Situational Awareness

There are five factors that would prompt the identification of a pediatric patient as being at increased risk:

Patient / Family / Caregiver Concern

A concern voiced about a change in the patient's status or condition.
For example:

- A concern that has the potential to impact immediate patient safety
- Family states the patient is worsening or not behaving as they normally would

"Watcher" Patient

A patient that you identify as requiring increased observations.
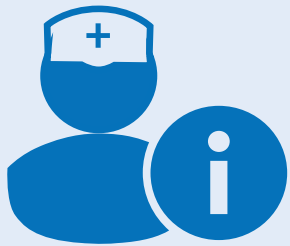For example:

- Unexpected responses to treatments
- Child different from "normal"
- Aggressive patient
- "Certified" patient
- Over/under hydration
- "Gut" feeling

Communication Breakdown

Describes clinical situations when there is lack of clarity about:

- Treatment
- Plans Responsibilities
- Conversation outcomes
- Language barriers

Unusual Therapy

Includes staff unfamiliar with ward or department, therapy or process.
For example:

- Float nurses or break coverage
- High risk infusion
- New medication or protocol for patient or nurse

Pediatric Early Warning System Score 2 or Higher

P.E.W.S 2+

Relevant patient assessment findings are summated into a score that can be used to identify patient physical deterioration early, so to optimize chances for intervention. These include:

- Cardiovascular, respiratory and behavioural data
- Persistent vomiting following surgery
- Use of bronchodilators

A score of 2 or higher should trigger increased awareness.

Each of the factors is equally important as an indicator of risk and this "system" encourages nursing assessment of both subjective and objective risk. Cincinnati Children's Hospital found these 5 factors to be 100% sensitive (i.e. every child who deteriorated clinically had one or more of these factors when they audited 89 serious safety events in the hospital)

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