip; Porter, Nicola; Browne, Andrew; Mooney, Jennifer; Lawson, Elaine; Baird, Billy; Craughwell, Eva

Subject: URGENT *** Submission re RQIA review into NPSA Safety Alert 22: Reducing the risk of hyponatraemia when administering intravenous fluids to children

Please see URGENT Submission attached on publication of RQIA report on Hyponatraemia requiring your clearance prior to submission to Minister.

Jim

Dr Jim Livingstone

Director of Safety, Quality and Standards

DHSSPS

Room C3.8

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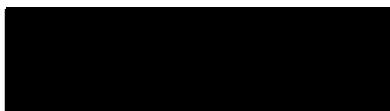
From: Livingstone, Jim
Sent: 07 January 2009 16:39
To: Campbell, Karen
Cc: Russell, George
Subject: FW: GAIN guidelines on hyponatraemia in adults
Karen

Before I respond to Carolyn please let me know if you are content for us to coordinate the agreed actions below as proposed.

Jim

Dr Jim Livingstone

*Director of Safety, Quality and Standards
DHSSPS
Room C3.8
Castle Buildings
Stormont
Belfast BT4 3SQ*



From: Harper, Carolyn
Sent: 07 January 2009 14:09
To: Livingstone, Jim
Subject: GAIN guidelines on hyponatraemia in adults

Jim, CMO, Heather and I met with Ian Young and Peter Maxwell pre-Christmas re the GAIN guidelines on hyponatraemia in adults. Following discussion it was agreed that GAIN would proceed with the guidelines for those aged over 16 and they hope to have those ready early in 2009.

It was also agreed that in support of medical staff managing 13-16 year olds admitted to adult wards:

- Trusts would be asked to admit children <16 to paediatric wards as much as possible, recognising that some hospitals will not have capacity to accommodate all <16 yr olds in paediatric wards
- Within adult wards, Trusts would be asked to cohort 13-16 year olds as much as possible, recognising that their clinical condition/requirements is the overriding priority re placement
- Undergrad medical training should include fluid prescribing in <16s as well as adults, emphasising the need to seek senior advice
- The medical school should be asked to consider ways in which to expose future F1s to fluid prescribing during work shadowing
- Induction for F1 doctors should include prescribing fluids in 13-16 year olds, emphasising the need to seek senior advice
- Senior advice should be readily available to any junior doctor seeking advice in prescribing fluids for those <16 as well as adults, whatever ward they may be in
- Clinical teams should review fluid prescribing routinely on randomly selected cases and on all near misses and adverse incidents relating to fluid prescription, particularly for those <16

Are you content for SQS to coordinate next steps re the agreed actions with secondary care etc, and liaise with GAIN re issue of the guidelines and handling the supporting action?

Carolyn