



Paediatrics *2020*

The vision for our Child Health Service is to be a regional centre of excellence, empowering all families to maximise their children's health and potential.

Student Name:

Overview of the Children's Hospital

Children's Day Ward (CDW)

The CDW is a 9 bed unit staffed by 2 nurses. It accommodates children from birth until their 16th birthday, having a range of day case surgical procedures. These include ENT, Urology, Dental and general Paediatric surgery.

Children also come into the CDW for sedation for scans and infusions. A small number of children are also seen for paediatric surgical pre-assessment.

Children's Acute Assessment Unit (CAAU)

The CAAU is situated within the Children's Day Ward. CAAU patients are cared for by an allocated nurse and with the support of the day ward staff during the day. CAAU is open from 0730 until 2300 hrs for medical and surgical referrals.

CAAU caters for children who have been referred from GP or ED referrals triaged 3-5. All children referred to CAAU come via ED to ensure their triage status has not changed en route from the GP. See [CAAU](#) guidelines which are available on the intranet and in the department.

Children's Clinic (Outpatient Service)

The Children's Clinic is located on Level 5 of the Grace Neill Block. It is staffed with up to 2 nurses and an HCA.

The Children's clinics operate Monday– Friday, 0800 until 1630 hrs. The exception is the adolescent clinics that run until 1730 hrs.

There are a number of clinics run by Paediatricians, visiting clinicians and other specialities for the children, e.g. Oncology, Diabetes, Cardiology, and Epilepsy etc. Usually children are referred to the clinics by GP's or they attend for follow up visits. Children also attend the outpatient service for booked nursing procedures e.g. blood tests, oral challenges, pH probe studies and desensitizing injections.

Kenepuru Child Health

The Child Health Service at Kenepuru is a combination of Acute Assessment and Outpatient services and provides the same care as at Wellington hospital. It is open from 0830 until 1700 hrs Monday-Friday.

Paediatric Community Nurses

The paediatric service has a team of community paediatric nurses. They are based at both the Wellington and Kenepuru hospitals. The nurses visit children and their families in their homes providing care for complex and chronically ill children. They also run nurse led clinics for eczema and continence. To refer an inpatient to the community nurses, a referral must be emailed/faxed by nurses on the wards.

Wellington Inpatient Wards

Ward 1

Ward 1 cares for:

- Paediatric medical patients from birth to 16 years.
- Infectious diseases from birth until 16 years.

This is a 28 bedded ward including 5 negative pressure rooms which are based in the isolation unit. A Play specialist is based on the ward Monday-Friday.

Ward 2

Ward 2 cares for:

- Paediatric surgical patients from birth until 16 years.
- Other specialties (ENT, Ortho, Neuro) from birth until 16 years.
- Shared care service for oncology of all age groups.

It is a 23 bedded ward including 2 hepa filtered single rooms. The Oncology day unit is an additional 4 bedded unit where patients come for blood tests, reviews and to receive day chemotherapy.

A central regional health school teacher is based on the ward and ensures that children who are long term patients are keeping up to date with academic requirements. A play specialist is based on the ward Monday-Friday.

Contacts

Ambulatory Pediatrics (CDW/OPD /Kene Child Health/Paediatric community team)	Karen Bridge Charge Nurse Manger	Karen.Bridge@ccdhb.org.nz
Ward 1	Lynne Cowley Charge Nurse Manager	(04) 385 5999 ext. 5519
Ward 2	Rachel Moss Charge Nurse Manager	(04) 385 5999 Ext. 5518 Rachel.moss@ccdhb.org.nz
Nurse Educator	Victoria Hollier	DD (04) 918 5797 Res-PaediatricEd@ccdhb.org.nz
Clinical Nurse Specialist	Charlotte Stanczuk	DD (04) 9185797
Dedicated Education Unit	Clinical Liaison Nurses	RES-ChildHlthDEU@ccdhb.org.nz

The Clinical liaison nurses oversee all student placements, allocate preceptors and do the shift rostering. If you have any questions about your placement or unable to attend work you must contact the CLN via the email address RES-ChildHlthDEU@ccdhb.org.nz

Preceptors

In child health we have a dedicated education unit, you will have a variety of preceptors. The Clinical Liaison Nurse (CLN) will be your main contact during your placement for assessments, concerns and queries.

All student nurses will be allocated a Registered Nurse to work with for each shift. Student nurses do not get allocated a specific preceptor as it is difficult to have consistency when students are working Monday – Fridays and Registered Nurses are doing rostered and rotating shifts 24/7.

It is **your** responsibility to ensure the nurse you are working with is aware of your objectives for the day/week. You must provide evaluations and/or other paperwork to your preceptor/CLN in a timely fashion (i.e. not on the due date). Your preceptor/CLN will not complete any evaluations if you give it to them on your last day in the unit.

Expectations of the Student Nurse while in Paediatrics

Ward 1 and ward 2:

Morning : 0700hrs to 1530hrs
Afternoon : 1445hrs to 2315hrs
Night : 2245hrs to 0715hrs

Ambulatory Pediatrics:

Wellington

Children's Day Ward : 0700 to 1600
Children's Acute Assessment : 1430 to 2300
Children's Outpatients : 0800-1630
Kenepuru : 0830-1700

Expectations of student nurses working in Child Health:

- ❖ It is expected that you arrive on time for your shift and if you are going to be late or you are unwell and cannot come to the ward you telephone the ward and speak to the nurse in charge.
- ❖ You must complete the full shift that you are allocated to work – if you are unable to do so please discuss this with your CLN or preceptor.
- ❖ It is important for your preceptor or the nurse you are working with that he/she is aware of your learning objectives
- ❖ All documentation must be counter signed by a registered nurse, including admission and discharge documentation and clinical notes
- ❖ If you are not achieving your objectives please see the CLN or your preceptor (before the last week in the ward)
- ❖ Due to infection control a clean uniform must be worn, long hair must be tied back, cardigans must not be worn when working on the floor and your arms must also be bare below the elbow i.e. no rings/watches etc.
- ❖ Please ensure all documentation you need to complete for the polytechnic/university is accomplished before the last days in the ward – your preceptor/CLN will **not** complete any paper that is given to him or her if it is given in the last days of your placement
- ❖ Please do not come to work if you are sick. If you have a cold, diarrhoea or any infectious illness please stay home until this has resolved as it puts staff and patients at risk if you are unwell at work.

Safety Measures in Paediatrics

- ❖ Emergencies CALL 777
- ❖ Fire Raise the Alarm
- ❖ Inform Nurse in Charge and follow instructions

- ❖ All Paediatric patients' nursed in cots are to have to have the sides up and secure at all times.

- ❖ Ensure internal ward safety gates are used if required.

- ❖ Ensure all lock or coded doors remained closed at all times.

- ❖ Isolation Unit- If unsure about any isolation precautions always check with the nurse in charge before entering an isolation room.

- ❖ Always check the person with the child is the legal guardian and any other visitors have permission to visit.

- ❖ Report any concerns for patient safety to the nurse in charge.

- ❖ External entry to the children's ward is locked in the evening and overnight, use the intercom to identify people before allowing entry to the ward. Patient safety is paramount.

Family / caregiver information

Hot drinks

To ensure the children's safety parents/caregivers are unable to make hot drinks on the wards, they can choose to purchase a hot drink, obtain one from the Ronald McDonald room, or Hospi Parents/caregivers room outside the ward. Parents/caregivers must ensure that if they bring a hot drink onto the wards; they transport it in a cup that has a secure cover.

Level 4 Ronald McDonald room: 0800-1800 hrs each day

Level 3 Hospi Parent room: 1800-0800 hrs each day

The Ronald McDonald family room is staffed by volunteers, families require a card from the ward reception to enter the room.

Parents/caregivers phone calls

If parents/caregivers receive phone calls from family and friends at the nurse's station, take a message and number and the parents/caregivers can return the call from the parents / caregivers phone located beside the bathrooms.

Nurses stations

For privacy and patient confidentiality families and children are not permitted in the nurse's station. To ensure professional responsibility; we must also be aware of the conversations we have in any public areas. We cannot be sure who can over hear us talking, so it is important to be mindful of our conversations, tone and place.

New families and Patients

All children and families need to be warmly welcomed and orientated to the ward and the facilities available. Remember to give them an information brochure for the ward on admission. It is particularly important parents are familiarised with the wards parking policy, the facilities of the Ronald McDonald room, the Hospi parent's room and the wards policy for ONE parent to stay overnight with their child.

Treasure Hunt

This list is designed to help you become familiar with the environment, but is by no means exhaustive of all the things you will be required to locate.

- IV fluid store
- Medication Room
- Play Specialist
- Linen supplies
- Charge Nurse Manager Office
- NE/CNS Office
- IV and oral Syringes
- Kitchen
- Staff tea room
- Cleaners room
- Where to store your bags
- Sluice Room
- Isolation Signs
- Oxygen isolation "shut off" valve
- Dressing Supplies
- Alcohol Swabs
- Allied Health Referral Form
- Paediatric Community Nurse Referral
- Whanau Care Referral Form
- Discharge Information
- Store Room
- Blood Glucose Machine
- Plain Gauze
- Clinical policies & procedures
- "Notes on Injectable Drugs"
- Roster
- BP machine
- Suction Equipment
- Bio-hazard bags
- Tympanic and axilla thermometer covers
- Stationery supplies
- Photocopier
- Patient charts
- Laboratory forms
- Specimen containers
- Treatment Room
- Sterile Gloves
- Doctors office
- Patient/Caregiver Information Board
- Pacific Care Referral Form
- Scales
- Resuscitation Trolley
- Blood Ketone Machine

Objectives

Complete admission to discharge care plan (PADP)

Paediatric Vital Signs/Observations and normal ranges (PEWS)

The provision of appropriate care to the patient and whanau with support and supervision from the preceptor, including

- Accurate assessment
 - Competent implementation of care
 - Documentation
 - Referrals
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- Gain an understanding of the multidisciplinary team
 - Attend an MDT (Eating Disorder/Complex Care)
 - Practice good infection control measures
 - Pain management
 - Fluid management/Fluid balance
 - Family centered care

Common Presentations to Child Health

Presentations to Child Health Include:

- Gastroenteritis
- Respiratory Illnesses
 - Bronchiolitis
 - Pneumonia
 - Asthma
 - Cystic Fibrosis
 - Bronchiectasis
- UTI (Urinary tract Infection)
- Head Injuries
- Fractures
- Surgery: ENT, Ortho, General
- Haematology/Oncology
- Child Protection
- Mental health

Common Medications

Students are advised to read up on these before they attend the placement.

Medication doses are based on the child's weight and need to be measured accurately in syringe. Paediatric medications are usually available in liquid form if unable to swallow tablets, oral medications must be drawn up using an oral syringe.

Some Common Paediatric Medications include:

Paracetamol
Ibuprofen
Antibiotics
Topical anaesthetic creams e.g. Emla
Salbutamol
Oral sucrose

Dosing information for paediatrics can be found on the New Zealand Formulary for Children

<https://nzfchildren.org.nz/>

Pre-reading/Resources

Children's Developmental Stages

Normal Ranges for Paediatric vital signs

Assessment of paediatric pain

Evaluation of Clinical Experience

Nurse: _____ Date of placement: _____

Date of Evaluation: _____ Preceptor: _____

This evaluation is intended to offer feedback to the preceptor and their clinical area.

Clinical Learning	1 Strongly Agree	2 Agree	3 Neither agree or disagree	4 Disagree	5 Strongly disagree	Comments
The staff were welcoming and learned to know the students by their personal name						
The staff were easy to approach and generally interested in student supervision						
A preceptor(s) was identified/introduced to me on arrival to area						
One preceptor had an overview of my experience and completed my assessment						
An orientation to the clinical area was provided						
My learning objectives were achieved						
I felt integrated into the nursing team						
I formally met with the "named preceptor" at least fortnightly						
There were sufficient meaningful learning situations in the clinical placement						
How was the Preceptor?						
The preceptor assessed and acknowledged my previous skills and knowledge						
The preceptor discussed my prepared learning objectives						
The preceptor assisted with planning learning activities						
The preceptor supported me by observing and supervising my clinical practice						
The preceptor was a good role model for safe and competent clinical practice						
I felt comfortable asking my preceptor questions						
The preceptor provided me with regular constructive feedback on my practice						

Additional comments:

Please return this form to Charge Nurse Manager or Clinical Nurse Educator

Notes

Please use this space for notes.