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Deputy Cathal Crowe, TD
Dáil Éireann
Leinster House
Dublin 2

PQ No. 10045/23

To ask the Minister for Health what would be required for the local injuries unit protocols to be changed for paediatric patients under five years, to permit treatment for minor injuries that is, burns breaks sprains and so on, to limbs and extremities arms, legs, hands and feet while continuing to refer head and torso injuries to the ED with the understanding that the former are very common in small children while the latter can require specialist paediatric diagnostics.

Dear Deputy Crowe,

The Health Service Executive has been requested to reply directly to you in the context of the above Parliamentary Question, which you submitted to the Minister for Health for response. I have examined the matter and the following outlines the position.

Response:

There are three main reasons that children less than five years of age are not treated in Injury Units:

1. Assessing children in that age group requires a skill-set and specific training because of difficulties with history taking and uncertainty as to the accuracy of the history given. Young children tend to temporarily regress to an earlier stage of development after a traumatic experience, compounding this difficulty. Staff in Injury Units may or may not have experience in such assessments, but it is not a requirement of their employment.
2. Modern Paediatric Emergency Medicine involves the use of many techniques to optimise the experience for the child and their carers, including distraction, play therapy, topical or local anaesthesia or procedural sedation as appropriate. This requires staff with appropriate training and facilities that are not available in Injury Units.
3. A key recommendation agreed between the National Clinical Programmes for Emergency Medicine and Paediatrics is the audio-visual separation of child and adult patients in unscheduled care. This is not feasible in Injury Units.

I trust this answers your question to your satisfaction.

Yours sincerely,



Emma Benton

General Manager

Acute Operations