

Neonatal Escalation Stickers

Heather Robinson, 2017

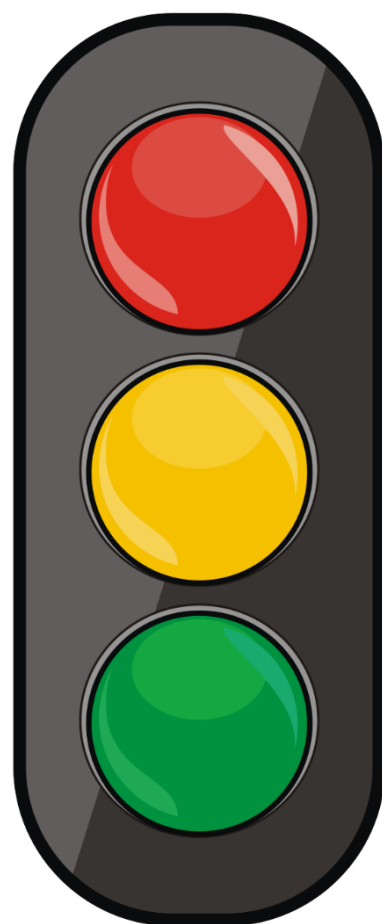
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Background

Early warning systems using a track and trigger process have been used successfully within the acute hospital setting in both adult (NEWS) and paediatric (PEW) settings for a number of years. The early warning system has been found to be successful in detecting subtle deterioration in clinical conditions, leading to early medical review. It provides a standardised observation chart for monitoring clinical deterioration with the bold colour change system providing a visual prompt to aid identification. The 'traffic light' colours alert the practitioner as to possible physiological changes the new born might be experiencing.

Aim

The aim is to provide a simplistic tool using the same traffic light colour system, to link together the Early Warning nursing documentation and the Medical notes. This will highlight deterioration of the patient and show escalation has taken place. The tool (a basic escalation sticker) will provide a link between the two sets of documentation, allowing nurses (registered and non-registered), advanced nurse practitioners and medical staff to be able to easily track the process of escalation and review. This tool will also provide a tool for continuous audit.



Method

STAGE 1

I undertook an informal survey of a selection of Neonatal units within the Wessex Network to ascertain if any of the units were already using an escalation tool and if they were, was the tool useful or successful. My research suggested that although early warning tools were not necessary being used within the escalation process, coloured stickers indicating differing clinical procedures or clinical changes (not necessarily representative of deterioration) were being widely used with good effect to represent patient changes.



STAGE 2

A sticker was developed to use in the Medical notes to identify differing levels and patterns of deterioration and to prevent nursing staff from duplicating information between notes. The escalation stickers would link together the two sets of documentation ensuring a full revolution of care has taken place. A full revolution of care constitutes; Patient change escalated to appropriate practitioner, practitioner reviews the baby and documents a plan in the medical notes, patient is then reviewed again within appropriate period to evaluate care plan or reassess)

The stickers have been approved by one unit and are currently being trialled and evaluated between nursing and medical staff. Staff in this Unit will be asked to evaluate the effectiveness of the coloured stickers and feedback any changes required

Patient Name.....

Date/Time.....

Event.....

Escalation.....

Patient Name.....

Date/Time.....

Event.....

Escalation.....

Feedback and Conclusions

Feedback from the majority of staff was that the escalation sticker was a useful tool, however confusion was expressed about placement of the sticker within the documentation and what the balance of information should be between the two sets of documentation.

This was easily rectified by providing instructions of use an example scenario of the sticker. Staff verbally stated that this helped clarify use of the stickers effectively and how the information regarding the deterioration should be documented between the two sets of notes.

During the trial staff also fed back that they felt the 'escalation' line of the sticker should read 'escalation to' this would allow better clarification to which practitioner they had escalated the issue to. The sticker was further amended. This was easily changed and reprinted and trailed again.