

**Child identified as suitable for Heated and Humidified High Flow Therapy (HHFT) or CPAP but will need intra-hospital transfer (e.g Emergency department to ward environment).
Note: for inter-hospital transfer call STRS for advise**

Is Reliable transfer HHHFT/CPAP equipment available?

Yes

Commence therapy prior to transfer and follow HHHFT or Infant CPAP guideline as appropriate

Prior to transfer

1. Patient assessed by a Senior clinician to establish the risk of deterioration during transfer.
2. **High Risk group**- Should be transferred by a paediatric airway competent health care professional (HCP) and a Nurse with Paediatric Basic life support. **If no improvement is seen since commencing therapy consider delaying transfer**
3. **Medium Risk Group**- Should be transferred by a competent HCP and a Nurse trained in Paediatric Basic life support.

No

Medium risk	High risk
Moderate respiratory distress. (Some recession and/or use of accessory muscles)	Severe respiratory distress (prominent recession and Marked use of accessory muscles)
Simple face mask oxygen or 2 Litres Nasal Cannula Oxygen maintaining oxygen saturations >92%	Saturations<92% on Oxygen or receiving FiO2 >0.5 Apnoea and/or bradycardic episodes Clinically tiring

Is transfer likely to happen within 30 mins?

No

Commence therapy prior to transfer and follow HHHFT or Infant CPAP guideline as appropriate

Prior to transfer

1. Patient assessed by a Senior clinician to establish the risk of deterioration during transfer without HHHFT.
2. Should be transferred by a paediatric airway competent health care professional and a Nurse with Paediatric Basic life support.
3. Oxygen delivery method during transfer should be 15L via Non Re-breath oxygen mask unless airway/Critical Care trained staff are competent in delivering PEEP via mask and Ayres T-piece (NBM, NG on free drainage,, consider oxygen requirement to ensure adequate supply for entire journey.)
4. Consider static trial period to establish tolerance and stability.
5. HHHFT should be recommenced immediately on arrival at destination

Yes

Do not commence HHHFT/CPAP prior to transfer. Ensure Therapy can commence on arrival at destination.

Prior to transfer

1. Clinical team must assess patient prior to transfer to establish risk of deterioration during transfer
2. A paediatric basic life support trained nurse is the minimum requirement for this group.
3. Oxygen delivery method does not need to change but Non Re-breath oxygen mask should to hand.
4. HHHFT/CPAP should be commenced immediately on arrival at destination

This appendix has been added in response to the National Patient safety alert on 1/04/20 reference NatPSA/2020/002/NHSPS Specifically in response to the action:
Do NOT start HFNO in any emergency department or short stay without a plan for how to transfer the patient onwards