RESPOND

Rescue for Emergency Surgery Patients Observed to uNdergo Deterioration

National Institute for

Prompt = Action Saves Lives.





RESPOND Interventions

RESPOND AIMS TO improve speed and quality of responses to deteriorating patients who have had colorectal surgery

2020 **Step 1:** Understand what we do now.

Step 2: Identify areas for improvement with staff.

Step 3: Develop and pilot interventions in 3 hospitals.

Step 4: Trial interventions against what we do now in 24 hospitals.

RESPOND Response for Emergency Surgery Patients Observed to UNdergo Acute Deterioration

RESPOND Interventions

Patient's Urgent Help Line

Provide patients with a phone number for urgent help.

For patients with nursing involvement

Team Strengthening

Improve cohesiveness of the team by integrating daily values and comments of appreciation.

→ For all

Surgical Escalation Procedure

Or "SEP" provides a memory aide to support early escalation and shared awareness across all care team members

For HCAs, nurses, and doctors

Shared Language

The "RICHER" communication tool organizes only the necessary information when requesting consults related to patient deterioration.

For FYs



Questions? Comments? Email respond@nds.ox.ac.uk

Patient's Urgent Help Line

For patients with nursing involvement

- The Problem: Patient's often know when something is 'not quite right' but are unable to escalate this concern for urgent attention.
- The Plan: Provide patients with a mechanism to escalate urgent concerns.
- The Solution: The Patient's Urgent Help Line provides patients with a phone number to call with only urgent concerns for immediate attention.
- The Ask of You: The RESPOND team will implement and collect data around the Patient's Urgent Help Line. Site leads are asked to encourage nurses to provide pamphlets (right) to patients.

PATIENTS' URGENT HELPLINE

Let Your Voice Be Heard

The Patients' Urgent Helpline was developed to give patients an easier way to escalate health concerns. If you feel or see a worrying change in your health, that of your loved ones, or other patients, please call:





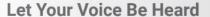
Patients' Urgent Helpline

ESCALATION REQUEST



RESPOND

PATIENTS' URGENT HELPLINE



Use the tear away card below as a way to escalate any health concerns to your Nurse or Health Care Assistant. This is meant to be used in situations where you feel your health concerns need urgent attention.

THIS IS AN IN-PATIENT **SERVICE ONLY**

Patients' Urgent Helpline

ESCALATION REQUEST



Further information can be provided by your nurse or HCA

- www.nds.ox.ac.uk/research/the-respond-programme
- OXFORD NIHR | National Institute for Health and Care Research





Team Strengthening

For everybody

The Problem: Early recognition relies on shared awareness but that is very difficult amid ever-changing teams and poor culture.

The Plan: Interviewed a number of team members and team leaders in high performing military and sport teams globally

The Solution: Fortify teamwork culture by:

- Discussing core team values at safety huddles and other groups
- Recognising team members in a positive way publicly
- Conducting observations of teamwork

The Ask of You: The RESPOND team will implement and collect data around the team strengthening interventions. We only ask you to encourage your team members to:

- Submit positive comments about team members via the RESPOND email to be displayed on the ward's e-board.
- Use and apply the values discussed in daily work.

VHAT THOU SURGI DISCU RESPO

THOUGHTS FROM THE SURGICAL TEAM AS DISCUSSED ON RESPOND AWAY-DAYS

RESPOND



7.BENEFIT FROM DIVERSE CULTURE

N O BLAME CULTURE





GENUINELY





4 MUTUAL RESPECT

5 CONSTRUCTIVE FEEDBACK

6 WELCOMING



10 TOLERANT AND APPRECIATIVE OF OTHERS

8.ACTIVELY ANTICIPATING AND LOOKING FOR OPPORTUNITIES TO HELP EACH OTHER

System Redesign

For HCAs, nurses, and FY1s

The Problem: There are complex workflow barriers to escalating concerns. Current escalation policies are lengthy and may not be feasible for frontline work.

The Plan: Work with HCAs, nurses, and doctors to understand what they do to ensure timely escalation and capture it into a flexible tool for frontline use

The Solution: Surgical Escalation Procedure (SEP): Like a grocery list: A memory aide to ensure nothing is forgotten and time isn't wasted, despite ever-changing circumstances.

The Ask of You: The RESPOND team will implement and collect data around the SEP. Site leads are asked to spread awareness of the SEP and encourage its use.





What is Happening?

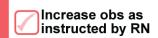
Observations (vital signs/NEWS² and General)

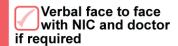
Who is Involved?

HCA and Nurse

Objective: Raise Alarm Reliably & Fast

Follow NEWS² pathway for reporting scores to Staff Nurse





Ensure Fluid Balance Chart is updated throughout

Ensure NEWS² is escalated to RN

Communicate Clearly: Use the RICHER tool (FY1s) Use SBAR (nurses/HCAs)



Support each Other:

Always back each other up and help before being asked



Back your Instinct: If its not NEWS² 5+ but you don't like it, mention it!



concerns, DO IMMEDIATELY

Phone a Friend: Ask for

Phone a Friend: Ask for help ASAP if you are unsure

Repeat or buddy check if you are not sure

No Response: Shout Help/pull buzzer and ask colleague to call 2222 if unconscious Cardiac Arrest, or Haemorrhage **Options**

Follow NEWS² or appropriate pathway for reporting scores to Staff Nurse and others and increase observation frequency when instructed

Write down if Wi-Fi is not working

Consider initiating Sepsis Screening if NEWS² is >5

Raise Alarm Reliably & Fast

Shared Language: The RICHER Tool

For FY1s

The Problem: Back and forth communication and missing information between FY1s and other service departments can contribute to delays.

The Plan: Needed a communication tool that captured the needs of all parties involved in coordinating care for a deteriorating patient.

The Solution: The R.I.C.H.E.R Tool: A concise communication format for deteriorating patients.

The Ask of You: The RESPOND team will implement and collect data around the RICHER tool. We only ask that you encourage your FY1s to use this tool in their communication with other services when coordinating care for a deteriorating patient.

RICHER Request Tool



Rapid Intro

- · Name, Department
- · Request: Scan, Consult
- Patient MRN
- · 1 Sentence Patient Description
- Timeline



Criticality

- Diagnosis
- · Supporting Evidence

LACTATE | CRP | WCC | NEWS2



History

Relevant and Significant Co-Morbidities

RENAL | CARDIAC | RESPIRATORY | **BLOOD-COAGULATION I** MALIGNANCY | FRAILTY SCORE



Expected Response

- · Confirm Request
- Additional Information
- · Clinical Decision on Request

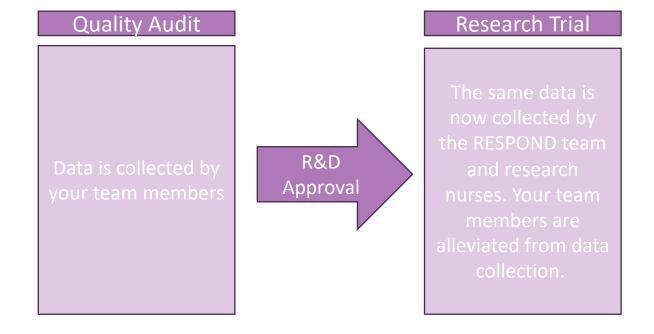






Transitioning Data Collection from the Quality Audit to the Randomised Control Trial

- Upon receiving approval from your R&D department for participation in the RESPOND research trial, we will transition from data collection from the quality audit to data collection for the trial.
- The data collected will be the same in both the quality audit and the research trial.
- A research nurse and members of the RESPOND team will collect all RESPONDrelated data upon approval for the research trial.





Thank you!

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