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Child Health Internship Family Centred Ward Care

Practical 01 / Supervised clinical practice

Aim

Plan and review a supervised child nursing shift and support the caregiver's role.

Principle

Age-specific assessment, accurate weight, safe treatment and caregiver communication protect paediatric care.

Articles and Materials

- Fictional paediatric chart or supervised placement assignment
- Growth chart, dose and fluid worksheet and care log

Procedure

1. Confirm identity, age, current measured weight, indication and relevant precautions. Review caregiver concerns and baseline feeding, development and function.
2. Assess immediate symptoms, breathing, behaviour, hydration and age-appropriate observations. Escalate danger signs and compare with the baseline.
3. Set a measurable nursing goal for the shift and prioritise authorised feeding, medication, mobility or observation tasks.
4. Verify all weight-based orders and rates with independent checks when required. Demonstrate the assigned care with appropriate equipment and caregiver involvement.
5. Record intake, output, treatment, symptoms and response. Reassess pain, alertness and vital trends at the agreed times.
6. Explain the current plan and warning signs to the caregiver and use teach-back. Verify the next review or referral.
7. Give a structured paediatric handover with age, weight, concern, trends, actions and pending review.
8. Complete the shift and supervised competency records and obtain faculty review of actual participation.

Precautions

- Check weight and order with trained staff.
- Escalate new respiratory, hydration or alertness findings promptly.

Observations and Record

Child Health Internship Family Centred Ward Care

Documentation

Item	What to record	Why it matters
Baseline	Age, weight and caregiver concern	Supports safe assessment
Care	Verified order, response and teaching	Demonstrates nursing role
Review	Handover and competency evidence	Supports continuity

Worked Example

A caregiver notices reduced activity before the next scheduled observation. The intern reassesses promptly and communicates the change with measured findings.

Result and Evaluation

Complete a supervised, age-appropriate nursing care plan and verify caregiver follow-up.

Viva Questions and Answers

Why document caregiver observations?

They can reveal a change from normal behaviour or intake.

What does a paediatric medicine handover include?

Current weight, verified order, timing, monitoring and any unexplained discrepancy.

Child Health Internship Newborn or PICU Observation and Escalation

Practical 02 / Skills laboratory

Aim

Review a high-risk child or newborn case and document supervised intensive-care observation and escalation.

Principle

Precise age, device checks and time-based observations support early recognition and follow-up.

Articles and Materials

- High-risk infant or child case with equipment models
- PICU or neonatal chart and competence review card

Procedure

1. Confirm age, weight, baseline and clinical support, reviewing device labels, orders and trainee role with the supervisor.
2. Assess breathing, colour, perfusion, temperature and alertness and note the patient's usual behaviour or feeding. Identify the most urgent finding.
3. Review ordered respiratory, thermal or infusion support using the appropriate device and case-specific settings. Trace connections and document checks.
4. Demonstrate one approved model task, such as temperature probe review, airway device checks or prescribed pump verification.
5. Record a change in clinical observations or support and take the assigned model response. Summon help promptly and reassess after action.
6. Review feeding, output and comfort or family information in the case and identify the next safe action with the team.
7. Handover age, weight, symptoms, settings, actions, response and follow-up. Confirm the receiving clinician.
8. Record actual skills-lab or clinical involvement, faculty feedback and the next practice goal.

Precautions

- Use trained supervision and approved settings.
- Monitor the child's condition alongside equipment displays.

Observations and Record

Child Health Internship Newborn or PICU Observation and Escalation

Documentation

Item	What to record	Why it matters
Status	Clinical baseline, age and support	Identifies risk
Observation	Device setting, measurements and trend	Supports reassessment
Evidence	Response, reviewer and log	Documents competence

Worked Example

A high-risk newborn case develops apnoea with a falling trend. The intern activates neonatal help, follows the assigned simulated response and records time and recovery.

Result and Evaluation

Demonstrate focused intensive-care observation and escalation with traceable evidence.

Viva Questions and Answers

Why confirm age and weight before support checks?

Device selection, orders and clinical interpretation are age and size dependent.

What must be recorded after an urgent action?

Time, findings, action, response and the responsible team.

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