Rapid response system activation IDENTIFYING AND DEFINITIONAL ATTRIBUTES	
DESCRIPTION:	The rate of rapid response system activation in a facility
TYPE OF QUALITY MEASURE:	Process measure
RATIONALE:	Monitoring the rate of rapid response system calls provides information about the effects of the rapid response system on workload
DEFINITIONS:	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
	Rapid response system: system that provides emergency assistance to patients whose condition is deteriorating
	Rapid response system call: presence of a rapid response system call record form in the patient's healthcare record or other relevant documentation
	Separation: the process by which an episode of care for an admitted patient ceases. This may be formal or statistical
COLLECTION AND USAGE ATTRIBUTE	S
POPULATION:	Admitted patients
COMPUTATION:	Number of rapid response system activations per 1000 hospital separations for the time period audited
	Numerator × 1000
	Denominator
NUMERATOR:	Number of rapid response system calls to patients during the time period audited
DENOMINATOR:	Number of patient separations in the time period audited
COMMENTS	
COMMENTS:	Interpretation of this data will vary depending on the type of rapid response system in use. In systems where there is only one response, such as the medical emergency team, there is some evidence that increased activation rates are associated with better patient outcomes. In graded response systems there is not yet any evidence regarding the optimal rapid response system calling rate. It is possible that a high call rate is desirable, as it may indicate that patients who are rapidly deteriorating are being identified and reviewed promptly. Alternatively, a high calling rate may represent a failure of the hospital organisation to develop and implement other strategies for preventing, detecting or responding to patient deterioration
	separately. These populations may include general adult, obstetric and paediatric patients. If specific escalation protocols apply in other settings (such as maternity), these should also be reviewed separately
	Collecting data for this quality measure will require information from the records of rapid response system calls and routine hospital data

Rapid response system activation

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