## Friday Grand Rounds in NICU

### Sites where Local Guideline applies
- Neonatal Intensive Care Unit, JHCH

### This Local Guideline applies to:
1. **Adults**
   - Yes
2. **Children up to 16 years**
   - Yes
3. **Neonates – less than 29 days**
   - Yes Approval gained from the Children Young People and Families Network on 24 July 2017

### Target audience
- All clinicians that are present at the weekly Friday Grand round in NICU

### Description
- Provides structure for the running of Grand Round in NICU each week

### Keywords
- NICU, JHCH, Ward round, Multi-disciplinary, Teaching, Handover

### Document registration number
- JHCH_NICU_03.10

### Replaces existing document?
- No

### Related Legislation, Australian Standard, NSW Ministry of Health Policy Directive or Guideline, National Safety and Quality Health Service Standard (NSQHSS) and/or other, HNE Health Document, Professional Guideline, Code of Practice or Ethics:

### Prerequisites (if required)
- N/A

### Local Guideline note
- This document reflects what is currently regarded as safe and appropriate practice. The guideline section does not replace the need for the application of clinical judgment in respect to each individual patient but the procedure/s require mandatory compliance. If staff believe that the procedure/s should not apply in a particular clinical situation they must seek advice from their unit manager/delegate and document the variance in the patients’ health record.

### Position responsible for the Local Guideline and authorised by
- **Pat Marks. General Manager / Director of Nursing CYPFS**

### Contact person
- Jennifer Ormsby NICU Guideline Coordinator NICU JHCH

### Contact details
- [Jennifer.Ormsby@hnehealth.nsw.gov.au](mailto:Jennifer.Ormsby@hnehealth.nsw.gov.au)
- Phone 02 4985 5304

### Date authorised
- 25 July 2017

### Review date
- 25 July 2020

### Issue date
- 13 September 2017
RISK STATEMENT

This local guideline has been developed to provide guidance to clinical staff in NICU to assist in understanding the structure of the Friday Grand Round in NICU as an integral part of information and communication to assist in caring for the neonate. It ensures that the risks of harm to the neonate are identified, communicated and managed.

Any unplanned event resulting in, or with the potential for injury, damage or other loss to infants/staff/family as a result of this management must be reported through the Incident Information management System and managed in accordance with the Ministry of Health Policy Directive: Incident managementPD2007_061. This would include unintended injury that results in disability, death or prolonged hospital stay.

Risk Category: Communication & Information

GLOSSARY

<table>
<thead>
<tr>
<th>Acronym or Term</th>
<th>Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td>NICU</td>
<td>Neonatal Intensive Care Unit</td>
</tr>
<tr>
<td>CNC</td>
<td>Clinical Nurse Consultant</td>
</tr>
<tr>
<td>NNP</td>
<td>Neonatal Nurse Practitioner</td>
</tr>
<tr>
<td>NUM</td>
<td>Nursing Unit Manager</td>
</tr>
<tr>
<td>SCN</td>
<td>Special Care Nursery</td>
</tr>
</tbody>
</table>

GUIDELINE

This Guideline does not replace the need for the application of clinical judgment in respect to each individual patient.

Quality improvement in patient care processes requires education and training of the entire care team. Bringing together medical, nursing, and allied health faculty together for multidisciplinary grand rounds is a practical solution towards enhancing meaningful education and collaboration for quality improvement activities.

Structure for NICU Friday Grand Rounds

Objective of grand rounds

- A multidisciplinary team approach to decision making in complex patients in NICU. A process of detailed handover of complex neonatal patients
- An opportunity for robust multidisciplinary team discussion and education around complex medical, nursing and social issues
- Improving presentation skills for junior medical staff, Nurse Practitioners (NNP’s), and clinical nursing staff
Time & duration
- Clinical discussions from 9:30am to 11am
- Every 2nd week, presentation by 4th year medical student on a current topic – 10:45am to 11am
- Discussion with Microbiology team 11am to 11:15am

Type & maximum number of patients for discussion
- Patients with complex/important issues (clinical & non-clinical)
- Maximum 5 patients

Who decides these patients?
- Primarily the on-service Neonatologist for ICU with input from Neonatologist for SCU and the NUM/Team Leader

Who attends the grand rounds?
Any one affiliated to the NICU is welcome to attend and participate at grand rounds. Below is a suggested list of personnel to allow fulfilment of the objectives of grand rounds.
- All Neonatologists try to attend
- All fellows
- All registrars & NNPs on the roster (excused for urgent clinical work)
- The clinical nurse caring for the patient
- Team leaders for NICU & SCU (at least one should be present)
- Nurse educators/CNC’s
- Dietitian/Social work
- Allied health (Physiotherapist, Speech Pathologist)

Who ‘chairs’ the grand rounds?
- Neonatologist for NICU (or chosen representative)

Who presents at grand rounds?
- Primary patient summary should be by the registrar/ NNP
- Clinical nurse – to provide input on current clinical status
- Fellow/Neonatologist for NICU to then add/amend if required and co-ordinate the discussion around the main issue or issues
- Social work / allied health feedback sought as appropriate
Communication

Anyone is free to raise issues for discussion and feel welcome to contribute to discussion around the issues being debated following completion of handover.

All staff should be mindful of communicating within the CORE values framework, and encourage collaboration from all members, with respectful behaviour encouraged by having one person talk at a time, and to treat each issue or question raised in a respectful manner (HNE Health Values-link on front page).

All phones should be kept on silent and calls should be taken outside the room to prevent disruption of the discussions.

Paperwork/Folders required to be brought to grand rounds

- Patient clinical handover folder (cheat sheet)
- Clinical progress notes– Plan from Grand Rounds to be documented by the NICU registrar/NNP
- Patient observation flowsheet can be brought at the clinical nurse’s discretion (without the hard plastic chart holder).
- All folders are to be ‘sanitised’ with large alcohol wipes before replacing them in bedside space/trolleys

During period of GR (9:30 to 11:00) – DECT phone “23171” – to be held by Level 2 registrar/NNP/Fellow

Following completion of Grand Rounds the medical team &/or clinical nurse should inform the patient’s family of the clinical discussion and the updated clinical management plan for their baby