



The Royal College
of Anaesthetists



The Association of
Paediatric Anaesthetists
of Great Britain and
Ireland

Joint statement from the Royal College of Anaesthetists and the Association of Paediatric Anaesthetists of Great Britain and Ireland (APAGBI) on the Association of Independent Healthcare Organisations Guidance for Care of Children in the Independent Healthcare Sector

Some of our Fellows and members have drawn our attention to a document circulated to private hospitals by the Association of Independent Healthcare Organisations (AIHO) which had been produced by their standards division, the Independent Healthcare Advisory Service (IHAS). This document is intended to outline standards for care of children in the independent sector. The RCoA and the APAGBI were invited to comment on this document last summer and made a number of points but we disagreed with one part in particular, the statement that “*At an individual level, surgeons and anaesthetist should carry out at least 100 procedures a year across their whole practice*”. The comment we made at the time was:

Although we support the principle that infrequent paediatric practice is to be discouraged we are concerned that the introduction of prescriptive caseload numbers required of surgeons and anaesthetists in the revised guidance is arbitrary, not evidence based and may be subject to challenge. In the RCoA [Guidelines for the Provision of Anaesthetic Services \(GPAS\)](#) there is no mention of any indicative case loads but the guidance states that the acquisition and maintenance of competencies should be the guiding principles for safe and effective care of children:

'Anaesthesia for children should be undertaken by consultants who have undergone appropriate training. In the UK, all anaesthetists with a CCT or equivalent will have obtained higher paediatric anaesthetic training. As a minimum, they should be competent to provide peri-operative care for common elective and emergency surgical conditions in children aged three years and older'

'...it is expected that competence and confidence to anaesthetise children will need to be sustained through direct care, CPD and/or refresher courses, and should be considered within annual appraisal and revalidation'

We also recommended that the emphasis should be on competencies rather than volume of cases and that those clinicians who wish to retain admission rights to care for children in the independent sector should have this aspect of their practice explicitly highlighted in the supporting evidence included in their revalidation portfolios.

Consequently, we were disappointed when the document was published with the offending phrase included. We have assumed that this was done in error but since the guidance is still on the AIHO website we feel that clarification is required. Recently, AIHO have made all their guidance subject to review including this document: <http://aiho.org.uk/policy-and-publications/aiho-publications?view=docman>.

We have communicated our concerns to AIHO and have requested that this document should be reviewed at the earliest possible opportunity or an erratum published. It is worth noting also that the Care Quality Commission is at an early stage of reviewing policies and guidance documents around the care of children and, in particular, children's surgery in the independent sector. Both the RCoA and the APAGBI will be involved with these discussions.

In summary, APAGBI and RCoA does not endorse the AIHO document and considers that the GPAS paediatric chapter remains the standard for the provision of paediatric anaesthetic services whether they are in the private or public sectors and Fellows and members should refer to this for their guidance: <http://www.rcoa.ac.uk/document-store/guidance-the-provision-of-paediatric-anaesthesia-services-2015>