

**Circular HSC (SQSD) (NICE NG29) 24/17**

**Subject: NICE Clinical Guideline NG29 –  
Intravenous fluid therapy in children and young  
people in hospital**

**For action by:**

Chief Executive of HSC Board – **for distribution to:**  
All HSC Board Directors – for cascade to relevant staff

Director of Integrated Care, HSC Board – **for cascade to:**  
Head of Pharmacy and Medicines Management  
Family Practitioner Services Leads – for cascade to relevant  
Family Practitioner groups

Chief Executive of Public Health Agency – **for distribution to:**  
Director of Public Health and Medical Director – for cascade  
to relevant staff  
Director of Nursing and AHPs – for cascade to relevant staff

Chief Executives of HSC Trusts – **for distribution to:**  
Medical Directors – for cascade to relevant staff  
Directors of Nursing – for cascade to relevant staff  
Heads of Pharmaceutical Services – for cascade to relevant  
staff  
Directors of Acute Services – for cascade to relevant staff  
HSC Clinical and Social Governance Leads  
Directors of Social Services – for cascade to relevant staff  
Directors of Finance – for cascade to relevant staff  
AHP Leads – for cascade to relevant staff

Chief Executive, Regulation & Quality Improvement Authority – **for  
cascade to:** relevant independent healthcare establishments

Chief Executives of HSC Special Agencies and NDPBs

**For Information to:**

Chair of HSC Board  
Chair of Public Health Agency  
Chairs of HSC Trusts  
Chair of RQIA  
NICE Implementation Facilitator NI  
Members of NI NICE Managers' Forum

**Summary of Contents:** This guideline covers general principles for  
managing intravenous (IV) fluids for children and young people under  
16 years, including assessing fluid and electrolyte status and  
prescribing IV fluid therapy. It applies to a range of conditions and  
different settings. It does not include recommendations relating to  
specific conditions. This guideline represents a major opportunity to  
improve patient safety for children and young people having IV fluid  
therapy in hospital.

**Enquiries:**

Any enquiries about the content of this Circular should be addressed  
to:

Quality Regulation and Improvement Unit  
Department of Health  
Room D1.4  
Castle Buildings  
Stormont Estate  
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[SGU-NICEGuidance@health-ni.gov.uk](mailto:SGU-NICEGuidance@health-ni.gov.uk)

**Circular Reference: HSC (SQSD) (NICE NG29) 24/17**

**Date of Issue: 20 June 2017**

**Related documents:**

HSC (SQSD) 3/13  
HSC (SQSD) (NICE CG174) 17/14

**Superseded documents**

None

**Status of Contents:**

Action

**Implementation:**

As per circular. Generally, Clinical Guidelines should be  
implemented within 12 months of endorsement.

**Additional copies:**

Available to download from  
<https://www.health-ni.gov.uk/topics/safety-and-quality-standards/national-institute-health-and-care-excellence-nice>

**Dear Colleagues**

**NICE Clinical Guideline NG29 - Intravenous fluid therapy in children and young people in hospital** <https://www.nice.org.uk/guidance/ng29>

The Department has reviewed the above NICE guidance and has formally endorsed it as applicable in Northern Ireland.

In accordance with the process outlined in circular HSC (SQSD) 3/13, the following actions should be taken (<https://www.health-ni.gov.uk/sites/default/files/publications/dhssps/hsc-sqsd-3-13.pdf>)

**1. HSC Board / PHA**

- a. Identify a Professional Lead who will consider the commissioning implications of the Clinical Guideline and co-ordinate with any other relevant commissioning teams. This Lead will identify any areas where regional planning / investment / commissioning are required, or where there is material risk to safety or quality. These will then be actioned immediately through normal commissioning arrangements or through bespoke arrangements reflecting the nature of the issue / risk.
- b. Ensure that relevant guidance is sent to the appropriate Family Practitioners.
- c. Seek positive assurance from the HSC Trusts that the required initial actions have been undertaken within a 3 month period, and that the Guideline has been implemented within a further 9 months (unless otherwise notified by the HSC Trusts).
- d. Where significant investment/ commissioning needs cannot be met within the usual timeframe, agree appropriate arrangements with HSC Trusts. Report to DoH as required at 6 monthly accountability meetings.

**2. HSC Trusts**

- a. Proceed with targeted dissemination, agree a clinical/management lead to coordinate implementation and consider what has to be done to achieve implementation using a risk based assessment and baseline review as appropriate to support planning. These initial actions should be undertaken within a three month period.
- b. Implement the Guideline within a further 9 months (apart from any elements where significant issues have been raised with the HSC Board/PHA).
- c. Provide positive assurances to the HSC Board that required initial actions have been taken within the 3 month planning period and that the Guideline has been implemented within a further 9 months, where appropriate.
- d. Where significant investment/ commissioning needs cannot be met within the usual timeframe, notify the HSC Board/PHA at the earliest opportunity through the bi-monthly director level meetings and agree appropriate arrangements with them to achieve implementation.

**3. RQIA**

- a. Disseminate the Guideline to the independent sector as appropriate.

**4. HSC Special Agencies and NDPBs**

- a. Take account of this Guideline in training and other developments as appropriate.

To inform the planning process, please find attached details from the Departmental review. You should consider and take account of other relevant Departmental policies and strategies in your planning, as well as any legislative / policy caveats identified in the course of the Departmental review.

A full current list of NICE guidance endorsed for application in Northern Ireland can be found on the Department's website at <https://www.health-ni.gov.uk/topics/safety-and-quality-standards/national-institute-health-and-care-excellence-nice>

A handwritten signature in black ink, appearing to read 'Michael McBride', written in a cursive style.

**Dr Michael McBride**  
**Chief Medical Officer**

## Appendix 1

### Endorsed NICE guidance - Details from Departmental review

Reference Number	NICE Clinical Guideline – NG29 <a href="https://www.nice.org.uk/guidance/ng29">https://www.nice.org.uk/guidance/ng29</a>
Title	Intravenous fluid therapy in children and young people in hospital
Summary of guidance	<p>This guideline covers general principles for managing intravenous (IV) fluids for children and young people under 16 years, including assessing fluid and electrolyte status and prescribing IV fluid therapy. It applies to a range of conditions and different settings. It does not include recommendations relating to specific conditions.</p> <p>This guideline represents a major opportunity to improve patient safety for children and young people having IV fluid therapy in hospital.</p> <p>It includes recommendations on:</p> <ul style="list-style-type: none"><li>• principles and protocols for intravenous fluid therapy</li><li>• assessment and monitoring</li><li>• fluid resuscitation</li><li>• routine maintenance</li><li>• replacement and redistribution</li><li>• managing hypernatraemia and hyponatraemia that develops during intravenous fluid therapy</li><li>• training and education</li></ul> <p>This guideline should be read in conjunction with NICE Clinical Guideline CG174 on Intravenous fluid therapy in adults in hospital (endorsed by DoH in July 2014) <a href="https://www.health-ni.gov.uk/sites/default/files/publications/dhssps/hsc-sqsd-nice-cg174-17-14.pdf">https://www.health-ni.gov.uk/sites/default/files/publications/dhssps/hsc-sqsd-nice-cg174-17-14.pdf</a></p>
Related strategically relevant DoH/ HSC policies	None
Inter-Departmental interest	None

Legislative / policy caveats	<p>This advice does not override or replace the individual responsibility of health professionals to make appropriate decisions in the circumstances of their individual patients, in consultation with the patient and/or guardian or carer. This would, for example, include situations where individual patients have other conditions or complications that need to be taken into account in determining whether the NICE guidance is fully appropriate in their case.</p> <p>Where this guidance indicates that informed consent should be obtained and documented, the DoH guidance <i>Reference Guide to Consent for Examination, Treatment or Care (2003)</i>, gives advice on the law concerning consent to intervention. Available at: <a href="https://www.health-ni.gov.uk/articles/consent-examination-treatment-or-care">https://www.health-ni.gov.uk/articles/consent-examination-treatment-or-care</a></p>
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