



Between the Flags

Keeping patients safe

A statewide initiative of the Clinical Excellence Commission



Recognition and Management of the Deteriorating Patient

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ACSQHC Workshop
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The issue

- 🇪🇺 World-wide issue
- 🇪🇺 IIMS and RCA + coronial recommendations
- 🇪🇺 GMCT – CERS document
- 🇪🇺 SSSL (RRS)
- 🇪🇺 Lack of coordinated action



Between the Flags

Aim

- 🚩 Identify universal and basic safety parameters for patient well-being in hospital wards
- 🚩 Trial processes for improved clinical observations, escalation and communication
- 🚩 Understand the work practices that interfere with team dynamics
- 🚩 Provide recommendations for statewide action.




Qualitative Analysis

Focus group participants identified observation chart elements to aid good patient care

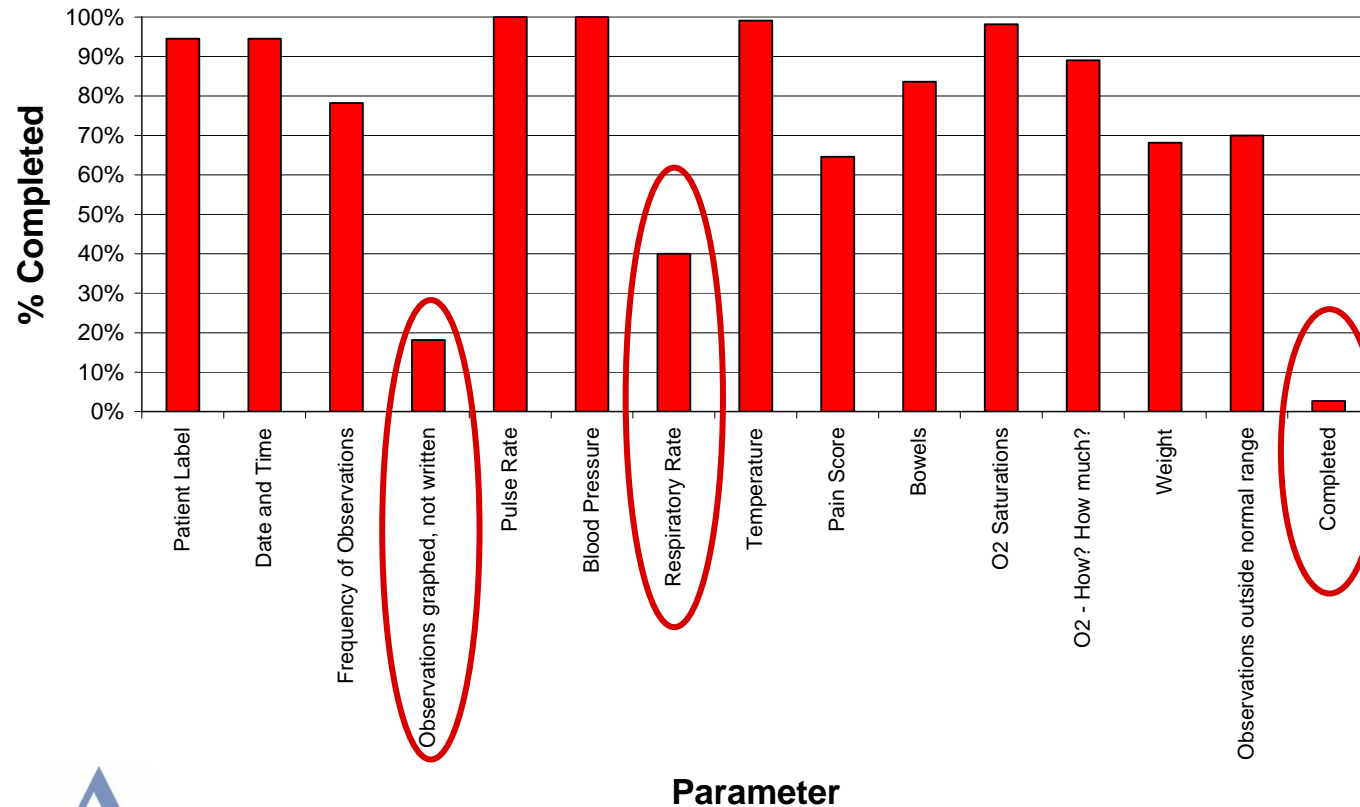
- 🇪🇺 Patient label
- 🇪🇺 Date & time
- 🇪🇺 Frequency of observations
- 🇪🇺 Obs graphed not written
- 🇪🇺 Pulse
- 🇪🇺 Blood pressure
- 🇪🇺 Respiratory rate
- 🇪🇺 Temperature
- 🇪🇺 Pain
- 🇪🇺 Bowels
- 🇪🇺 Oxygen saturation
- 🇪🇺 Oxygen delivery rate & mode if applicable
- 🇪🇺 Weight
- 🇪🇺 If any obs outside normal range
- 🇪🇺 All obs collected as 'complete' set

Review of existing observation charts

Reliability Audit revealed the extent of variability in existing observation charts. Key inconsistencies included:

-  Inconsistent design/ format
-  Inconsistent frequency of vital sign recording
-  Clarity of documentation
-  Variable physiological parameters are found on different observation charts

Review of existing observation charts





Trial of colour coded observation chart

- 🚩 Used ACT chart in 4 sites
- 🚩 Initially without supportive education
- 🚩 Re-focus on observation taking





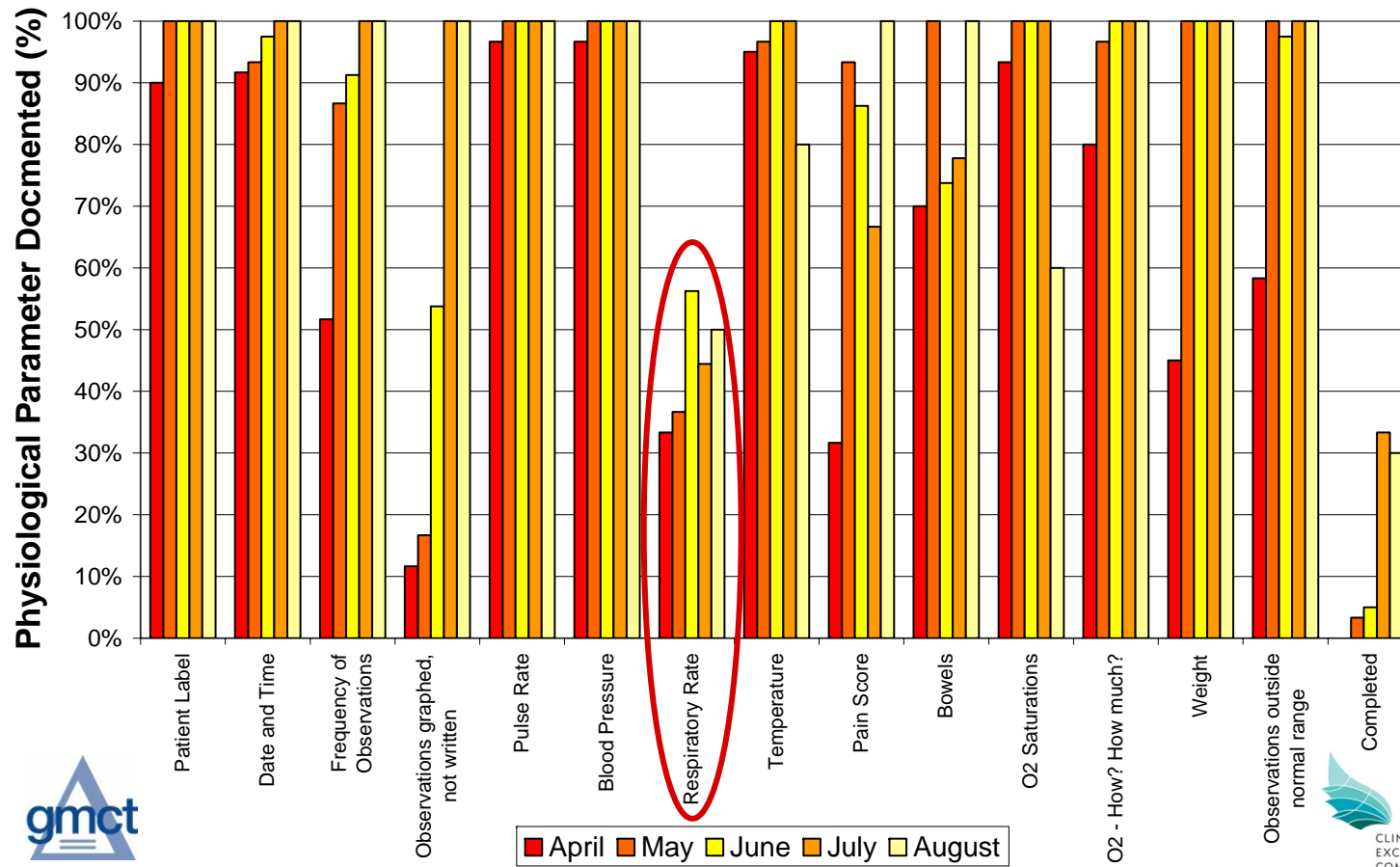
The Canberra Hospital
General Observation Chart

Modified Early Warning Scores		0	1	2	3	Observation chart number:									
Date															
Time															
Resp Rate MET RR < 5 or > 36	≥ 36														
	31 – 35														
	21 – 30														
	9 – 20														
	≤ 8														
RR Score															
Oxygen mode (l/min)															
SpO ₂	≥ 93														
	90 – 92														
	85 – 89														
	< 84														
SpO₂ Score															
Temp (°C)	≥ 39.6														
	38.6 – 39.5														
	38 – 38.5														
	37 – 37.9														
	36.1 – 36.9														
	35.1 – 36														
	34.1 – 35														
Temp Score															
↔ Blood Pressure & Heart Rate (●) MET criteria HR < 40 or > 140 SBP < 90 Usual SBP:	200														
	190														
	180														
	170														
	160														
	150														
	140														
	130														
	120														
	110														
	100														
	90														
	80														
	70														
	60														
50															
40															
Score HR															
Score BP (see back)															
Sedation Score	0														
	1														
	2														
	3														
	4														
Sedation Score															
Urine for 4hrs	> 800														
	120 – 800														
	80 – 119														
	< 80														
Urine Score															
TOTAL MEWS															
Pain															
Bowels															
Initial															






General Observation Chart



Review of existing observation charts



Observation chart - requirements

-  Enable clinicians to better identify early and late signs of deterioration of patients in general wards
-  Be easy to use
-  Assist in standardising care in a mobile workforce
-  Transferability across all facilities
-  Reduce duplication of documentation and number of variations in observation charts across facilities



Comprehensive approach required

- 🚩 A system for early recognition of at-risk patients
- 🚩 A clear process for escalation of clinical concern
- 🚩 Rapid response to escalation of concern with appropriately trained staff
- 🚩 Appropriate data collection to support practice improvement including feedback to clinicians
- 🚩 Supportive education programs to facilitate 1-4 above



Why between the flags?

Strong analogy with SLSA

-  Flags on the beach denote safe swimming area
-  Escalation protocols and tiered rescue devices
-  Education and training appropriate for role and includes communication
-  Lifesavers on duty
-  Observation chart with pre-defined parameters
-  Escalation protocols and RRS
-  Tiered education needs for appropriate response levels
-  Vigilance of clinical roles to identify patients at risk of clinical deterioration



 *Whatever it takes.....*



