

HELEN VEGODA

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A times during the child's admission, for example, being available to parents
 B accompanying the child to theatre or the catheter lab and supporting them whilst
 C they awaited the child's return. Some of my support was to liaise with parents'
 D employers to obtain leave of absence, give information about voluntary
 E organisations such as the Heart Circle and the Downs Heart Group, and help make
 F preparations for discharge by contacting other agencies, eg Social Services, GPs
 G and Health Visitors. Having attempted to establish a working relationship with the
 H families, my involvement with them varied from very intense to minimal,
 I depending on the needs of the family.

J
 K 6. On occasions I would sit in with cardiologists and surgeons when a diagnosis was
 L made or when details of surgery were given to the parents. This allowed me
 M subsequently to carry out a supportive role.

N
 O 7. As the children's conditions were often complex, I would usually try to ascertain
 P whether a parent understood what any treatment or surgery entailed following the
 Q meeting with the cardiologists or surgeons. If it was apparent that a parent needed
 R clarification of the information, I would ask the consultant/Registrar or one of the
 S nurses to meet with the parents again to explain the procedures. I would never explain
 T the medical aspect of any procedure to a parent as I was not qualified to do so. I could
 U provide the details of the process and place of treatment only. For instance where
 V there was a catheterization I could take the parents to the lab or provide details of the
 W time table of admission. If parents were still concerned about procedures I would
 X encourage them to go back to the cardiologist or arrange a meeting for them.

Y
 Z 8. On the occasions when I sat in at the diagnostic stage with the parents I felt that the

The contents of this statement are true to the best of my knowledge and belief.

Signed... *Helen Vegoda* Dated... *8 / 7 / 99*