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Page	Contents
3	Introduction
3	Purpose
3	Objectives
4	Best Practice recommendations paediatric preoperative assessment
5	Flow chart – Child requires Surgery
6	Example – 48-hour screening questionnaire (RMCH)
6	Day of procedure
6	Paediatric Preassessment Practitioner Course
7	<p>Appendices</p> <ol style="list-style-type: none"> 1. Paediatric Preassessment Guidelines-South Tees Hospital NHS Foundation Trust 2. A Paediatric Preassessment Service in a Box 3. Best Practice Guidance for Preassessment Services for Children Undergoing Surgery or Procedures. Association of Paediatric Anaesthetist of Great Britain and Ireland. 4. Ratification process
9	References and Bibliography

Introduction

The North West, North Wales and Isle of Man Surgery in Children Operational Delivery Network (NW SiC ODN) aims to provide impartial clinical advice and expertise to all providers and commissioners of surgery in children across the North West of England (Cheshire and Mersey, Greater Manchester, Lancashire and South Cumbria), North Wales and the Isle of Man. It aims to develop equitable and high standard services to children and young people across the region.

The ODN funding and governance arrangements are provided by North West NHS England. The ODN is hosted jointly by Royal Manchester Children's Hospital (RMCH) and Alder Hey Children's Hospital (AHCH) with finance and human resources support being provided by RMCH.

This document outlines the best practice pre-operative assessment guidance that the NW SiC ODN recommends for organisations that are delivering surgical services for children.

Purpose

Preoperative assessment for children and young people (CYP) lags behind adult service. This predominately stems from children being seen as lower risks (1) as diagnosis and management of disease in childhood have evolved, and as before, surgical presentations are now more complex the need for high-quality, consistent paediatric preoperative assessment services as described in the Association of Paediatric Anaesthetists of Great Britain and Ireland (APAGBI) Best Practice Guidance, is now being recognised.

The results of an audit of preoperative assessment services across our Network shows a significant variation in the standards and availability of paediatric preassessment services for children across the North West.

All children undergoing a procedure requiring general anaesthetic should receive a preoperative assessment (2). This should be completed at an appropriate time to ensure assessment, optimisation of any medical conditions, psychological preparation, and consent (3). To ensure equitable and high standard preoperative assessment services to children and young people across the region the ODN have developed this best practice guidance for stakeholders to utilise alongside the Paediatric Preoperative Assessment Guidelines developed by the South Tees hospital NHS Trust.

Objectives

This document aims to support organisations across the ODN:

A preoperative assessment service is an invaluable opportunity for a detailed anaesthetic assessment which improves patient care by supporting (3):

- Multidisciplinary planning
- Shared decision-making
- Optimisation of chronic conditions
- Provision of information before surgery
- Early identification and management of anxiety

- Reduction of potential long-term negative psychological effects from perioperative experiences
- A 'teachable moment' for opportunistic health screening and intervention
- Reduces starvation and waiting times through staggered admission
- Reduced days off work for parents
- Reduced days of missed education

A preoperative assessment service not only supports patient and carers through the surgical pathway but also has extensive benefits for Trusts; efficiency improvements have been shown to create financial savings in excess of the costs of running the preassessment service (3) by:

- Reducing on the day cancellations by ensuring patients in the right place at the right time
- Reduces 'was not brought' rates through improved communication with families
- Reduces tasks on the day of the procedure leading to improved start times of theatre lists and reduced changes to list order
- Increases day case rates
- Allows for staggered admissions
- Improving the pathway through theatre especially for children with learning disabilities, neurodiversity and anxiety by identifying patients requiring additional services to support their pathway
- Reducing length of stay

This best practice guidance will support services to establish robust preoperative assessment services to ensure equitable access to high quality surgical care across the region.

Best Practice recommendations paediatric preoperative assessment

All children having a procedure which requires a general anaesthetic should have access to a paediatric preoperative assessment.

It is recommended that trusts use a version of the template pathway below for all children undergoing a procedure.

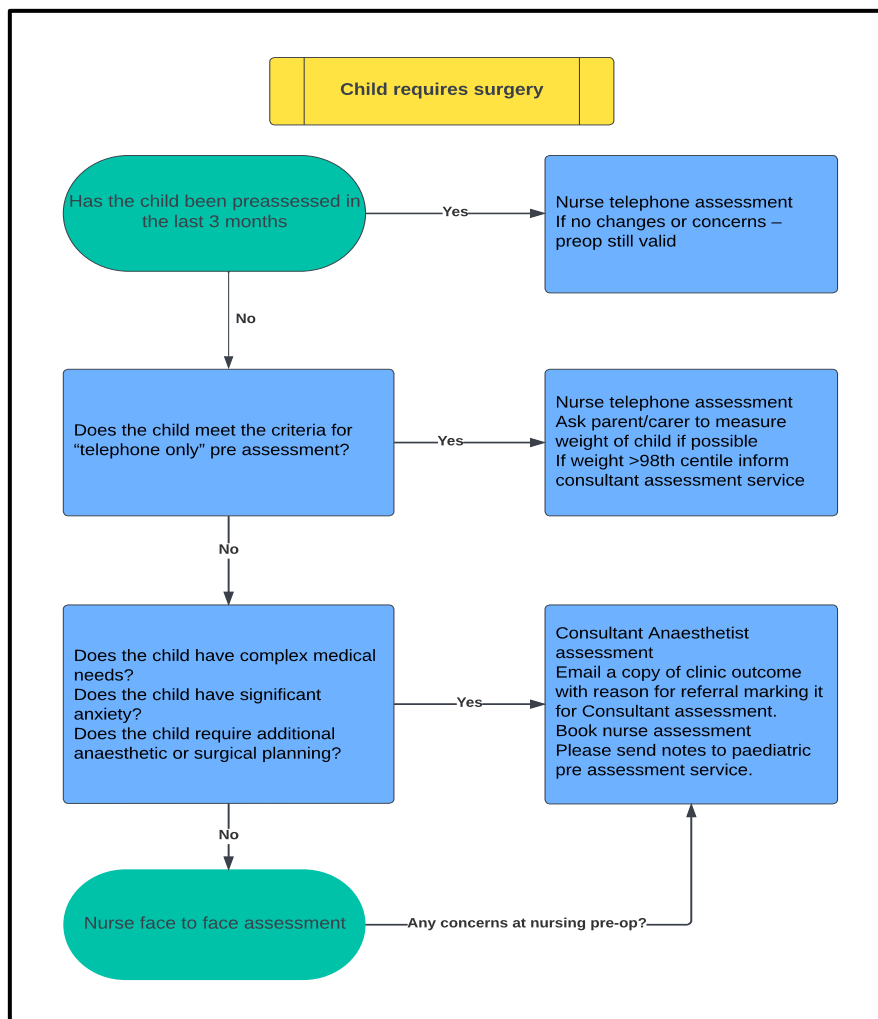
- A child having an elective procedure should be referred for a preoperative assessment by the surgical or scheduling teams 6 weeks prior to the date of surgery.
- All children should be pre assessed by the nursing team at a time appropriate to their individual needs, but ideally not less than two weeks prior to planned procedure.
- There should be a provision for short notice preoperative assessment for cases where elective surgery is urgent.
- Non specialist centres should have clear criteria for children and young people who can have their care delivered locally and those who need to be referred to a tertiary centre. See South Tees guidance for examples, linked on ODN website. <https://northwestchildrensodnhub.nhs.uk/>
- All children should be assessed by the nursing team either face to face or by telephone depending on patient or parental need.

- All children with complex medical needs, significant anxiety or who require additional anaesthetic or surgical planning should have their notes reviewed, after initial nursing consultation, by a consultant paediatric anaesthetist and seen face to face if required.
- As part of the pre-operative assessment, a review of all the patient’s regular medicines should be undertaken. This should include considerations for
 1. Stopping high risk medicines at the appropriate time pre-operatively,
 2. Managing long-term conditions during the surgery (e.g. adrenal insufficiency, diabetes)
 3. Restarting medicines at the appropriate time post-operatively
 4. Which medications should be taken on the day of surgery.

The Handbook of Perioperative Medicines (UK Clinical Pharmacy Association, [UKCPA - Handbook of Perioperative Medicines](#)) is a useful source for general medicines information in the surgical setting if a pharmacist is unavailable for advice (please note; this resource is based on adult medical advice and should be with used with caution in paediatrics).

- Appropriate written information about anaesthesia and surgery should be given to parents/carers and the patient.
- A check-up phone call 48-72 hours before the procedure is useful for preventing on the day cancellations and allowing short notice replacement of cases.
- Preassessment is a touch point and provides an opportunity for wider health screening and health promotion should be discussed with the family.

Flowchart



Example 48-hour screening questionnaire (RMCH)

- Can you confirm that you will be bringing your child on (to come in (TCI)-date and time)
- Do you understand the starving instructions?
- Does the child still have the problem and needs the operation?
- Contact with chickenpox, measles, mumps, cold sore, rash in the last 4 weeks?
- Chest infection in the last 4 weeks?
- Vomiting and diarrhoea in the last 2 weeks?
- Prescribed or taking antibiotics within the last 2 weeks?
- Prescribed/ taking blood thinning tablets? Aspirin, Warfarin, Clopidogrel etc.
- Due to receive any immunisation / vaccination within 48 hrs of TCI date
- Visited GP/Emergency Dept within last 2 weeks for any problems not discussed above?

The Handbook of Perioperative Medicines (UKCPA, www.ukcpa-periophandbook.co.uk) is a useful source for general medicines information in the surgical setting if a pharmacist is unavailable for advice

Day of procedure

All children undergoing a procedure should have had a physical assessment completed with observations charted on national PEWS documentation (either at Preassessment or on day of procedure).

Examination should include:

- Weight and height
- Temperature
- Oxygen saturations
- Heart rate
- Blood pressure
- Airway assessment including loose deciduous teeth
- Consider heart auscultation for children aged <2

Paediatric Preassessment Practitioner Course

It is widely recognised across the country that best pre-assessment practice should be nurse-led with access to a paediatric consultant anaesthetist (or consultant anaesthetist with paediatric interest). Preassessment nurses should be supported in their decision making with clear pathways for escalation to their anaesthetic colleagues.

The NW SIC ODN recommends that nurses working in an area delivering preassessment should undertake the Paediatric Preassessment Practitioner Course, which has been developed by the South West Surgery in Children ODN and Thames Valley & Wessex Surgery in Children ODN.

The course aims to equip the nurse with the required knowledge to support effective, person-centred preparation that will result in an efficient pathway for children to access surgery/procedures under anaesthesia with improved outcomes, patient and family experience and reduction of cancellations.

The course runs virtually twice a year over 3 days with a competency document to be completed within 6 months and has been rolled out nationally across the ODN regions.

Appendices

Appendix 1

Paediatric Preassessment Guidelines-South Tees Hospital NHS Foundation Trust

[South Tees Paediatric Pre assessment Guidelines Booklet 2022.pdf \(apagbi.org.uk\)](https://www.apagbi.org.uk/South_Tees_Paediatric_Pre_assessment_Guidelines_Booklet_2022.pdf)

Appendix 2

A Paediatric Preassessment Service in a Box

Provided by South Tees NHS Foundation trust, the 'in a box' signposts to the various resources helpful in running a successful pre assessment service

[Microsoft Word - Document1 - Compatibility Mode.docx \(apagbi.org.uk\)](https://www.apagbi.org.uk/Microsoft_Word_-_Document1_-_Compatibility_Mode.docx)

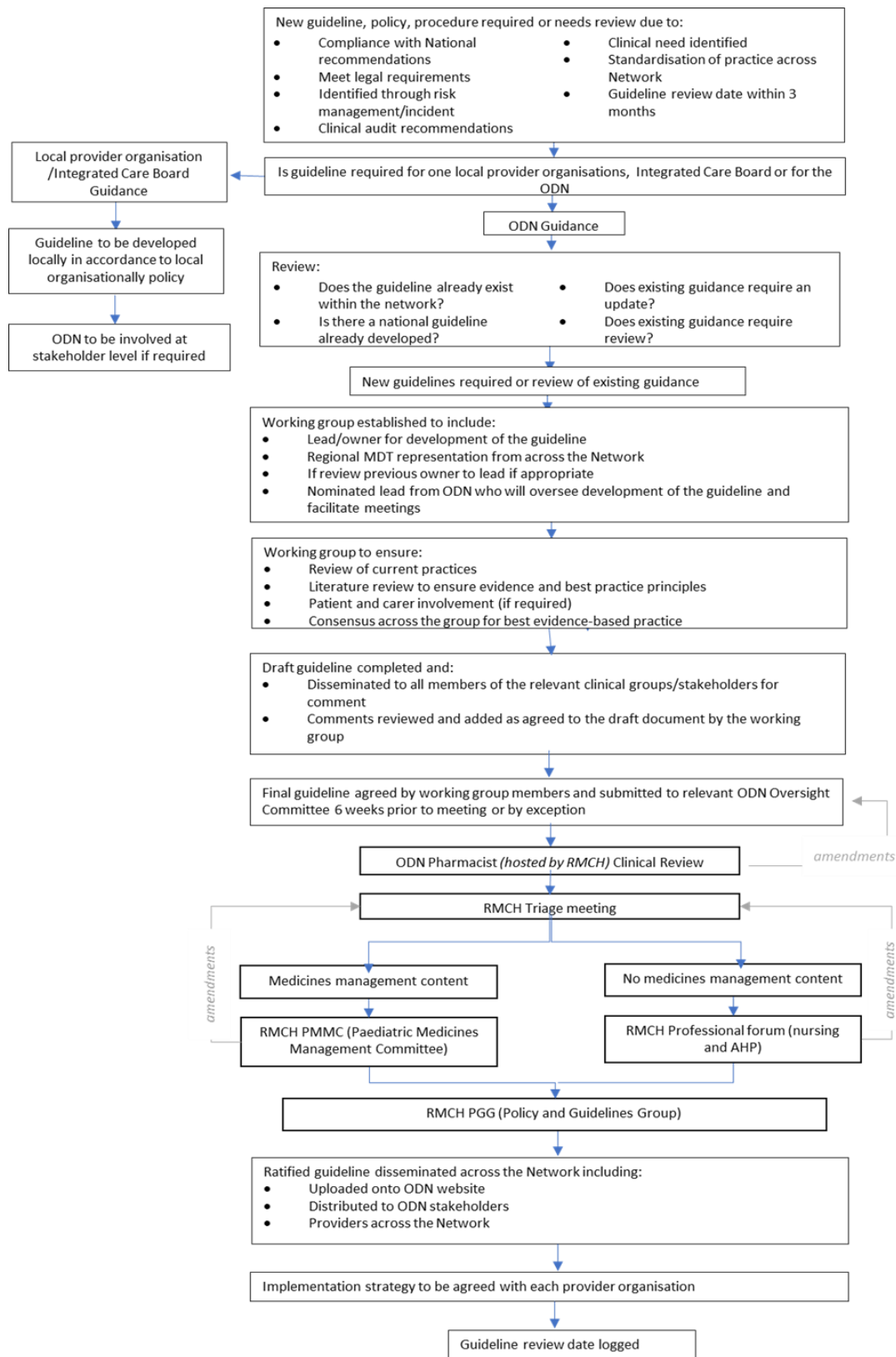
Appendix 3

Best Practice Guidance for Preassessment Services for Children Undergoing Surgery or Procedures. Association of Paediatric Anaesthetist of Great Britain and Ireland.

[Best Practice - Preassessment standards in Children - Final publication v5 \(apagbi.org.uk\)](https://www.apagbi.org.uk/Best_Practice_-_Preassessment_standards_in_Children_-_Final_publication_v5)

Appendix 4

Ratification process:



Bibliography and References

1. Lewis, H & Norrington A. (2013) Paediatric Pre-Operative Assessment [Paediatric preoperative assessment - BJA Education](#) (accessed July 2024)
2. Royal College of Anaesthetists [RCoA] (2022). Chapter 10 Guidelines for the Provision of Anaesthesia Services (GPAS) Guidelines for the Provision of Paediatric Anaesthesia Services. 2022 2.7
3. S. Courtman, Best practice guidance. Preassessment services for children undergoing surgery or procedures, 2022. Available from [Best Practice - Preassessment standards in Children - Final publication v5 \(apagbi.org.uk\)](#) (accessed July 2024)
4. Paediatric Preassessment Pathway. Best Practice Recommendations South West Surgery in Children Operational Delivery Network (SW SIC ODN [SW-SIC-ODN-Best-Practice-Recommendations-Paediatric-Pre-Assessment-Pathway-v1.1-FINAL.pdf](#) ([southwestsicodn.nhs.uk](#)) (accessed July 2024)
5. UK Clinical Pharmacy Association. Handbook of Perioperative Medicines. [UKCPA - Handbook of Perioperative Medicines](#) (accessed October 2024)