

## More children admitted to intensive care but with lower staffing ratios

## September 28 2014

More children than ever are being admitted to intensive care units in England and Wales but there are fewer staff per bed available to cope with the increase, according to a new report published jointly by the University of Leeds and University of Leicester.

The Paediatric Intensive Care Audit Network (PICANet) report showed that there was a 15% increase in admissions over a 10-year period between 2004 and 2013, but this included an increase of 4% that was not due to changes in the childhood population.

At the same time, staffing levels have increased by 36% but this increase has not matched the 40% increase in paediatric intensive care beds.

PICANet is commissioned by the Healthcare Quality Improvement Partnership (HQIP), a multi-agency organisation established in April 2008 to promote quality in healthcare, as part of the National Clinical Audit Programme and is run jointly by the University of Leeds and the University of Leicester.

PICANet has collected data on all admissions to paediatric intensive care in England and Wales since 2002 and has expanded to include Scotland, Northern Ireland and the Republic of Ireland. In this special 10-year report, they looked at details of nearly 134,000 admissions to English and Welsh units of children aged between 0 and 15 years over the period 2004 to 2013.



Professor Liz Draper from the University of Leicester said: "Paediatric intensive care units continue to have difficulty achieving the Paediatric Intensive Care Society standards for nursing care.

"Over time, the complexity of care that some of these children have required has increased, yet staffing levels have not risen to meet this need. A large number of cases require more than one nurse to attend to a child in a paediatric intensive care <u>bed</u>, so there is still great pressure on these nursing staff to deliver under often very difficult conditions."

Dr Roger Parslow, from the School of Medicine at the University of Leeds, added: "With this long-term dataset, we are able to examine trends in outcomes, interventions and patient profiles. This enables effective planning for the future as well as providing the kind of data doctors and researchers need to set up clinical trials to improve the treatments that children receive in paediatric intensive care."

Dr Michael Marsh, representing the independent PICANet Steering Group, commented: "The last twenty years has brought phenomenal improvements in the outcomes of critically ill children in England and Wales. This is in part due to systematic organisation of paediatric intensive care services and improvements in the quality of care provided. It would be a tragedy to see these improvements compromised by failures to attend to proper staffing of units."

Professor Draper added: "Over the 10 years of PICANet the situation has not improved and issues of staff retention and training as well as the adequacy of funding of the service need investigation."

## Provided by University of Leeds

Citation: More children admitted to intensive care but with lower staffing ratios (2014,



September 28) retrieved 23 April 2024 from <a href="https://medicalxpress.com/news/2014-09-children-intensive-staffing-ratios.html">https://medicalxpress.com/news/2014-09-children-intensive-staffing-ratios.html</a>

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