

Queensland Paediatric Sepsis Program

Paediatric Sepsis

Health Promotion Pack



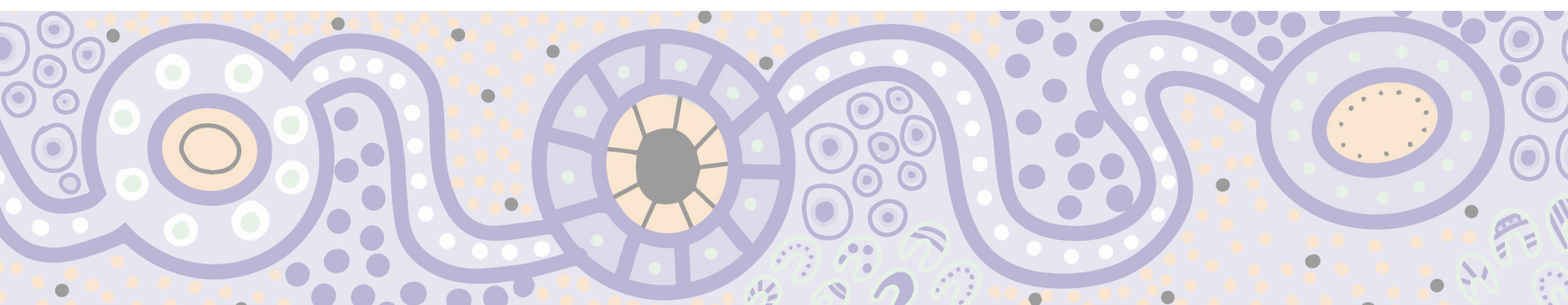
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Introduction

Who is the Queensland Paediatric Sepsis Program?

The Queensland Paediatric Sepsis Program (QPSP) is an innovative, multidisciplinary program aimed at reducing the burden of sepsis on children, their families, clinicians and the health system. In strong partnership with consumers, the QPSP is delivering a world-leading holistic approach to paediatric sepsis.

What is paediatric sepsis?

Sepsis happens when an infection causes an extreme response in the body, and it starts to damage its own tissues. It is rare but can happen to any child with any infection. Sepsis can damage many parts of the body and even cause death. Sepsis is a **medical emergency** and needs immediate treatment in hospital. Approximately one-third of children who survive sepsis suffer long-term physical and cognitive impairments which also affect their families, the community and the health system.

While sepsis can affect anyone at any age, babies and young children are at greater risk. Across the world, 40 per cent of all sepsis cases are in children under five. The best chance of getting better from sepsis is to treat it quickly.

Although public awareness of sepsis is increasing, it remains lower than awareness for other common medical conditions with only a minority (14–28 per cent) of people recognising fever as a symptom of sepsis¹.

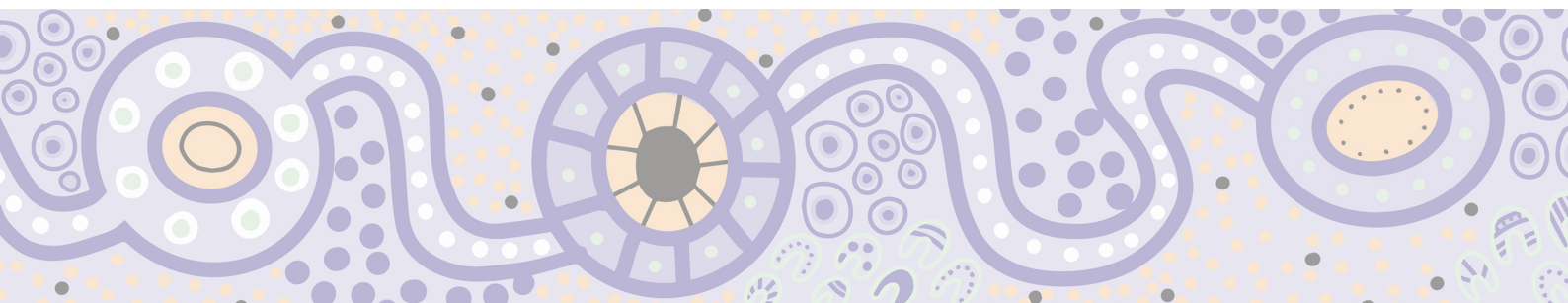
This makes raising awareness of sepsis and its symptoms a global health priority and we need your help.

Whether you are a workplace, a sports club, a school or community group, the QPSP have developed this digital health promotion pack with ready-made content and links for you to share across your platforms. The pack includes awareness, education and information resources, support options for families who have had a child diagnosed with sepsis and stories from families sharing their lived experience of having a child with sepsis.

Thank you for helping to raise awareness about sepsis in children and empowering parents and carers to ask the question:

Could it be

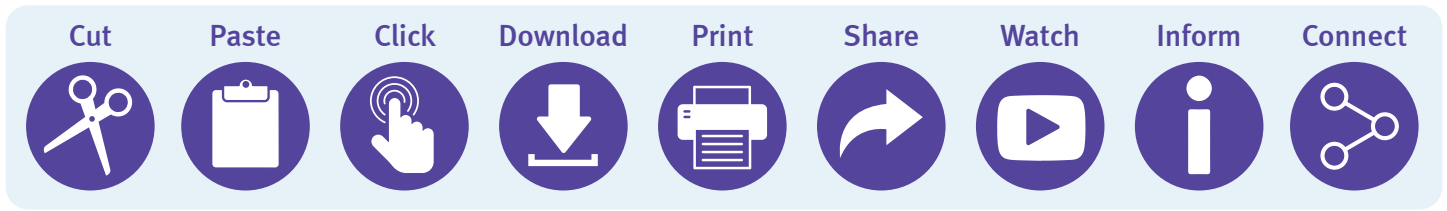
SEPSIS?



How to use this health promotion pack

Look for these symbols to prompt actions to take with the content in the pack.

Pick and choose content to cut, paste, download, print, share, watch, inform and connect as relevant to your platform. Images and blue text are hyperlinked to resources, click to open.



MIA

One Friday afternoon, 4-year-old Mia complained of a sore belly. After a diagnosis of gastro by her GP on Saturday morning, a further diagnosis of Influenza B and Viral Myositis by the hospital Emergency Department on Saturday afternoon, Mia was sent home to rest.

On Sunday, a faint purple rash appeared, sepsis had set in.

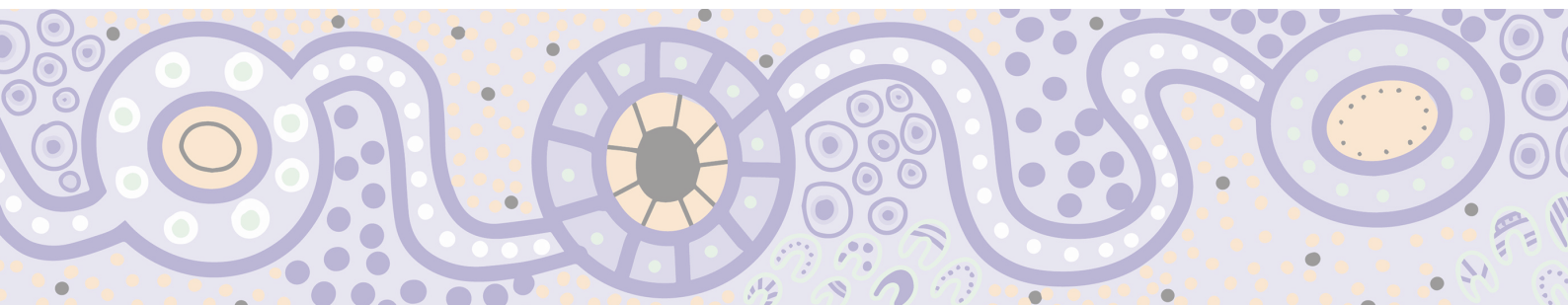
Mia spent six days in intensive care, fighting for life.

Mia survived sepsis, however, lives with a permanent disability as a quadruple amputee due to the injuries sustained from her journey with sepsis.

Mia's story: [Movement for Mia](#)

The best way to **stop sepsis** and **save lives** is to raise awareness.

Please share this pack with your networks, colleagues, friends and family.



Sepsis awareness initiatives

Paediatric Sepsis Week and **World Sepsis Day** are internationally recognised initiatives of the Global Sepsis Alliance. These initiatives aim to raise awareness and show support and solidarity with the millions of people worldwide whose lives have been affected by sepsis. Use them as an opportunity to educate your community about sepsis in children by sharing the content in this pack. The content remains relevant and we encourage you to share it at any time.

- **Paediatric Sepsis Week – 3rd week of April**
- **World Sepsis Day – September 13th**



Global
Sepsis
Alliance



WORLD SEPSIS DAY - SEPTEMBER 13TH
BE PART OF THE GLOBAL MOVEMENT - JOIN AT WORLDSEPSISDAY.ORG

How you can raise sepsis awareness

Share content on your social media platforms



Spread the word by sharing sepsis awareness animations, infographics and hashtags across your social media platforms.

Copy and paste from one of the options below to create your post:

1. Click on the images to download and save, or copy the URL to include in your social media post.

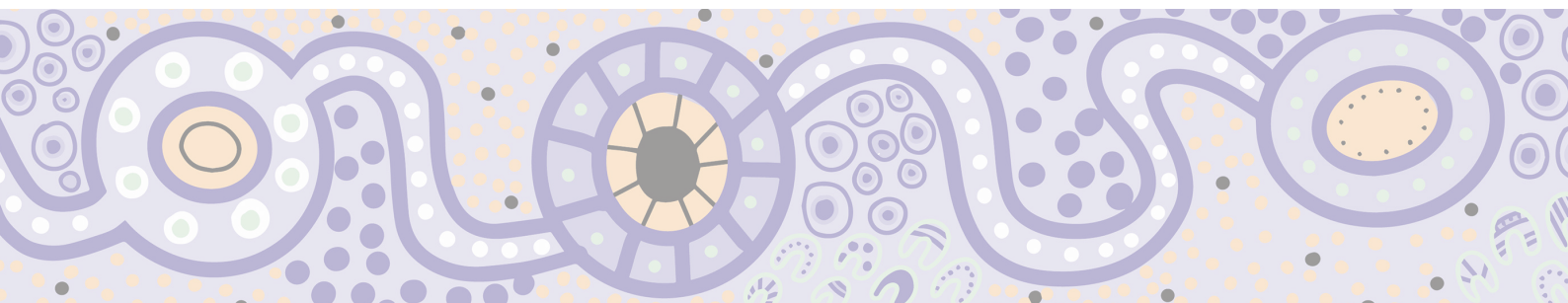
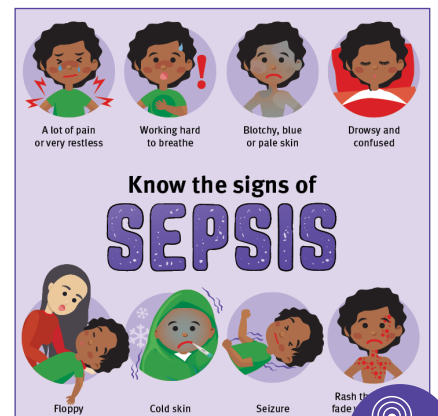
AND

2. Copy and paste from one of the options below to add to your post:

[Insert name of your organisation] is proud to support **#WorldSepsisDay** OR **#PaediatricSepsisWeek** to raise awareness of #sepsisinchildren. Use the @ChildhealthQLD resources and ask, “Could it be Sepsis?” [Sepsis | Children’s Health Queensland](#) #sepsisawareness #coulditbesepsis?

OR

Do you know the signs and symptoms of #sepsisinchildren? Join the **#WorldSepsisDay** OR **#PaediatricSepsisWeek** sepsis awareness campaign to help raise awareness and improve recognition of the signs. #sepsisawareness #coulditbesepsis?



Display sepsis awareness infographics

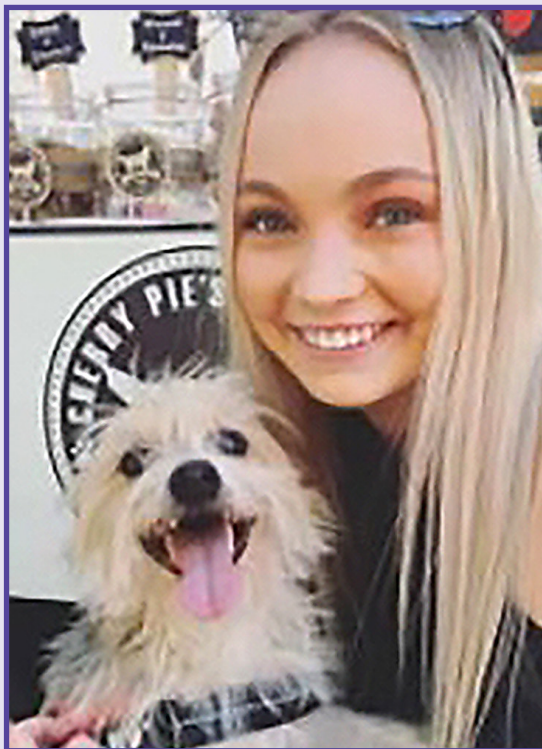


Download infographics for your organisation to display on your digital screens or in your physical spaces:

- [Infographics](#) – Know the signs of sepsis
- [Poster](#) – Do you know the signs of sepsis in children?
- [Postcard](#) – Do you know the signs of sepsis in children? (*Available in 10 languages*)

Further resources are available from:

- [World Sepsis Day Toolkit](#) – Global Sepsis Alliance
- [Paediatric Sepsis Week](#) – Sepsis Alliance
- [Sepsis Australia](#)
- [Sepsis Campaign](#) – Australian Commission for Safety and Quality in HealthCare



MADDY

As an 18-year-old Honours Law student, Maddy was intelligent, beautiful, very independent, wickedly funny with sarcastic undertones (sometimes irreverent) and a great lover of all of God's creatures, in particular dogs. Maddy was larger than life, a high achiever that typically got what she wanted, through sheer dedication and perseverance.

Maddy contracted Influenza and just over one week later died from Sepsis.

Please educate yourself, your family and friends about Sepsis. Share Maddy's story. Get the flu shot, know the signs of sepsis and if concerned always ask, "Could it be Sepsis?"

Damian, father of Maddy (1998–2017)



Could it be Sepsis?

Sepsis happens when the body is fighting an infection, but it starts to attack itself. It can be caused by any infection (viral, fungal or bacterial). Sepsis can damage many parts of the body and can even cause death.

Sepsis is **time critical**, the best chance of getting better is to treat it quickly.

Symptoms can vary between children and often mimic that of other illnesses, such as flu or gastro, making sepsis difficult to recognise. We want you to **know the signs of sepsis** in babies and children.

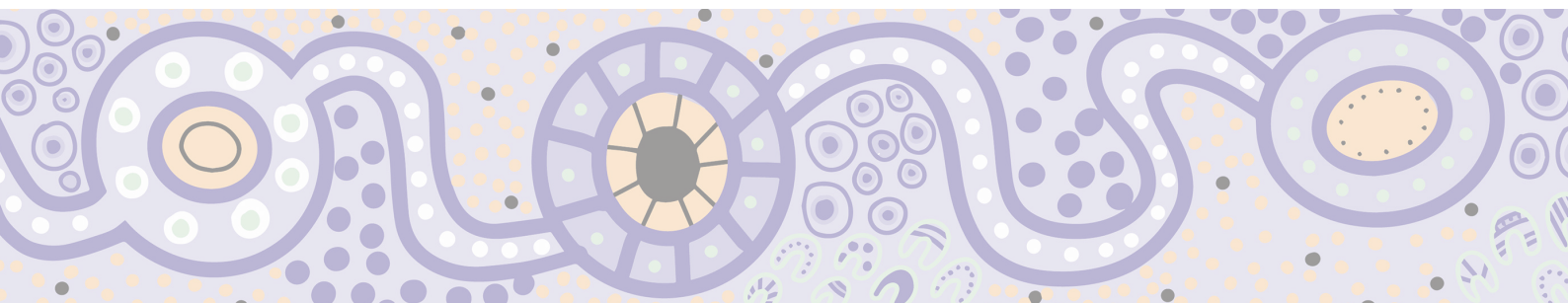
Any one (or more) of these symptoms may mean your child needs urgent medical care:

- A lot of pain or very restless
- Working hard to breathe
- Blotchy, blue or pale skin
- Drowsy and confused
- Floppy
- Feels abnormally cold to touch
- Seizure

Sepsis is a **medical emergency** and needs immediate treatment in hospital. You know your child best, if you are concerned that they are more unwell than ever before, or this illness is different from other times – just ask your doctor or nurse **“Could it be Sepsis?”**

For more information visit [Sepsis | Children’s Health Queensland](#)

Could it be SEPSIS?



Host a sepsis awareness activity or event



A range of ideas and resources are available to assist you in hosting your sepsis awareness activity. This may be simply sharing content online or hosting a physical event. There is something to suit all ages and organisation types in the list below.

Online activities:

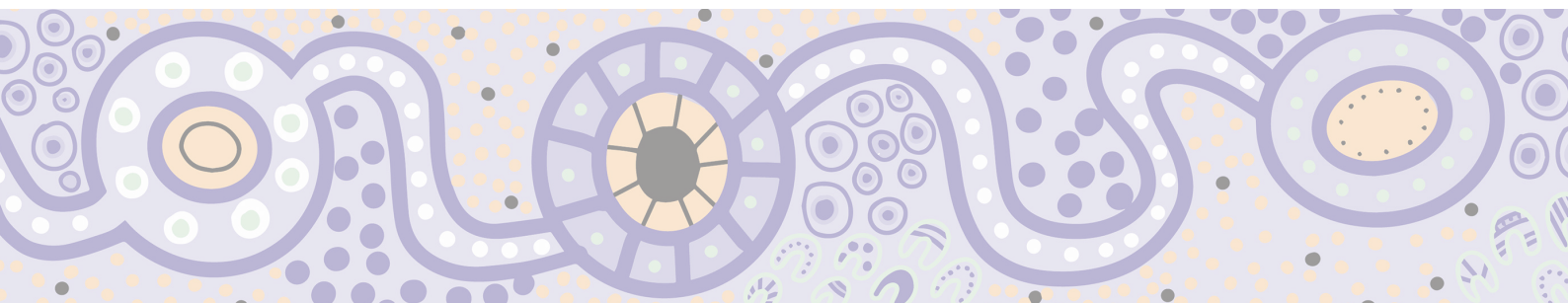
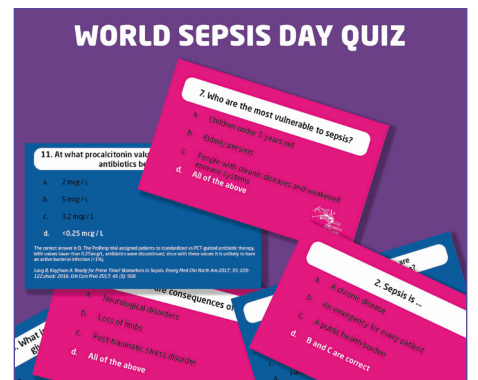
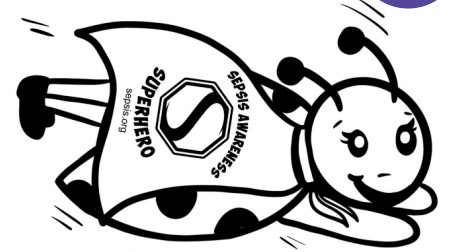
- Share digital sepsis awareness content:
 - » Post the [animation](#) or [infographics](#) to social media
 - » Send [education](#) for parents and carers through your networks
 - » Publish the [article](#) in your newsletter
- Participate in the [World Sepsis Day Photo Challenge](#)

Activities for children:

- [Bug Colouring Book for sepsis prevention](#) from the Global Sepsis Alliance
- Watch the [‘Is it Sepsis?’ song](#) to learn the signs and symptoms

Activities for all ages:

- [‘Steps for Sepsis’](#), dedicate a walk, run or other sporting event to raising sepsis awareness
- [‘Sips for Sepsis’](#), dedicate a morning tea to raising sepsis awareness with pink or purple food
- Hold a sepsis awareness stall at your organisation with the [Checklist for children with infection](#)
- Test your organisation with the [World Sepsis Day Quiz](#)



Public Awareness Event:

- Lobby your local council to illuminate a building, landmark or sports field for **pink** World Sepsis Day
- Get the media involved to promote and provide coverage of your event

Whatever you choose to do, we'd love you to share it with us.

Use these hashtags on your social media posts:

#sepsisinchildren

#sepsis

#sepsisawareness

#coulditbesepsis?

Email your photos to: paediatricsepsis@health.qld.gov.au



PRESTON

In 2003, Preston, was diagnosed with pneumonia, which caused an acute lung injury. This injury allowed a secondary infection to take hold which led to sepsis.

Within hours, beautiful little Preston sadly passed away.

Preston's mum, Mary, believes that you know your child better than anyone, so it is critical that you tell health professionals any concerns you have and don't be afraid to ask, "Could it be Sepsis?"

Preston's family outside the Brisbane City Hall, illuminated pink for World Sepsis Day 2021.

Education for parents and caregivers

How can you protect your child from sepsis?



As sepsis is caused by an infection, preventing infection is the best way to protect your child from sepsis. While infection cannot always be prevented, the following strategies can help to minimise the spread of germs and reduce the risk:

- Keep scrapes and cuts clean, dry and covered
- Wash hands regularly and maintain sanitation
- Cover your mouth when you sneeze or cough
- Stay at home if you are feeling unwell
- Keep vaccinations up to date



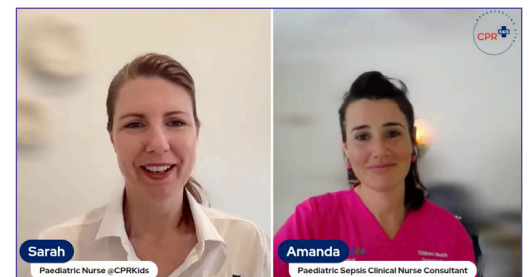
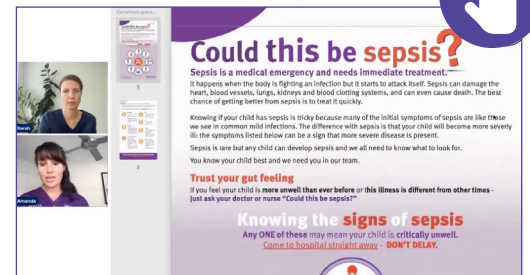
Sepsis in babies and children video resources



CPR Kids have teamed up with the QPSP to deliver education to parents and carers about sepsis in babies and children.

Sepsis in babies and children:

- [Common infections, red flags and prevention](#)
- [The facts you need to know about sepsis](#)
- [The facts every parent and carer need to know](#)
- [Signs, symptoms, and your questions answered](#)
- [Influenza – What you need to know](#)
- [Looking after you](#)
- [Empowering you](#)
- [Mia's story](#)
- [Jo and Tayla's story](#)





If your child is unwell, use the paediatric infection checklist to help monitor their condition and guide you to know when to see a doctor. You know your child best. If your child is not getting better, or they are getting worse, trust your gut feeling.

- [Checklist for children with infection](#)

If your child has been diagnosed with sepsis:

- [Information for parents, carers and families of children with sepsis](#)
- [Information for parents, carers and families of children who have died from sepsis](#)

Checklist for children with infection

You have been given this checklist because your child has an infection but does not have sepsis; even if they have a few of the symptoms below. Illnesses can change even when it starts mild – that's why it's important to assess.

Use this checklist to watch for any new symptoms, or signs that their condition is getting worse. If you're unsure or concerned, go to hospital, even if your child was recently seen, and ask "Could it be sepsis?"

You can also call 13 HEALTH (13 43 29 84) anytime for free, confidential advice from a registered nurse.

If your child has any symptoms listed on page 1, go to hospital or call 000 now.

<p>Temperature</p> <ul style="list-style-type: none"> <input type="checkbox"/> Shivering or shaking with fever (burning up/hot body) <input type="checkbox"/> Temperature more than 38°C for more than 4 days in children over 3 months of age <input type="checkbox"/> Temperature more than 38°C in babies 3 months or younger <p>Breathing</p> <ul style="list-style-type: none"> <input type="checkbox"/> Fast breathing <input type="checkbox"/> Nostrils that move in and out (flare) with breathing <input type="checkbox"/> Trouble with breathing; sucking in of breast/bone and under ribs <input type="checkbox"/> Grating noises with breathing <input type="checkbox"/> Crackly noises from the chest <p>Activity and movement</p> <ul style="list-style-type: none"> <input type="checkbox"/> Feeling more unwell than before <input type="checkbox"/> Less interest in playing; not "quite right" <input type="checkbox"/> Irritable, restless and won't settle <input type="checkbox"/> Unable to walk or refusing to walk <input type="checkbox"/> Not sitting part of the body for any obvious reason <input type="checkbox"/> Swelling of a joint 	<p>Pain</p> <ul style="list-style-type: none"> <input type="checkbox"/> Headache, neck, muscle, chest, bone or joint pain for no obvious reason <input type="checkbox"/> Pain relief is not working <p>Skin</p> <ul style="list-style-type: none"> <input type="checkbox"/> Cold hands and feet <input type="checkbox"/> Skin painful to touch <input type="checkbox"/> Bright red or swollen skin <input type="checkbox"/> Rash <p>Toileting</p> <ul style="list-style-type: none"> <input type="checkbox"/> Fewer wet nappies and not as heavy as usual <input type="checkbox"/> Blood in the faeces (poop) <input type="checkbox"/> More than 5 watery poos (runny tummy) in 24 hours <p>Eating and drinking</p> <ul style="list-style-type: none"> <input type="checkbox"/> Eating and drinking much less than usual <input type="checkbox"/> Vomiting (spewing) most fluids <input type="checkbox"/> Vomit that is green or black or with blood in it <input type="checkbox"/> Very thirsty, dry mouth, lips or tongue
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Scan the QR code on the left to watch a video demonstration on how to use this checklist.

Scan the QR code on the right for more information about sepsis, include support for families, or visit: www.childrens.health.qld.gov.au/sepsis



THOMAS

This is my son Thomas not long before sepsis struck in July 2017. Big, beautiful, strong and healthy, Thomas was in Brisbane representing the Northern Territory in Rugby.

Thomas was taken to a GP very poorly, vomiting, with diarrhoea and the flu. He was sent away with gastro tablets. Five hours later he had mass organ failure. He then spent 20 painful, traumatic days in ICU on two ECMO machines. The onset of Pneumonia then sepsis was rapid with Thomas.

If anyone around Thomas at that time had been aware of sepsis, we may have got him to hospital quicker and his chances of survival could have been 5% more for every hour.

There is a huge gaping hole in my heart and that of my family since the loss of Thomas.

*Thomas's Mum, Amanda Clarke
Thomas's story: [IsItSepsis?](#)*

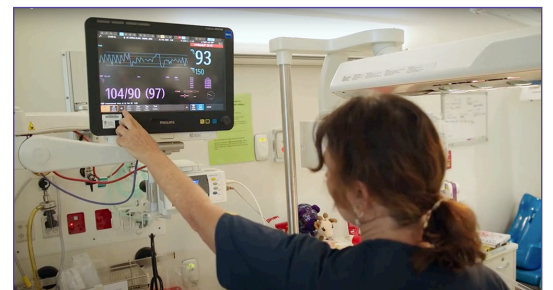
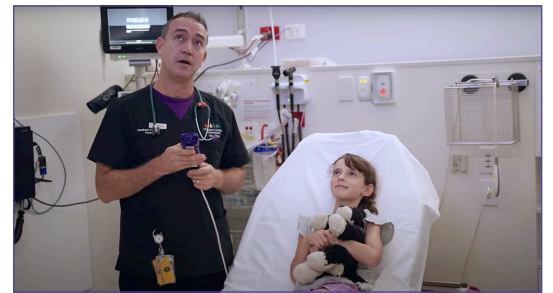


Having a child in hospital with sepsis is a very challenging time for you, your child and other members of your family and community. The eight-part 'Journeying through Sepsis' video series aims to support families by providing information on each stage of a child's hospital journey – from initial diagnosis, through intensive care, rehabilitation and support after discharge.

The series features four families who have lived their own journey through sepsis as well as clinicians with experience in working with families affected by sepsis.

We hope that this video series will provide you with clear and relevant information that you can explore further with your child's health care team. Watch these videos however you choose as they have been designed to be watched individually or in order as a series.

- [Part 1 – What is Sepsis?](#)
- [Part 2 – Early Stage of admission: the facts](#)
- [Part 3 – Support during the early stages of admission](#)
- [Part 4 – Rehabilitation: the facts](#)
- [Part 5 – Support during rehabilitation](#)
- [Part 6 – Preparing for discharge: the facts](#)
- [Part 7 – Support for preparing for discharge](#)
- [Part 8 – Sepsis: some final thoughts](#)



We thank the Queensland families who have openly and honestly shared their experiences to help others:

Sabella, Marissa and Peter; Tiffany and Austin; Cindy and Myles; Amy, Peter and Mia.

Support for families that have been affected by sepsis

If your networks include families affected by sepsis



A child's diagnosis of sepsis is a life changing event that often involves a significant period of hospitalisation with many medical teams. The lifelong impacts of sepsis can require ongoing care. Parents have described a sense of isolation in their child having had, and potentially being significantly affected by an unfamiliar condition. We want families to be well supported and have access to useful information and resources.

The QPSP provides support to families throughout their journey with sepsis - from a new diagnosis, to receiving care in hospital, rehabilitation, returning home after hospital, and bereavement support to families whose child has died from sepsis. Families can self-refer to our support services through the following links:

- [Family Support Network](#): A state-wide network of families who have been affected by sepsis
- [Peer Mentor Program](#): Peer support between mentors and mentees with a shared lived experience

Cultural and linguistic diversity

Resources for culturally and linguistically diverse families



To support culturally and linguistically diverse families in our communities, we have translated sepsis in children resources into 10 different languages.

Available in Arabic, Burmese, Chinese, Dari, Farsi, Japanese, Korean, Kurdish, Swahili, and Vietnamese:

- [Checklist for children with infection](#)
- [Sepsis in Babies and Children animation](#)
- [Sepsis in Babies and Children postcard](#)
- [Information for parents, carers and families of children with sepsis](#)
- [Information for parents, carers and families of children who have died from sepsis](#)





Aboriginal and Torres Strait Islander children experience higher rates of sepsis than the non-indigenous population. Sepsis awareness resources have been developed specifically for Aboriginal and Torres Strait Islander people:

- [Checklist for children with infection for Aboriginal and Torres Strait Islander families](#)
- [Information for Aboriginal and Torres Strait Islander families of a child with sepsis](#)
- [Postcard – Do you know the signs of Sepsis in bubs and kids?](#)
- [Spotlight on Sepsis – Aboriginal and Torres Strait Islander Peoples](#)

The artwork, titled **‘Healing Journey’**, represents the journey through sepsis. The centre circle represents a central location for patients to be treated and cared for. The journey lines moving forward and backward represent the struggles and setbacks families and patients might face as well as the successes, positives, and joy in good health. The unique orange circles represent people as a symbol of the diversity of doctors, carers, and patients. The purple circles on the outside represent traditional medicines and meeting places where elders teach the younger generations how to care for one another. The smaller purple, orange and black dots are a representation of sepsis itself. Some cases are mild (small orange dots), some are serious (larger purple dots), and some are deadly (black dots).

By Sheri Skele at Bigi Nagala – Proud Bidjara woman from South-West Queensland

Children’s Health Queensland Hospital and Health Service

Do you know the signs of SEPSIS in bubs and kids?

			
Floppy	Cold skin	Seizure	Drowsy or confused
			
A lot of pain or very restless	Working hard to breathe	Rash that doesn’t fade when pressed	Blotchy, blue or pale skin

Go to hospital or call 000 now
www.childrens.health.qld.gov.au/Sepsis

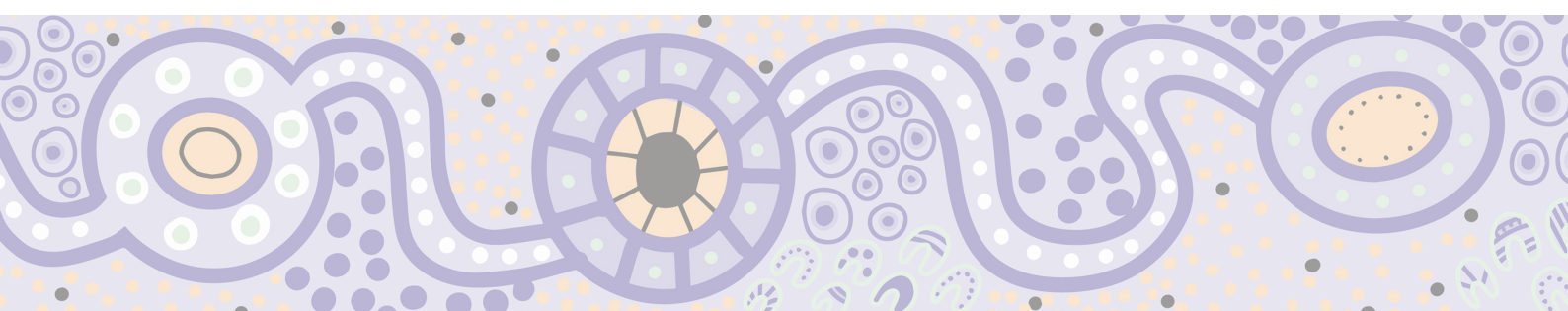


Children’s Health Queensland acknowledges the Traditional Custodians of the land and pays respect to Elders past, present and future.



Artwork: *The Healing Journey* by Sheri Skele, Bidjara



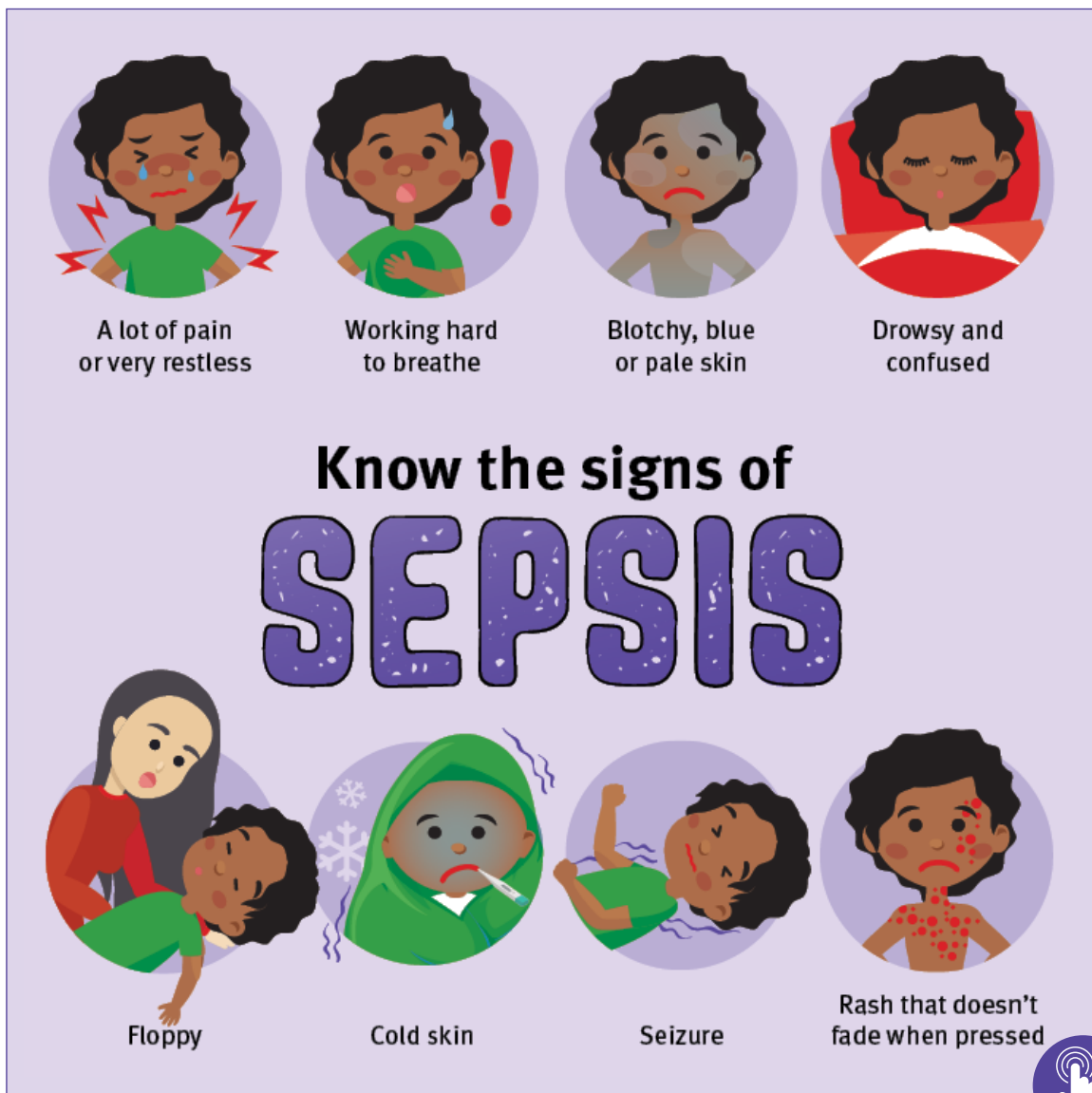


Conclusion

Key points to remember



- Sepsis is a **medical emergency**
- **Know the signs of sepsis** and seek medical attention urgently
- **Illnesses can change**, if you are concerned that your child is getting worse, or is not getting better, see a doctor, even if you have recently been.
- You know your child best, if you are concerned, trust your gut and ask your healthcare provider **“Could it be Sepsis?”**





The QPSP collaborates with a number of organisations to help the fight against sepsis. If you would like further information please visit the websites below:

- [Sepsis Australia](#)
- [Australian Commission on Safety and Quality in Health Care](#)
- [Sepsis Alliance](#)

LAUREN

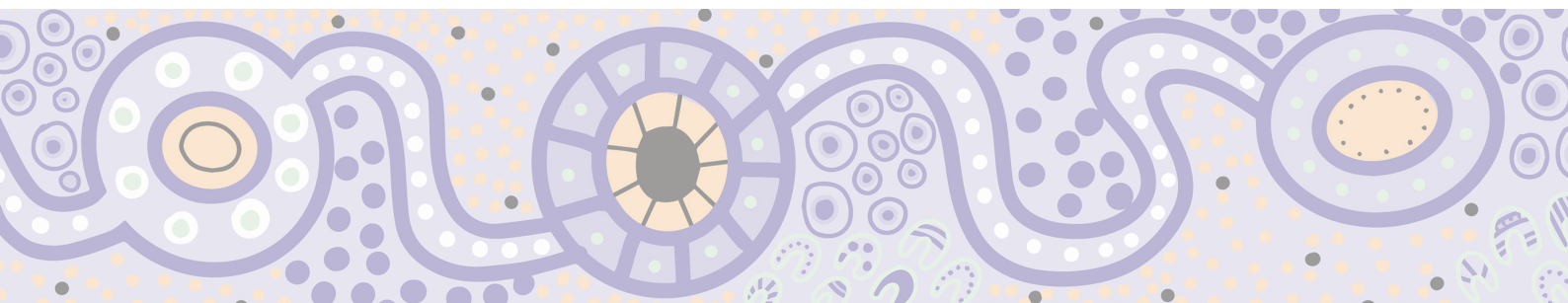
Lauren, a year 12 student in the midst of her final exams started feeling a little off one day – but put it down to the stressors of studying, on top of a recent flu like infection. Thinking an early night was in order, Lauren went to bed and awoke the next morning with a raised temperature, confusion, drowsiness and just ‘feeling weird’. A trip to the Emergency Department, Lauren received fluids and was sent home feeling better. However, a possible infection was detected in her blood test and the hospital soon asked her to return.

From here, Lauren deteriorated with laboured breathing, low blood pressure and high heart rate. She was transferred to a higher acuity hospital and placed in intensive care where she stayed for 5 days receiving antibiotics through a central IV line inserted directly into her heart. Superb medical attention and a further 5 days on the ward saw her released home with a month-long dose of IV antibiotics and instructions to rest. No follow-up was required.

Determined to finish year 12, Lauren went back to school part-time, but there was something very different going on. She was highly emotional, tired all the time, anxious, struggling with poor mental function and very unsettled. She focused on her studies, pushing herself to the brink of REAL exhaustion many times. Frequent trips to the GP informed her that they weren't sure what was wrong, many tests, examinations and inconclusive ideas were all posed. But nothing seemed to solve the issues. Concerns about her recovery from sepsis were dismissed.

Lauren's family came across Post Sepsis Syndrome (PSS), a condition that causes mental and physical impairments. Despite looking physically in one piece, thankfully, no amputations, organ and brain damage, there was a real thing happening. Lauren had not been herself for a very long time, she just needed to have the support to find out why and help her.

Getting in touch with various Sepsis support networks and survivors has allowed Lauren and her family to understand the likely challenges better. This meant getting the correct psychological support, learning to manage her energy and psychological safety better and dealing with the socially isolating aspects of living through a significant health event at a young age. Lauren wants to use her experience to educate others and ensure that their care appreciates the immediate and longer-term impact that sepsis has on the patient, their family, and their community.



Thank you

The Queensland Paediatric Sepsis Program would like to express our appreciation to you for joining the fight against paediatric sepsis. Together we can raise awareness and provide education to reduce the burden of paediatric sepsis on Queensland children and families.

If you would like to know more about the **Queensland Paediatric Sepsis Program** please contact us at paediatricsepsis@health.qld.gov.au or visit [Sepsis | Children's Health Queensland](#).



The inspiring families of the Queensland Paediatric Sepsis Program

Endnotes:

1. Kumar, A., Abbenbroek, B., Hammond, N., & Finfer, S. (2024). Trend in public awareness of sepsis in Australia between 2016 and 2022: An analysis of three national surveys' data. *Australian Critical Care*, 37(Suppl. 1), S3–S4. <https://doi.org/10.1016/j.aucc.2024.07.009>

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