

Neonatal Intensive Care Unit (NICU) - Contact Numbers and Escalation Pathway

Protocol Responsibilities and Authorisation

Department Responsible for Protocol	Child Health - Neonatal Intensive Care Unit
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Document Owner Title	Head of Department - Neonatal Intensive Care Unit
Target Audience	All Neonatal Intensive Care Unit clinical staff
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Protocol Review History

Version	Updated by	Date Updated	Summary of Changes
01	David Graham	18-10-2019	New protocol
02	Jutta van den Boom	April 2022	Inclusion of phone allocations and roles, title change

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1 Overview

1.1 Purpose

This document contains information when neonatal service assistance is required

- Phone and role allocations for NICU
- Medical Escalation Pathway
- Nursing Demand Escalation Pathway

1.2 Scope

All NICU clinical staff, paediatric medical staff, anaesthetic staff.

1.3 Patient / client group

Infants in the care of Te Whatu Ora Waikato NICU.

1.4 Exceptions / contraindications

Nil.

1.5 Definitions

ACNM	Associate Charge Nurse Manager
DM	Duty Manager
Neonatal Medical Escalation	SMO is required to attend immediately to medical emergencies, clinical deterioration and high acuity/demand
NICU	Neonatal Intensive Care Unit
Paeds Reg	Paediatric Registrar
Resident	Registrar, Neonatal Nurse Practitioner, Neonatal Nurse Specialist, Fellow
SHO	Senior House Officer
SMO	Senior Medical Officer

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2 NICU Roles and Phone Allocations

- Resident and ACNM cover in NICU is 24 hours every day
- SMO cover on site is 8.00am to 5.00pm, then on call back
- Neonatal Community Service is available Monday to Friday, 8.00am to 5.00pm

The table below outlines phone allocations and roles, which will be reflected in Amion accordingly (see [Appendix A](#) for **an example of Amion**).

Phone Name/Duty	Number	Time Held	Function/Role
Neonatal emergency	99777	24 hrs	<ul style="list-style-type: none"> • NICU arrest pager 20630 <i>If no response:</i> Call Level 1 NICU Acute Calls (021 488 194, 23863) <i>If NICU Resident unavailable:</i> Call Paed Reg (ext 26142) <ul style="list-style-type: none"> • Delivery Suite Coordinator -20908 • Duty Manager - 27003 or 021 504 638 • L3 Coordinator - 23703 or 021 240 8955
NICU arrest pager	20630	24 hrs	For all emergencies Level 2 Resident
Level 1 NICU Acute Calls	021 488 194 Ext 23863	24 hrs	Held by Level 1 Resident All acute phone calls / postnatal ward
Level 2 NICU Second on Call	027 254 7312 Ext 20724	24 hrs	Held by Level 2 Resident In case 'Level 1- Acute calls' unavailable
Level 3 NICU 3rd on Call	027 242 4401 Ext 20164	0800-1700	Held by Level 3 Resident (admission space) Backup for Level 1/2 Internal communication for level 3
SHO	021 919 248 Ext 23002	0800-2200	Held by SHO, picked up by SHO at 0800am (handover) Charged overnight (while turned off) in NICU
SMO	Own phones (amion/operator)	24 hrs	Any requests All transport calls
Coordinator L3	021 240 8955 ext 23703	24 hrs	Held by ACNM Level 3
Coordinator L2	021 701 634 ext 23412	0700-1530	Held by ACNM Level 2
Community Nurses NICU	0800 667 882 ext 23571	0800-1700 (Mon-Fri)	Community nurses NICU for community contact

3 NICU Medical Escalation

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3.1 Decision to trigger “Medical Escalation”.

Decision to trigger “Medical Escalation” is taken by the Resident or ACNM on duty. This includes medical emergencies, clinical deterioration and high acuity/demand needing the attendance of the Neonatal SMO.

This is also to be used in conjunction with the [‘Safety Code’](#)

Escalate to the on-call Neonatal SMO	state “Neonatal Medical Escalation”
If they are uncontactable:	
In hours	
Call another neonatal SMO who is on-site in the hospital	state “Neonatal Medical Escalation”
After hours	
Call another neonatal SMO where likelihood of availability is known to be high moving down the list of Neonatal SMOs until successful response	state “Neonatal Medical Escalation”
Call the acute Paediatric Registrar (ext 26142) (They must attend, they must also call their on-call medical SMO to come in to cover their duties)	state “Neonatal Medical Escalation”
Call the Duty Anaesthetist (ext 23322) if specifically an airway issue - they must coordinate support from an anaesthetic perspective	state “Neonatal Medical Escalation”
In addition, if the on call Neonatal SMO was initially not contactable, further attempts should continue until a response is gained, in order to inform the Neonatal SMO of the current clinical situation.	
After activation of a “Neonatal Medical Escalation” this should be documented in the clinical notes; and a timely debrief and Datix should be considered - Critical Incident Debriefing – Neonatal Intensive Care Unit (NICU) guideline (Ref. 6349)	

For neonatal emergencies refer to the [Neonatal Emergency Response](#) procedure (Ref. 0192)

For neonatal attendance at births refer to [Attendance of Neonatal Staff for Births at Waikato Hospital](#) guideline (Ref. 2293)

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3.2 NICU Nursing Demand Escalation

This guideline is to be read in conjunction with the [Care Capacity Demand Management](#) guideline.

Decision to trigger Demand Escalation is taken by ACNM on duty.

- Basic criteria should be patient centred, and should reflect clinical demand vs available service capacity.
- Demand Escalation is the usual expected response to very high demand.
- Demand Escalation is distinct from discussion with more senior staff re patient management.
- Escalation implies new resource (usually more hands, more expertise, more seniority) being urgently sought on-site.
- Staff must respond to an escalation request.

Demand includes - volume of work to be done, and acuity of work to be done i.e.

		Acuity			
		-	Low	Medium	High
Volume	Low	-	-	-	-
	Medium	-	-	-	-
	High	-	-	-	-

In the usual setting, escalation is **mandatory** in the setting of high volume and high acuity, and may be necessary in the setting of a combination of medium or high acuity and volume.

Acuity for an individual patient is derived from standard clinical assessment. If there are several patients with elevated acuity individually below the threshold for escalation (i.e. high volume, medium acuity), this may in itself require escalation. Demand may also be escalated if there is insufficient staff. The duty manager must be informed of this situation, and will support the demand escalation pathway.

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4 Evidence base

4.1 Associated Te Whatu Ora Waikato Documents

- [Care Capacity Demand Management](#) guideline (Ref. 5916)
- [Early Warning Scoring System for the Deteriorating Patient](#) procedure (Ref. 1541)
- [SBARR Communication Tool](#) protocol (Ref. 5038)
- [SMO Responsibilities and Limits of Delegation to RMOs](#) policy (Ref. 2561)
- [Attendance of Neonatal Staff for Births at Waikato Hospital](#) guideline (Ref. 2293)
- [Critical Incident Debriefing – Neonatal Intensive Care Unit \(NICU\)](#) guideline (Ref. 6349)
- [Neonatal Emergency Response](#) procedure (Ref. 0192)
- [Code Red Major Trauma Response W0342HWF](#)
- [Speaking up for Safety](#)

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Appendix A – Image of AMION for phone allocations.

For current on call allocations, please refer to the actual AMION application for Waikato Hospital.

THIS IS AN EXAMPLE ONLY

NICU Acute Calls				
NICU Arrest Pager	0800-0800	Via Emergency Operator	Admin	99777 ↕
1st On Call - Acute NICU	0800-0800	Via Mobile	Admin	021 488 194 ↕
2nd On Call - Postnatal	0800-0800	Via Mobile	Admin	027-254-7312 ↕
NICU: House Officer	0800-2230	Via Mobile	Admin	23002 ↕
NICU L3				
NICU L3 Admitting SMO ◊	0800-0800	VAN DEN BOOM Jutta	Paediatrician	0000 ↕
On Duty: AM NICU L3 - SMO	0800-1600	VAN DEN BOOM Jutta	Paediatrician	021 784 348
On Call: PM NICU L3 - SMO	1600-0800	VAN DEN BOOM Jutta	Paediatrician	021 784 348
NICU: L3 - Reg 1	0800-1700	CHESTER Rachel	NICU Registrar	027-203-9262
NICU: L3 - Reg 3	0800-1700	JUIT-JUBAN Lady	NICU Registrar	
NICU: L3P - Reg	1630-2100	CHESTER Rachel	NICU Registrar	021 488 194... ↕
NICU: L3 - NNP 1	0800-1630	OVERINGTON Sally	NICU NNP	20132
NICU: L3P - NNP 1	1630-2030	OVERINGTON Sally	NICU NNP	021 488 194... ↕
NICU: L3 Nurse Coordinator	0800-0800	Via Mobile	Admin	021 240 8955 / 23703 ↕
NICU L2/Post Natal Ward				
NICU L2.Post Natal Ward Admitting SMO ◊	0800-0800	PACELLA Marisa (Locum)	Paediatrician	0000 ↕
On Duty: AM NICU L2 - SMO	0800-1600	PACELLA Marisa (Locum)	Paediatrician	027-359-4168
On Call: PM NICU L2 - SMO ◊	1600-0800	VAN DEN BOOM Jutta	Paediatrician	021 784 348
NICU: L2 Nurse Coordinator	0800-0800	Via Mobile	Admin	021 701 634 / 23412 ↕
NICU Community Contact				
Community Nurses NICU	0800-1600	Via Mobile	Admin	0800 667 882 / 23571 ↕
NICU: L2 - Reg	0800-1700	WARCIAK Karolina	NICU Registrar	021 488 194 ↕
NICU L1				
NICU: L1A - Reg 1	0800-1700	HALL Amy	NICU Registrar	027-254-7312 ↕
NICU: Night - Reg 1	2000-0830	RAE Elwyn	NICU Registrar	20630 ↕
NICU: Night - NNP 1	2000-0830	RAINBOW Maggie	NICU NNP	20630 ↕