

**PATIENT FLOW & BED
UTILISATION PROTOCOL**

PURPOSE

To provide guidance for when it is necessary to admit patients to the swing beds that are available for adults or children.

To ensure that children and young people are cared for in the hospital in a setting which ensures their safety, reduces stress and promotes their growth and development. This is best achieved by grouping children and young people together in developmentally appropriate settings, separate from adults.

To ensure that adults that are being cared for by paediatric staff are receiving appropriate care to ensure their safety and wellbeing.

No adults are to be admitted to the rooms that have been delineated for paediatric patients only.

EXCLUSIONS

- Maternity patients
- Suicidal or drug and alcohol related young people or adults

STANDARDS TO BE MET

BEST PRACTICE	RATIONALE
<ul style="list-style-type: none"> • Patients admitted to the swing beds are to be staffed based on TrendCare NHPPD. • Decision to admit to the swing beds requires the approval and discussion with the Hospital Co-ordinator or Duty Manager and the Clinical Nurse Manager / Clinical Nurse Co-ordinator or Shift Leader co-ordinating the shift • Careful assessment is required to ensure that: <ul style="list-style-type: none"> – Adult patients can be appropriately cared for. – The safety of children and their families / whanāu is maintained. – The ward nursing staff can meet the nursing care requirements of the patients. 	<ul style="list-style-type: none"> • To ensure staffing is adequate in terms of numbers and competency to provide safe patient care. • The safety of the children, young people and adults can be maintained.
<ul style="list-style-type: none"> • Only after all other options for accommodating adult patients have been exhausted, and there is adequate nursing staff, patients who meet the following criteria can be considered for admission to the swing beds and nursed by paediatric staff. <ul style="list-style-type: none"> – Female – Ambulant and not requiring any walking devices to assist in their mobility. – Have a non-critical diagnosis and their condition is stable 	<ul style="list-style-type: none"> • It may be distressing for a patient losing her baby to be cared for in a children and young person's ward. • As a significant proportion of child admissions to the Children's ward are for infectious diseases, side rooms should be retained for paediatric acute care delivery.

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BEST PRACTICE	RATIONALE
<ul style="list-style-type: none"> No adult patient must be admitted to the same room as a child or young person unless they are next of kin and also require admission as a carer. Consideration of gynaecology patients being given the option to be cared for in an adult ward e.g. Maternity if swing bed not deemed appropriate. 	

REFERENCES

- New Zealand Handbook Health and Disability Sector Standard (Children and Young People) SNZ HB 8134.4:2004

ASSOCIATED DOCUMENTS

- Bay of Plenty District Health Board policy 6.2.3 Patient Flow & Bed Utilisation
- Bay of Plenty District Health Board policy 6.2.3 protocol 2 Patient Flow - Booked Admissions
- Bay of Plenty District Health Board policy 6.2.3 protocol 4 Patient Flow - Day Stay Unit Opening Overnight - Tauranga
- Bay of Plenty District Health Board policy 6.2.3 protocol 5 Patient Flow - Transition Lounge - Transfer of Patient Pending Discharge
- Bay of Plenty District Health Board IOC.B1.1 Business Continuity - Variance Response Management (VRM) - Ward / Unit
- Bay of Plenty District Health Board IOC.S1.1 SOP - Acute Patient Journey
- Bay of Plenty District Health Board IOC.S1.2 SOP - Acute Patient Journey - ED, Inpatient Teams, Bed Management and Wards
- Bay of Plenty District Health Board IOC.S2.1 SOP – Acute Patient Journey – Whakatane Hospital
- Bay of Plenty District Health Board IOC.S2.2 SOP – Acute Patient Journey – ED, Inpatient Team, Bed Management and Wards – Whakatane Hospital

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