



SURNAME _____ NHI _____

FIRST _____

DATE OF _____ / _____ / _____ SEX _____

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Family members participating in Care Plan:

Date / time	Goal	Expected outcomes	Individualised care needs	Revision, date & time, name & signature	Signature nurse and family
	Family centred care	<ul style="list-style-type: none"> Family is orientated to the area and facilities Family is enabled and encouraged to ask questions and participate in care Complete "My name is" poster at bedside Identify estimated discharge date Key family support member is identified and documented Identified social and cultural requirements Family has identified specific cultural considerations and they are in place Cultural support provided at family meetings Care is negotiated with caregivers on a shift-by-shift basis and family is aware of care plan Activities of daily living (ADLs) are planned daily with family, meeting the needs of the individual child with consideration to development Family is fully conversant in all aspects of their child's care and are fully prepared to confidently care for child post-discharge 			
	Pain and comfort assessment and management	<ul style="list-style-type: none"> Identify child's known response to pain and comfort strategies Identify on a daily basis potential sources of pain and discomfort, including pre- and post-procedural management Undertake pain assessment in discussion with child 			

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		and/or caregiver complemented with an age appropriate pain scale <ul style="list-style-type: none"> Identify and implement any non-pharmacological approaches or techniques Identify and administer appropriate analgesic requirements Evaluate effectiveness of interventions and escalate further analgesic requirements Clinical care reviews provide the opportunity to assess pain on a regular basis 			
	Child is well prepared during hospitalisation and for application of hip spica plaster cast	<ul style="list-style-type: none"> Pre-op education to child and family Discuss the Hip Spica Patient and Family Information booklet with the family Observe the patient and their family for signs of anxiety Explain all procedures to patient and their family Refer to the ward play specialist for developmentally appropriate activities Ensure play/distraction activities are available for the patient 			
	The patient has an uneventful post-operative period	<ul style="list-style-type: none"> Ensure child is recovered sufficiently from the anaesthetic to return to ward Post-operative recordings as per RBP <ul style="list-style-type: none"> TPR half-hourly for 4 hours, then 4-hourly PEWs until discharge 			



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		<ul style="list-style-type: none"> Report any elevated PEWS Score to the Charge Nurse/ Shift Coordinator/Orthopaedic team 			
	<p>Maintain optimal tissue perfusion and monitor neurovascular observations to ensure circulatory and nerve function is maintained</p> <p>COMPARTMENT SYNDROME = Any condition in which structures (most often vessels, nerves or tendons) are constricted within a confined space</p>	<ul style="list-style-type: none"> Assess neurovascular obs as per RPB Half-hourly for 4 hours 1-hourly for 24 hours 4-hourly until discharge Notify Charge Nurse/Shift Coordinator/Orthopaedic team if neurovascular obs alter Elevate affected limb ensuring that the spica cast is well supported with pillows Split cast if required as per RBP Encourage active/passive movement to maintain circulation Ensure adequate play/distraction activities are available Assess plaster cast 2-hourly for pressure area 			
	<p>Minimise complications from increased abdominal pressure related to application of hip spica (due to positioning of spica causing pressure on phrenic nerve, resulting in respiratory compromise</p>	<ul style="list-style-type: none"> Monitor and document vomiting, nausea and abdominal pain Notify Charge Nurse/Shift Coordinator/Orthopaedic team as appropriate Post-op observations as per PEWS chart Monitor for signs of distress or decreased feeding. Notify Charge Nurse/Shift Coordinator/Orthopaedic team of any changes. Document in the patient's clinic notes 			



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	Child remains comfortable	<ul style="list-style-type: none"> • Ensure the patient has a current Glamorgan Score with a minimum of daily scoring. Initiate the appropriate associated bundle of care – document this in the nursing care plan and the clinical notes. • Ensure the plaster is dry on discharge • Careful positioning of whole cast and supporting knee's with pillows • When turning, ensure affected limb is elevated and pillows placed between legs • Provide monkey bars for older children to assist with mobility in the bed 			
	Provide patient/families with education regarding care of hip spica cast	<ul style="list-style-type: none"> • When plaster is dry, ensure the hip spica is sleeked around groin to prevent cracking and soiling of cast • Discuss with and demonstrate to the patient and their family the correct lifting technique for hip spicas • Demonstrate and discuss positioning • Refer to the occupational therapist for the assessment and provision of equipment for the family at home after discharge • Refer to the ward social worker for a social assessment and referrals as appropriate • Refer to Paediatric Homecare/District Nursing if appropriate • Ensure a follow-up clinic appointment has been requested 			



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	Discharge planning and preparation	<ul style="list-style-type: none"> Discuss with family on daily ward round estimated date of discharge Assess discharge needs and supports with family and MDT and begin preparation for discharge early including referrals, equipment, medications and education Infectious concerns Discuss implications with family for: <ul style="list-style-type: none"> Return to school/early childhood centres/kohanga reo Returning to normal level of daily activities (inclusive of group and cultural activities) Check immunisation status and opportunistically immunise Arrange discharge meeting if required Educate family on normal course of illness, concerning signs and symptoms of recurrence and how and where to seek help Follow-up referrals and appointments specific to presentation: <u>hearing assessment</u> 			