

## Clinical documentation after rapid response system calls

### IDENTIFYING AND DEFINITIONAL ATTRIBUTES

<b>SHORT NAME:</b>	Clinical documentation after rapid response system calls
<b>DESCRIPTION:</b>	The proportion of rapid response system calls for which there is documentation in the clinical record of the details of the event
<b>TYPE OF QUALITY MEASURE:</b>	Process measure
<b>RATIONALE:</b>	Inadequate clinical documentation has been identified as an important contributing factor to adverse events in healthcare. Poor written and verbal communication between health professionals can result in discontinuity of care, delays in treatment, adverse events and increased morbidity and mortality. Poor communication also poses risks to patient safety when patients are transferred between clinical areas and during critical events such as rapid response system calls
<b>DEFINITIONS:</b>	<p>Admitted patient: any patient for whom the hospital accepts responsibility for the provision of inpatient care and/or treatment. Admission follows a clinical decision based upon specified criteria that a patient requires same day or overnight care or treatment</p> <p>Evidence of clinical documentation: documentation in the healthcare record that summarises the details of the rapid response call and meets any requirements outlined in the facility's rapid response policy</p> <p>Rapid response system: system that provides emergency assistance to patients whose condition is deteriorating</p> <p>Rapid response system call: presence of either a rapid response system call record form in the patient's healthcare record or other relevant documentation</p>

### COLLECTION AND USAGE ATTRIBUTES

<b>POPULATION:</b>	Admitted patients who receive a rapid response system call
<b>COMPUTATION:</b>	<p>Percentage of rapid response system calls for which there is a documented summary of the details of the call in accordance with the requirements of rapid response policy</p> $\frac{\text{Numerator}}{\text{Denominator}} \times 100$
<b>NUMERATOR:</b>	Number of audited rapid response system calls for which there is a documented summary of the details of the call in accordance with the requirements of rapid response policy
<b>DENOMINATOR:</b>	Total number of audited rapid response system calls

### COMMENTS

<b>COMMENTS:</b>	<p>A high rate of clinical documentation after rapid response calls is desirable</p> <p>Evidence of clinical documentation should be assessed in accordance with the agreed documentation process outlined in the facility's rapid response policy</p> <p>Collecting data for this quality measure will require information from the records of rapid response system calls and from the patient's healthcare record</p>
------------------	--

## Clinical documentation after rapid response system calls

### REFERENCES

#### REFERENCE DOCUMENTS:

Australian Commission on Safety and Quality in Health Care. OSSIE Guide to Clinical Handover Improvement. Sydney. ACSQHC, 2009

Australian Institute of Health and Welfare Index. (Accessed 5 August 2011, at <http://meteor.aihw.gov.au/content/index.phtml/itemId/327206>.)

National Institute for Health and Clinical Excellence. Acutely ill patients in hospital: Recognition of and response to acute illness in adults in hospital. National Institute for Health and Clinical Excellence, 2007

Sebat F. *Designing, implementing and enhancing a Rapid Response System*. Mount Prospect: Society of Critical Care Medicine, 2009