A lifetime of specialist care

Royal Brompton & Harefield NHS
NHS Foundation Trust

Royal Brompton Hospital

# Paediatric critical care

# Information for parents and carers

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*This leaflet gives you general information about paediatric critical care. It does not replace the need for personal advice from a healthcare professional. Please ask us if you have any questions.*

Welcome to paediatric critical care at Royal Brompton Hospital. In this booklet you will find information about our paediatric intensive care unit (PICU) and paediatric high dependency unit (PHDU).

## Finding PICU and PHDU

The main entrance is on level 2, which is at street level, off Sydney Street. From the main entrance, walk past reception on your left and continue down the corridor, turn right and the lifts will be on your left. Both PICU and PHDU are on level 4.

The PICU is down the corridor from the lifts, past the hospital school. Please ring the bell to the right of the main door and tell us who you are visiting and we will let you in.

Once you are inside PICU, PHDU can be found about halfway down, on the right side of the ward

After entering, please remove your jacket / coat and wash your hands.

When leaving PICU, return to level 2 to exit onto Sydney Street.

## Hand washing

While you are in hospital you will notice all staff and visitors washing their hands or using alcohol gel. This is to prevent the spread of germs and infection. We ask that family members and visitors help us in this. Please wash your hands thoroughly at the sink on your right as you enter using the hot water and soap provided. Work up a lather / foam and wash for about 30 seconds.

## Your PICU multidisciplinary team (MDT)

When children are ill they need to be cared for not just by doctors and nurses, but also by other members of the multidisciplinary team (MDT).

There are PICU doctors and nurses at the bedside 24 hours a day. A consultant in paediatric intensive care is responsible for the care of your child 24 hours a day.

A senior nurse is in charge of each shift. The children have their own nurse during each shift. They are called bedside nurses and may be helped by a trainee nurse. However, as your child gets better they may be looked after by a nurse who is also caring for another child. Health care assistants (HCAs) support the bedside nurses. “Runners” are nurses who support the bedside nurses.

Your child may also be seen by members of the cardiology (heart), respiratory (lung), or surgical teams.

Your child’s medicines will be reviewed daily by a pharmacist. Physiotherapists, dietitians, speech therapists and occupational therapists may also help in your child’s care.

Other specialist staff may also be involved in the care of your child, such as doctors who specialise in:

- Anaesthesia (medication, such as sedation and painkillers)
- Radiology (X-rays and scans)

- Gastroenterology (stomach)
- Endocrinology (glands)
- Neurology (brains and nerves)
- Nephrology (kidney)

You, your child and family will be offered support from the family liaison service, play therapists, nursery nurses, hospital school, psychology, social support and welfare teams. All these people are part of the MDT.

## Ward rounds

The consultants and doctors on the unit carry out a regular routine check of the children three times a day. The medical needs of each of the children are discussed at these times. As it may be possible to overhear confidential medical conversations about other children, we ask parents to leave their child's bedside between 7am and 8am during the morning bedside ward round.

## Daily routines

| | |
|---|---|
| 7am | Specialist consultant ward round |
| 8am | Nursing handover |
| 9am | PICU consultant patient management meeting |
| 2pm | PICU consultant ward round |
| 6pm | PICU consultant ward round |
| 8pm | Nursing handover |

## Team simulation training

On most Mondays, between 3pm and 5pm, some of the paediatric doctors and nurses participate in our *SPRinT* (simulated paediatric resuscitation team training) courses on PICU. This helps to improve patient safety by allowing staff to practice dealing with critical situations on training mannequins (dolls), followed by a team discussion. During these times, you may hear emergency alarms and see people rushing about, just as they would in a real emergency. We hope that this does not upset you and your family during this already stressful time.

## Communication

The nurses and doctors will give you regular updates. You can book a meeting with the PICU consultant by asking the nurse in charge or the ward clerk.

For the families of children needing a longer stay on PICU we usually offer a weekly meeting to discuss their child’s progress. These meetings can include discussions with the multidisciplinary team.

If you have any other issues, please talk to the bedside nurse, runners, nurse in charge or the ward clerk.

## Research

Research is being carried out to discover better ways of treating children. You may be asked for permission to allow your child to be included in a research study. The research will be explained in detail. You are under no obligation to say yes and your child’s care will not be affected by your decision.

## Your child's needs

Your child will need your support while he or she is on PICU, and we want to help you look after him or her as much as you can. However, it is important that you also take time to rest, eat and drink, and sleep. By looking after yourself, you are able to support your child.

It helps us to know about your child's character, any nickname they are called, habits, likes and dislikes and any other important family members. This will help your child to feel comfortable while they are on the unit.

## Sleeping and pain relief

Your child’s anaesthetists, doctors and nurses will do their best to minimise any pain that he or she may feel.

Even when your child is asleep, they may hear and recognise familiar voices and sounds. You can read or talk to your child, touch him or her and play favourite music / DVDs or specially recorded messages. Please could you bring in your child's favourite toy or comforter to put near them.

## Breathing

If your child needs help with breathing, we will give him / her medicine to go to sleep (so that there is no discomfort), and we will then pass a breathing tube through the nose or mouth and into his / her lungs. Once the tube is in place, it will be connected to a ventilator (breathing machine). This will help your child until he or she can breathe properly.

## Suctioning

To keep the breathing tube clear your child’s nurse may need to remove any secretions (mucus) that has collected using a suctioning tube.

The physiotherapist may also help remove any mucus by tapping and moving your child’s chest from side to side.

## Monitoring and alarms

Your child will have monitoring equipment attached while they are on PICU. Our nurses will set limits on the monitors. If a limit is passed the monitor will make a sound and the staff will check your child.

## Visiting

You can be with your child whenever you want to, except during the morning doctors' ward round, between 7am and 8am.

When we need to attend to a child we ask visitors to leave during that time, as it is safer for all the children in the room.

We ask that you are present when visitors come to see your child. (Please keep the number of visitors to a maximum of two.) Your child's siblings are welcome at any time. They should visit one at a time and always be supervised by a responsible adult. After 8pm, parents should be the only visitors. Exceptions may be made in special circumstances.

You are welcome to telephone the unit at any time, but please be mindful that answering calls takes the nurses away from their job of caring for the children.

Anyone who has an infection, including coughs, colds, diarrhoea and vomiting, should not visit; children in PICU can easily pick up infections and become even sicker. If you are ever in doubt, please speak to the nurse in charge.

## Mobile phones

Please keep your phones on silent whilst visiting as the noise can disturb the children. If you need to make or answer a call, then please do so outside PICU or in the parents' room.

The doctors and nurse in charge carry mobile phones to assist in the care of your child.

We ask you not to take photographs of the staff or visitors, unless they have agreed to be photographed. We also ask that you do not photograph any children other than your own.

## Clothes and toys

Wherever possible, we will dress your child. You are welcome to bring in their clothes, but please label them clearly as we cannot take responsibility for them while they are in the hospital.

We encourage the use of toys in the PICU and have a small selection. Please feel free to bring your child's own toys into hospital, especially anything that is a particular favourite.

## New mothers

When a newborn baby is admitted the child's mother can visit, if well enough, and a wheelchair will be available to get to and from the unit. The mother may stay on PICU / PHDU only after the team in maternity services have agreed.

## Midwives

If you need to see a midwife, please ask a member of staff. We will arrange for one of the community midwives from Chelsea and Westminster Hospital to visit you. However, if the problem is urgent, you may need to be seen at Chelsea and Westminster Hospital.

## Breastfeeding

While your baby is on PICU it is important to keep up your supply of breast milk, even though your baby may not be able to breast or bottle feed. You can express your breast milk and it can be frozen and stored, so that it is ready to be used whenever your baby needs it.

It is very important to remember to eat and drink well while you are expressing your breast milk. To help support mothers to do this we offer free meals vouchers that can be used in the hospital.

Electric or hand breast pumps are kept in the breastfeeding room on Rose Ward. Sterile bottles are available, please make sure you label the bottles with your name and the date, and give them to a member of staff to place them in the milk fridge. If you have any problems, please speak to any member of staff who will arrange for a member of the breastfeeding and expressing team (BEST) to help you.

All our HCAs and nursery nurses are trained breastfeeding advisors. One is usually available on each shift.

## Family liaison

The family liaison team provide support to children and their families. They can be contacted via the nurse in charge or the ward clerk.

## Play therapists

Play therapists are part of the hospital play team. They are specially trained to use play to help your child cope with any distressing experience they may have while in hospital, such as blood tests or operations.

## The psychology team

Having a child on PICU can be very stressful, not just for parents but also for your child's extended family, such as brothers, sisters and grandparents. If you would like to talk to someone about this, we can arrange for you to see a member of our psychology team, who can offer support and advice.

## Religious services

The hospital chaplains offer support to families of all religions and can be contacted at any time. The chapel and multifaith room can be found on level 2.

## Telephones

For incoming calls, you may use the direct telephone lines to the unit (please see the numbers at the end of this leaflet). If friends or relatives call, we will take a message but we ask that these calls be kept to a minimum. Hospital staff cannot give information about a child to anyone except his or her parents / guardians.

## Facilities

### Accommodation

One parent or carer can usually be accommodated, free of charge, in our parents' units. The rooms are on level 6 in Sydney Wing and in South Parade, a five-minute walk away. As your child gets better we may ask you to move accommodation.

It is not always possible to find accommodation for both parents. However, special consideration is given to parents with very sick children in PICU / PHDU and both parents can usually stay. We are sorry but we do not allow parents to sleep in the bed spaces next to your child as this may interfere with your child's care.

Accommodation is organised through the family liaison team, the ward clerk, or the nurse in charge.

## Eating and drinking

At first your child may not be able to eat or drink normally and may be fed through special feeding tubes directly into their stomach or special drips into their veins. When they can eat, please speak to the bedside nurse before you give them anything to eat or drink as they may only be allowed very small amounts. If your child has a special cup or bottle, please bring this in. We provide baby milk and food, but you may also wish to bring your baby's own milk / food.

There is a parents' kitchen on PICU, with facilities to make tea and coffee. There is also a fridge where you are welcome to store your own food, but please put your name on it. Children are not allowed in the parents' kitchen.

Food is available in the hospital from:

### The Brompton Café level 1

Opening times:

Monday to Friday

- Breakfast: 7am-10.30am
- Lunch: 12pm-2.30pm
- Afternoon: 2.45pm-5.30pm
- Dinner: 5.30pm-7.30pm

Saturday to Sunday

- Breakfast: 7am-10am
- Lunch: 12pm-2.30pm

### Sydney Street Coffee Shop, level 2

Opening times:

Monday to Friday

- 8am-4.30pm

Saturday to Sunday

- 2.30pm-7.30pm

Please note that these times may change.

Breastfeeding mothers are provided with food from the Rose Ward trolley free of charge.

## Parking

Parking is severely limited and only available in an emergency.

## Leaving PICU

When your child's condition improves, and he or she no longer needs specialist intensive care, we will arrange transfer; either to PHDU or to a ward – usually Rose Ward, next door. Occasionally, transfer can be to the children's ward in your local hospital.

## Adjusting to life after intensive care

When a child leaves PICU, this is usually a positive sign that your child is getting better. However, parents tell us that they can feel stressed and anxious at this time. For example, it can take time to get used to not having the one-to-one nursing care and constant monitoring that your child will have received on PICU. Most families find that they worry less with time and as they get to know the staff on the new ward.

## Family satisfaction survey

Inside the admission pack, you will find a family satisfaction survey. Please complete this survey when your child goes home. We are constantly trying to improve the service we provide and greatly value your feedback.

## For more information

You can contact paediatric critical care on the following telephone numbers:

The phone number for the hospital is **020 7352 8121**.

Direct line phone numbers are:

| | |
|---|---|
| PICU | **020 7351 8590** |
| PHDU | **020 7352 8121, extension 2400** |

# Your notes

If you have concerns about any aspect of the service you have received in hospital and feel unable to talk to those people responsible for your care, call PALS on 020 7349 7715 or email pals@rbht.nhs.uk. This is a confidential service.

Royal Brompton Hospital
Sydney Street
London
SW3 6NP
tel: 020 7352 8121
textphone: (18001) 020 7352 8121

Harefield Hospital
Hill End Road
Harefield
Middlesex
UB9 6JH
tel: 01895 823 737
textphone: (18001) 01895 823 737

Website: www.rbht.nhs.uk

إذا كنت ترغب في الحصول على ترجمة فورية لمضمون هذه الوثيقة إلى اللغة العربية، يرجى منك الاتصال بأحد
مستخدمينا بجناح المصلحة التي يتم فيها استشفائك. أحد موظفينا سيسعى لترتيب إجراءات الترجمة وإتمامها في
الوقت المناسب لك.

Brosurteki bilginin Turkçe tercumesi için tedavi goruyor oldugunuz bolume bas vurunuz. Bolum personeli tercumenin gerçeklesmesini en kisa zamanda ayarlacaktir.

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