CORE CONCEPT

Children's Hospital Management Course: Paediatric Units, PICU/NICU Capacity and Family-Centred Care

21 – 25 February 2027
Dammam - Eastern Province five-star

CORE CONCEPT

Children's Hospital Management Course: Paediatric Units, PICU/NICU Capacity and Family-Centred Care

Ref: 2024_29784 **Date:** 21 – 25 February 2027 **Location:** Dammam - Eastern Province five-star **Fees:** 19500 SAR

Introduction:

Children's hospital management, covering paediatric units, PICU/NICU capacity and family-centred care, is a 1-week course for paediatric department, children's hospital, paediatric nursing and service planning managers, ending with a Paediatric Service Development Plan for a case children's hospital. Children's services lose capacity and family trust when cots are planned like adult beds, critical care levels are unclear, retrieval links are informal and parents have nowhere to stay. Nominees already run a paediatric unit or plan children's services and work through case studies built on census, rota and family feedback data. CoreConcept Training Center delivers this children's hospital management course.

Course Objectives:

- Profile paediatric demand by age band, specialty and level of care and set the bed and cot base a children's service needs
- Classify neonatal and paediatric critical care units by level of care and plan PICU and NICU capacity with retrieval and transfer links
- Design paediatric emergency streaming and set nurse-to-child ratios and skill mix for wards, high dependency, PICU and NICU
- Organise family-centred care services including parent accommodation, open parental presence, play and child life support and child-friendly ward design
- Define safeguarding referral interfaces and a transition pathway that moves young people from paediatric to adult services
- Build a paediatric quality indicator set and assemble a Paediatric Service Development Plan for executive approval

Target Audience:

- Managers who head paediatric departments and are accountable for paediatric beds, clinics and service performance
- Managers of children's hospitals responsible for service lines, capacity investment and family experience
- Paediatric nurse managers responsible for staffing ratios, skill mix and ward routines across children's units
- Leaders of PICU, NICU and special care nursery units responsible for cot capacity, admissions and retrieval links
- Health service planners who size children's services across a hospital network and prepare business cases

CORE CONCEPT

Course Outline:

Day 1: Children's Services Landscape and Paediatric Demand Baseline

- Children's Hospital Service Model From Infancy to Adolescence
- Paediatric Demand Profile by Age Band and Specialty
- Paediatric Bed and Cot Census Seasonal Pattern Review
- Children's Service Line Map Across Wards, Clinics and Day Care
- Paediatric Service Current-State Assessment Using Unit Data Pack

Day 2: Levels of Care, PICU/NICU Capacity and Retrieval Networks

- Neonatal Levels of Care I to IV Unit Classification
- PICU Community, Tertiary and Quaternary Level Roles
- Cot and PICU Bed Requirement Model by Level of Care
- Neonatal and Paediatric Retrieval Team Transfer Agreements
- Paediatric High Dependency and Step-Down Bed Mix Planning

Day 3: Paediatric Emergency Streams, Staffing Ratios and Family-Centred Care

- Paediatric Emergency Department Streaming and Separate Waiting Zones
- Nurse-to-Child Ratio Matrix for Ward, PICU and Special Care
- Paediatric Skill Mix Model With Child Life Specialist Roles
- Family-Centred Care Principles Applied to Ward Rounds and Care Partners
- Parent Accommodation, Kangaroo Care Spaces and Sibling Facilities

Day 4: Child-Friendly Design, Safeguarding Interfaces, Transition and Quality Risk

- Child-Friendly Ward Design Brief With Play and Teaching Areas
- Safeguarding Referral Interface Between Paediatric Units and Protection Teams
- Transition to Adult Services Readiness Pathway for Young People
- Paediatric Quality Indicator Set With Definitions and Thresholds
- Paediatric Capacity Failure Patterns From Cancelled Transfers and Boarding

Day 5: Case Study on the Paediatric Service Development Plan

- Case Children's Hospital Demand and Cot Gap Analysis
- Case PICU and NICU Level Designation and Retrieval Option Appraisal
- Case Staffing Ratio Costing and Family Services Specification
- Case Paediatric Quality Dashboard and Transition Pathway Draft
- Paediatric Service Development Plan Completion and Executive Panel Review

Skills You Will Gain:

- Paediatric Demand Modelling
- Neonatal and Paediatric Level Designation
- Cot and PICU Bed Planning
- Paediatric Nurse Staffing Design
- Family-Centred Service Design
- Child-Friendly Environment Briefing
- Adolescent Transition Planning
- Paediatric Quality Monitoring

Why Attend This Course:

- Deliver a Paediatric Service Development Plan for a case children's hospital to the chief executive and the head of children's services
- Decide which level of neonatal and paediatric critical care a site should provide and when to transfer a child through the retrieval network
- Avoid cancelled transfers, children boarded on adult wards and family complaints that follow from informal capacity and accommodation planning
- Share the cot requirement model, staffing ratio matrix, family services checklist and transition pathway with ward and unit managers

Conclusion:

Back at work, the participant presents the Paediatric Service Development Plan to the chief executive, the head of children's services and the paediatric nursing lead. They use it to agree bed and cot numbers by level of care, PICU and NICU designation, retrieval agreements, staffing ratios and the family accommodation and play services to fund. After the first winter season under the plan, the service should review cot occupancy, refused transfers, children boarded on adult wards, transition readiness and family feedback against the baseline and adjust the plan.

Frequently Asked Questions FAQ:

What should participants know before the children's hospital management course?

Participants should already manage a paediatric ward, neonatal or paediatric critical care unit, or plan children's services, and know how their unit records admissions, occupancy and staffing. Bringing an anonymised census extract, rota or family feedback summary helps them apply the case study to their own service.

How does children's hospital management differ from an adult ICU or general hospital operations course?

It concentrates on services for children and their families: paediatric demand by age band, neonatal and paediatric levels of care, retrieval links, child staffing ratios, parent accommodation, child-friendly design and transition to adult services. Adult critical care and hospital-wide operations courses do not address these child-specific planning decisions.

Why does family-centred care matter in children's hospital management?

Family-centred care treats parents as partners in the care team, so it shapes how wards are run and built. Open parental presence, overnight accommodation, play services and shared information on rounds all need space, staff and budget that managers must plan from the start.

What do participants take back from the children's hospital management course?

Participants take back a Paediatric Service Development Plan for a case children's hospital, with a cot and bed requirement model, level of care designations, a retrieval option appraisal, a staffing ratio matrix, a family services specification, a transition pathway and a paediatric quality dashboard.