**Clinical Pathway for the Management of Respiratory condition**

Referral to CCTH for home visit. Discharge checklist

Information leaflet and advice given:

* Asthma plan
* Bronchiolitis leaflet
* Viral wheeze leaflet
* Smoking cessation advice

Fluid/ feeding plan outlined

CCTH home visit:

Assess observations and record on PEWS chart

Assess fluid/feed intake

Provide advice on:

* Inhaler technique
* hydration and feeding (as outlined
* symptom management (as per asthma plan/ bronchiolitis guidelines/ consultant plan)

Discharge from CCTH criteria:

Observations within normal limits.

Tolerating adequate fluids for at least 24 hours

OPEN ACCESS TO WARD UNTIL DISCHARGE FROM Care Closer To Home

Criteria for referral to Care Closer To Home:

Observations within normal limits for age.

If oxygen therapy has been required during stay- Saturations maintained in air for at least 6 hours including one period of sleep.

If Salbutamol inhalers required to relieve symptoms- Salbutamol has not been required for >3 hours.

Tolerating minimal fluid requirements for age.

Observations not within normal limits

Unable to maintain saturation above 92% in air

Requiring Salbultamol up to 3 hourly

Manage symptoms as inpatient according to relevant guidelines.

Diagnosis: Viral respiratory illness (including bronchiolitis)

Exacerbation of asthma

Viral induced wheeze.