

-7-

- Where to go on arrival
- What to bring
- Who to ask for information
- What to expect
- Confidentiality of personal information

10.9 The child and parents/carers will be informed of the plan of care, what treatment is being carried out or planned and why, and results of any tests as they become available.

Monitoring: Customer satisfaction survey.

10.10 Parents/carers will be allowed to visit freely and encouraged to participate with the ward staff in the care of their children.

10.11 Patients will be offered a selection of high quality food, which will include provision for patients with special diet requirements and preferences. A vegetarian option will be available at every meal. A special menu will be provided for children.

10.12 Overnight stay facilities will be available for parents/carers and relatives and also in the near vicinity for longer term stays.

10.13 Facilities for education will be provided and children will be encouraged to participate where appropriate. Links will be maintained with the child's school.

11. Neonatal Care Services

11.1 Facilities will be provided for nursing babies who need different levels of support in the neonatal period, including neonatal intensive care, neonatal high dependency care and special care.

11.2 Where it is anticipated that a baby will need intensive care, the opportunity should be offered to the parents to visit the unit before delivery and to become familiar with the surroundings, procedures and possible outcome.

11.3 Close liaison will be maintained with the Obstetric Department.

11.4 The atmosphere of the unit will be welcoming to parents and they will be encouraged to participate in their baby's care.

11.5 Parents will be kept well informed of events concerning their baby in a sensitive way, which ensures their understanding.

11.6 Good communication links will be maintained between the unit and general practitioner, health visitor, midwife and social worker to enable the family to be supported.

11.7 There should be sensitive arrangements for helping parents cope with handicap or bereavement and access to counselling for both parents and unit staff.

12. Discharge and Follow-Up

12.1 Discharge planning and implementation will be in line with HC(89)5. The discharge letter will be sent to the general practitioner within 10 working days of discharge where possible.