Get your message across

**Raise the Alert** within your home e.g. to a senior carer, registered nurse or manager.

If possible, **record the observations** using a NEWS2 based system.

**Report your concerns** to a health care professional e.g. Nurse/GP/GP HUB/111/999 using the SBARD Structured Communication Tool.

**Key prompts / decisions**

- **Situation** e.g. what’s happened? How are they? NEWS2 score if available
- **Background** e.g. what is their normal, how have they changed?
- **Assessment** e.g. what have you observed / done?
- **Recommendation** ‘I need you to...’
- **Decision** what have you agreed? (including any Treatment Escalation Plan & further observations)

Don’t ignore your ‘gut feeling’ about what you know and see. Give any immediate care to keep the person safe and comfortable.

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**If YES** to one or more of these triggers – take action!

Does your resident show any of the following ‘soft signs’ of deterioration?

- Increasing **breathlessness** or **chestiness**
- Change in **usual drinking / diet habits**
- A **shivery fever** – feel **hot or cold** to touch
- Reduced mobility – ‘off legs’ / less co-ordinated
- New or increased confusion/ agitation / anxiety / pain
- Changes to usual level of **alertness / consciousness / sleeping** more or less
- ‘Can’t pee’ or ‘no pee’, change in pee appearance
- **Diarrhoea, vomiting, dehydration**

Any **concerns** from the resident / family or carers that the person is not as well as normal.

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