

# *#CallThem*

A courtesy call from recovery to a patient's next of kin —  
telling them their loved one is safely out of theatre.

Worcestershire Acute Hospitals NHS Trust



# #CallThem — Waiting is the hardest part

For families, the operative period and the moment it ends are the most anxious of the whole hospital journey.

## Anxiety peaks during surgery

The wait during the operation, and the moment it ends, are the highest-anxiety points families face.

## Families are left in the dark

Relatives leave at the theatre doors, often can't reach the ward, and don't know whether surgery is over.

## It's uncertainty, not detail

What distresses families is simply not knowing their person is safe — not a lack of clinical detail.

*“Oh thank god, I can let our daughters know — we were so worried.”*

**Family member · January 2026 pilot feedback**



## **#CallThem — What are we trying to solve?**

**No national body — has a systematic way to tell families that surgery is complete.**

**Not NICE. Not NHS England. Not the Royal Colleges.** A genuine, unaddressed gap in care.



# #CallThem — What it is

A brief, low-burden call made once the patient is safely awake in recovery.

1

## A BRIEF, SCRIPTED CALL

Recovery staff phone the next of kin once the patient is awake, stable and settled after theatre.

2

## ONE SIMPLE MESSAGE

Their loved one is out of surgery, awake and safe — nothing more, and nothing clinical.

3

## NO NEW KIT OR FUNDING

It uses what every recovery room already has: a person who knows the patient is safe, a phone, and a number in the notes.



# #CallThem — How it works

Four simple steps, built into the existing recovery routine.

1

## CONSENT

Patient agrees before surgery; next-of-kin or contact details recorded on the checklist.

2

## RECOVER

Made once the patient is awake, stable and settled.

3

## CALL

Brief, warm and scripted — using the patient's preferred name (*#CallMe*).

4

## DOCUMENT

Outcome recorded on the Surgical Ward Checklist (PF WR554 1).

**Safety first:** the call is only ever made when clinical workload allows — never at the expense of patient care.



# #CallThem — Kept simple, kept safe

The whole script — and the boundaries that keep it safe.

## THE CALL

*“Hello, I’m calling from recovery. I’m looking after [name], who has just come through from theatre. This is just to let you know they are awake, safe and recovering well.”*

If asked anything clinical: the ward or surgical team will explain more later.

## What it is NOT

-  Not a clinical update
-  No operative details
-  No discharge times
-  Clear boundaries, every time



# #CallThem — The pilot at Kidderminster

It works — and it's light on staff.

93%

of eligible calls attempted

73%

successfully connected to family

63 sec

average call duration

*Feedback from families was universally positive — repeated expressions of relief and gratitude, and staff found the calls became a natural part of the routine.*



# #CallThem — What families and staff told us

Reassurance for relatives — and, once routine, second nature for staff.

“

*It reassured me completely  
— and it stops me ringing  
the ward in a panic.*

Next of kin

“

*A great initiative — and its  
value is proven by the trial.*

Patient & Public Forum

“

*Once we had a routine, it  
felt completely natural to  
make the call.*

Recovery staff, pilot



**#CallThem**

## **Endorsed & supported by**

### **Royal College of Anaesthetists**

Patient Voices Away Day and Clinical Quality & Research Board.

### **Centre for Perioperative Care**

Confirmed for the CPOC website and Autumn newsletter.

### **WAHT Patient & Public Forum**

Reviewed and unanimously endorsed.



# *#CallThem*

*“They are awake. They are with us. They are safe.”*

A simple, human response to a gap the evidence has identified as unaddressed — and a candidate for a standard of care.

*Thank you*

