**GUH paediatric ward / CEAU**

**Paediatrician decision to refer to CCTH - IV/IM/SC Abx, Respiratory/Gastro/Disimpaction/Wound/ UTI – See clinical pathways.**

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**Plan agreed with duty Consultant /medical team**

**Re-admission to ward/CEAU**

**Deliver intervention as agreed, review and reassess**

**Duty Paediatric Consultant/ medical team contacted for urgent advice. Bleep (via switch or dial 76)**

**Ward Consultant - 3325**

**CEAU -3318**

**Concern and /or a deterioration in clinical condition**

**(PEWS and SBAR to be completed)**

**Assessment, intervention, care and support given as required by CCTH Team**

**Patient admitted by CCTH to virtual ward on CWS and database**

**Referral accepted- confirmed by telephone. Referral allocated.**

**CCTH to contact family to arrange review in centre. Home visits are discussed on an individual basis**

**Ward nurse to complete CCTH E referral form on CWS and call CCTH to ensure capacity**

* **CCTH working times 08:30-18:00, 7 days a week.**
* **CCTH – Covers Caerphilly and Blaenau Gwent, Newport, Torfaen and Monmouthshire**

**Please call CCTH to ensure capacity to accept referral- Risca HC, CCTH Office 01633 618010**

**Blue – Ward Nurse/ referrer.**

**Purple - CCTH Nurse**

**Green - Doctors**

**Discharge**

**Intervention complete**

**Discharge notification completed by medical team. CCTH documentation returned to GUH. Discharge from CCTH virtual ward and dashboard.**

**(as per referral process)**

**Medical team complete discharge summary in draft with clear plan of care and any relevant information to support the care in the community.**

**When care complete discharge notification to be completed by medical team**

**Care delivered by CCTH to be discussed with CCTH team daily in morning handover Via telephone - document on CWS E-form**

**Care continued as an inpatient/ admit to ward**

**Referral declined**

**Referrer & Medical team informed of reason.**