‘Listening To You’ Parent Information:
Improving the validity of parent concern assessment in the PEWS score

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Background

The Paediatric Early Warning System (PEWS) is a national paediatric patient safety system incorporating standard age-specific observation charts, a PEWS scoring tool, escalation guide, paediatric ‘Sepsis 6’ and ISBAR communication tool.

Scoring parent / family concern as a core parameter recognises the importance of a parent’s knowledge of, and expertise about, their own child and helps to facilitate open communication.

In post-pilot audits, focus groups and site visits, variation was noted in:
• recording of concern
• assessment methods
• understanding of how to score parent concern

Methods

We adapted a set of communication resources from Birmingham Children’s Hospital into a ‘Listening to You’ leaflet with information for parents about PEWS, strategies to express concern and an action pathway in response to concern.

Implementation of the leaflets was tested through a series of PDSA cycles in two wards in Our Lady’s Children’s Hospital Crumlin (OLCHC). Lessons learned in OLCHC informed the second phase of implementation in the children’s wards at University Hospital Limerick (UHL).

Results

While parent awareness of PEWS did not increase, there was an increase in reporting concerns by parents across both sites, however this had reduced to baseline levels in OLCHC by the end.

95% (n=103) of parents thought it was useful to ask about their concerns, 98% (n=106) said it helped them feel included and 94% (n=102) said it helped them feel safer about their child’s care.

The proportion of parents who received information about PEWS and ‘Listening to you’ increased over the period studied, with those that did providing positive feedback.

PEWS concern scoring compliance improved in UHL but not in OLCHC.

Discussion

Baseline information mismatch:
Nurses assumed parents would raise their concerns explicitly. Parents reported a wish to be asked about their concern. Some parents ‘did not want to bother staff’ or ‘relied on clinician opinion’.

Post-implementation benefits:
Nurses report greater confidence in asking parents about their concern and in understanding concern versus anxieties. Posters were the cheapest and most effective method of providing information at ward level. Interactions with parents were seen as more open & meaningful.

Parents said:
I used to stay quiet but now I am asking lots of questions

Nurses said:
You’re so used to how they are, your opinion is really valid

Conversation is definitely more open

Conclusions

Being asked about their concern matters to parents
‘Listening to you’ information enhances parents’ sense of inclusion in care and supports validity of the concern scoring assessment.

Keep it simple – posters were cheaper & more effective!
A toolkit of ‘Listening to you’ resources will be available online to help ensure standardisation of care nationally.

Local champions are essential for successful implication to provide clinical leadership, create will to change & to encourage ownership & participation in change.

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