



The referring team should let the family know that KIDSNTS have a responsibility for delivering acute care transport to the West Midlands region, hence there will be a possibility of a last-minute change to agreed transport.

Please see Palliative Care Transport guideline

## KIDS NTS check list for the transfer of a child to a hospice or another acute hospital:

- Name of receiving professional and contact details: Ensure they are contacted the morning of the transfer to ensure bed still available and 20 minutes prior to arrival if necessary.
- How will the family travel?
- Any specific wish the child has that we could facilitate?
- Monitoring: Pre-agreed with the duty consultant, among the transport team and family
- ° Duly completed and signed Advance Care Plan/ RESPECT form which includes Do Not
- Attempt Cardio-Pulmonary Resuscitation agreement.
- ° Parents must hold the original copy of the ACP (Advance Care Plan).
- ° Medical discharge summary
- Symptom management plan for the child and agreement regarding drugs and doses to be used during the retrieval process
- Medications: Hospital TTOs (if there are any) and 'Blue Box' medications incorporated into the SMP (symptom management plan) and drug administration document (DAD)
- ° Management plan if on-route deterioration: ensure the family are clear about this
- ° Ongoing care needs of the child are arranged at home suction, NIV, Oxygen, or any other?
- Feeding and or hydration needs for the child for transfer and at the hospice / home.
- Referring team / palliative care team should have clear plans regarding who will write the MCCD. If discussion with HM Coroner is warranted, has this has been done?
- Has tissue donation was agreed in advance? KIDSNTS to communicate tissue donation nurse on 08004320559, at the time of transfer and update ETA to hospice / home.

## If the transfer of a child is planned for home: In addition to the above:

- Accessibility to the house and into the house of an ambulance
- □ Accessibility into the room the family wish the child to be it is the key consideration
- □ Family and CCN team clarity regarding symptom management after KIDS NTS have departed