

Utilising an e-observations system (Systems C) with real-time notification ability to escalate the deteriorating patient directly to Critical Care Outreach Team within a large tertiary hospital.

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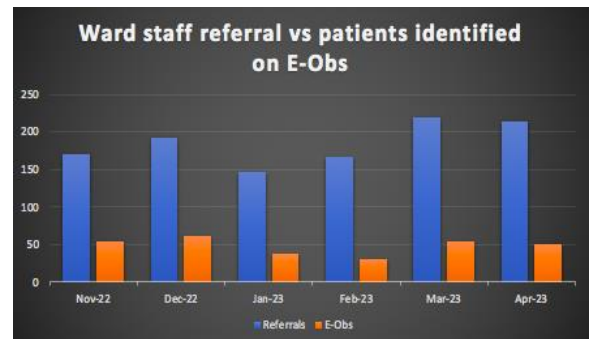
Significance

Evidence of failure to escalate patients with a NEWS2 score (Royal College of Physicians, 2017) ≥ 7 to the Critical Care Outreach was found after an initial trust-wide campaign during which the newly established Critical Care Outreach team and associated deteriorating patient escalation pathway were introduced.

Critical Care Outreach team members manually interrogated the e-observation system at regular intervals. This process highlighted that an average of 24% of patients with a NEWS2 score were not being escalated as per the Trust's deteriorating patient policy, which potentially could have led to a number of failure to rescue scenarios (Burke, Downey and Almoudaris, 2022).

Method

In collaboration with the organisational digital team and service provider, a manual reporting system alongside real-time notification alerts for a handheld device (held by the Critical Care Outreach nurse) was introduced.



Results

The manual reporting system identified a greater number of deteriorating patients which resulted in a 24% increase of patients identified with a NEWS2 ≥ 7 than previously. However, as service demands become increasingly busy, the search method was found to be less efficient as the Critical Care Outreach nurse has limited availability to complete the manual search method.

The introduction of live notifications provided real-time track and trigger responses at the point of initial patient deterioration (NORF, 2020) has initially proved some success in identifying a small number of deteriorating patients (average 3% over initial use in practice).

Conclusion

Track and trigger live-notifications will require further auditing and development to assess its practicality and usability in terms of overall service provision. There is scope to develop notifications further such as triggers for high oxygen requirements.