



SURGERY IN CHILDREN (INCLUDING INTERVENTIONAL PROCEDURES)

National Confidential Enquiry into Patient Outcome and Death (NCEPOD)

Site ID

SUPPLEMENT SHEET: NETWORKS

FOR EACH NETWORK IDENTIFIED:

(Where multiple networks are identified in question 9, please use these supplement sheets to answer questions 10 - 21 for each individual network)

10a. What is the network specialty? (Please tick one box only)

- All surgical specialties
- Paediatric general surgery
- Plastic surgery
- Gynaecology
- Paediatric anaesthesia
- Other (please specify)
- General surgery
- Ear, nose and throat
- Maxillo-facial surgery
- Orthopaedics
- Paediatric cardiology
- Urology
- Ophthalmology
- Neurosurgery
- Paediatric cardiac surgery

10a. Is this a formal or informal network? Please see definitions

- Formal
- Informal

11a. Does the network include children's anaesthesia?

- Yes
- No
- Unknown

11b. If NO, is there an anaesthetic clinical care network?

- Yes
- No
- Unknown

12. How many hospitals are included in the network?

13. What source of funding is there for the administrative functions of the network? (answers may be multiple)

- None
- Direct Primary Care Trust funding
- Other (please specify)
- Local contribution from each hospital
- Direct Strategic Health Authority Funding (SHA)

14. Is there a lead clinician/chair who has overall responsibility for managing the network?

- Yes
- No
- Unknown

15a. Does the network include the use of peripheral (satellite) outpatient clinics attended by clinicians from the tertiary centre?

- Yes
- No
- Unknown



15b. If YES, what local support is given?

- | | |
|---|--|
| <input type="checkbox"/> Administration (booking of patients) | <input type="checkbox"/> Nursing (and nurses or children's nurses) |
| <input type="checkbox"/> Medical | <input type="checkbox"/> Specialised equipment e.g. echocardiography |
| <input type="checkbox"/> Unknown | <input type="checkbox"/> Other (please specify) <input type="text"/> |

16. Does the network include operating lists undertaken by tertiary surgeons at peripheral (non tertiary) sites? Yes No Unknown

17a. Does the network include the provision of post operative community care? Yes No Unknown

17b. If YES, what provision is there?

- Direct telephone contact between GP services and the surgical team
- Direct telephone contact between patient/parent and surgical team
- Liaison Nurse
- Other (please specify)

18a. Does the network hold educational meetings? Yes No Unknown

18b. If YES, how frequently are they held each year? (please specify)

19a. Does the network have agreed policies for clinical care? Yes No Unknown

19b. If YES, what policies exist?

- | | |
|---|--|
| <input type="checkbox"/> Transfer of elective cases | <input type="checkbox"/> Transfer of emergency cases |
| <input type="checkbox"/> Management of the critically ill child | <input type="checkbox"/> Other (please specify) <input type="text"/> |

20a. Does the network hold multidisciplinary team (MDT) meetings to agree clinical management? Yes No Unknown

20b. If YES, how frequently are they held each year? (please specify)

20c. Are these limited to children with specific diseases? Yes No Unknown

20d. If YES, which? (please specify)

21a. Does the network hold audit and Morbidity & Mortality (M&M) meetings? Yes No Unknown

21b. If YES, how frequently are they held each year? (please specify)

Please complete the additional supplement sheets for each network included.

