

RAPID RESPONSE TEAM

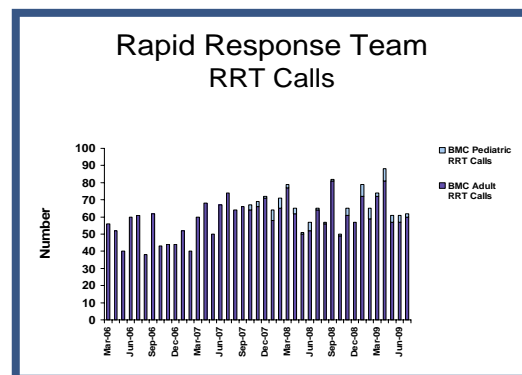
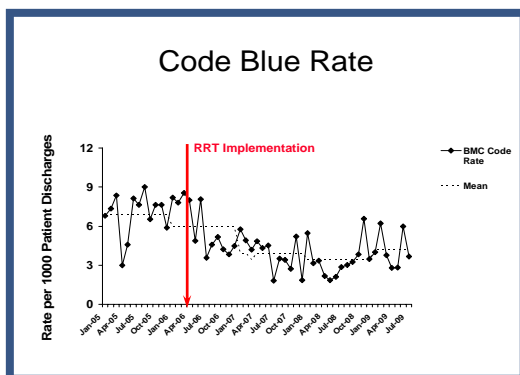
Where we've been...

Creating a Rapid Response Team (RRT) As members of the Institute for Healthcare Improvement's 100,000 Lives and 5 Million Lives From Harm Campaigns, Baystate Health (BH) facilities implemented the Rapid Response Teams (RRT). The RRT is a team of clinicians who assist the bedside nurse in the care of a patient who is experiencing acute clinical deterioration, by implementing protocol-driven interventions and recommending further action. The Adult RRT is comprised of an ACLS trained critical care nurse, a respiratory therapist, an IV nurse, and the attending or consult physician. Likewise, the Pediatric RRT (PRRT) is a multidisciplinary team comprised of a PALS trained pediatric critical care nurse, a respiratory therapist, and a PICU resident. All RRT members have flexible duties in the hospital that allow them to be available when needed.

Staff can call the RRT to evaluate a patient at the first signs of acute clinical deterioration and the team will respond to the patient's bedside within 5 minutes of notification. The Rapid Response Teams are accessible 24 hours a day, 7 days a week to provide support to all nursing units. After RRT intervention, the physician and the team determine what level of care the patient requires. Both teams can be activated by family members.

Where we are now...

BAYSTATE MEDICAL CENTER Baystate Medical Center was the first BH facility to implement an RRT after an initial pilot in July 2005. Positive feedback and the number of codes averted led BMC to full implementation. Prior to the March 2006 implementation, hospital-wide education of staff members was conducted regarding the purpose, scope and use of the Rapid Response Team. Since then, more than 2,400 RRT calls have been logged. Both our overall rate of code blues and the number of out of critical care codes have decreased significantly. Staff feedback has been extremely favorable; the team is viewed as an effective tool to rescue and support patients in any situation.



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BAYSTATE MARY LANE HOSPITAL BMLH launched its RRT in September 2006, and currently receives approximately five calls per month. Staff feedback has been extremely favorable; the team is viewed as an effective tool to rescue and support patients in any situation. The Rapid Response task force at BMLH has developed algorithms for pediatric patients and has also assembled Rapid Response bags with pediatric supplies for the team to have available when responding to a call.

BAYSTATE FRANKLIN MEDICAL CENTER BFMC launched its RRT in January 2007. To date, there have been 35 RRT calls. Education of staff in the use of the RRT has resulted in rapid identification of acute changes in a patient's condition and in the implementation of new orders/interventions. Staff feedback has been extremely favorable; the team is viewed as an effective tool to rescue and support patients in any situation. The BFMC RRT received Honorable Mention at the Baystate Health Annual President's Quality Award presentation in the fall of 2007.

BAYSTATE CHILDREN'S HOSPITAL The Pediatric RRT was implemented in September 2007, and has responded to 65 calls to date. Additionally, family activation of the PRRT was implemented in July 2008, and 4 calls have been activated by family since then. Staff feedback is elicited after each call and has been extremely favorable, citing improvement in teamwork and education of the unit nurses as strong benefits of the PRRT. Members of the PRRT have participated in Spirit of the Child Team Communication education.

Where we are going...

RRTs have been validated as effective tools both at BH facilities and other facilities nationwide to identify and rescue patients who are at-risk for clinical deterioration. The RRT has been successful in rescuing patients as well as supporting our clinical staff to ensure that patients get the right care at the right time. Recent implementation of the automated BH Early Warning Scoring System will help to identify patients at-risk to facilitate their rescue even before they require RRT intervention.