

Stabilisation of the critically ill child: Stabilisation questionnaire

A. Introduction

What is this study about?

The aim of this study is to identify good practice and areas for improvement in the quality of care provided to children and young people who are critically ill and require stabilisation; and to review the impact of delivering that care on staff and parent carers.

Inclusions

Patients aged 0 to 16th birthday, who require stabilisation in any location (including the emergency department, on the general ward etc.) during a hospital admission.

Who should complete this questionnaire?

This questionnaire should be completed by the clinician who was responsible for the care of the patient at the time of stabilisation. Please do not include any patient identifiers in the free text boxes

Definitions

A list of definitions can be found here: <https://www.ncepod.org.uk/pdf/current/Stabilisation/Definitions.pdf>

Questions or help

If you have any queries about this study or this questionnaire, please contact: stabilisation@ncepod.org.uk or telephone 020 7251 9060.

CPD accreditation

Consultants who complete NCEPOD questionnaires make a valuable contribution to the investigation of patient care. Completion of questionnaires also provides an opportunity for consultants to review their clinical management and undertake a period of personal reflection. These activities have a continuing medical and professional development value for individual consultants. Consequently, NCEPOD recommends that consultants who complete NCEPOD questionnaires keep a record of this activity which can be included as evidence of internal/self directed Continuous Professional Development in their appraisal portfolio.

About NCEPOD

The National Confidential Enquiry into Patient Outcome and Death (NCEPOD) reviews healthcare practice by undertaking confidential studies, and makes recommendations to improve the quality of the delivery of care, for healthcare professionals and policymakers to implement. Data to inform the studies are collected from NHS hospitals and Independent sector hospitals across England, Wales, Northern Ireland and the Offshore Islands. NCEPOD are supported by a wide range of bodies and the Steering Group consists of members from the Medical Royal Colleges and Specialist Associations, as well as observers from The Coroners Society of England and Wales, and the Healthcare Quality Improvement Partnership (HQIP).

Impact of NCEPOD

Recommendations from NCEPOD reports have had an impact on many areas of healthcare including: Development of NICE Clinical Guidelines for Acute Kidney Injury (CG169), published 2013 – 'Adding Insult to Injury' (2009).

Development of ICS Standards for the care of adult patients with a temporary Tracheostomy, published 2014 – 'On the right trach?' (2014).

Development of guidelines from the British Society of Gastroenterology: diagnosis and management of acute lower gastrointestinal bleeding, published 2019 – 'Time to Get Control' (2015).

Development of the British Thoracic Society's Quality Standards for NIV, published 2018 – 'Inspiring Change' (2017).

Development of NHSE Children and young people's cancer service specification - 'On the Right Course?' (2018)

Development of the Centre for Perioperative Care Guideline for Perioperative Care for People with Diabetes Mellitus Undergoing Elective and Emergency Surgery, published 2021 - 'Highs and Lows' (2018)

Update to NICE 'Transition from children's to adults' services' Quality Standard (QS140), updated 2023 – 'The Inbetweeners' (2023)

Update to NICE 'Endometriosis: diagnosis and management' guideline (CG73), updated 2024 – 'A long and painful road' (2024)

Development of the GIRFT Children and Young People: Testicular torsion pathway, published 2024 – 'Twist and Shout' (2024)

This study was commissioned by The Healthcare Quality Improvement Partnership (HQIP) as

part of the Clinical Outcome Review Programme into Child Health.

1a. Grade of clinician completing the questionnaire

- ☐ Consultant
- ☐ Specialty and associate specialist (SAS)
- ☐ Senior Clinical Fellow
- ☐ Resident doctor/specialist trainee (ST6-8 or equivalent)
- ☐ Resident doctor/specialist trainee (ST3-5 or equivalent)
- ☐ Resident doctor (below ST3 or equivalent)
- ☐ Advanced clinical practitioner
- ☐ Specialist nurse (bands 7-9)
- ☐ Registered nurse (band 5-6)
- ☐ Unknown

If not listed above, please specify here...

1b. Specialty of clinician completing the questionnaire

- | | |
|---|---|
| ☐ Specialist paediatrician | ☐ General paediatrician |
| ☐ Anaesthetics | ☐ Paediatric critical care medicine |
| ☐ Critical care medicine | ☐ Critical care outreach |
| ☐ Paediatric emergency medicine | ☐ Emergency medicine |
| ☐ General medicine | ☐ Unknown |

If not listed above, please specify here...

2. Please use the box below to provide a brief summary of this case, adding any additional comments or information you feel relevant. You should be assured that this information is confidential. NCEPOD attaches great importance to this summary. Please give as much information as possible about the care of this patient.

C. Patient details

To be included in the study, the patient must have received stabilisation care during this admission. If this patient did not require stabilisation during this admission, please return this questionnaire to your Local Reporter (hand your assignment back) who will notify NCEPOD

1a. Age at admission:

 Years☐ Unknown

Value should be no more than 16

1b. Was the patient less than two years of age at admission?

☐ Yes ☐ No ☐ Unknown

1c. If answered "Yes" to [1b] then: Age in months

 Months☐ Unknown

Value should be no more than 23

1d. If answered "Yes" to [1b] then: Was the patient less than one month of age at admission

☐ Yes ☐ No ☐ Unknown

1e. If answered "Yes" to [1b] and "Yes" to [1d] then: Age in days

 Days☐ Unknown

Value should be no more than 31

2. Sex

☐ Male ☐ Female ☐ Other ☐ Unknown

3. Ethnicity

- ☐ White British/White - other
☐ Black/African/Caribbean/Black British
☐ Asian/Asian British (Indian, Pakistani, Bangladeshi, Chinese, other Asian)
☐ Mixed/Multiple ethnic groups
☐ Unknown

If not listed above, please specify here...

4a. Did the patient have any communication difficulties? (Please tick all that apply)

☐ Yes ☐ No ☐ Unknown

4b. If answered "Yes" to [4a] then: What were these? (Please tick all that apply)

- ☐ Neurodiversity - patient ☐ Neurodiversity - parent carer ☐ Language barrier
☐ Unable to answer

Please specify any additional options here...

5. Did the patient have any learning difficulties (e.g. dyslexia)?

Please see definitions: <https://www.ncepod.org.uk/pdf/current/Stabilisation/Definitions.pdf>

☐ Yes ☐ No ☐ Unknown

6. Did the patient have any learning disability (e.g. Down's syndrome)?

Please see definitions: <https://www.ncepod.org.uk/pdf/current/Stabilisation/Definitions.pdf>

- ☐ Yes ☐ No ☐ Unknown
-

7. Did the patient have any physical disability?

- ☐ Yes ☐ No ☐ Unknown
-

8. What was the diagnosis prior to stabilisation?

9a. Did the patient have any comorbidities?

- ☐ Yes ☐ No ☐ Unknown

9b. If answered "Yes" to [9a] then:

What were these? (Please tick all that apply)

- | | | |
|--|--------------------------------------|---|
| ☐ Cardiac | ☐ Respiratory | ☐ Neurological |
| ☐ Metabolic | ☐ Malignancy | ☐ Developmental difficulties |
| ☐ Mental health condition | ☐ Unknown | |

Please specify any additional options here...

10. Is this the first time the patient has required stabilisation prior to this admission?

- ☐ Yes ☐ No ☐ Unknown

D. Hospital details

1. What type of hospital is this? (Where the patient arrived)

- ☐ A stand alone tertiary paediatric centre
- ☐ A tertiary paediatric centre in a Trust/Health Board that also treats adults
- ☐ A University Teaching Hospital
- ☐ A District General Hospital
- ☐ Unknown

If not listed above, please specify here...

2a. Does this hospital have: (Please tick all that apply)

- | | |
|---|--|
| ☐ A paediatric intensive care unit (PICU) | ☐ An adult critical care (ICU) |
| ☐ A paediatric high dependency unit (PHDU) | ☐ An adult high dependency unit (HDU) |
| ☐ Other critical care area | ☐ None of the above |
| ☐ Unknown | |

2b. If answered "Other critical care area" to [2a] then: If other critical care area, please specify

E. Arrival and admission details

1. Was this patient:

- ☐ A patient who was unstable on arrival to the emergency department
- ☐ A patient who deteriorated in the emergency department
- ☐ An inpatient who deteriorated on the ward
- ☐ Unknown

2a. What was the date of arrival at this hospital?

☐ Unknown

2b. What was the time of arrival at this hospital?

☐ Unknown

3a. At initial assessment how was acuity defined using the Manchester Triage System (or equivalent e.g., local triage scale)?

<https://www.triagenet.net/classroom/>

- ☐ Red (1)
- ☐ Orange (2)
- ☐ Yellow (3)
- ☐ Green (4)
- ☐ Blue (5)
- ☐ Unknown

If not listed above, please specify here...

3b. If answered "Red (1)" to [3a] then:

Was the patient reviewed by a senior decision maker (ST4+) following triage?

- ☐ Yes
- ☐ No
- ☐ Unknown

4. Where was the patient first seen on arrival at this hospital?

- ☐ Paediatric emergency department in the resus room
- ☐ Paediatric emergency department any available bed
- ☐ Emergency department in the resus room
- ☐ Emergency department any available bed
- ☐ Children's assessment unit (CAU)
- ☐ Surgical admissions unit (SAU)
- ☐ Medical admissions unit (MAU)
- ☐ General paediatric surgical ward
- ☐ Specialist paediatric surgical ward
- ☐ General paediatric medical ward
- ☐ Specialist paediatric medical ward
- ☐ General adult surgical ward
- ☐ Specialist adult surgical ward
- ☐ General adult medical ward
- ☐ Specialist adult medical ward
- ☐ Unknown

If not listed above, please specify here...

5. Mode of arrival

- ☐ Self referral via the emergency department - brought in by ambulance
- ☐ Self referral via the emergency department - brought in by parent/carer
- ☐ 111 referral
- ☐ GP referral
- ☐ Transfer from another hospital
- ☐ Unknown

If not listed above, please specify here...

6a. If answered "An inpatient who deteriorated on the ward" to [1] then:

Date of admission

☐ Unknown

6b. If answered "An inpatient who deteriorated on the ward" to [1] then:

Time of admission

☐ Unknown

7. If answered "An inpatient who deteriorated on the ward" to [1] then:

Where was the patient first admitted?

- | | |
|---|--|
| ☐ Children's assessment unit (CAU) | ☐ Surgical admissions unit (SAU) |
| ☐ Medical admissions unit (MAU) | ☐ General paediatric surgical ward |
| ☐ Specialist paediatric surgical ward | ☐ General paediatric medical ward |
| ☐ Specialist paediatric medical ward | ☐ General adult surgical ward |
| ☐ Specialist adult surgical ward | ☐ General adult medical ward |
| ☐ Specialist adult medical ward | ☐ Theatre |
| ☐ PHDU/HDU | ☐ ICU/PICU |
| ☐ Not applicable - not admitted | ☐ Unknown |

If not listed above, please specify here...

8. If answered "An inpatient who deteriorated on the ward" to [1] then:

Was the patient reviewed by a consultant within the 12 hours prior to deterioration?

- ☐ Yes ☐ No ☐ Unknown

F. Escalation of care

1a. Was an early warning score used to escalate care?

☐ Yes ☐ No ☐ Unknown

**1b. If answered "Yes" to [1a] then:
What score was used?**

☐ NPEWS ☐ PEWS ☐ Local early warning score
☐ Unknown

1c. Was Martha's Rule (or equivalent) used to escalate care?

☐ Yes ☐ No ☐ Unknown

2a. Was the patient discussed with critical care (this could include PICU/ICU; PCCOT/CCOT, transport team, neonatologist, critical care colleague in another organisation): (please tick all that apply)

☐ Prior to stabilisation ☐ During stabilisation ☐ Once the patient was stable
☐ No ☐ Unknown

2b. If answered "Prior to stabilisation", "During stabilisation" or "Once the patient was stable" to [2a] then:

Were there discussions with: (please tick all that apply)

☐ Paediatric intensivist - onsite ☐ Paediatric intensivist - off-site
☐ Adult intensivist - onsite ☐ Adult intensivist - off-site
☐ Paediatric critical care transport team ☐ None of the above
☐ Unknown

Please specify any additional options here...

2c. If answered "Prior to stabilisation", "During stabilisation" or "Once the patient was stable" to [2a] then:

Was it easy to access this advice?

☐ Yes ☐ No ☐ Unknown

2d. If answered "Prior to stabilisation", "During stabilisation" or "Once the patient was stable" to [2a] then:

Did a member of the critical care team come to review the patient?

☐ Yes ☐ No ☐ Unknown

**2e. If answered "No" to [2a] then:
If not, why not?**

G. The stabilisation process

1. Was a '2222 (medical emergency call)' initiated for this patient?

- ☐ Yes ☐ No ☐ Unknown

2. Where did the patients condition deteriorate?

- ☐ Deteriorated prior to arrival
☐ Paediatric emergency department in the resus room
☐ Paediatric emergency department any available bed
☐ Adult emergency department in the resus room
☐ Adult emergency any available bed
☐ Surgical admissions unit (SAU)
☐ General paediatric surgical ward
☐ General paediatric medical ward
☐ General adult surgical ward
☐ General adult medical ward
☐ Unknown
- ☐ Children's assessment unit (CAU)
☐ Medical admissions unit (MAU)
☐ Specialist paediatric surgical ward
☐ Specialist paediatric medical ward
☐ Specialist adult surgical ward
☐ Specialist adult medical ward

If not listed above, please specify here...

3. Where did the initial stabilisation of the patient taken place?

- ☐ Paediatric emergency department in the resus room
☐ Paediatric emergency department any available bed
☐ Adult emergency department in the resus room
☐ Adult emergency any available bed
☐ Surgical admissions unit (SAU)
☐ General paediatric surgical ward
☐ General paediatric medical ward
☐ General adult surgical ward
☐ General adult medical ward
☐ PHDU/HDU
☐ Unknown
- ☐ Children's assessment unit (CAU)
☐ Medical admissions unit (MAU)
☐ Specialist paediatric surgical ward
☐ Specialist paediatric medical ward
☐ Specialist adult surgical ward
☐ Specialist adult medical ward
☐ Theatre

If not listed above, please specify here...

4a. Which specialty clinicians were involved with the IMMEDIATE stabilisation of the patient? (Please tick all that apply)

- ☐ Paediatric emergency medicine
☐ General paediatric medicine
☐ Adult intensive care medicine
☐ Medicine
☐ Anaesthetics
☐ Critical care outreach nurse - paediatric trained
☐ Critical care outreach nurse - adult trained
☐ Unknown
- ☐ Emergency medicine
☐ Paediatric intensive care medicine
☐ Surgery
☐ Anaesthetist with regular paediatric sessions
☐ Operating department practitioner

Please specify any additional options here...

4b. If answered "Paediatric emergency medicine" to [4a] then:

If PAEDIATRIC EMERGENCY MEDICINE, please specify the grade(s) (Please tick all that apply)

- ☐ Consultant
- ☐ Specialty and associate specialist grade (SAS)
- ☐ Senior Clinical Fellow
- ☐ Resident doctor/specialist trainee (ST6-8 or equivalent)
- ☐ Resident doctor/specialist trainee (ST3-5 or equivalent)
- ☐ Resident doctor (below ST3 or equivalent)
- ☐ Advanced clinical practitioner
- ☐ Specialist nurse (bands 7-9)
- ☐ Registered nurse (band 5-6)
- ☐ Unknown

Please specify any additional options here...

4c. If answered "Emergency medicine" to [4a] then:

If EMERGENCY MEDICINE, please specify the grade(s) (Answers may be multiple)

- ☐ Consultant
- ☐ Specialty and associate specialist grade (SAS)
- ☐ Senior Clinical Fellow
- ☐ Resident doctor/specialist trainee (ST6-8 or equivalent)
- ☐ Resident doctor/specialist trainee (ST3-5 or equivalent)
- ☐ Resident doctor (below ST3 or equivalent)
- ☐ Advanced clinical practitioner
- ☐ Specialist nurse (bands 7-9)
- ☐ Registered nurse (band 5-6)
- ☐ Unknown

Please specify any additional options here...

4d. If answered "General paediatric medicine" to [4a] then:

If GENERAL PAEDIATRIC MEDICINE, please specify the grade(s) (Please tick all that apply)

- ☐ Consultant
- ☐ Specialty and associate specialist grade (SAS)
- ☐ Senior Clinical Fellow
- ☐ Resident doctor/specialist trainee (ST6-8 or equivalent)
- ☐ Resident doctor/specialist trainee (ST3-5 or equivalent)
- ☐ Resident doctor (below ST3 or equivalent)
- ☐ Advanced clinical practitioner
- ☐ Specialist nurse (bands 7-9)
- ☐ Registered nurse (band 5-6)
- ☐ Unknown

Please specify any additional options here...

4e. If answered "Paediatric intensive care medicine" to [4a] then:

If PAEDIATRIC INTENSIVE CARE MEDICINE, please specify the grade(s) (Please tick all that apply)

- ☐ Consultant
- ☐ Specialty and associate specialist grade (SAS)
- ☐ Senior Clinical Fellow
- ☐ Resident doctor/specialist trainee (ST6-8 or equivalent)
- ☐ Resident doctor/specialist trainee (ST3-5 or equivalent)
- ☐ Resident doctor (below ST3 or equivalent)
- ☐ Advanced clinical practitioner
- ☐ Specialist nurse (bands 7-9)
- ☐ Registered nurse (band 5-6)
- ☐ Unknown

Please specify any additional options here...

4f. If answered "Adult intensive care medicine" to [4a] then:

If ADULT INTENSIVE CARE MEDICINE, please specify the grade(s) (Please tick all that apply)

- ☐ Consultant
- ☐ Specialty and associate specialist grade (SAS)
- ☐ Senior Clinical Fellow
- ☐ Resident doctor/specialist trainee (ST6-8 or equivalent)
- ☐ Resident doctor/specialist trainee (ST3-5 or equivalent)
- ☐ Resident doctor (below ST3 or equivalent)
- ☐ Advanced clinical practitioner
- ☐ Specialist nurse (bands 7-9)
- ☐ Registered nurse (band 5-6)
- ☐ Unknown

Please specify any additional options here...

4g. If answered "Surgery" to [4a] then:

If SURGERY, please specify the grade(s) (Please tick all that apply)

- ☐ Consultant
- ☐ Specialty and associate specialist grade (SAS)
- ☐ Senior Clinical Fellow
- ☐ Resident doctor/specialist trainee (ST6-8 or equivalent)
- ☐ Resident doctor/specialist trainee (ST3-5 or equivalent)
- ☐ Resident doctor (below ST3 or equivalent)
- ☐ Advanced clinical practitioner
- ☐ Specialist nurse (bands 7-9)
- ☐ Registered nurse (band 5-6)
- ☐ Unknown

Please specify any additional options here...

4h. If answered "Medicine" to [4a] then:

If MEDICINE, please specify the grade(s) (Please tick all that apply)

- ☐ Consultant
- ☐ Specialty and associate specialist grade (SAS)
- ☐ Senior Clinical Fellow
- ☐ Resident doctor/specialist trainee (ST6-8 or equivalent)
- ☐ Resident doctor/specialist trainee (ST3-5 or equivalent)
- ☐ Resident doctor (below ST3 or equivalent)
- ☐ Advanced clinical practitioner
- ☐ Specialist nurse (bands 7-9)
- ☐ Registered nurse (band 5-6)
- ☐ Unknown

Please specify any additional options here...

4i. If answered "Anaesthetist with regular paediatric sessions" to [4a] then:

If ANAESTHETIST WITH REGULAR PAEDIATRIC SESSIONS, please specify the grade(s) (Please tick all that apply)

- ☐ Consultant
- ☐ Specialty and associate specialist grade (SAS)
- ☐ Senior Clinical Fellow
- ☐ Resident doctor/specialist trainee (ST6-8 or equivalent)
- ☐ Resident doctor/specialist trainee (ST3-5 or equivalent)
- ☐ Resident doctor (below ST3 or equivalent)
- ☐ Unknown

Please specify any additional options here...

4j. If answered "Anaesthetics" to [4a] then:

If ANAESTHETICS, please specify the grade(s) (Please tick all that apply)

- ☐ Consultant
- ☐ Specialty and associate specialist grade (SAS)
- ☐ Senior Clinical Fellow
- ☐ Resident doctor/specialist trainee (ST6-8 or equivalent)
- ☐ Resident doctor/specialist trainee (ST3-5 or equivalent)
- ☐ Resident doctor (below ST3 or equivalent)
- ☐ Unknown

Please specify any additional options here...

5a. Which specialty clinicians were involved with the ONGOING stabilisation of the patient? (Please tick all that apply)

- | | |
|---|--|
| ☐ Paediatric emergency medicine | ☐ Emergency medicine |
| ☐ General paediatric medicine | ☐ Paediatric intensive care medicine |
| ☐ Adult intensive care medicine | ☐ Surgery |
| ☐ Medicine | ☐ Anaesthetist with regular paediatric sessions |
| ☐ Anaesthetics | ☐ Critical care outreach nurse - paediatric trained |
| ☐ Critical care outreach nurse - adult trained | ☐ Operating department practitioner |
| ☐ Unable to answer | |

Please specify any additional options here...

5b. If answered "Paediatric emergency medicine" to [5a] then:

If PAEDIATRIC EMERGENCY MEDICINE, please specify the grade(s) (Please tick all that apply)

- ☐ Consultant
- ☐ Specialty and associate specialist grade (SAS)
- ☐ Senior Clinical Fellow
- ☐ Resident doctor/specialist trainee (ST6-8 or equivalent)
- ☐ Resident doctor/specialist trainee (ST3-5 or equivalent)
- ☐ Resident doctor (below ST3 or equivalent)
- ☐ Advanced clinical practitioner
- ☐ Specialist nurse (bands 7-9)
- ☐ Registered nurse (band 5-6)
- ☐ Unknown

5c. If answered "Emergency medicine" to [5a] then:

If EMERGENCY MEDICINE, please specify the grade(s) (Answers may be multiple)

- ☐ Consultant
- ☐ Specialty and associate specialist grade (SAS)
- ☐ Senior Clinical Fellow
- ☐ Resident doctor/specialist trainee (ST6-8 or equivalent)
- ☐ Resident doctor/specialist trainee (ST3-5 or equivalent)
- ☐ Resident doctor (below ST3 or equivalent)
- ☐ Advanced clinical practitioner
- ☐ Specialist nurse (bands 7-9)
- ☐ Registered nurse (band 5-6)
- ☐ Unknown

Please specify any additional options here...

5d. If answered "General paediatric medicine" to [5a] then:

If GENERAL PAEDIATRIC MEDICINE, please specify the grade(s) (Please tick all that apply)

- ☐ Consultant
- ☐ Specialty and associate specialist grade (SAS)
- ☐ Senior Clinical Fellow
- ☐ Resident doctor/specialist trainee (ST6-8 or equivalent)
- ☐ Resident doctor/specialist trainee (ST3-5 or equivalent)
- ☐ Resident doctor (below ST3 or equivalent)
- ☐ Advanced clinical practitioner
- ☐ Specialist nurse (bands 7-9)
- ☐ Registered nurse (band 5-6)
- ☐ Unknown

Please specify any additional options here...

5e. If answered "Paediatric intensive care medicine" to [5a] then:

If PAEDIATRIC INTENSIVE CARE MEDICINE, please specify the grade(s) (Please tick all that apply)

- ☐ Consultant
- ☐ Specialty and associate specialist grade (SAS)
- ☐ Senior Clinical Fellow
- ☐ Resident doctor/specialist trainee (ST6-8 or equivalent)
- ☐ Resident doctor/specialist trainee (ST3-5 or equivalent)
- ☐ Resident doctor (below ST3 or equivalent)
- ☐ Advanced clinical practitioner
- ☐ Specialist nurse (bands 7-9)
- ☐ Registered nurse (band 5-6)
- ☐ Unknown

Please specify any additional options here...

5f. If answered "Adult intensive care medicine" to [5a] then:

If ADULT INTENSIVE CARE MEDICINE, please specify the grade(s) (Please tick all that apply)

- ☐ Consultant
- ☐ Specialty and associate specialist grade (SAS)
- ☐ Senior Clinical Fellow
- ☐ Resident doctor/specialist trainee (ST6-8 or equivalent)
- ☐ Resident doctor/specialist trainee (ST3-5 or equivalent)
- ☐ Resident doctor (below ST3 or equivalent)
- ☐ Advanced clinical practitioner
- ☐ Specialist nurse (bands 7-9)
- ☐ Registered nurse (band 5-6)
- ☐ Unknown

Please specify any additional options here...

5g. If answered "Surgery" to [5a] then:

If SURGERY, please specify the grade(s) (Please tick all that apply)

- ☐ Consultant
- ☐ Specialty and associate specialist grade (SAS)
- ☐ Senior Clinical Fellow
- ☐ Resident doctor/specialist trainee (ST6-8 or equivalent)
- ☐ Resident doctor/specialist trainee (ST3-5 or equivalent)
- ☐ Resident doctor (below ST3 or equivalent)
- ☐ Advanced clinical practitioner
- ☐ Specialist nurse (bands 7-9)
- ☐ Registered nurse (band 5-6)
- ☐ Unknown

Please specify any additional options here...

5h. If answered "Medicine" to [5a] then:

If MEDICINE, please specify the grade(s) (Please tick all that apply)

- ☐ Consultant
- ☐ Specialty and associate specialist grade (SAS)
- ☐ Senior Clinical Fellow
- ☐ Resident doctor/specialist trainee (ST6-8 or equivalent)
- ☐ Resident doctor/specialist trainee (ST3-5 or equivalent)
- ☐ Resident doctor (below ST3 or equivalent)
- ☐ Advanced clinical practitioner
- ☐ Specialist nurse (bands 7-9)
- ☐ Registered nurse (band 5-6)
- ☐ Unknown

Please specify any additional options here...

5i. If answered "Anaesthetist with regular paediatric sessions" to [5a] then:

If ANAESTHETIST WITH REGULAR PAEDIATRIC SESSIONS, please specify the grade(s) (Please tick all that apply)

- ☐ Consultant
- ☐ Specialty and associate specialist grade (SAS)
- ☐ Senior Clinical Fellow
- ☐ Resident doctor/specialist trainee (ST6-8 or equivalent)
- ☐ Resident doctor/specialist trainee (ST3-5 or equivalent)
- ☐ Resident doctor (below ST3 or equivalent)
- ☐ Unknown

Please specify any additional options here...

5j. If answered "Anaesthetics" to [5a] then:

If ANAESTHETICS, please specify the grade(s) (Please tick all that apply)

- ☐ Consultant
- ☐ Specialty and associate specialist grade (SAS)
- ☐ Senior Clinical Fellow
- ☐ Resident doctor/specialist trainee (ST6-8 or equivalent)
- ☐ Resident doctor/specialist trainee (ST3-5 or equivalent)
- ☐ Resident doctor (below ST3 or equivalent)
- ☐ Unknown

Please specify any additional options here...

6a. With the benefit of hindsight, were the appropriate people involved in the stabilisation of this patient?

- ☐ Yes ☐ No ☐ Unknown

6b. If answered "No" to [6a] then:

Please give further detail as to who should have been involved

7a. Did the child have an advanced care plan in place?

☐ Yes

☐ No

☐ Unknown

7b. If answered "Yes" to [7a] then:

Was this followed?

☐ Yes

☐ No

☐ Unknown

8. Was there a discussion with parents/carers regarding ceiling of treatment?

☐ Yes

☐ No

☐ Unknown

☐ Not applicable

9a. With the benefit of hindsight, were there any missed opportunities to recognise the condition of the patient was deteriorating?

☐ Yes

☐ No

☐ Unknown

☐ Not applicable

9b. If answered "Yes" to [9a] then:

Please give further details

Airway & breathing**1. What respiratory support was used? (Please tick all that apply)**

- | | |
|---|--|
| ☐ No respiratory support required | ☐ Oxygen via nasal cannulae |
| ☐ Oxygen via mask | ☐ High flow humidified oxygen |
| ☐ Supraglottic airway (e.g. Laryngeal mask airway) | |
| ☐ BiPAP | ☐ CPAP |
| ☐ Bag and mask | ☐ Tracheostomy |
| ☐ Intubation | ☐ Unknown |

Intubation

2a. Did the patient require intubation?

- ☐ Yes
 ☐ No
 ☐ Unknown

**2b. If answered "Yes" to [2a] then:
Was intubation performed?**

- ☐ Yes
 ☐ No
 ☐ Unknown

**2c. If answered "Yes" to [2a] and "Yes" to [2b] then:
Was intubation successful?**

- ☐ Yes
 ☐ No
 ☐ Unknown

**2d. If answered "Yes" to [2a] and "Yes" to [2b] then:
Was the patient moved to a different area of care for the intubation?**

- ☐ Yes
 ☐ No
 ☐ Unknown

**2e. If answered "Yes" to [2a] and "Yes" to [2b] and "Yes" to [2d] then:
Where was the patient moved to?**

- | | |
|---|--|
| ☐ Paediatric emergency department | ☐ Emergency department |
| ☐ Paediatric intensive care unit | ☐ Intensive care unit |
| ☐ Paediatric high dependency unit | ☐ High dependency unit |
| ☐ Theatre | ☐ Paediatric ward |
| ☐ Adult ward | ☐ Other |
| ☐ Unknown | |

**2f. If answered "Yes" to [2a] and "Yes" to [2b] then:
Was the location of the intubation appropriate?**

- ☐ Yes
 ☐ No
 ☐ Unknown

If intubation successful

**2g. If answered "Yes" to [2a] and "Yes" to [2b] and "Yes" to [2c] then:
Which grade of clinician intubated the patient**

- ☐ Consultant
☐ Specialty and associate specialist grade (SAS)
☐ Senior Clinical Fellow
☐ Resident doctor/specialist trainee (ST6-8 or equivalent)
☐ Resident doctor/specialist trainee (ST3-5 or equivalent)
☐ Unknown

If not listed above, please specify here...

**2h. If answered "Yes" to [2a] and "Yes" to [2b] and "Yes" to [2c] then:
Which specialty clinician intubated the patient?**

- | | |
|---|---|
| ☐ Paediatric emergency medicine | ☐ Emergency medicine |
| ☐ General paediatric medicine | ☐ Paediatric intensive care medicine |
| ☐ Adult intensive care medicine | ☐ Anaesthetist with regular paediatric sessions |
| ☐ Anaesthetics | ☐ Operating department practitioner |
| ☐ Unknown | |

If not listed above, please specify here...

**2i. If answered "Yes" to [2a] and "Yes" to [2b] and "Yes" to [2c] then:
Was an appropriate size tube available?**

- ☐ Yes ☐ No ☐ Unknown

**2j. If answered "Yes" to [2a] and "Yes" to [2b] and "Yes" to [2c] and "No" to [2i] then:
If NO, why not?**

**2k. If answered "Yes" to [2a] and "Yes" to [2b] and "Yes" to [2c] then:
Was the tube:**

- ☐ Cuffed ☐ Uncuffed ☐ Unknown

**2l. If answered "Yes" to [2a] and "Yes" to [2b] and "Yes" to [2c] then:
If intubation was performed, were there any failed intubation attempts prior to
successful intubation?**

- ☐ Yes ☐ No ☐ Unknown

If intubation required but not performed

**2m. If answered "Yes" to [2a] and "No" to [2b] then:
If intubation was required but not performed, why not (please give further detail)**

If intubation was performed but not successful

**2n. If answered "Yes" to [2a] and "Yes" to [2b] and "No" to [2c] then:
If intubation performed but not successful, which specialty clinician attempted the
intubation? (Please tick all that apply)**

- | | |
|--|--|
| ☐ Paediatric emergency medicine | ☐ Emergency medicine |
| ☐ Paediatric medicine | ☐ Paediatric intensive care medicine |
| ☐ Adult intensive care medicine | ☐ Anaesthetist with regular paediatric sessions |
| ☐ Anaesthetics | ☐ Operating department practitioner |
| ☐ Unknown | |

Please specify any additional options here...

2o. If answered "Yes" to [2a] and "Yes" to [2b] and "No" to [2c] and "Paediatric emergency medicine" to [2n] then:

If PAEDIATRIC EMERGENCY MEDICINE, please specify the grade(s) (Please tick all that apply)

- ☐ Consultant
- ☐ Specialty and associate specialist (SAS)
- ☐ Senior Clinical Fellow
- ☐ Resident doctor/specialist trainee (ST6-8 or equivalent)
- ☐ Resident doctor/specialist trainee (ST3-5 or equivalent)
- ☐ Unknown

Please specify any additional options here...

2p. If answered "Yes" to [2a] and "Yes" to [2b] and "No" to [2c] and "Emergency medicine" to [2n] then:

If EMERGENCY MEDICINE, please specify the grade(s) (Please tick all that apply)

- ☐ Consultant
- ☐ Specialty and associate specialist (SAS)
- ☐ Senior Clinical Fellow
- ☐ Resident doctor/specialist trainee (ST6-8 or equivalent)
- ☐ Resident doctor/specialist trainee (ST3-5 or equivalent)
- ☐ Unknown

Please specify any additional options here...

2q. If answered "Yes" to [2a] and "Yes" to [2b] and "No" to [2c] and "Paediatric medicine" to [2n] then:

If PAEDIATRIC GENERAL MEDICINE, please specify the grade(s) (Please tick all that apply)

- ☐ Consultant
- ☐ Specialty and associate specialist (SAS)
- ☐ Senior Clinical Fellow
- ☐ Resident doctor/specialist trainee (ST6-8 or equivalent)
- ☐ Resident doctor/specialist trainee (ST3-5 or equivalent)
- ☐ Unknown

Please specify any additional options here...

2r. If answered "Yes" to [2a] and "Yes" to [2b] and "No" to [2c] and "Paediatric intensive care medicine" to [2n] then:

If PAEDIATRIC INTENSIVE CARE MEDICINE, please specify the grade(s) (Please tick all that apply)

- ☐ Consultant
- ☐ Specialty and associate specialist (SAS)
- ☐ Senior Clinical Fellow
- ☐ Resident doctor/specialist trainee (ST6-8 or equivalent)
- ☐ Resident doctor/specialist trainee (ST3-5 or equivalent)
- ☐ Unknown

Please specify any additional options here...

2s. If answered "Yes" to [2a] and "Yes" to [2b] and "No" to [2c] and "Adult intensive care medicine" to [2n] then:

If INTENSIVE CARE MEDICINE, please specify the grade(s) (Please tick all that apply)

- ☐ Consultant
- ☐ Specialty and associate specialist (SAS)
- ☐ Senior Clinical Fellow
- ☐ Resident doctor/specialist trainee (ST6-8 or equivalent)
- ☐ Resident doctor/specialist trainee (ST3-5 or equivalent)
- ☐ Unknown

2t. If answered "Yes" to [2a] and "Yes" to [2b] and "No" to [2c] and "Anaesthetist with regular paediatric sessions" to [2n] then:

If ANAESTHETIST WITH REGULAR PAEDIATRIC SESSIONS, please specify the grade(s) (Please tick all that apply)

- ☐ Consultant
- ☐ Specialty and associate specialist (SAS)
- ☐ Senior Clinical Fellow
- ☐ Resident doctor/specialist trainee (ST6-8 or equivalent)
- ☐ Resident doctor/specialist trainee (ST3-5 or equivalent)
- ☐ Unknown

Please specify any additional options here...

2u. If answered "Yes" to [2a] and "Yes" to [2b] and "No" to [2c] and "Anaesthetics" to [2n] then:

If ANAESTHETICS, please specify the grade(s) (Please tick all that apply)

- ☐ Consultant
- ☐ Specialty and associate specialist (SAS)
- ☐ Senior Clinical Fellow
- ☐ Resident doctor/specialist trainee (ST6-8 or equivalent)
- ☐ Resident doctor/specialist trainee (ST3-5 or equivalent)
- ☐ Unknown

Please specify any additional options here...

2v. If answered "Yes" to [2a] and "Yes" to [2b] and "No" to [2c] then:

Was an appropriate size tube available?

- ☐ Yes ☐ No ☐ Unknown

2w. If answered "Yes" to [2a] and "Yes" to [2b] and "No" to [2c] and "No" to [2v] then:

If NO, why not?

2x. If answered "Yes" to [2a] and "Yes" to [2b] and "No" to [2c] then:

If intubation was attempted but not successful, please give any further details

3. Prior to deterioration was central access in situ?

- ☐ Yes ☐ No ☐ Unknown

4a. Was intravenous (IV) or intraosseous (IO) access obtained?

- ☐ Yes ☐ No ☐ Unknown

4b. If answered "Yes" to [4a] then:

How many lines were put in place? (Please tick all that apply)

- ☐ Intraosseous access ☐ Peripheral IV x1 ☐ Peripheral IV x2 ☐ Peripheral IV 3+
☐ Central line ☐ Unknown

Please specify any additional options here...

4c. If answered "No" to [4a] then:

Were attempts made to insert a line?

- ☐ Yes ☐ No ☐ Unknown

4d. If answered "No" to [4a] and "Yes" to [4c] then:

Did this delay transfer to critical care?

- ☐ Yes ☐ No
☐ Unknown ☐ Not applicable - not transferred to critical care

5a. Did the patient receive CPR?

- ☐ Yes ☐ No ☐ Unknown

5b. If answered "Yes" to [5a] then:

Which specialty clinicians provided this? (Please tick all that apply)

- ☐ Paediatric emergency medicine ☐ Emergency medicine
☐ General paediatric medicine ☐ Paediatric intensive care medicine
☐ Adult intensive care medicine ☐ Surgery
☐ Medicine ☐ Anaesthetist with regular paediatric sessions
☐ Anaesthetics
☐ Critical care outreach nurse - paediatric trained
☐ Critical care outreach nurse - adult trained ☐ Operating department practitioner
☐ Unknown

Please specify any additional options here...

5c. If answered "Yes" to [5a] and "Paediatric emergency medicine" to [5b] then:

If PAEDIATRIC EMERGENCY MEDICINE, please specify the grade(s) (Please tick all that apply)

- ☐ Consultant
☐ Specialty and associate specialist grade (SAS)
☐ Senior Clinical Fellow
☐ Resident doctor/specialist trainee (ST6-8 or equivalent)
☐ Resident doctor/specialist trainee (ST3-5 or equivalent)
☐ Resident doctor (below ST3 or equivalent)
☐ Advanced clinical practitioner
☐ Specialist nurse (bands 7-9)
☐ Registered nurse (band 5-6)
☐ Unknown

Please specify any additional options here...

5d. If answered "Yes" to [5a] and "Emergency medicine" to [5b] then:

If EMERGENCY MEDICINE, please specify the grade(s) (Please tick all that apply)

- ☐ Consultant
- ☐ Specialty and associate specialist grade (SAS)
- ☐ Senior Clinical Fellow
- ☐ Resident doctor/specialist trainee (ST6-8 or equivalent)
- ☐ Resident doctor/specialist trainee (ST3-5 or equivalent)
- ☐ Resident doctor (below ST3 or equivalent)
- ☐ Advanced clinical practitioner
- ☐ Specialist nurse (bands 7-9)
- ☐ Registered nurse (band 5-6)
- ☐ Unknown

Please specify any additional options here...

5e. If answered "Yes" to [5a] and "General paediatric medicine" to [5b] then:

If GENERAL PAEDIATRIC MEDICINE, please specify the grade(s) (Please tick all that apply)

- ☐ Consultant
- ☐ Specialty and associate specialist grade (SAS)
- ☐ Senior Clinical Fellow
- ☐ Resident doctor/specialist trainee (ST6-8 or equivalent)
- ☐ Resident doctor/specialist trainee (ST3-5 or equivalent)
- ☐ Resident doctor (below ST3 or equivalent)
- ☐ Advanced clinical practitioner
- ☐ Specialist nurse (bands 7-9)
- ☐ Registered nurse (band 5-6)
- ☐ Unknown

Please specify any additional options here...

5f. If answered "Yes" to [5a] and "Paediatric intensive care medicine" to [5b] then:

If PAEDIATRIC INTENSIVE CARE MEDICINE, please specify the grade(s) (Please tick all that apply)

- ☐ Consultant
- ☐ Specialty and associate specialist grade (SAS)
- ☐ Senior Clinical Fellow
- ☐ Resident doctor/specialist trainee (ST6-8 or equivalent)
- ☐ Resident doctor/specialist trainee (ST3-5 or equivalent)
- ☐ Resident doctor (below ST3 or equivalent)
- ☐ Advanced clinical practitioner
- ☐ Specialist nurse (bands 7-9)
- ☐ Registered nurse (band 5-6)
- ☐ Unknown

Please specify any additional options here...

**5g. If answered "Yes" to [5a] and "Adult intensive care medicine" to [5b] then:
If INTENSIVE CARE MEDICINE, please specify the grade(s) (Please tick all that apply)**

- ☐ Consultant
- ☐ Specialty and associate specialist grade (SAS)
- ☐ Senior Clinical Fellow
- ☐ Resident doctor/specialist trainee (ST6-8 or equivalent)
- ☐ Resident doctor/specialist trainee (ST3-5 or equivalent)
- ☐ Resident doctor (below ST3 or equivalent)
- ☐ Advanced clinical practitioner
- ☐ Specialist nurse (bands 7-9)
- ☐ Registered nurse (band 5-6)
- ☐ Unknown

Please specify any additional options here...

**5h. If answered "Yes" to [5a] and "Surgery" to [5b] then:
If SURGERY, please specify the grade(s) (Please tick all that apply)**

- ☐ Consultant
- ☐ Specialty and associate specialist grade (SAS)
- ☐ Senior Clinical Fellow
- ☐ Resident doctor/specialist trainee (ST6-8 or equivalent)
- ☐ Resident doctor/specialist trainee (ST3-5 or equivalent)
- ☐ Resident doctor (below ST3 or equivalent)
- ☐ Advanced clinical practitioner
- ☐ Specialist nurse (bands 7-9)
- ☐ Registered nurse (band 5-6)
- ☐ Unknown

Please specify any additional options here...

**5i. If answered "Yes" to [5a] and "Medicine" to [5b] then:
If MEDICINE, please specify the grade(s) (Please tick all that apply)**

- ☐ Consultant
- ☐ Specialty and associate specialist grade (SAS)
- ☐ Senior Clinical Fellow
- ☐ Resident doctor/specialist trainee (ST6-8 or equivalent)
- ☐ Resident doctor/specialist trainee (ST3-5 or equivalent)
- ☐ Resident doctor (below ST3 or equivalent)
- ☐ Advanced clinical practitioner
- ☐ Specialist nurse (bands 7-9)
- ☐ Registered nurse (band 5-6)
- ☐ Unknown

Please specify any additional options here...

5j. If answered "Yes" to [5a] and "Anaesthetist with regular paediatric sessions" to [5b] then:

If ANAESTHETIST WITH REGULAR PAEDIATRIC SESSIONS, please specify the grade(s) (Please tick all that apply)

- ☐ Consultant
- ☐ Specialty and associate specialist grade (SAS)
- ☐ Senior Clinical Fellow
- ☐ Resident doctor/specialist trainee (ST6-8 or equivalent)
- ☐ Resident doctor/specialist trainee (ST3-5 or equivalent)
- ☐ Resident doctor (below ST3 or equivalent)
- ☐ Unknown

Please specify any additional options here...

5k. If answered "Yes" to [5a] and "Anaesthetics" to [5b] then:

If ANAESTHETICS, please specify the grade(s) (Please tick all that apply)

- ☐ Consultant
- ☐ Specialty and associate specialist grade (SAS)
- ☐ Senior Clinical Fellow
- ☐ Resident doctor/specialist trainee (ST6-8 or equivalent)
- ☐ Resident doctor/specialist trainee (ST3-5 or equivalent)
- ☐ Resident doctor (below ST3 or equivalent)
- ☐ Unknown

Please specify any additional options here...

6a. Did the patient receive vasoactive infusions?

- ☐ Yes ☐ No ☐ Unknown

6b. If answered "Yes" to [6a] then:

Were these delivered: (please tick all that apply)

- ☐ Peripherally ☐ Centrally ☐ Unknown

Please specify any additional options here...

6c. If answered "No" to [6a] then:

If NO, why not?

7a. Did the patient require fluid resuscitation?

- ☐ Yes ☐ No ☐ Unknown

**7b. If answered "Yes" to [7a] then:
How much?**

- | | | | |
|--------------------------------|---------------------------------|--------------------------------|--------------------------------|
| ☐ 10mls/kg | ☐ 20mls/kg | ☐ 30mls/kg | ☐ 40mls/kg |
| ☐ 50mls/kg | ☐ >50mls/kg | ☐ None | ☐ Unknown |

**7c. If answered "Yes" to [7a] then:
Was electrolyte/glucose correction given?**

- | | | |
|---------------------------|--------------------------|-------------------------------|
| ☐ Yes | ☐ No | ☐ Unknown |
|---------------------------|--------------------------|-------------------------------|

**7d. If answered "Yes" to [7a] then:
Were blood products given?**

- | | | |
|---------------------------|--------------------------|-------------------------------|
| ☐ Yes | ☐ No | ☐ Unknown |
|---------------------------|--------------------------|-------------------------------|

8a. Were antibiotics required?

- | | | |
|---------------------------|--------------------------|-------------------------------|
| ☐ Yes | ☐ No | ☐ Unknown |
|---------------------------|--------------------------|-------------------------------|

**8b. If answered "Yes" to [8a] then:
Were they given?**

- | | | |
|---------------------------|--------------------------|-------------------------------|
| ☐ Yes | ☐ No | ☐ Unknown |
|---------------------------|--------------------------|-------------------------------|

**8c. If answered "Yes" to [8a] and "No" to [8b] then:
If NO, why not? (Please tick all that apply)**

- | | | |
|--|---|--|
| ☐ Antibiotics not available | ☐ Antibiotics not prescribed | ☐ Venous access not available |
| ☐ Unknown | | |

Please specify any additional options here...

Equipment

9a. Was all equipment required available?

- | | | |
|---------------------------|--------------------------|-------------------------------|
| ☐ Yes | ☐ No | ☐ Unknown |
|---------------------------|--------------------------|-------------------------------|

**9b. If answered "No" to [9a] then:
If NO, please give further details:**

10a. Were there any problems with the equipment used?

- | | | |
|---------------------------|--------------------------|-------------------------------|
| ☐ Yes | ☐ No | ☐ Unknown |
|---------------------------|--------------------------|-------------------------------|

**10b.If answered "Yes" to [10a] then:
Please give further details:**

I. Outcome of stabilisation

1. Was the patient admitted to critical care (either within this Trust/Health Board or within another Trust/Health Board)?

Critical care locations include PHDU/HUD/PICU/ICU, and theatre if used as a holding area prior to transfer to critical care)

- ☐ Yes - patient admitted to critical care in this (the stabilising) hospital
- ☐ Yes - patient admitted to critical care in another hospital in this Trust/Health Board
- ☐ Yes - patient admitted to critical care in another Trust/Health Board?
- ☐ No
- ☐ Unknown

Please specify any additional options here...

Transfers to critical care

2a. If answered "Yes - patient admitted to critical care in this (the stabilising) hospital" to [1] then:

If the patient was admitted to critical care in this hospital, what level of critical care was the patient admitted to?

Please specify the highest level of critical care received

- ☐ Paediatric intensive care unit
- ☐ Intensive care unit
- ☐ Paediatric high dependency unit
- ☐ High dependency unit
- ☐ Theatre used as a holding area prior to transfer to critical care
- ☐ Unknown

If not listed above, please specify here...

2b. If answered "Yes - patient admitted to critical care in this (the stabilising) hospital" to [1] then:

Was this:

- ☐ The definitive critical care destination
- ☐ A place of holding during stabilisation before transfer to the definitive critical care destination
- ☐ Unknown

2c. If answered "Yes - patient admitted to critical care in another hospital in this Trust/Health Board" to [1] then:

If the patient was admitted to critical care in another hospital in this Trust/Health Board, what level of critical care was the patient admitted to?

Please specify the highest level of critical care received

- ☐ Paediatric intensive care unit
- ☐ Intensive care unit
- ☐ Paediatric high dependency unit
- ☐ High dependency unit
- ☐ Theatre used as a holding area prior to transfer to critical care
- ☐ Unknown

If not listed above, please specify here...

2d. If answered "Yes - patient admitted to critical care in another hospital in this Trust/Health Board" to [1] then:

Was this:

- ☐ The definitive critical care destination
- ☐ A place of holding during stabilisation before transfer to the definitive critical care destination
- ☐ Unknown

2e. If answered "Yes - patient admitted to critical care in another Trust/Health Board?" to [1] then:

If the patient was admitted to critical care in another Trust/Health Board, what level of critical care was the patient admitted to?

Please specify the highest level of critical care received

- | | |
|---|--|
| ☐ Paediatric intensive care unit | ☐ Intensive care unit |
| ☐ Paediatric high dependency unit | ☐ High dependency unit |
| ☐ Unknown | |

If not listed above, please specify here...

2f. If answered "Yes - patient admitted to critical care in another Trust/Health Board?" to [1] then:

If transferred to critical care (PICU,ICU,HDU) in another Trust/Health Board, please specify the Trust/Health Board name (please do not include any clinician details)

2g. If answered "Yes - patient admitted to critical care in another Trust/Health Board?" to [1] then:

Was this the definitive critical care destination?

- | | | |
|---------------------------|--------------------------|-------------------------------|
| ☐ Yes | ☐ No | ☐ Unknown |
|---------------------------|--------------------------|-------------------------------|

2h. If answered "Yes - patient admitted to critical care in another Trust/Health Board?" to [1] and "No" to [2g] then:

If NO (not definitive destination), please give further details:

3a. If answered "Yes - patient admitted to critical care in this (the stabilising) hospital", "Yes - patient admitted to critical care in another hospital in this Trust/Health Board" or "Yes - patient admitted to critical care in another Trust/Health Board?" to [1] then:

If transferred to critical care (PICU,ICU,PHDU, HDU), which grade clinician made the decision to transfer?

- ☐ Consultant
- ☐ Specialty and Associate Specialist (SAS)
- ☐ Senior Clinical Fellow
- ☐ Resident doctor/specialist trainee (ST6-8 or equivalent)
- ☐ Resident doctor/specialist trainee (ST3-5 or equivalent)
- ☐ Resident doctor (below ST3 or equivalent)
- ☐ Advanced clinical practitioner
- ☐ Specialist nurse (bands 7-9)
- ☐ Registered nurse (band 5-6)
- ☐ Unknown

If not listed above, please specify here...

**3b. If answered "Yes - patient admitted to critical care in this (the stabilising) hospital", "Yes - patient admitted to critical care in another hospital in this Trust/Health Board" or "Yes - patient admitted to critical care in another Trust/Health Board?" to [1] then:
If transferred to critical care (PICU,ICU,PHDU, HDU), which specialty clinician made the decision to transfer?**

- | | |
|---|---|
| ☐ Paediatric emergency medicine | ☐ Emergency medicine |
| ☐ General paediatric medicine | ☐ Paediatric intensive care medicine |
| ☐ Adult intensive care medicine | ☐ Anaesthetist with regular paediatric sessions |
| ☐ Anaesthetics | ☐ Unknown |

If not listed above, please specify here...

Patients not admitted to critical care

4. If answered "No" to [1] then:

If not admitted to critical care, what was the outcome of the stabilisation?

- ☐ Patient transferred to a specialist paediatric ward in the same hospital
- ☐ Patient transferred to a specialist paediatric ward in another hospital
- ☐ Patient transferred to a general paediatric ward in the same hospital
- ☐ Patient transferred to a general paediatric ward in another hospital
- ☐ Patient transferred to an adult ward in the same hospital
- ☐ Patient transferred to an adult ward in another hospital
- ☐ Patient remained on the ward they were stabilised on
- ☐ Patient died
- ☐ Unknown

If not listed above, please specify here...

5. If answered "Patient remained on the ward they were stabilised on" to [4] and "No" to [1] then:

If the patient remained on the ward they were stabilised on, why was the patient not transferred?

- | | |
|---|--|
| ☐ Patient stable enough to be cared for on ward | ☐ Patient for palliative care only |
| ☐ Patient died during attempted stabilisation | ☐ Unknown |

If not listed above, please specify here...

All patients

6a. Was there discussion with the parent/carer about where the patient would go once stabilised?

- | | | | |
|---------------------------|--------------------------|-------------------------------|--------------------------------------|
| ☐ Yes | ☐ No | ☐ Unknown | ☐ Not applicable |
|---------------------------|--------------------------|-------------------------------|--------------------------------------|

6b. If answered "Yes" to [6a] then:

Which grade clinician had that discussion?

- ☐ Consultant
- ☐ Specialty and associate specialist (SAS)
- ☐ Senior Clinical Fellow
- ☐ Resident doctor/specialist trainee (ST6-8 or equivalent)
- ☐ Resident doctor/specialist trainee (ST3-5 or equivalent)
- ☐ Resident doctor (below ST3 or equivalent)
- ☐ Advanced clinical practitioner
- ☐ Specialist nurse (bands 7-9)
- ☐ Registered nurse (band 5-6)
- ☐ Unknown

If not listed above, please specify here...

6c. If answered "Yes" to [6a] then:

Which specialty clinician had that discussion?

- ☐ Paediatric emergency medicine
- ☐ General paediatric medicine
- ☐ Adult intensive care medicine
- ☐ Medicine
- ☐ Anaesthetics
- ☐ Critical care outreach nurse - paediatric trained
- ☐ Critical care outreach nurse - adult trained
- ☐ Unknown
- ☐ Emergency medicine
- ☐ Paediatric intensive care medicine
- ☐ Surgery
- ☐ Anaesthetist with regular paediatric sessions
- ☐ Operating department practitioner

If not listed above, please specify here...

7. What was the outcome of this admission?

- ☐ Patient discharged alive
- ☐ Patient still an inpatient in the stabilising hospital
- ☐ Patient died
- ☐ Unknown

J. Debriefing

1. Did a hot debrief take place?

☐ Yes

☐ No

☐ Unknown

2. Did a cold debrief take place?

☐ Yes

☐ No

☐ Unknown

1a. Was the outcome of this patient discussed at a multidisciplinary review/audit/mortality meeting?

☐ Yes ☐ No ☐ Unknown

**1b. If answered "No" to [1a] then:
In your opinion, should they have been?**

☐ Yes ☐ No ☐ Unknown

**1c. If answered "Yes" to [1a] then:
Were remediable factors in the care of this patient identified?**

☐ Yes ☐ No ☐ Unknown

**1d. If answered "Yes" to [1a] and "Yes" to [1c] then:
What action was taken?**

2. Was a duty of candour completed in this case?

☐ Yes ☐ No ☐ Unknown

3a. Was a patient safety incident declared in this case?

☐ Yes ☐ No ☐ Unknown

**3b. If answered "Yes" to [3a] then:
Was this investigated?**

☐ Yes ☐ No ☐ Unknown

**3c. If answered "No" to [3b] then:
In your opinion, should it have been?**

☐ Yes ☐ No ☐ Unknown

1a. In your opinion, could the stabilisation care of this patient have been improved in any way?

☐ Yes

☐ No

☐ Unknown

**1b. If answered "Yes" to [1a] then:
Please give further details**

2a. In your opinion, were there any potential barriers to delivering stabilisation care in this case?

☐ Yes

☐ No

☐ Unknown

**2b. If answered "Yes" to [2a] then:
Please give further details**

1. Please use this space should you wish to provide further details on any of the answers you have provided (please include the question number)

Other data collection methods for this study include:

A clinician survey: An anonymous online survey for completion by clinicians who provide care to children and young people who may require stabilisation during a hospital admission. A patient and parent carer survey: An anonymous online survey for completion by patients and parent carers of patients who have previously required stabilisation during a hospital admission.

2a. If you would like any of the following to be sent to you, please indicate which information you would like, and enter your email address

- ☐ A link to the clinician survey
- ☐ A link to the parent carer survey to help disseminate locally
- ☐ A copy of the report at publication

2b. Email address:

THANK YOU FOR TAKING THE TIME TO COMPLETE THIS QUESTIONNAIRE

By doing so you have contributed to the dataset that will form the report and recommendations due for release in late 2026