



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

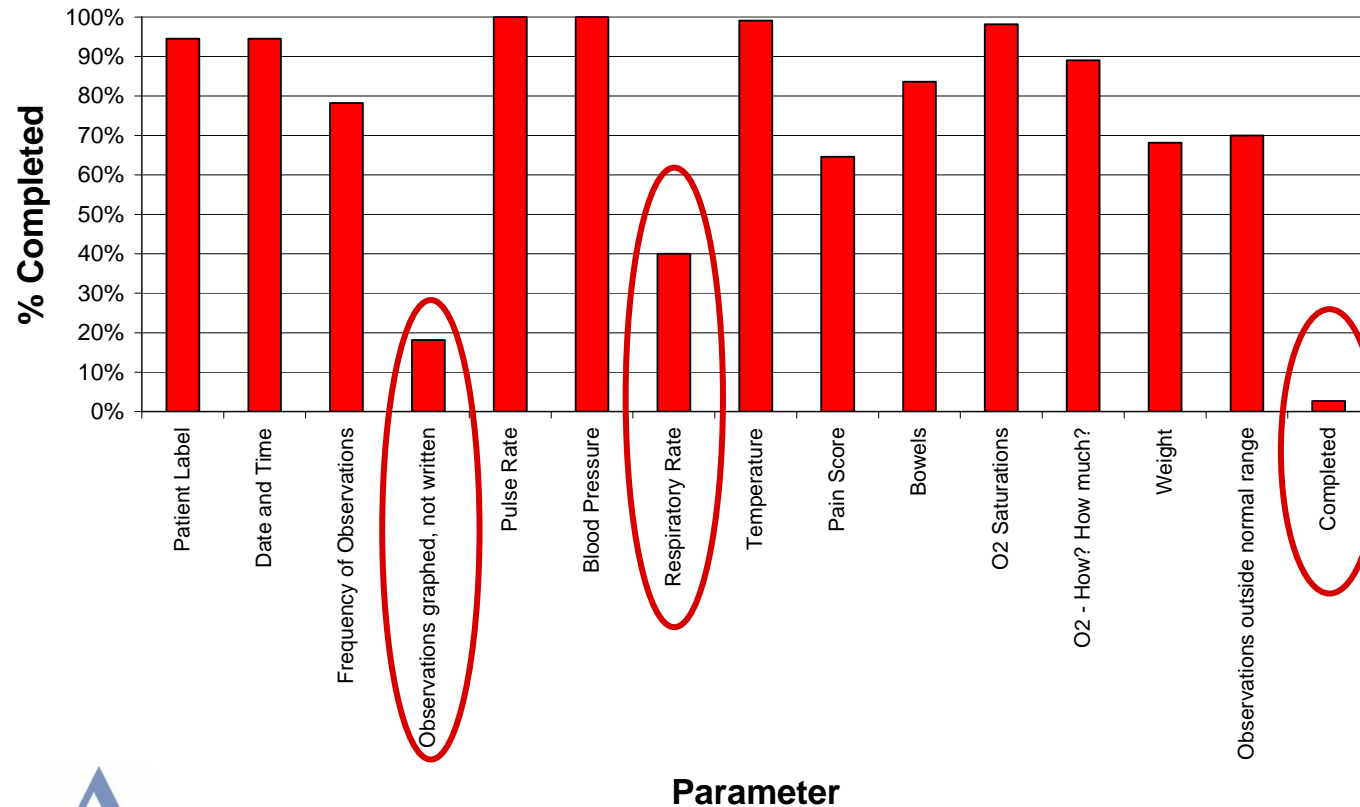
- 🇪🇺 Patient label
- 🇪🇺 Date & time
- 🇪🇺 Frequency of observations
- 🇪🇺 Obs graphed not written
- 🇪🇺 Pulse
- 🇪🇺 Blood pressure
- 🇪🇺 Respiratory rate
- 🇪🇺 Temperature
- 🇪🇺 Pain
- 🇪🇺 Bowels
- 🇪🇺 Oxygen saturation
- 🇪🇺 Oxygen delivery rate & mode if applicable
- 🇪🇺 Weight
- 🇪🇺 If any obs outside normal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





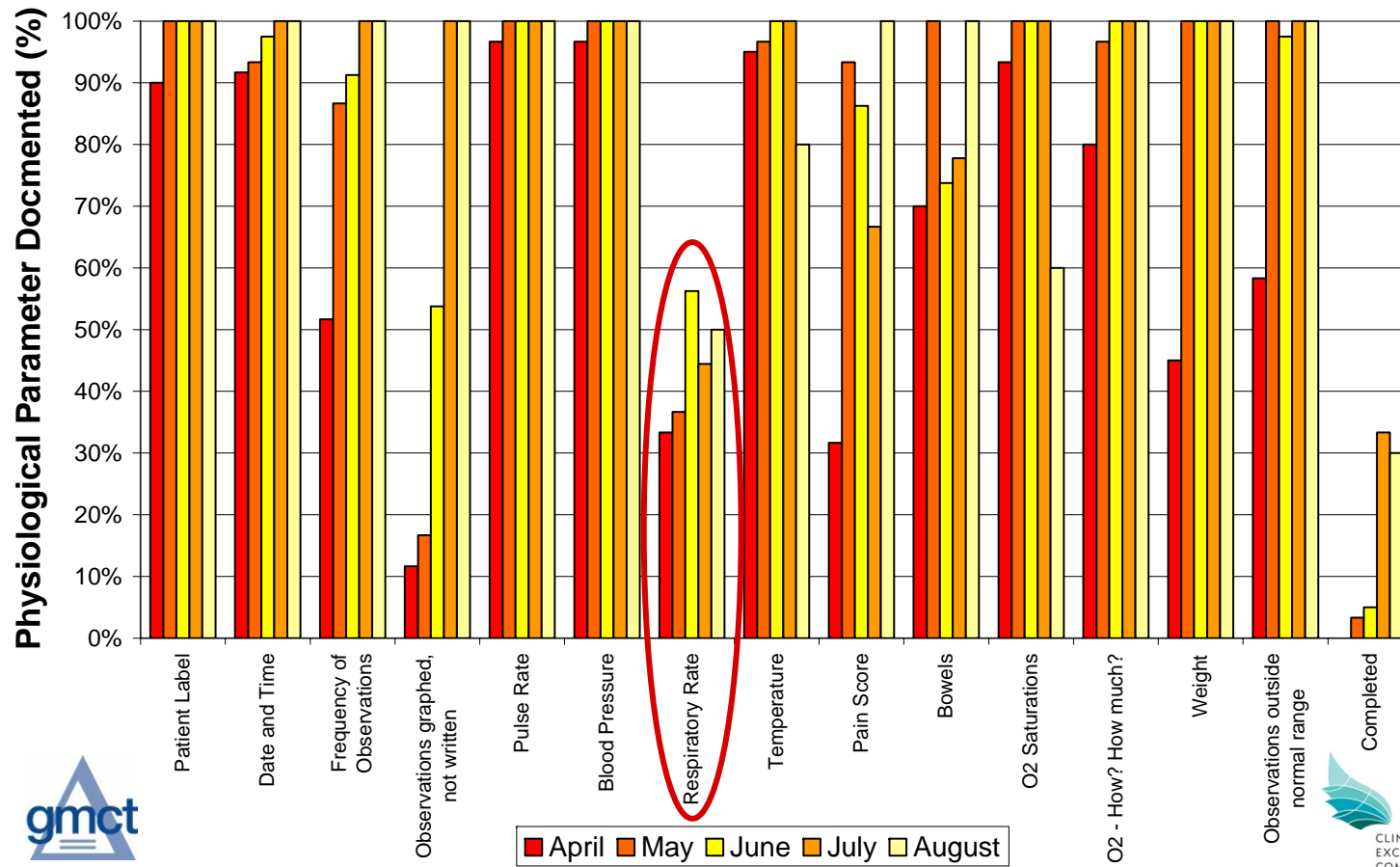
The Canberra Hospital
General Observation Chart

| | | | | | | | | | | | | | | | |
|--|-------------|---|---|---|---|---------------------------|--|--|--|--|--|--|--|--|--|
| 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.....*



