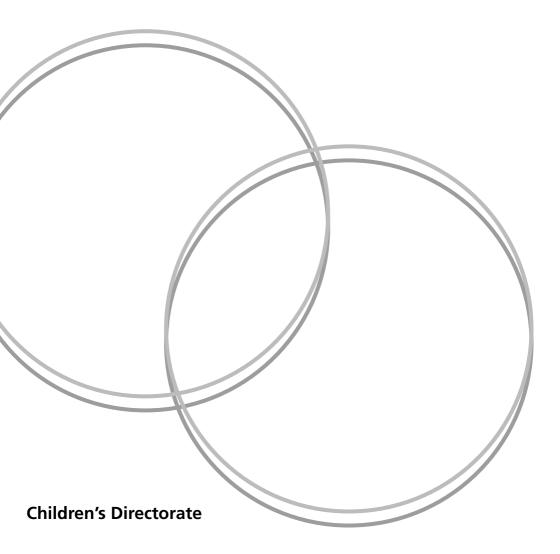


Admission to Discharge – helping your child's journey through hospital

Information for parents and carers



This leaflet contains information about some of the processes involved in your child being admitted to hospital, during their stay and when they are discharged (leave hospital).

There is often a high demand for hospital beds for children being admitted from the Emergency Department (ED) and Children's Clinical Decisions Unit (CDU). We also take children who are transferred in from other hospitals for specialist care and transfers from Critical Care within our hospital.

We strive to work efficiently, to make every child's journey as a patient a smooth one. Our aim is to make sure that children who require a bed in hospital have one when they need it, and that children who want to be cared for at home (where they and their parents/carers would rather be) can do so (as long as it is safe). This leaflet explains some of the ways we try to do this and also ways you can help us achieve this.



Please look out for this symbol, to let you know how you can help us.

Who decides if my child needs admitting to hospital?

Your child will be assessed by a doctor or nurse practitioner and a decision will be made about whether they need to be admitted to hospital. All children who need to be admitted will be seen by or discussed with an experienced children's doctor (Registrar or Consultant).

If the decision is made to admit your child, we will try to find a bed as soon as possible. This can take some time, as we may have wait for other children to be discharged from the hospital.

Which hospital will my child be admitted to?

The Horton General Hospital (HGH), in Banbury, and Oxford Children's Hospital (CHOX), in Oxford, are both part of the Oxford University Hospitals NHS Foundation Trust.

If your child is seen in the Emergency Department or in the Children's CDU in Oxford and the beds in the Children's Hospital are full, they may be admitted to the children's ward at the Horton General Hospital. We would only do this if it is felt by a senior children's doctor to be an appropriate and safe option, and we will tell you if this is necessary.

Sometimes (but very rarely) there are no beds available in either the Horton General Hospital or the Oxford Children's Hospital. If this is the case, we will need to find your child a bed in another nearby hospital. Again, we will only do this if it is appropriate and safe to do so, and we will let you know if this is necessary.



If your child needs to be admitted and it would be more convenient to you for them to be admitted to the Horton General Hospital, please let us know and we will see if this is possible.

How long will my child have to wait for a bed?

If your child was seen in the Emergency Department and needs to be admitted, we will aim to get them into an inpatient bed within 4 hours of arriving in the Emergency Department.

If your child was seen in the Clinical Decisions Unit (CDU) and needs to be admitted, they may be admitted to a bed in CDU, but ideally for no longer than 24 hours. If it is likely that they will need to stay longer than this, we will try to find a bed in the Children's Hospital or at the Horton General Hospital.

Due to a high demand for beds, there can sometimes be a long wait for a bed to become available. We appreciate your patience if this happens.

Which ward and bed will my child be admitted to?

There are a number of different wards, each with a different focus of care and with a range of different bed spaces (cubicles and bays). Where possible, we will admit your child to the most appropriate ward and bed available.

As the demand and availability of beds changes, we may move your child to a different area. For example, children with infectious conditions or those who are particularly vulnerable to infection may need to go into single cubicles.

What happens when my child is admitted to a ward?

If your child is admitted to a ward, they will be seen and assessed by a nurse and then reviewed by a doctor. The plan for the initial treatment of your child will be confirmed and shared with you.

The nursing staff will be able to let you know about the ward and the facilities available. Each ward has its own written information, which you should be given when your child arrives on the ward.

When will my child next be seen by a doctor?

When your child is admitted to hospital they will be seen at least once a day by a doctor.

Ward round

The ward round is where all children in hospital are seen by the medical team. When a child is first admitted, usually on the first morning after admission (if not before), they will be seen on the Paediatric Consultant's ward round. After this, they will be seen every day on the ward round by an experienced children's doctor (Registrar or Consultant).

The ward round starts at 9.00am and is usually finished by lunchtime. The more unwell children are usually seen first.



Use the ward round as an opportunity to ask any questions you have about your child's condition.

Routine reviews

A decision will be made during the ward round, or after discussion with the Consultant, about whether your child needs to stay in hospital and, if so, when they should be reviewed again. This may be early in the afternoon, in the evening, early in the morning (between 6.00am and 8.30am) or on the following day's ward round.

Unplanned reviews

If your child's condition changes, or if you are worried about them, they can be reviewed at any time. Please alert the nursing or medical staff if you have concerns. The speed at which this can happen will depend on their condition and other priorities in the hospital.

DEMAND FOR BEDS

Children in ED

Children in CDU

Referrals from GPs

Children from other hospitals requiring specialist care

Children transferred from Critical Care



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Children's value the Horton Hospital.



FREE UP BED FOR ANOTHER CHILD

Discharge home

Early morning discharge

Continuing antibiotics at home



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ward at General

BED IN ANOTHER HOSPITAL

Transfer to Horton General Hospital

Transfer to local hospital

Will my child see the same doctor every day?

It is usually not possible for the same doctor to see your child on a daily basis, although we do try to do this as much as possible. The team of doctors is led by a Consultant, who takes responsibility for all the children admitted during that week. Each child is regularly discussed with the Consultant on duty, to make sure the whole team is aware of what is going on and the care and treatment they need.

When will a decision be made to discharge my child?

We aim to keep children in hospital for as short a time as possible. When your child is reviewed, a decision will be made about whether they can be discharged. This could be at any of the reviews mentioned previously.

Early morning discharge

For some children we are able to predict that they are likely to be discharged the following morning. Where possible, these children will be identified by the medical team the night before. They will then be seen by the night team between 6.00am and 8.00am, when a decision should be made about whether they can be discharged that morning.

Sometimes emergencies or other priorities in the hospital may prevent the night team from carrying out the early morning review. This may mean that even if an early morning discharge has been planned it might not happen.



Once the decision has been made that your child can be discharged, we ask that they vacate their bed within two hours. This helps us to admit another unwell child, who may be waiting in the Emergency Department or Clinical Decisions Unit, as rapidly as possible.

How long will my child have to wait if they need medicines to go home with?

The most common discharge medications we use are available as 'ward discharge packs'. Where possible we will provide you with these, to reduce delays in getting your child home.

If your child needs other medications, you are likely to need to wait for these to arrive from our pharmacy. This may be several hours after the decision to discharge your child from hospital.

We will try to order discharge medicines in advance from the pharmacy, so they are ready when the decision is made to discharge your child.



If you need to wait for medications, your child may be asked to vacate their bed and wait in the playroom or in one of the cafes or restaurants in the hospital. The nursing staff will arrange with you how they will let you know when the medications are ready.



It may be possible for your child to go home whilst waiting for the medicines and for someone else to return to the ward later to collect them.

What if my child needs to continue with intravenous antibiotics after leaving hospital?

If your child needs to continue treatment with intravenous antibiotics (given through a drip into a vein), they may still be able to be discharged from hospital. They can either return each day to the Children's Clinical Decisions Unit (CDU) for the antibiotics, or the community nurses can give them the antibiotics at home. This is usually only possible if your child is on a once daily intravenous antibiotic.

If they can continue the treatment from home, your child will leave hospital with an intravenous cannula (small tube in their arm or hand). Nursing staff will give you advice on how to care for the cannula and where and when to come for the next doses of antibiotics. If your child needs a long course of intravenous antibiotics, we will try to arrange for the community nursing team to give the antibiotics at home.

Will my child need to return for a follow-up?

The medical team looking after your child will decide whether they need a follow-up appointment. This could be with your child's GP, in the Children's CDU or in Children's Outpatients.



If a follow-up appointment is suggested with your child's GP, you will need to arrange this. The GP will be sent a letter explaining what has happened to your child and any plans for future care and management.

If a follow-up appointment is to be held in the Children's CDU, you will be given the date and time of this when your child is discharged; please make a note of this.

If the follow-up appointment is taking place in Children's Outpatients, you will be sent an appointment in the post.

Further information

Each ward has its own individual information leaflets, which tell you about being a patient on that ward. The staff on each ward will also be happy to provide further information.

There are also information leaflets about many of the conditions for which children are admitted to hospital. Please ask if you have not been given one about your child's condition.

Let us know how we are doing



Please give us your feedback about how we are doing. We are encouraged by constructive feedback and welcome suggestions for improvement.

If you have a specific requirement, need an interpreter, a document in Easy Read, another language, large print, Braille or audio version, please call 01865 221 473 or email PALS@ouh.nhs.uk

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OXFORD HOSPITALS CHARITY (REGISTERED CHARITY NUMBER 1175809)

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