

# Acute Deterioration and Escalation Incident

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# Gorseinon Hospital Site



***Gorseinon Hospital is located in the heart of a local community where many of our patients reside***

Gorseinon Hospital is a stand alone 39 bedded community rehabilitation hospital. Includes 3 surge beds.

It acts as a step down in patient facility for patients who are clinically optimised but are not yet ready to be discharged home as they require a period of recovery and reablement

Gorseinon Hospital's function is to support flow across the Health Board system

**Patients are assessed and listed by either the older people's assessment service (OPAS) or the discharge liaison nurses (DLNs)**

# Patient Escalation Incident Detail

- Inc No 22573
- Female patient, 84 years old, admitted to Gorseinon Hospital 16<sup>th</sup> February 2023
- Summary – At 06:00hrs on 22<sup>nd</sup> February 2023 patient (MJ), had a temperature above 38 degrees, a raised heart rate (124bpm) and a very low blood pressure (70 systolic), overall NEWS score of 4
- The nurse on duty chose to wait for the medical team who were due on shift at 09:00hrs that day to assess the patient instead of following the NEWS protocol and escalating to the on call registrar based at Morriston Hospital
- When the Medical team arrived at 09:00hrs the patient was diagnosed with septic shock.

# Actions and Interventions after assessment by the medical team

- The patient was prescribed and administered intravenous antibiotics and intravenous fluids and was closely monitored
- An ambulance was called to transfer the patient to an acute hospital
- Family were informed of the patients condition and the transfer plan to the acute site.
- The patient was closely monitored until ambulance arrived
- NEWS score improved after treatment, with a NEWS score of 3

# National Early Warning Scores (NEWS)

The NEWS guidance is clear when undertaking observations, where a numerical value will determine the actions the health professional should take.

A score of:

0-2 (12 hourly observations)

3-5 (increase observations to a minimum of 4 hours, inform nurse in charge, screen for sepsis and inform medical team)

6-8 (as above + a minimum of hourly observations, contact medical team/outreach within 30 minutes)

9-13 (as above + a minimum of 30 minute observations, fast bleep 2222/ SPR review within 15 minutes)

14 or more (2222)

## Learning from the incident

The following actions should have been undertaken

- A sepsis screen s completed
- SBAR and escalation to the on call Registrar based on a NEWS score of 4
- The above actions would have ensured a remote medical triage, a prompt treatment plan which could potentially have prevented sepsis in this case.

# Nurse Reflection



- The nurse caring for the patient at the time was asked to complete a reflective piece, demonstrating any rationale for actions and to highlight any learning from this incident.
- The nurse explained that the patient had a NEWS of 4 at 06:20hrs on 22<sup>nd</sup> Feb 2023, this was due to pyrexia, hypotension and tachycardia. Her immediate actions were to administer oral paracetamol for Pyrexia, push oral fluids for the hypotension and handed the patient over to the oncoming day nurse and asked her to monitor her and get a medical review when the medics arrived.



# Patient Outcome

- The following day, Gorseinon Hospital was contacted by Singleton Hospital bed managers to explain that the patient was prescribed different antibiotics (Gentomicin).
- The plan was to transfer the patient back to Gorseinon to complete her treatment as she was responding well and was clinically well.
- The plan was not supported as the patient would require regular bloods and monitoring of her gentamycin levels. Given it was a Friday with no medical cover over the weekend it was deemed by the team to high risk given the potential for deterioration.

# Management Plan

- This incident has been shared with staff via emails and ward based meetings
- The nurse was asked for a reflective account based on her actions and any learning she identified from the incident as she had not followed NEWS guidance
- The nurse will undertake refresher training as part of her professional practice requirement
- An audit of NEWS compliance and sepsis escalation by the Community Resuscitation Nurse Specialist was undertaken on 11<sup>th</sup> April 2023. Those recommendations have formed part of the action plan.

# Acute Deterioration Audit

- A review of acute deterioration (AD) behaviours and escalation following this incident with a particular focus on out of hours practice was undertaken by the Community Resuscitation Specialist Nurse.
- 32 charts were reviewed, 12% had a NEWS of 3 or greater compared to Morriston Hospital where 20% of patients had a NEWS greater than 3
- All NEWS charts were completed correctly
- 3 charts met escalation criteria (obs to be repeated in 12 hours), this was not done in all cases.
- The audit commended the Gorseinon Team as almost all charts identified a regular/irregular pulse and if they were on room air as opposed to oxygen therapy which is seldom completed across the HB

# AD Audit outcomes continued

- All staff could easily locate equipment to record vital signs and the anaphylaxis tray
- The 6am and 6pm obs round is well established.
- When questioned all staff had a good understanding of when it was appropriate to increase the frequency of observations
- Majority of staff had a sound understanding of the more complex aspects of NEWS and how to document patient non-compliance.
- Scenarios given to staff (all bandings) were answered appropriately
- Although some staff are trained in cannulation and IV drug administration, infrequent use of these skills means staff cannot always maintain their competence.
- Timely transfers due to ambulance delays are an issue

# AD Audit Recommendation

- Refresher NEWS Cymru training, dates ongoing
- The robust use of SBAR when referring a patient to acute care
- Trial the All Wales Treatment Escalation Plan in Gorseinon Hospital.
- Nurse Practitioner availability to West Ward may be of benefit, particularly out of hours when there is no on site medical cover
- Invitation to attend the All Wales Community Hospital Forum, this would provide an opportunity to discuss their escalation processes amongst other issues.

# Ongoing Plan

- A meeting was held with all nurses and they have been reminded to escalate as per NEWS guidance
- Revisit nurse practitioner support, particularly for patients with a news just above threshold as these patients often have a delay in ambulance transfer back to acute sites
- Attending the All Wales Community Hospital Forum was very useful as it gave the opportunity to compare similar challenges which was enlightening and refreshing. A regular attendance in these quarterly meeting will be beneficial
- Weekly NEWS audit to identify any compliance issues
- Present this incident to the Stakeholder Patient Experience group for feedback and learning opportunities.

Luckily the patient responded well with a good outcome. However.....

***Patient outcomes should not be based on luck, their care has to be carefully assessed, reviewed and managed in order to ensure the best patient outcome and experience as possible.***

***From this....***

***To This***

