

## Standard Operating Procedure

**THE ACUTELY ILL CHILD - PARENTAL (PATIENT) INVOLVEMENT IN ESCALATION OF CLINICAL CARE**

<b>SETTING</b>	Women's and Children's Division
<b>FOR STAFF</b>	Registered Practitioners and Student Nurses, Associate Practitioners, Nursery Nurses and Nursing Assistants under the direct supervision of a Registered Practitioner. All trainee Medical Staff and Medical Consultants
<b>PARENT, CARER and PATIENT</b>	Any parent or carer, infant, child or young person within the Division who has a clinical concern regarding their child's care (or their care if they are a patient) and would like a further clinical review.

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**Standard Operating Procedure (SOP)****AIMS:**

- To clarify the process of empowering parents to escalate concerns if they are worried about the clinical condition and care being delivered to their child, (or themselves if they are a patient).
- To ensure accurate and appropriate information is provided to parents on admission (elective and acute) regarding how they should escalate concerns about the care their child is receiving. Information is available on the following Trust websites:
  - the Intranet site
  - in the 'Going to Hospital' booklet
  - in the 'Welcome to Bristol Children's Hospital' booklet.

**PROCESS**

- Posters highlighting the above issues and identifying the escalation process (Appendix 1) should ideally be placed at each in-patient bed-space. Failing this, as a minimum it must be displayed in prominent locations in the ward area identified by the Ward Manager / Matron. This must include parent / carer relaxation areas.
- SBAR Labels (as over page) to be held in all Clinical Ward areas and by the Clinical Site Team (CST). An SBAR Label is to be placed in the child's health record and documentation of any parent / patient concerns to be made below this.

**REGISTERED PRACTITIONER ROLE:**

1. If a parent raises any clinical concern regarding their child with the ward Registered Practitioner, Ward Sister / Charge Nurse, the following process must be followed:
  - a. All aspects of the discussion, including any action points and, or escalation, to be documented in the child's health records ensuring the SBAR Label below has been used to commence the documentation.
2. If the above senior ward staff are not available, or it is 'out-of-hours' parents may request to speak to the Clinical Site Team (CST) member on duty for the Children's Hospital/NICU, with the aim of parents being able to further discuss their clinical concerns and where appropriate seek CST support to escalate their child's care for an additional clinical review.
  - a. All aspects of the discussion, including any action points and, or escalation, to be documented in the child's health records ensuring the SBAR Label below has been used to commence the documentation. Ensure ward sister / charge nurse is made aware of the concerns as their earliest opportunity.

## MEDICAL STAFF ROLE:

1. Medical trainees / Medical Consultant's to discuss any parental concerns as raised above with both the parents and the Registered Practitioner caring for the child, the Ward Sister / Charge Nurse and, or CST.
2. Medical trainees to ensure the child's Medical Consultant is made aware of the discussion, actions and, or escalation of care.
3. Ensure any escalation of care is carried out in a timely and appropriate manner, with the appropriate personnel e.g. PICU review, Emergency Call, Outreach Team.
4. All aspects of any discussion, including any action points and, or escalation, to be documented in the child's health records ensuring the SBAR Label below has been used to commence the documentation. Ensure ward sister / charge nurse is made aware of the concerns as their earliest opportunity.

## COMMUNICATION / DOCUMENTATION

- Any discussion with a parent or patient regarding clinical concerns raised regarding their child's care or their care must use the SBAR Label below to commence written documentation of the discussion in the child's health record.
- Labels to be held in each clinical ward area (location to be decided locally) and the CST.

### SBAR Label:

**S**ituation  
**B**ackground  
**A**ssessment  
**R**ecommendations

## FUTURE MEDICAL CONSULTANT DISCUSSION

- Discussion with the child's medical consultant can be arranged at a time mutually agreeable to both the consultant and parent. However any acute needs of the child must be actioned and documented immediately.

### RELATED DOCUMENTS

Clinical Protocol – Paediatric Emergency Calls  
<http://nww.avon.nhs.uk/dms/download.aspx?did=14645>

Wishes Document s:

<http://workspaces/sites/Teams/ChildrensPalliativeCare/default.aspx>

<http://nww.avon.nhs.uk/dms/default.aspx>

- Wishes Documents / Do not resuscitate documents

### SAFETY

If at any time the infant/child's condition deteriorates, call the Emergency / Cardiac Arrest Team and inform the relevant Medical Staff and Outreach Nurse.

### QUERIES

Clinical Site Team on extension 28445/7 or Bleep 3217 / 2968

## APPENDIX 1

## POSTER

# Listening to Parents

We want to hear from you if you have any worries or concerns about the clinical well-being of your child

## If you have a clinical concern:

- ✓ Please speak to your child's nurse or the nurse-in-charge (preferable the Ward Sister / Charge Nurse)
- ✓ If you feel you would like to discuss your child's condition further, please request to speak to a member of the Clinical Site Team (CST).
- ✓ Please be reassured that this conversation will be documented in your child's health records.

## If you have any general concern regarding your child's management:

- ❖ Please remember:
  - at any time you may ask to make arrangements for your child's consultant to meet with you.
  - during Monday-Friday you can discuss any concern you have about your child's care with the LIAISE team, in the Family Information Room, Level 2, BRHC. Ph: **0117 342 8065**

## And Patients

- if you are a patient, you can use all of the above but you can also ask to speak to our Young Person's Involvement worker who can be contacted through the LIAISE office.