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## REGIONAL AUDIT IN PAEDIATRIC REGIONAL ANAESTHETIC PRACTICE ACROSS THE NORTH OF ENGLAND

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The North of England Paediatric Anaesthetic Network (NEPAN) consists of representatives from each hospital trust, covering this large geographical region. Working together with our Operational Delivery Network (ODN) our aim is to promote collaborative working and shared learning so that all children requiring surgery across the North of England have access to the same high standard of care (1). We set out to conduct a survey to identify the types of regional anaesthesia being performed across our region. We hoped to review the perioperative care these children received and identify any barriers anaesthetists face in performing regional anaesthesia in the hope that we can address them, standardise practice and improve our patient's care.

### Methods

We designed a survey, via survey monkey, which was distributed to all consultants, non-training grade and trainee anaesthetists across the North of England through NEPAN representatives. Questions focussed on the amount of paediatric workload of the individual and specialities covered. The survey asked about the number of central neuroaxial, upper limb, lower limb and trunk regional anaesthesia blocks performed, as well as monitoring post-procedure and discharge criteria. Respondents offered any barriers they felt existed to performing regional blocks and if they and/or their trainees would benefit from more training. The survey was open for 1 month.

### Results

We received 34 completed surveys from across the region, with all but 1 trust being represented. 31 respondents were consultants and 4 were trainees. The majority (64%) described themselves as having a mainly adult-based job plan, with some paediatric cases. This covered a mixture of surgical specialities; 72% covering orthopaedic surgery, 56% general surgery and 44% plastic surgery, all lending themselves to performing regional anaesthesia. A mix of blocks were performed, with femoral and popliteal blocks being the most common done by 49% respondents. There was a big gap in knowledge regarding discharge criteria following regional anaesthesia with 50% or above unsure of the requirements of their trust. 60% indicated they felt a lack of training or confidence stopped them performing regional anaesthesia with 56% reporting the lack of training in ward staff post-operatively is a barrier for them. 38% felt there was not adequate training in paediatric regional for trainees.

### Discussion and Conclusion

This audit was a valuable tool to assess our current practice of care. We identified that improved training for the anaesthetists and ward nursing staff would help improve skills, confidence as well as break down barriers to performing regional techniques.

These results were presented locally at the annual NEPAN conference, December 2022. It was well received, with the ODN keen to build on this opportunity of collaborative working and look to create cross site learning opportunities aiming to overcome the obstacles identified.

**Reference**

1. NHS Commissioning Board. Developing Operational Delivery Networks: The Way Forward. December 2012.