



Australasian College
for Emergency Medicine

Role of the Paediatric Clinical Lead in Emergency Departments

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1. Purpose and scope

The purpose of this document is to provide guidance on the definition, role, and responsibilities of a Paediatric Clinical Lead in emergency departments (EDs). The implementation of this role is designed to lead to improved outcomes for paediatric emergency patients.

This statement is applicable to all EDs in Australia and Aotearoa New Zealand.

2. Introduction

Children may comprise up to 30 per cent of patient presentations in an ED.

To ensure high quality and equitable care for children, a Paediatric Clinical Lead should be appointed from, or recruited to, the FACEM team in EDs across Australia and Aotearoa New Zealand (particularly if they see >10,000 annual paediatric presentations).

The Paediatric Clinical Lead advocates for the acutely unwell child in the ED. The role can facilitate education and research opportunities and aid in the collaboration between the paediatric inpatient and tertiary service teams. The benefits of having a Paediatric Clinical Lead have been published¹ and set as an objective in various international position statements.^{2 3 4 5}

3. Definitions

ACEM/the College

The Australasian College for Emergency Medicine.

Emergency physician/FACEM

An emergency physician is a registered medical practitioner trained and qualified in the specialty of emergency medicine (EM). The recognised qualification of an emergency physician in Australia and Aotearoa New Zealand is the Fellowship of the Australasian College for Emergency Medicine (FACEM). Emergency physician is the preferred term to describe a registered medical practitioner trained and qualified in the specialty of EM. Other acceptable terms include emergency medicine (or EM) specialist, emergency medicine (or EM) consultant, or FACEM. Emergency physician and emergency specialist are titles protected by law in Australia and Aotearoa New Zealand.

Paediatric Emergency Medicine (PEM)

Paediatric Emergency Medicine (PEM) is concerned with the short-term and emergency treatment of children.

¹ Gausche-Hill M, Ely M, Schmuhl P, Telford R, Remick KE, Edgerton EA, Olsen LM. A National Assessment of Pediatric Readiness of Emergency Departments. *JAMA Pediatrics*. 2015;119(6):527

² Intercollegiate Committee for Standards for Children and Young People in Emergency Care Settings. *Facing the Future: Standards for children in emergency settings*. London UK: 2018

³ Paediatric Emergency Medicine Special Interest Group of IFEM. *High quality emergency care for children: optimal global care of children in acute care settings: A white paper from the Paediatric Emergency Medicine Special Interest Group of IFEM*. Melbourne VIC: 2019

⁴ Paediatric Emergency Medicine Special Interest Group of IFEM. *Standards of care for children in emergency departments*. Melbourne VIC: 2019

⁵ Joint Policy Statement – Guidelines for care of children in the emergency department. *Paediatrics*. 2009;124(4):1233-43

Paediatric emergency physician

A paediatric emergency physician is a medical practitioner trained and qualified under the sub-specialty of paediatric emergency medicine (PEM). Recognised qualifications of a paediatric emergency physician in Australia and Aotearoa New Zealand who is a Fellow of the Australian College of Emergency Medicine (FACEM) or the Royal Australian College of Physicians (FRACP) Paediatrics Division who has completed or has who has been awarded completion of, or granted equivalence to, Stage 2 of the Joint Paediatric Training Program and obtained a Letter of Completion or Equivalence by the Committee for Joint College Training (CJCT) in Paediatric Emergency Medicine.

4. ACEM Position

ACEM supports the International Federation for Emergency Medicine (IFEM) White Paper *High quality emergency care for children: optimal global care of children in acute settings* ³ and the IFEM Standards document *Standards of care for children in emergency departments*. ⁴

ACEM supports the IFEM recommendation for EDs to appoint a lead doctor to the role of Paediatric Clinical Lead to champion the specific needs of children in EDs. ⁴

5. Paediatric Clinical Lead

The Paediatric Clinical Lead will provide leadership in the ED to ensure that children receive optimal family-centred emergency care. The Paediatric Clinical Lead may be a formally appointed Paediatric Director, or a Clinical Lead undertaking this portfolio as part of their specialist duties within the ED. Key elements of the Paediatric Clinical Lead role include the following:

- Advocating for optimal facilities in the ED e.g., physical design, models of care, equipment, medication supplies and staffing.
- Providing procedural guidance and provision of care, quality monitoring and improvement, and developing and reviewing paediatric-specific policies and procedures within the ED. ⁵
- Supporting the ongoing education and training of ED clinical staff to ensure that current best practice standards of paediatric emergency care are delivered to patients.
- Maintaining effective communication and collaboration with local and external stakeholders involved in the care of paediatric patients, including referral pathways and retrieval services.

6. Knowledge and skills

It may not be feasible for every ED to be staffed by medical specialists with special interests across the entire spectrum of emergency care. ACEM recommends that the following factors are considered when selecting a candidate for a Paediatric Clinical Lead role:

- Be three years post-Fellowship or have a designated mentor who is at least three years post-Fellowship to support the requirements of the role.
- Demonstrated commitment to excellence in the practice of emergency medicine.
- Expert level of knowledge, skills and experience (or committed to obtaining this experience) in paediatric emergency care across the spectrum from neonates to adolescents.
- Leadership skills applied to the scope of paediatric emergency patients.
- Knowledge of systems and procedures as appropriate for the ED in which they are employed, including procedural governance, departmental operations, quality monitoring and improvement systems.

7. Support for the role

- The Paediatric Clinical Lead would benefit from membership of the ACEM PEM Network and access this network for support, advocacy and health promotion within their ED. It is highly recommended that they are in contact with other Paediatric Clinical Leads in their region.
- Sufficient clinical support time should be allocated to this role, which may be spread between a team of clinicians who share the duties of the Paediatric Clinical Lead role.
- It is recommended that the Paediatric Clinical Lead role is reviewed every 3-5 years to determine whether the role is adequately meeting the needs of the ED. EDs may also elect to vacate and re-advertise or rotate the Paediatric Clinical Lead role to other suitable and interested candidates on a 3-5 yearly cycle.
- In recognition that patient care is provided by doctors, nurses and allied health clinicians, it is highly recommended that the Paediatric Clinical Lead partners with an ED nursing lead, and collaborates with other clinicians delivering care for paediatric patients in the ED. A team effort is known to produce successful change management and a supportive ED culture.
- Recognise the cultural needs of children who are Māori, Aboriginal or Torres Strait Islander and the people who are caregivers, to engage with them in a culturally safe manner throughout their ED stay and continue that safety in planning for care beyond their disposition from the ED.

Document Review

Timeframe for review:	Every five years, or earlier if required
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Revision History

Version	Date	Pages revised / Brief Explanation of Revision
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