

HDU care in paediatrics

Paediatric inpatients

Information for parents and carers

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Caring for you

This leaflet gives general information about HDU care for children on B11.

A separate leaflet is available for children.

Please discuss your child's treatment with a member of staff. Do not rely on this leaflet alone for information about their care.

What is HDU care?

HDU stands for high dependency unit. Your child may stay in HDU if they need closer monitoring more support with breathing or treatment and more frequent checks.

Some children only stay for a few hours. Others may stay for several days. If your child needs more specialist care, we may transfer them to a paediatric intensive care unit (PICU).

Where is the children's HDU care area?

There is a designated HDU care cubicle on Ward B11. However, children who need HDU care can be cared for in any of our cubicles.

Why is my child here?

Your child is in HDU so we can watch them closely and give the care they need.

When they are well enough, they will move back to the main ward before going home.

What to expect when your child is in HDU

Your child will be attached to a monitor. This allows the nurse caring for them to record hourly checks of their vital signs, including:

- heart rate,
- oxygen levels
- number of breaths per minute

The nurse will also record:

- everything that your child has had to eat or drink.
- everything that comes out of your child's body (e.g. weighing nappies to see how much urine has been passed)

Sometimes in HDU children do not manage to eat or drink as they normally would. So, please check with your nurse before feeding them.

At the end of each bed there are charts where your nurse records this information. So, you will often see them writing at the end of the bed.

Unfamiliar environment

Some of the medical equipment on the unit can appear quite daunting until you know more about its function.

All children in HDU are connected to machines that beep and alarm frequently.

Staff understand these sounds and noises and will know how to respond. Please do not touch the machines.

If you have concerns, please speak to a member of staff.

HDU environment

Equipment used in HDU

If you have any questions, please speak to a member of the nursing team.

The following show commonly used equipment in HDU and explain what each item is used for. Equipment may vary depending on your child's condition.



Monitor – checks heart rate, breathing and oxygen levels.

Small stickers are placed on your child's chest, with a probe on their finger or foot.



Oxygen mask – gives extra oxygen when needed.



Nebuliser – turns medicine into a mist that your child can breathe in.



IV pump – gives fluids or medicine through a small tube in a vein (cannula).

The pump may beep to remind staff to check it.



Airvo machine – gives warm, moist oxygen through small tubes in the nose to help breathing.



CPAP (continuous positive airway pressure) – Helps your child breathe more easily by gently pushing air into their lungs through a mask or small tubes in their nose. This is often secured in place with a hat.

Your child may not be able to eat or drink while using this. They will have fluids through a drip.



Visiting

Parents can visit their children anytime during the day.

We have facilities for 1 parent to stay overnight at the child's bedside.

Staff must always be able to access your child for safety. So, please keep the bed space tidy and put your belongings in the locker provided.

We have a parent's room with a kettle, fridge and microwave for you to use.

This is a secure ward. So, please use the buzzer to gain entry and don't let anyone else in.

Whilst the best thing for a child in HDU is rest, peace and quiet, we do recognise the need for support from family and friends. Other visitors and family members are welcome to visit between the hours of 1:30pm and 7:30pm, please do not come before this time.

For the safety and comfort of all our patients and visitors, we operate a policy of only 2 visitors per bed space at any time.

If your child is having a test or examination, we may ask your visitors to leave at this time.

If you have any concerns about visiting, please speak to your child's nurse.

Ensure all visitors wash their hands.

Staff

Your child will be cared for by a registered children's nurse, and they will be assisted by health care assistants.

Student nurses may have placements on the ward – they will always ask for your consent before treating your child and will be supervised by a registered nurse.

If you have any concerns about students being involved in your child's care, please speak to your child's nurse.

Nursing staff handover and shift change between 7am and 7:30am and 8pm and 8:30pm.

Doctors will complete a ward round in the morning after 9:30am, where a plan of care will be made. However, your child will have regular medical reviews whilst in HDU. Please use these times to ask any questions you may have.

Medical students may have placements on the ward, and they will always ask your consent before taking history about your child's symptoms.

Comfort

The ward is an unfamiliar environment for your child, and they may be anxious or scared.

To make them feel more comfortable, please bring in a favourite teddy / toy, comforter or book.

There is a playroom with toys, games, puzzles and books that can be brought to your child's bed space.

Once they are well enough, they can visit the playroom.

We have a hospital play specialist, available Monday to Friday, who will visit your child in HDU.

You may like to read the leaflet for children in HDU that has pictures and puzzles and explains what it is like to be cared for in HDU.

There is a small TV at your child's bed space. It is free to use between 7am and 7pm.

Further care

We encourage you to take part in your child's care as much as you feel able to. Staff will be available to assist you if needed.

Remember to take care of yourself – eat, drink and get some rest when you can.

The parent's room is available to make drinks and have a break.

We work closely with the Anaesthetic Team, so please do not be worried if they come to check on your child. If your child becomes more unwell in HDU, they may need help with breathing. This could mean having a breathing tube placed in their windpipe while they are asleep, so we can support their breathing.

We may contact the North West Transport Services (NWTS – specialists) to arrange transfer of your child, if they need it, to an intensive care unit.

Warrington Hospital does not have a children's intensive care unit.

Your child will continue to be cared for by the Paediatric Team, with support from Anaesthetic Team, until NWTS arrive to transfer your child.

If this is needed, the nursing and medical team will discuss this with you in detail.

Sometimes we may contact NWTS for advice about the care of your child whilst they stay with us. Staff will discuss this with you.

Having a child that needs HDU care can be a very worrying time. Please speak to your child's nurse and they will help to answer any questions you may have. They can also arrange for you to speak to your child's doctor if necessary.