



PAEDIATRICS

**A NATIONAL MODEL
OF CARE FOR PAEDIATRIC
HEALTHCARE SERVICES
IN IRELAND**

**CHAPTER 20:
PAEDIATRIC
CRITICAL
CARE**



Féidhmeannacht na Seirbhíse Sláinte
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**ROYAL
COLLEGE OF
PHYSICIANS
OF IRELAND**

20.0 PAEDIATRIC CRITICAL CARE

A model of care for paediatric critical care is currently being developed by the National Clinical Programme for Critical Care.

A paediatric critical care unit (PCCU) is a specialised facility within a children's hospital charged with the care of infants and children, which is staffed by a specialist team and is designated to provide an increased level of detailed clinical observation, invasive monitoring, focused interventions and technical support to facilitate the care of critically ill paediatric patients over an indefinite period of time. A PCCU will care for patients that are typically aged between birth up until their sixteenth birthday, diagnosed with life-threatening potentially recoverable conditions, post-operative patients who may benefit from close nursing or technical support and children with chronic complex medical co-morbidities which exceed the capabilities of other clinical care areas within the hospital. In Ireland, the two PCCUs are currently located in Our Lady's Children's Hospital Crumlin (OLCHC) and Temple Street Children's University Hospital (TSCUH).

The PCCU team is comprised of paediatric intensivists, nursing, pharmacists, and allied professions, such as clinical engineering, physiotherapists, dietitians, speech and language therapy, occupational therapy, social workers and psychologists) who are certified in, and / or have received recognised specialised training particular to their profession in the care of critically ill infants and children. These individuals should deliver care within a PCCU that conforms to agreed guidelines and standards particular to their professional regulatory bodies.

There are four levels of paediatric critical care – Level 1 (high dependency care requiring nurse to patient ratio of 1:2), Level 2 (critical care requiring nurse to patient ratio of 1:1), Level 3 (critical care requiring nurse to patient ratio of 1:1) and Level 3S (critical care requiring nurse to patient ratio of 2:1). Transport services are key – this will support the transfer of critically ill infants and children from the referring hospital to the PCCU in OLCHC and TSCUH.

There are a number of recommendations relating to the delivery of paediatric critical care services detailed in the Paediatric Anaesthesia Model of Care, which is available here:

<http://www.hse.ie/eng/about/Who/clinical/natclinprog/anaesthesia/modelofcare/paediatricanaesthesia.pdf>

This Model of Care should be considered in conjunction with the overall Model of Care for Paediatrics and Neonatology.