



minimum NURSE-TO-PATIENT RATIO

CRITICAL CARE: PEDIATRIC INTENSIVE CARE UNIT (PICU) DEFINITION

Approved by Ministry of Health: March 2024

PREAMBLE STATEMENT

B.C.'s minimum nurse-to-patient ratios (mNPR) are grounded in a commitment to continuous improvement and ongoing learning, prioritizing the well-being of nurses and patients. As these ratios are implemented, we will engage in continuous improvement cycles to better understand their impact on nursing outcomes and patient care. This will enable us to make informed adjustments, ensuring that we meet the needs of nurses and patients effectively.

DEFINITION – Pediatric intensive care unit refers to:

- a) a multi-day inpatient unit which is organized, operated, and maintained to provide specialized care for pediatric patients who:
 - (i) have complex, life threatening medical problems requiring urgent and intensive treatment using life support technologies and interprofessional collaboration among clinicians; and
 - (ii) meet Levels 2 or 3 of Pediatric Critical Care

RATIO – 1:1

GUIDELINES

The Levels of Pediatric Critical Care refers to the patient care needs and should be aligned to the right service available.

Level 2 refers to pediatric patients who require continuous supervision and may need invasive and non-invasive ventilatory support or support for two or more organ systems, for example, major trauma (major trauma is defined as an ISS score >12. Thus, some major trauma patients may be cared for in a level 2 tertiary centre). Sometimes, the child will have one organ system needing support and another suffering from chronic failure. Usually, children receiving level 2 care are intubated to assist with breathing. Level 2 patients are at risk of deteriorating and requiring Level 3 support.

Level 3 refers to pediatric patients who require intensive supervision and continuous monitoring at all times, with two or more organ systems needing technological support. This includes advanced invasive respiratory support. A child may undergo complex therapeutic and monitoring procedures, such as invasive and non-invasive ventilation requiring advanced renal support; children who have suffered multiple trauma; or children who have undergone complex major surgery or require extracorporeal life support (ECLS).