

Improving the recognition and response to physical deterioration

The National Patient Safety Improvement Programme (NPSIP)'s deteriorating patient workstream aims to improve the recognition and response to deterioration in all care settings for adult patients, supporting the adoption of NEWS2 in acute and ambulance care.



We work locally with healthcare teams across the 15 AHSNs to improve:

- **Recognition** – helping staff improve processes to facilitate the appropriate monitoring and assessment of the patient condition, leading to early identification of a change that requires intervention and response. This includes the use of National Early Warning Score 2 (NEWS2).
- **Response** – helping to create the conditions or environment where staff are able to communicate freely, raise concerns reliably and take the appropriate action, including escalation, senior clinical review and clinical intervention, treatment or referral.

Communication is a critical element of the work, recognising the role that structured communication tools such as SBAR(D) may have in transmission and receipt of information across care settings or between healthcare professionals.

Standardisation and use of common language by using NEWS2 consistently to communicate the condition of the patient, enables a standard language of deterioration that can be used and understood across all services across the pathway. This ensures key messages are transmitted and received accurately ensuring all patients receive appropriate and timely treatment.

UCLPartners Breakthrough Series Collaborative



Over a two-year period, UCLPartners Breakthrough Series Collaborative brought together teams from 13 hospitals across London, Hertfordshire, Bedfordshire and Essex with the aim of improving the quality of care and patient safety for people with two key causes of deterioration: acute kidney injury and sepsis. The collaborative aimed to improve quality and reliability of processes such as timely recognition and treatments. It also focused on developing the patient safety improvement capability of staff to enable continuous safety and quality improvement in the care delivered to patients.

This resulted in these improvements in the outcomes for:

Acute kidney injury

- Reduced 30-day mortality by 47%
- Improved renal function recovery by 19.5%

Sepsis

- Reduced 30-day mortality by 24%
- Reduced the number of sepsis related transfers to the intensive care unit by 52%
- Reduced hospital length of stay by 19.5%

Safer care through the National Early Warning Score

Since 2015, the PSC programme has supported healthcare organisations in the West of England in a breakthrough series to introduce NEWS at all handovers of patient care – primary care, ambulance, hospital, community and mental health.

NEWS has been shown to be a highly effective system for

detecting patients at risk of clinical deterioration or death and is supported by the National Quality Board and the Royal College of Physicians. The aim of the project was to standardise NEWS across all acute trusts into pre-hospital care to facilitate early recognition of acute illness including sepsis, which kills around 37,000 people in the UK per year.

The region-wide adoption of NEWS, and subsequently NEWS2, has standardised communication across the system so that acutely unwell patients can be seen at the right time, in the right place by the right kind of clinician. The PSC team were awarded BMJ patient safety team of the year in 2018 for this work.

National NEWS2 Survey 2019



96%

of acute trusts in England are using NEWS2 in all or part of the organisation



100%

of ambulance trusts in England are using NEWS2 in all or part of the organisation