

What information should a paediatric asthma discharge letter contain? – a Delphi study

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Background

Despite established standards for hospital discharge letters, the quality of paediatric asthma discharge letters remains variable and they can lack salient details, including management and follow-up. There is a need for a consensus on the information and structure required for discharge letters to ensure the safe and effective handover of care to the primary care clinician, child's school or parent/carer.

Aim

To establish the core elements of a standardised paediatric asthma discharge letter.

Method

- Conducted by the National Respiratory Audit Programme (NRAP) Children and Young People (CYP) Asthma team.
- An online Delphi method comprising two survey rounds was used to secure a consensus from subject experts involved in paediatric asthma care. In round 1, participants ranked the top three elements from 25 options on a scale of 1–5. In round 2, participants ranked five key elements on a scale of 1–5.
- Clinicians were recruited from all settings directly and via national groups.*
- Patient and carer involvement was facilitated by The Royal College of Paediatrics and Child Health.

Results

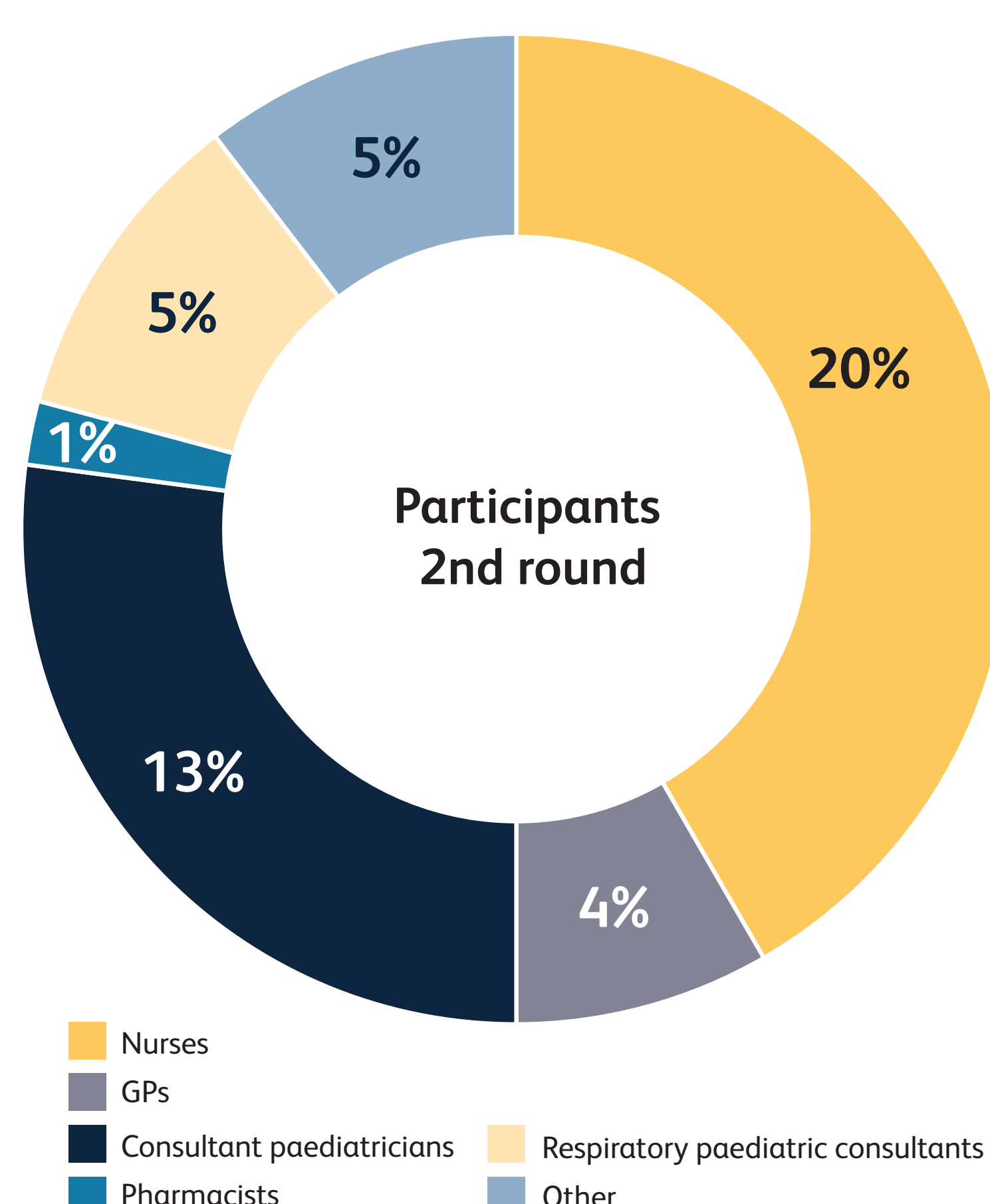
Round 1: 55 participants (clinicians and parents/carers) responded. The most frequently selected key items were:

- Red flags (71 %)
- Treatment plan (31 %)
- Record of exacerbations (31 %)
- Inhaler technique and action plan (27 %)
- Hospital treatment (27 %)
- GP instructions (24 %)
- Clear diagnosis (22 %)

Round 2: 48 participants responded. The five most important core elements voted for inclusion in the discharge letter were:

- Clear GP information (diagnosis, severity of the attack, treatment, follow-up)
- Discharge planning
- Red flags (medication, symptoms, reviews, environment, other health conditions, triggers)
- Record of previous exacerbations (including intensive care admission)
- Treatment during admission (including oxygen, intravenous medication, intensive care admission)

* British Paediatric Respiratory Society, British Thoracic Society, Association of Respiratory Nurses, Primary Care Respiratory Society, School and Public Health Nurses Association, National Paediatric Respiratory and Allergy Nurses Group, and teams participating in the NRAP audit.



Conclusion

- A Delphi study on best practice standards for children and young people with asthma identified the core elements to include in a paediatric asthma discharge letter
- The five core elements were: clear information for the GP, discharge planning, red flags, record of previous exacerbations, and treatment during admission.
- The findings informed the development of a standardised discharge letter, now under review.