

*Please affix patient label*

Patient name:

Date of birth:

NHS/K number:

**This care plan should be reviewed on a daily basis to ensure collaborative working with parents, carers and nursing staff.**

**CHILDREN'S NURSING CARE PLAN**  
**Patient with a Paid Carers**

**Ward.....**



Date	Time	Nursing action	Date and time	Negotiated care (Tick for parent/carer to undertake)	Date and time
		<p><b>Carers wellbeing</b> Carers names</p> <p>1. _____ 2. _____ 3. _____</p> <ul style="list-style-type: none"> <li>• Carers agree to carry their personal identification at all times</li> <li>• Carers agree to report to the nurse in charge at the start of their shift</li> </ul>		<p>Local Induction Complete: Date: Date: Date:</p>	
		<p><b>Patient wellbeing (Delete if not appropriate)</b> <i>Personal hygiene</i></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Washing/bathing/dressing</li> <li><input type="checkbox"/> Oral care</li> <li><input type="checkbox"/> Nappy care</li> <li><input type="checkbox"/> Toileting support</li> </ul> <p><i>Supportive care</i></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Escorting to procedures</li> <li><input type="checkbox"/> Distraction</li> <li><input type="checkbox"/> Play and sensory stimulation</li> </ul> <p><i>Therapeutic care</i></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Physiotherapy</li> </ul> <p><i>Communication</i></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Carers will receive verbal updates as necessary from nursing and medical team</li> </ul>		<ul style="list-style-type: none"> <li><input type="checkbox"/> Washing/bathing/dressing</li> <li><input type="checkbox"/> Oral care</li> <li><input type="checkbox"/> Nappy care</li> <li><input type="checkbox"/> Toileting support</li> <li><input type="checkbox"/> Escorting to procedures</li> <li><input type="checkbox"/> Distraction</li> <li><input type="checkbox"/> Play and sensory stimulation</li> <li><input type="checkbox"/> Physiotherapy</li> <li><input type="checkbox"/> Carers will receive updates</li> <li><input type="checkbox"/> Carers will participate in medical review</li> </ul>	

	<ul style="list-style-type: none"><li><input type="checkbox"/> Carers will be encouraged to participate in the child daily medical review by providing feedback on patients ongoing condition</li></ul> <p><b><i>Patient Specific Care (negotiated and agreed with the Matron)</i></b></p> <ul style="list-style-type: none"><li><input type="checkbox"/> 1.</li> <li><input type="checkbox"/> 2.</li> <li><input type="checkbox"/> 3.</li> <li><input type="checkbox"/> 4.</li> <li><input type="checkbox"/> 5.</li></ul>		<ul style="list-style-type: none"><li><input type="checkbox"/> 1.</li> <li><input type="checkbox"/> 2.</li> <li><input type="checkbox"/> 3.</li> <li><input type="checkbox"/> 4.</li> <li><input type="checkbox"/> 5.</li></ul>	
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