

# Leaving the Intensive Care Units at GOSH

The background of the entire page is a photograph of a man with short dark hair and a light beard, wearing a grey sweater over a light blue t-shirt. He is looking towards the left of the frame with a thoughtful expression. In the foreground, a young child with dark hair is lying in a hospital bed, wearing a light blue hospital gown and looking up towards the man. The bed has white linens and a green patterned headboard.

Information for families

Great Ormond Street Hospital  
for Children NHS Foundation Trust



**This leaflet explains about the process of discharging a child from the Cardiac Intensive Care Unit (CICU), Alligator, Paediatric Intensive Care Unit (PICU) and the Neonatal Intensive Care Unit (NICU) at Great Ormond Street Hospital (GOSH).**

**This leaflet supports the information that the intensive care team will give you before and after leaving the unit. When your child's condition improves and they no longer need specialist intensive care, we will arrange transfer to another ward. The medical and nursing staff will discuss with you the most appropriate place for your child to receive ongoing care; this may be another ward at GOSH or it may be a ward at your local hospital.**

## Transfer to another ward at GOSH

Your child is likely to be transferred to another ward at GOSH if:

- They need to carry on having specialist care or investigations
- They are already a regular patient at GOSH and are receiving ongoing care here

Occasionally, your child is transferred to another ward at GOSH because a bed is not available at your local hospital. There are many different specialties at GOSH dealing with a wide variety of complex conditions. We will try to transfer your child to the most appropriate ward, so that they can receive ongoing care.

Before your child is moved, the medical team will speak to the ward doctors to explain fully about your child's condition and treatment. The nursing staff will also be given a full explanation about your child's care. The aim of both these 'handovers' is to make sure that everyone caring for your child knows about the reason they needed intensive care, their current condition and planned treatment. Your child will be seen by a Clinical Site Practitioner, who will assess them on the intensive care unit, ensure that they can be cared for appropriately on the allocated ward and will also assess them again after they have transferred to the ward.

The hospital can only guarantee accommodation for one parent once your child leaves intensive care. On some wards it is possible for one parent to sleep by their child's bed, but if space is limited, the Accommodation Office will arrange alternative accommodation in or near the hospital. If both parents want to stay, they can supply a list of local hotels for which you may pay a reduced rate.

All of your child's meals will be provided on the ward; special diets are available on request. If you are breastfeeding your baby and staying in hospital accommodation, you are entitled to food vouchers. Please ask ward staff for the form to request these. Baby milk and food is provided on the ward, as are some nappies for the first few days, but then you will need to bring in your own supply.

When your child is well enough to be transferred to the ward, they will require a less intensive level of nursing and medical input, compared to what was required on intensive care. On the ward, your child will be allocated a 'named nurse' for each shift, although they will also be responsible for the care of other children at the same time.



## Transfer to a ward at your local hospital

Babies are transferred to other neonatal or paediatric units as soon as they do not need the specialist services at GOSH anymore. Premature babies may need to go to other neonatal intensive care units to continue to recover and grow over longer periods of time. Babies can be transferred to any hospital within their local network according to their clinical need. This is to provide the best possible care for your baby as well as trying to keep them as close to your family home as possible. If they still need ongoing intensive care, they will be transferred by a doctor and a nurse. If you have breast milk in the fridge or freezer at GOSH, please remind your baby's nurse before transfer so it can be sent with your baby.

Children will be transferred back to the paediatric ward at your local hospital. Occasionally this is not possible, but we will try to find another hospital as close to home as possible. It is important that your local health services are involved sooner rather than later to plan any ongoing care that your child may need at home.

The nursing and medical staff at GOSH will tell your local hospital about everything that has happened to your child while in intensive care, and the treatment needed to meet their needs now and in the future. The nurses at GOSH will arrange transport for the journey, and a nurse will accompany your child. One parent may be able to travel with them.

If you have been staying in hospital accommodation at GOSH, please leave your room as soon as you have confirmation of your child's transfer, so the room can be given to another parent in need, returning the key to the Accommodation office. Please make sure you have all your belongings with you when you leave. Your deposit will be returned to you.

If your child has any follow-up appointments planned, we will send you a letter in the post, so please make sure we have your correct details.

## Adjusting to life after intensive care

Discharge from intensive care is usually a positive sign that your child is getting better. However, parents tell us that they can also feel stressed and anxious at this time. It can take time to get used to not having one-to-one nursing care and constant monitoring that your child will have received on intensive care. It can also take time to adjust to only one parent or carer being able to stay overnight. Most families find that they worry less with time and as they get to know the staff on the new ward.

However, if you have any particular concerns about your child's discharge plans, please discuss them with the staff on intensive care. The Family Liaison team can also offer support.

## Sources of information and support

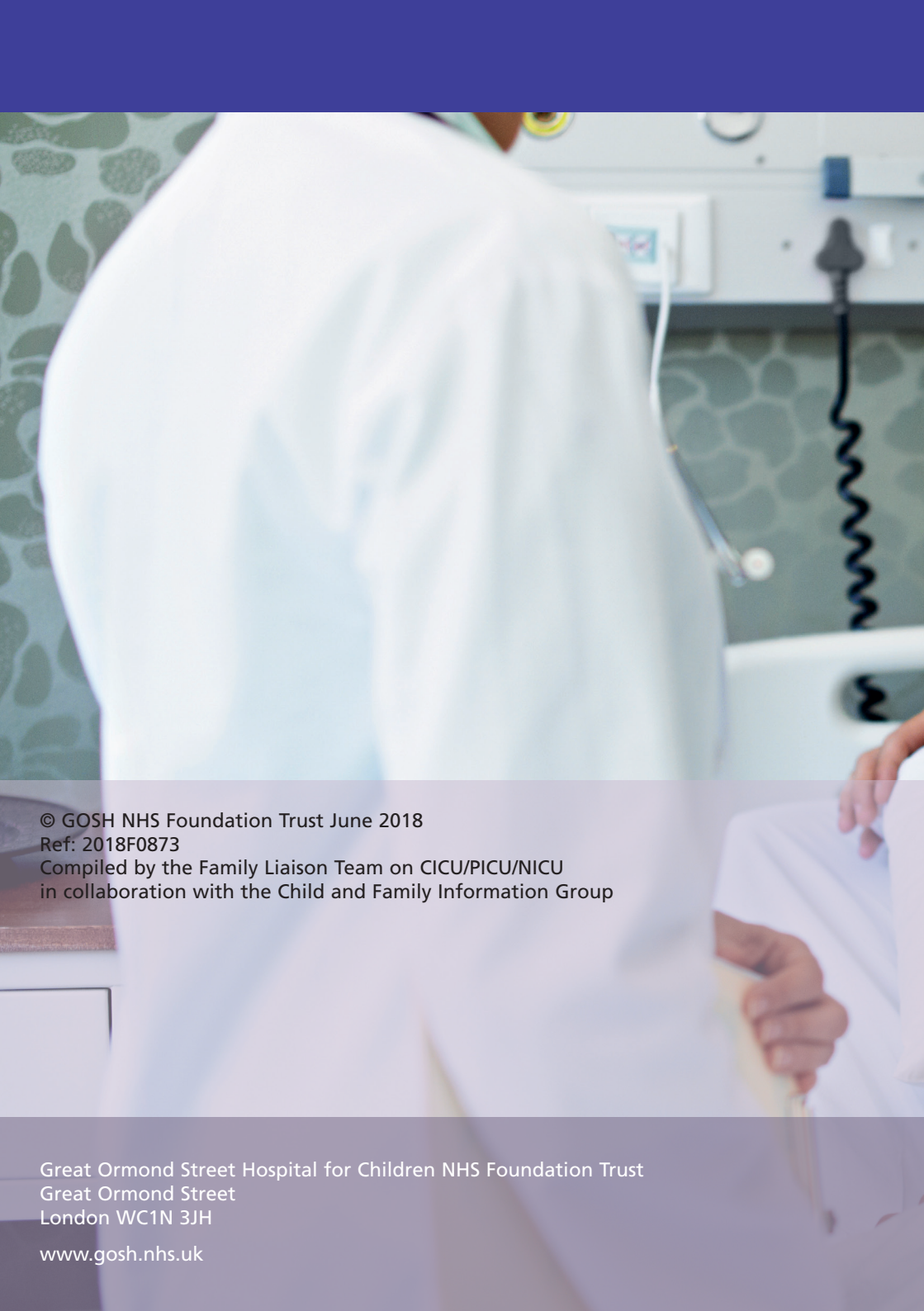
We recognise that your child's needs (and your family's) continue beyond intensive care. These needs may include those related to health and education, as well as social, emotional and psychological needs. The team can give you information about organisations that can help and refer you to them if you want. Previously, we have referred families to various organisations, such as charities, voluntary groups, schools and education departments, local mental health teams and social services.

There are also some organisations that you can contact yourself, now or at any point in the future:

- **Contact** – for families with disabled children – offer support and advice on various topics including education, finance and welfare. Call their helpline on 0808 808 3555 or visit their website at [www.contact.org.uk](http://www.contact.org.uk)
- **Family Lives** offer parenting and family support. Call their helpline on 0808 800 2222 or visit their website at [www.familylives.org.uk](http://www.familylives.org.uk)

We are fortunate to have a specialist welfare rights service on site, delivered by Camden Citizens Advice in partnership with GOSH. They give advice face-to-face, by telephone and by e-mail as well as carrying out casework. They are only able to see families whose child has been an inpatient at GOSH for more than three weeks. Referrals are made through the Social Work or Pals teams. You can also use their website at [www.adviceguide.org.uk](http://www.adviceguide.org.uk) to find details of local branches.

If you have any questions about your child's transfer from intensive care, please contact the Family Liaison team on 020 7813 8207 (PICU/NICU) or 020 7762 6357 (CICU/Alligator)



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Compiled by the Family Liaison Team on CICU/PICU/NICU  
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