

# PHYSIOTHERAPY SERVICES - ACUTE RESPIRATORY ON-CALL - SCH

## POLICY®

### DOCUMENT SUMMARY/KEY POINTS

- The On Call Acute Respiratory Physiotherapy Service is:
  - Requested only by a registrar or more senior medical officer following their review of the patient
  - For acutely ill children with deteriorating respiratory status
  - Provided between 2200hrs and 0800hrs, 7 days per week
  - Accessed via the Switchboard Operator

### CHANGE SUMMARY

- Due for mandatory review. Updated titles and content.

### READ ACKNOWLEDGEMENT

- All After Hours Nurse Manager (AHNM), physiotherapists and clinical nursing staff should read and acknowledge they understand the contents of this document.
- All medical staff should be aware of this document.

This document reflects what is currently regarded as safe practice. However, as in any clinical situation, there may be factors which cannot be covered by a single set of guidelines. This document does not replace the need for the application of clinical judgement to each individual presentation.

<b>Approved by:</b>	Director, Clinical Governance	
<b>Date Effective:</b>	1 <sup>st</sup> April 2017	<b>Review Period:</b> 3 years
<b>Team Leader:</b>	HOD	<b>Area/Dept:</b> Physiotherapy

# TABLE OF CONTENTS

<b>1</b>	<b>On Call Physiotherapy and Call-back Policy .....</b>	<b>3</b>
1.1	Flowchart: Ward Process for Physiotherapy Call-backs .....	3
1.2	Purpose and Scope .....	4
1.3	Responsibilities.....	4
	<i>Evening Physiotherapist .....</i>	<i>4</i>
	<i>Nurse caring for patient with deteriorating respiratory condition .....</i>	<i>4</i>
	<i>Nurse Team Leader (Team Leader or Clinical Coordinator).....</i>	<i>4</i>
	<i>Registrar (Page 44104) or ICU Medical Officer .....</i>	<i>4</i>
	<i>On Call Physiotherapist .....</i>	<i>5</i>
	<i>Switchboard Operator (2200hrs-0800hrs).....</i>	<i>5</i>
	<i>After Hours Nurse Manager .....</i>	<i>5</i>
	<i>Consultant Medical Officer (Admitting Medical Officer) .....</i>	<i>5</i>
	<i>Respiratory Clinical Lead Physiotherapist or delegate .....</i>	<i>6</i>

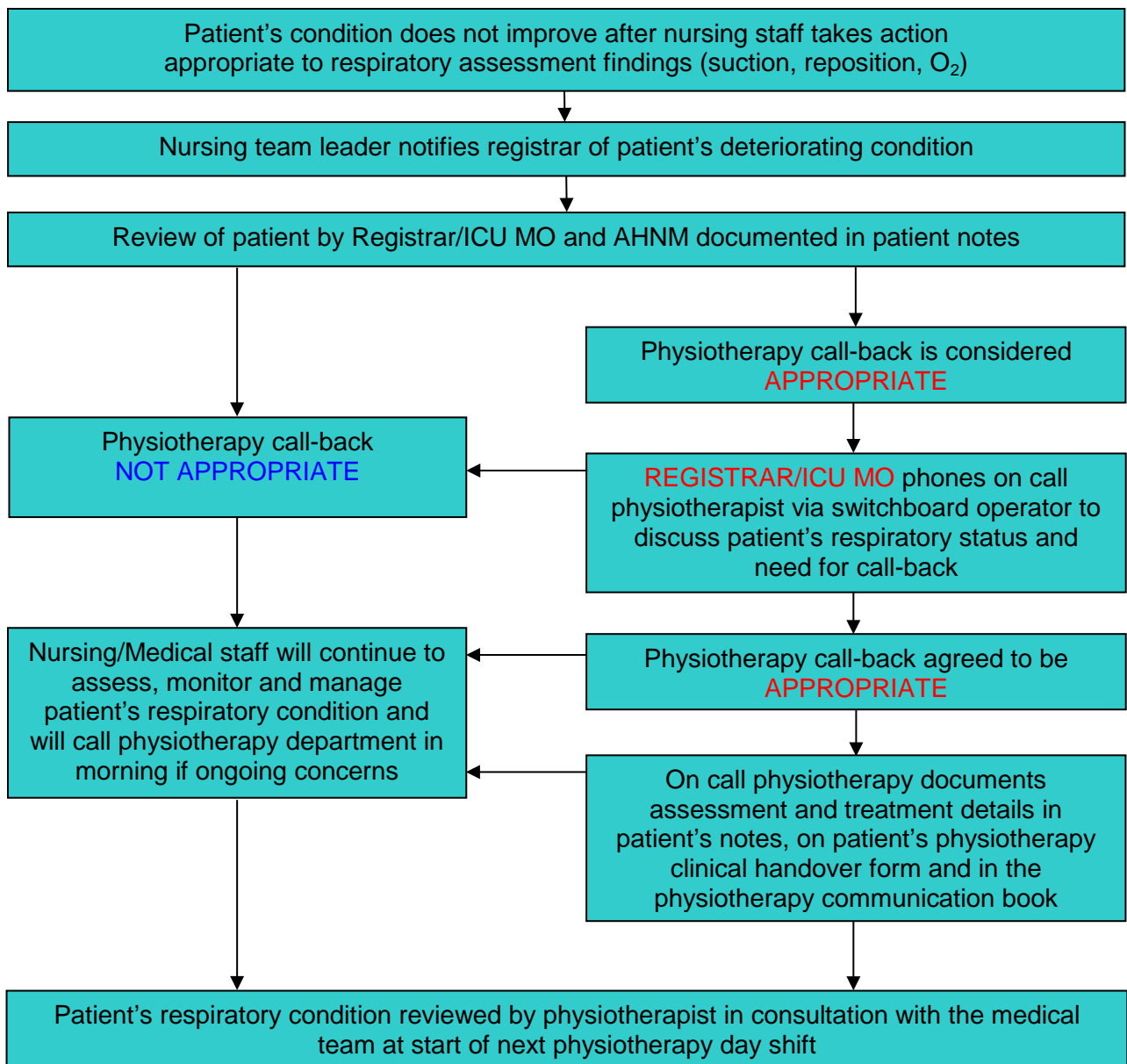
# 1 On Call Physiotherapy and Call-back Policy

The physiotherapy department provides a 24-hour acute care respiratory service 7 days per week. Between the hours of 2200hrs and 0800hrs there is no physiotherapist on site. During these hours, there is a physiotherapist on call who may be asked to come in and provide physiotherapy services for acutely ill patients.

**Note: It may take the physiotherapist up to an hour to reach the hospital after being notified of the call-back request.**

A registrar or more senior medical officer must review the patient and inform the After Hours Nurse Manager (AHNM) of the need to call in the on-call physiotherapist. This medical officer will be the person who speaks with the physiotherapist to provide the relevant clinical information.

## 1.1 Flowchart: Ward Process for Physiotherapy Call-backs



## 1.2 Purpose and Scope

To inform all medical, nursing, physiotherapy staff members and switchboard operators of the policy and procedures for calling in the on call physiotherapist between 2200hrs and 0800hrs.

## 1.3 Responsibilities

### ***Evening Physiotherapist***

- Diverts the physiotherapy department mobile phone to the on call physiotherapist's phone at the end of their shift
- Informs the switchboard operator that the SCH physiotherapist has finished their shift and is leaving the hospital. Advises switchboard to use the SCH physiotherapy department mobile phone number if they need to contact the on call physiotherapist

### ***Nurse caring for patient with deteriorating respiratory condition***

- Has the skills and knowledge to assess a patient's respiratory status and identify significant deterioration of respiratory status e.g. increased work of breathing, increased oxygen requirements, moist/ineffective cough
- Takes action appropriate to findings e.g. suction and reposition patient, modify oxygen therapy and documents accordingly
- Notifies team leader of deteriorating patient condition

### ***Nurse Team Leader (Team Leader or Clinical Coordinator)***

- Ensures that nurses caring for patients with an acute respiratory condition are competent in the assessment, care and management of patient's with respiratory distress
- Assesses patient's respiratory status
- Notifies the registrar of deteriorating patient condition and need for review
- Notifies AHNM of possible need to call in the on call physiotherapist
- Attends/ensures patient care and documentation

### ***Registrar (Page 44104) or ICU Medical Officer***

- Receives notification from nursing staff or Resident Medical Officer (RMO) of deterioration in patient's condition
- Reviews patient as soon as possible including assessment of the effect of repositioning, suctioning, O<sub>2</sub> therapy
- Documents in patient notes: patient review; patient's condition; request to call in the on call physiotherapist
- Liaises with AHNM and contacts the physiotherapist on call through the switchboard operator

- Discusses relevant clinical information with the on call physiotherapist
- Liaises with nursing staff and monitors patient's condition

### ***On Call Physiotherapist***

- Carries their mobile phone during on call period (includes when they are in the hospital)
- Ensures they are able to attend the hospital within 60 minutes of agreeing to a call-back during on call period
- Ensures the call-back request is from a registrar or more senior medical officer
- Discusses patient's condition and request for call-back with the medical officer
- Attends, assesses and treats patient if appropriate
- Documents in patient notes
- Liaises with nursing staff and/or registrar about the result of their consultation
- Documents details on physiotherapy clinical handover form and in physiotherapy weekend/after hours communication book
- Documents arrival and departure times on physiotherapy department sign-in sheet
- May consider it appropriate to phone the Respiratory Clinical Lead Physiotherapist or their delegate at the start of the next rostered physiotherapy day shift to discuss the call-back

### ***Switchboard Operator (2200hrs-0800hrs)***

- Receives a request from the registrar or more senior medical officer to connect them with the SCH on call physiotherapist
- Contacts the SCH on call physiotherapist using the physiotherapy department mobile phone number
- Confirms the calling in of the on call physiotherapist with the AHNM
- If the on call physiotherapist is not contactable, the switchboard operator has an alternative mobile number to contact

### ***After Hours Nurse Manager***

- Receives notification from nursing staff of deterioration in patient's condition
- Reviews the situation as soon as possible, liaises with the registrar, asks relevant questions and ensures that all practicable avenues are considered prior to approving the calling in of the on call physiotherapist
- If a physiotherapy call-back is thought to be appropriate, ensures the registrar contacts the on call physiotherapist via the switchboard

### ***Consultant Medical Officer (Admitting Medical Officer)***

- Receives information from registrar about patient's deteriorating condition overnight and the request for call-back physiotherapy at the earliest possible convenience

***Respiratory Clinical Lead Physiotherapist or delegate***

- Ensures the switchboard operator has an alternative mobile phone number to call in case the on call physiotherapist is not contactable
- Receives information about call-back in the communication book and possible verbal handover from the on call physiotherapist and notifies Physiotherapy Manager of the call-back

**Copyright notice and disclaimer:**

The use of this document outside Sydney Children's Hospitals Network (SCHN), or its reproduction in whole or in part, is subject to acknowledgement that it is the property of SCHN. SCHN has done everything practicable to make this document accurate, up-to-date and in accordance with accepted legislation and standards at the date of publication. SCHN is not responsible for consequences arising from the use of this document outside SCHN. A current version of this document is only available electronically from the Hospitals. If this document is printed, it is only valid to the date of printing.