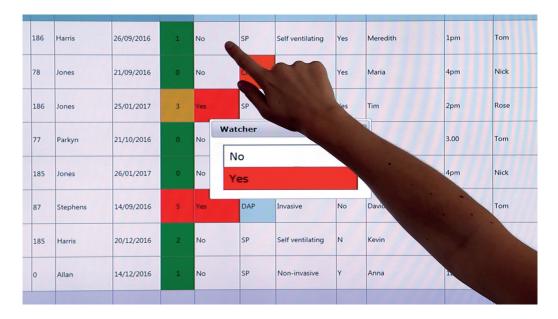


Great Ormond Street Hospital for Children NHS Foundation Trust

While everyone at Great Ormond Street Hospital (GOSH) is an expert in their field, you are the expert in your child. You will know better than us if they are not behaving as they usually do or seem different in some way. Studies have shown that caregivers are often the first people to spot changes in the health of their child, even when in a clinical environment.

We want you to feel part of our safety team. This means you should feel able to raise any concerns with us if you think something is 'just not right' with your child.





When your child is in hospital, we carry out regular checks ("observations") of things like their breathing, their pulse and their temperature and record these results electronically on a tablet computer. These observations are then added up to form a children's early warning score (PEWS). A raised PEWS result will automatically alert the nurse in charge or doctor to come and assess your child within an arranged time period.

Sometimes your child's PEWS might be within normal limits but something "does not seem right" – either to you or the nurse. The nurse should still alert the nurse in charge or doctor and we would identify your child as a "Watcher" – someone who needs to be observed more closely.

Please do not worry if your child is recorded as being a 'watcher' – this simply means that we will keep a closer eye on them for a while until they improve. Equally, please do not worry if your child is no longer a 'watcher' – we will still check their observations regularly and carry out all our usual nursing care.

What sort of thing should I look for?

You know your child best so you will know when something is concerning you. It could be that:

- They seem different to usual quieter, sleepier, warmer or colder
- They are doing something, or not doing something, they usually do – crying or eating
- They look or sound different to usual paler, puffier or wheezier
- There is a difference in how they are eating, drinking, weeing or pooing

Or anything else that is 'out of the ordinary'.

How should I raise a concern?

Initially, talk to the nurse looking after your child. They will talk to a more senior member of nursing staff or the ward doctor if needed. If you cannot find your child's bedside nurse, use the call button.

If you are still worried, ask to speak to the nurse in charge of the ward who will review your child and arrange for a medical review if needed.





What will happen next?

When you raise a concern with us, we promise that we will:

- 1. Assess your child
- 2. Carry out a set of observations
- 3. Record the results on their tablet computer
- 4. Escalate your concern appropriately
- 5. Create a plan with you in order to address your concern

Information sharing

Several times a day, the ward team get together to catch up about how each patient on the ward is doing – this could be at ward rounds, shift handover or at safety "huddles". The purpose of these discussions is to make sure all of the staff on the ward have the same level of information about each child and so are equally capable of managing any concerns that arise.

We discuss each child, noting whether they have a higher PEWS score or another reason why they may need to be watched more closely. As part of these discussions, the nurse looking after your child will share your concerns with the rest of the team and record your child as a "watcher" on the ward's electronic patient status at a glance (ePSAG) board.

Remember

- No question or concern is silly or 'wasting our time'
- Do not worry if you get upset or tearful
- If you are not sure what we are doing, ask us
- If you do not understand something, ask us to explain it again until you do

Want to know more?

Talk to the nurse in charge of your ward or watch these videos, available on the bedside television system or on the NHS England website at www.england.nhs.uk/patientsafety/re-act/resources/films

Scan this code for the Family Time video

or this code for the **Child Doctor video**





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