

Improving day case tonsillectomy rates in children

How can networks support collaboration and service improvements

Background:

- The South West Surgery in Children Operational Delivery Network (SW SIC ODN) was established in 2020 with its key aim to improve children's surgical services
- The SW SIC ODN established a board to ensure oversight of clinical working groups which were setup with regional representation to review national reports (GIRFT¹), guidelines and metrics
- An Ear, Nose and Throat (ENT) Clinical Working group was established to review regional delivery of national standards; enthusiastic stakeholders came together to review data, agree priorities and deliver regional service improvements

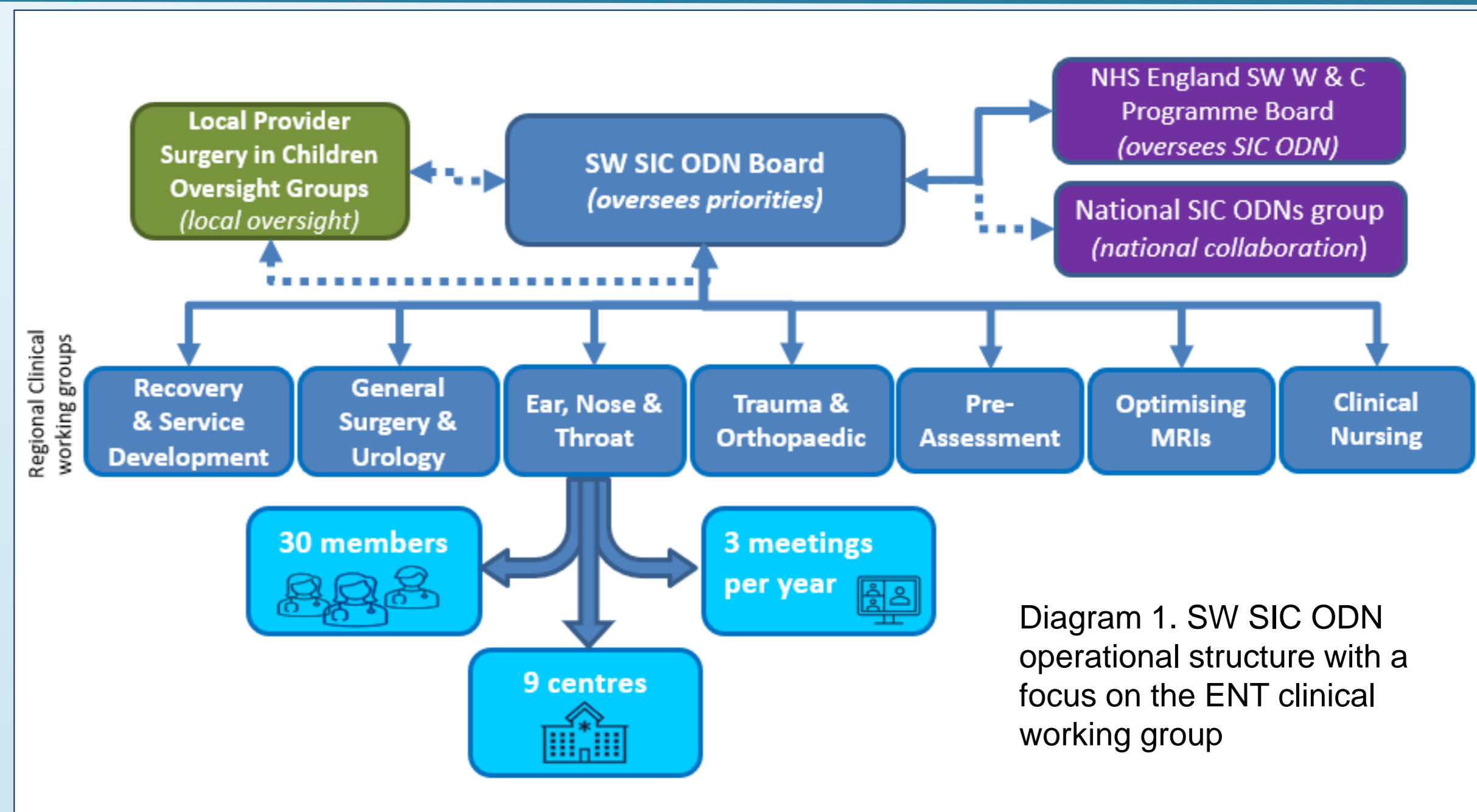


Diagram 1. SW SIC ODN operational structure with a focus on the ENT clinical working group

1. Using national metrics to explore regional variation

- The ENT Clinical Working Group first met in January 2021 and reviewed national metrics available through the Model Healthcare system² and Hospital Episode Statistics data
- It was agreed regional variation in **day case tonsillectomy pathways** should be reviewed as a priority, with opportunities for collaboration
- Day case rates in region varied from ~15 to >95%

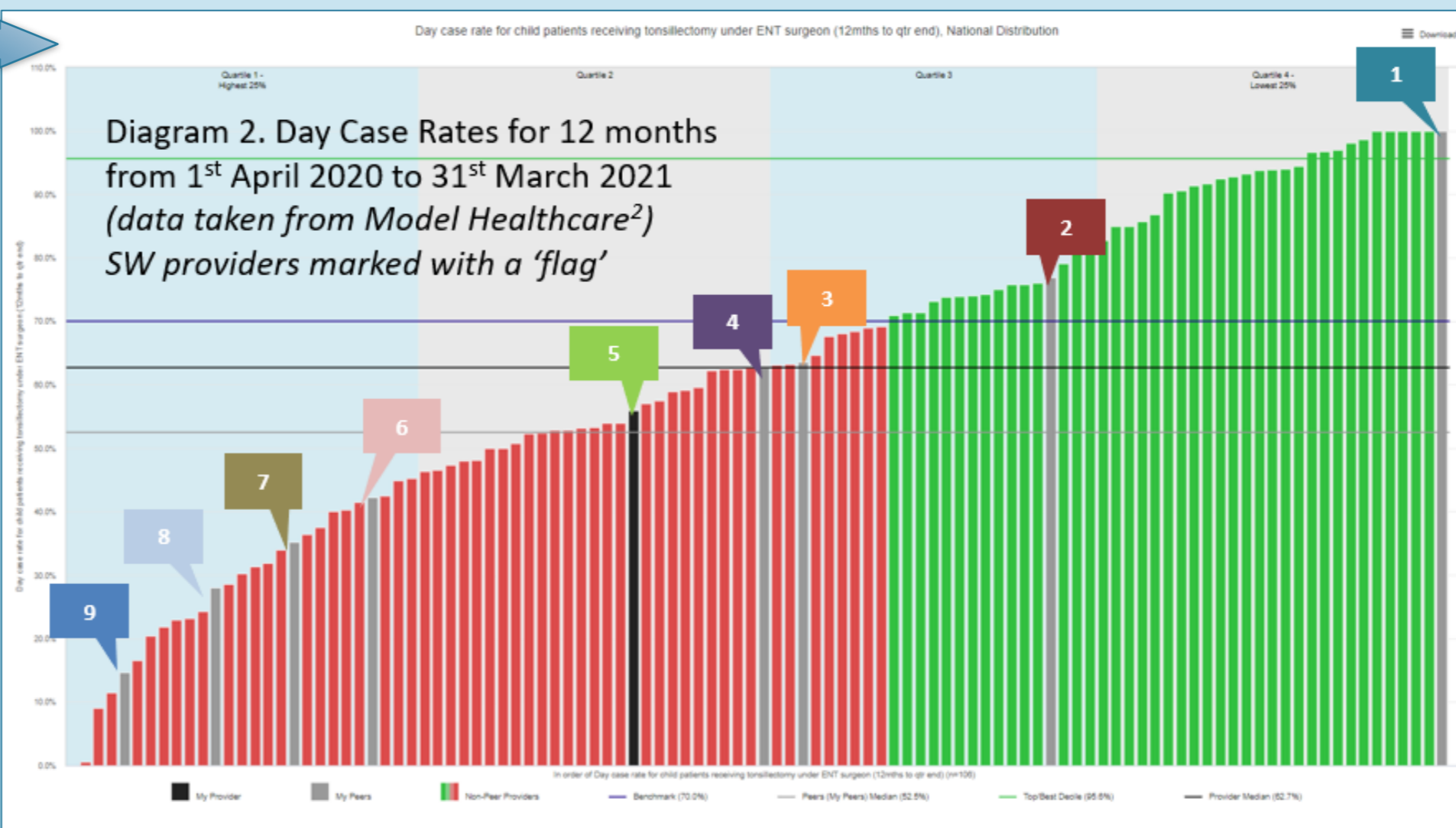


Table 1. Summary of day case rate per centre in SW (2020/21)

2. Best practice recommendations

- The group came together to review national and regional evidence and practice
- They developed a 'Best practice recommendations Adenotonsillectomy Day case Pathway'³ outlining key elements required to deliver the best day case pathways for patients

3. Audit of practice against recommendations

- All centres audited their own service against agreed best practice
- Results were shared across the region at the next group meeting

4. Agree actions at local and regional level

- Actions were identified for local provider teams to pursue
- Regional actions were also agreed that the core team facilitated:
 - Support business cases for coblation services at several centres
 - Support provision of coblation training within region
 - Collate information on opening times, patient information and pain management to further support the service
 - Develop a tracker so day case rates can be monitored quarterly

Best Practice Recommendations
ADENOTONSILLECTOMY DAY CASE PATHWAY

SETTING FOR STAFF: South West Surgery in Children Operational Delivery Network (SW SIC ODN) Staff involved in the pathways for children under 18 years undergoing adenotonsillectomy procedures

PATIENTS: Children who are being considered for adenotonsillectomy procedures in organisations across the SW SIC ODN region

Guidance Summary: It is recommended nationally that 60% of tonsillectomies in children are performed as day case procedures (1, 2). The following recommendations are designed to support centres across the South West in adopting their day case pathways to achieve this. This document is intended to provide a reference for what is considered best practice across the South West region and should be viewed alongside any locally agreed Standard Operating Procedures (SOPs) which should be followed at all times by local clinical teams.

Patient Selection:

- All departments must have an approved day case pathway for children undergoing tonsillectomy which meets existing published standards (2, 3)
- All children >15kg and greater than 2 years old (including 2 year olds) and without significant comorbidity should expect to have their procedure as a day case, including those with Obstructive Sleep Apnoea (4)
- Children, who live greater than 1 hour from the hospital delivering the procedure, may require to be admitted post-operatively, but geographical restrictions should not necessarily prevent children from being treated as a daycase (5)
- Certain types of pre-operative sleep studies may be poorly sensitive for OSA and should only be considered in children with significant comorbidities or where there is doubt about the diagnosis of OSA (3)

Day of Surgery:

- Children undergoing tonsillectomy should be preferentially booked onto morning ENT theatre sessions; children could be booked on an afternoon session, ideally at or near the start of the list, to facilitate day case. A post-operative stay of 4 hours is recommended for children post procedure (starting from when the child leaves theatre) (6)
- Whilst surgical technique should not impact on day case rates, evidence suggests that coblation results in less pain in the immediate post-operative period and reduce readmissions in children undergoing tonsillectomy or adenotonsillectomy (1, 7, 8). (The SW SIC ODN would support surgeons wishing to develop coblation as a technique at their centre, whilst auditing their own completion rates to ensure an improved service.)

Version v1.0 From: Jan 21 - To: Jan 24 Author(s): Steve Coombe, Clinical Director SW SIC ODN Page 1 of 2

Invitation COBLATION® Surgery for Tonsillectomy South West Course
28th June 2022
The Academy, Hargrove Park Hospital, Taunton, UK

Examples of regional sharing & collaboration: Best practice guidelines, training and information leaflets

Caring for your child after a tonsillectomy and/or adenoidectomy

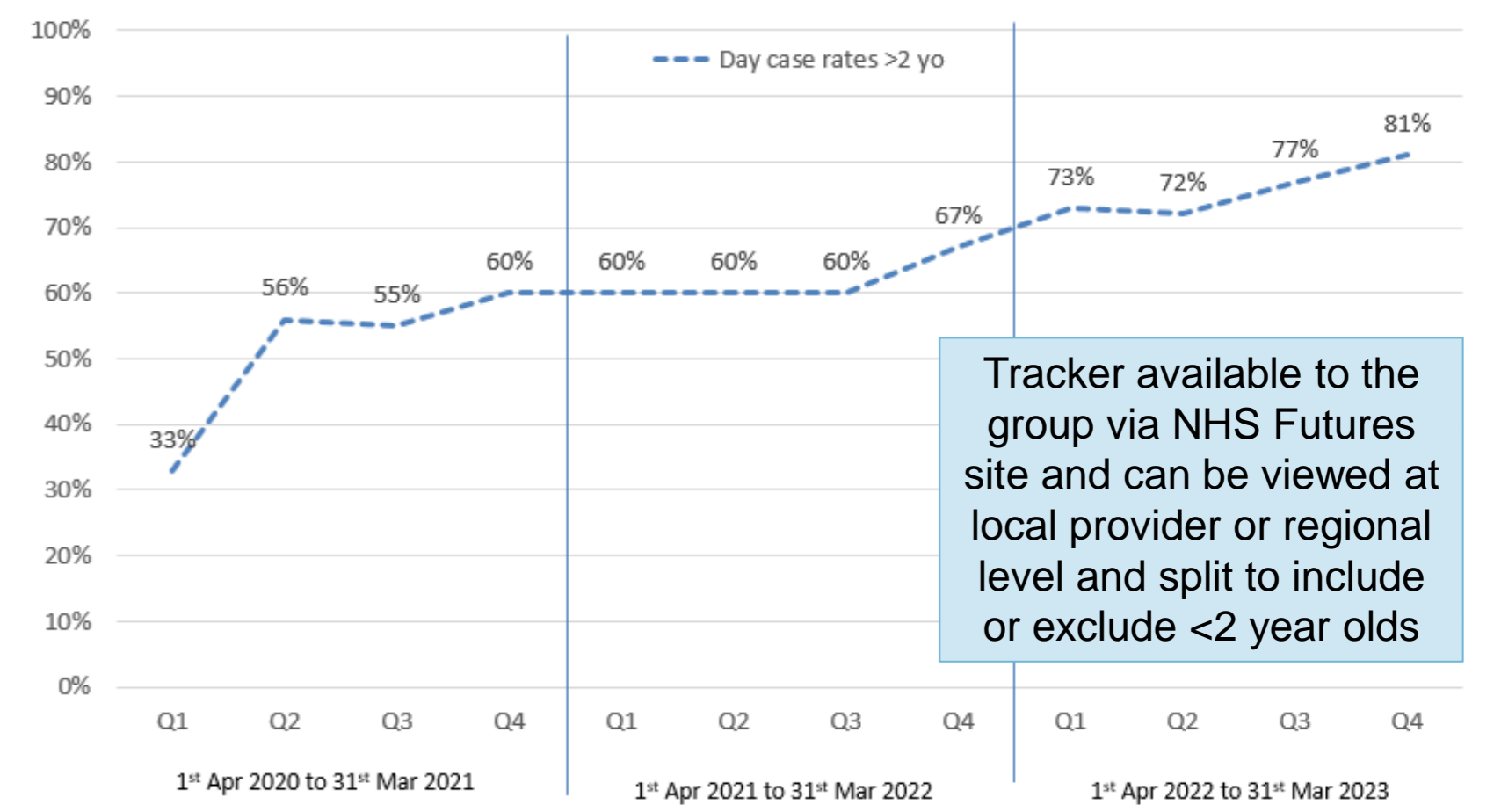
After your child's tonsillectomy

Children's day surgery Patient information

Table 2. Comparison of day case rate per centre in SW

Centre	Day Case Rate 12 months ending	
	Q4 20/21	Q4 22/23
1	100%	99%
2	77%	82%
3	64%	81%
4	63%	68%
5	56%	70%
6	42%	52%
7	35%	71%
8	28%	70%
9	15%	64%

Diagram 3. Adenotonsillectomy day case rates per quarter for providers across the South West from April 2020 to March 2023



Tracker available to the group via NHS Futures site and can be viewed at local provider or regional level and split to include or exclude <2 year olds

5. Ongoing review of activity and sharing

- Next steps agreed to review readmissions and post operative pain management

Conclusion & discussion:

- Regional increase in day case rates noted and tracked quarterly by centre and split by age (>2)
- For the 12 months ending 2020/21 compared to 12 months ending Q4 2022/23 there is notable increase in rates at 5 centres, slight increase at 2, and 2 continue high performance
- Managed clinical networks can provide the ideal opportunity to bring together regional teams to support service development for patient benefit

With thanks to: The improvements noted in day case rates are a result of the hard work of numerous colleagues across the region all of whom are too numerous to thank on this small poster; however we are particularly grateful to our colleagues who are part of the SW SIC ODN ENT Clinical Working Group who come together to drive our work and projects so enthusiastically; current membership and details can be found on our website.

"I think regional guidelines are very helpful to enable local change in practice – the day case tonsillectomy guidelines have been very useful to enable a change in very entrenched practices (thank you)." ENT Group member

- References:**
1. [GIRFT ENT Speciality report](#)
 2. Model Hospital (model.nhs.uk)
 3. Articles used in our guidelines can be found on our website: www.southwestsicodn.nhs.uk