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Rapid Response Team: Increases Patient Outcomes and Nursing Staff Satisfaction.

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Rapid Response Team: Increases Patient Outcomes and Nursing Staff Satisfaction

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Rapid Response Team (RRT) - Why Now?

- Institute for Healthcare Improvement
 - 70% (45/64) arrests with evidence of respiratory/neurological deterioration with 8 hours. (Schein, Chest 1990; 98:1388-92)
 - 66% (99/150) of patients show abnormal signs and symptoms within 6 hours of arrest and MD is notified in only 25% (25/99) of cases. (Franklin C, Mathew J. Critical Care Med. 1994;22(2):244-247)
- 2009 National Patient Safety Goal (NPSG)

The Rapid Response Team

- ...is a team of clinicians who bring critical care expertise to the bedside (or wherever needed)
- Goal
 - Prevent deaths in patients who are failing outside intensive care settings by implementing Rapid Response Teams (RRT)

2005 Institute for Healthcare Improvement

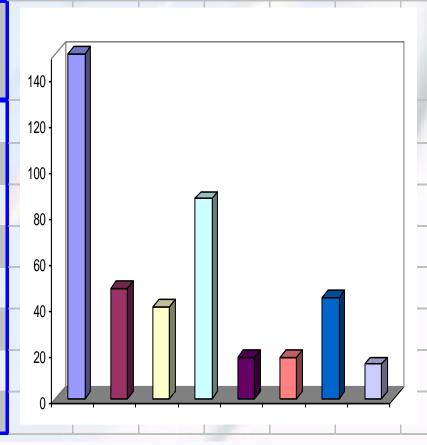
So How Did We Get Started?

- We developed the RRT committee
 - Team of nurse leaders, physicians, and respiratory therapists
 - Utilized the IHI 100 Thousand Lives
 Campaign's RRT Practical Implementation
 Strategies 2005 and the Getting Started Kit.
 - Conducted a literature review
 - Developed criteria for when to make a RRT call
- Training for the team members
- Staff education

Cedar Crest RRT Calls

What was the reason for the RRT?

Response	Number of Calls	Percentage of Calls
Respiratory	150	48.08
Heart Rate	48	15.38
Blood Pressure	40	12.82
Acute Neurological Change	87	27.88
Pain	18	5.77
Staff Concern	18	5.77
Other	44	14.10
Stroke Alert	15	4.81



Cedar Crest, Med – Surg/Low Level – Year 1 (2006-2007)

100														
	Feb	Mar	Apr	May	June	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Totals
Unit							1	- 7						
TOHU		1	37		1	2	2			1	1	1		9
IPCU		4			5		1	2	1	3	1	2	2	21
PCU		1	2	3	1	1	3	2	2	2	3	3	6	29
4A	1		3		2	4	7	4	4	1		1	3	30
4C	4	4	8	4	1	5	1	1	1	1	2	3	1	36
5A	137	1	2	1	1	Jul 1	1	1	1	1			1	10
5B	4		2	1	7	3	1	1						8
5C	1		5	4	1	6	2	2	2	3	2	3	1	32
6B	1	8	2		2	2	2	4	1	3	2	4	1	32
6C		1	7	1	2	3	3	4	1	4		2	4	32
7A		3	7	4	4	2	4	7	1	8	4	3	4	51
7B	2	3	2			5		1	4	6	1	2	3	29
7C	2	4	4	3	4	6	1	2	2		1		100	29
EAU N							To a	1	1				1	3
EAU S	7		1		1		2			1				5
Dialysis								1	1		2			2
Total	11	30	45	21	25	39	30	33	22	34	19	24	27	360
10 1														

Cedar Crest – Time of Call, Year 1 (2006 – 2007)

	_		_											
	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Totals
Time			1											
0301-0700	2	7	6	3	2	6	4	3	5	4	3	3	5	53
0701-1100	2	4	7	5	6	6	7	9	4	4	2	4	4	64
1101-1500	1	2	7	3	5	4	4	4	3	9	4	1	1	48
1501-1900	2	6	9	3	7	8	7	4	6	4	4	5	5	70
1901-2300	2	6	11	0	2	9	4	6	2	6	3	5	4	60
2301-0300	2	5	5	7	3	6	4	7	2	7	3	6	8	65
Total	11	30	45	21	25	39	30	33	22	34	19	24	27	360
		•												

Cedar Crest - Med Surg Unit/Low Level, Year 2 (2007 - 2008)

2007	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Total
							-1	7					
Unit													
тони/зк	1	4	0	1	3	0	2	0	0	1	2	1	15
IPCU	1	1	3	0	4	1	6	0	2	3	1	0	22
PCU	6	2	4	3	3	5	0	2	2	3	1	1	32
4A	1	2	0	5	3	1	4	1	1	3	4	1	26
4C/4K	2	3	0	0	2	3	1	3	1	2	1	2	20
5A	1	1	0	1	1	0	0	2	0	0	0	0	6
5B	1	0	0	0	0	2	2	0	1	1	1	4	12
5C	5	1	0	1	0	2	1	1	0	1	2	1	15
6B	3	6	3	2	7	5	8	7	3	2	3	2	51
6C	2	2	3	2	5	1	6	6	0	4	2	4	37
6K	B	6							150		4	6	10
7A	1	3	7	1	2	2	0	3	3	3	2	3	30
7B/5K	3	5	1	2	6	3	4	4	2	5	3	4	42
7C	4	1	1	1	3	3	2	0	3	0	1	2	21
EAU N	0	1	0	0	1	0	0	0	1	0	0	0	3
EAU S	0	0	0	0	0	1	0	0	1	1	0	0	3
Dialysis	0	0	0	2	0	0	0	0	0	0	0	0	2
NSICU	-1	0	0	0	0	0	0	0	0	0	0	0	1
Total	32	34	24	22	42	30	36	31	21	31	29	35	367

Cedar Crest – Non-Med Surg Units, Year 2 (2007-2008)

	Mar	Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Total
MSICU		1			1								1
SSA		1			1						1		3
ОНИ			2							1	F		3
PACU				1	1	9		1			1		4
MRI						1						2	3
СТ	1	A						1					1
Radiology		97							1			1	2
PICU	1									1		d	1
ACU	0										1	1	1
Total		2	2	1	2	1		2	1	2	2	4	19

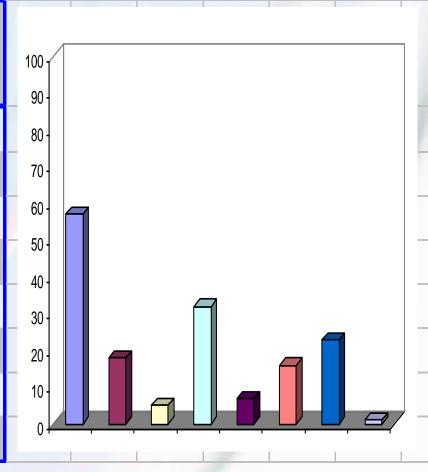
Cedar Crest – Time of Call, Year 2 (2007-2008)

	Mar	Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Totals
Time	1				4								
0301-0700	4	10	4	8	10	9	10	5	5	6	7	6	84
0701-1100	5	4	4	6	5	2	3	3	4	9	3	7	55
1101-1500	5	5	6	3	2	2	6	3	2	3	7	10	54
1501-1900	7	4	5	2	9	6	8	7	5	3	2	3	61
1901-2300	5	6	3	2	10	11	3	11	2	6	5	8	72
2301-0300	6	5	2	1	6	0	6	2	3	4	5	1	41
Total	32	34	24	22	42	30	36	31	21	31	29	35	367

Muhlenberg RRT Calls

What was the reason for the RRT?

		· · · · · · · · · · · · · · · · · · ·
Response	Number of Calls	Percentage of Calls
Respiratory	57	48.72
Heart Rate	18	15.38
Blood Pressure	5	4.27
Acute Neurological Change	32	27.35
Pain	7	5.98
Staff Concern	16	13.68
Other	23	19 <mark>.6</mark> 6
Stroke Alert	1	0.85



Muhlenberg – Med Surg Units, Year 1 (2007-2008)

								/					
	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Totals
2nd	0	0	0	0	0	0	0	1	0	0	0	0	11
	- 7												
3T	2	1	8	8	7	6	6	9	7	3	4	1	62
	37					8//							
4T	2	5	2	2	4	5	2	5	0	2	4	5	38
				7///			1 4						- 10
5T	2	1	2	2	1	0	1	3	1	3	4	2	22
				>									
6T	3	3	2	5	2	4	0	3	2	2	3	1	30
		FA										- 11	7
EAU	0	0	0	0	0	0	0	0	0	0	0	0	0
	11											-00	
BH	2	0	0	0	2	1	1	2	1	0	0	0	9
CT scan	1	0	0	0	0	0	1	0	1	0	2	0	5
111											- 0		
7T	2	0	3	2	1	1	2	3	5	0	0	3	22
111													
Totals	14	11	17	20	17	18	14	27	17	12	17	12	204

Muhlenberg, Non Med-Surg Units, Year 1 (2007-2008)

Nov Dec	Jan Feb	Mar Apr	May Jun	Jul Totals
	100			1
1				1
	1			1
	1		1	2
		1		1
			1	1
				1 1
	1	1	2	5
				1

Muhlenberg, Time of Call, Year 1 (2007-2008)

Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Totals
4	0	3	4	1	2	2	3	3	2	3	1	28
3	0	6	5	4	1	2	3	2	3	3	2	34
1	3	1	4	1	2	2	5	3	2	1	3	28
1	3	4	4	5	2	3	4	2	1	4	1	34
2	1	1	1	4	7	4	6	5	2	4	6	43
3	4	2	2	2	4	1	6	2	2	2	0	30
14	11	17	20	17	18	14	27	17	12	17	13	197
	4 3 1 2	4 0 3 0 1 3 1 3 2 1	4 0 3 3 0 6 1 3 1 1 3 4 2 1 1 3 4 2	4 0 3 4 3 0 6 5 1 3 1 4 1 3 4 4 2 1 1 1 3 4 2 2	4 0 3 4 1 3 0 6 5 4 1 3 1 4 1 1 3 4 4 5 2 1 1 1 4 3 4 2 2 2	4 0 3 4 1 2 3 0 6 5 4 1 1 3 1 4 1 2 1 3 4 4 5 2 2 1 1 1 4 7 3 4 2 2 2 4	4 0 3 4 1 2 2 3 0 6 5 4 1 2 1 3 1 4 1 2 2 1 3 4 4 5 2 3 2 1 1 1 4 7 4 3 4 2 2 2 4 1	4 0 3 4 1 2 2 3 3 0 6 5 4 1 2 3 1 3 1 4 1 2 2 5 1 3 4 4 5 2 3 4 2 1 1 1 4 7 4 6 3 4 2 2 2 4 1 6	4 0 3 4 1 2 2 3 3 3 0 6 5 4 1 2 3 2 1 3 1 4 1 2 2 5 3 1 3 4 4 5 2 3 4 2 2 1 1 1 4 7 4 6 5 3 4 2 2 2 4 1 6 2	4 0 3 4 1 2 2 3 3 2 3 0 6 5 4 1 2 3 2 3 1 3 1 4 1 2 2 5 3 2 1 3 4 4 5 2 3 4 2 1 2 1 1 1 4 7 4 6 5 2 3 4 2 2 2 4 1 6 2 2	4 0 3 4 1 2 2 3 3 2 3 3 0 6 5 4 1 2 3 2 3 3 1 3 1 4 1 2 2 5 3 2 1 1 3 4 4 5 2 3 4 2 1 4 2 1 1 1 4 7 4 6 5 2 4 3 4 2 2 2 4 1 6 2 2 2	4 0 3 4 1 2 2 3 3 2 3 1 3 0 6 5 4 1 2 3 2 3 3 2 1 3 1 4 1 2 2 5 3 2 1 3 1 3 4 4 5 2 3 4 2 1 4 1 2 1 1 1 4 7 4 6 5 2 4 6 3 4 2 2 2 4 1 6 2 2 2 0

Process Evaluation

- Debriefing Tool
 - Validate need for RRT
 - Identify reason for calls
- Peer Review
 - Necessity of call
 - Identify presence of earlier decompensation
 - Admission to appropriate level of care

Date: _____

PEER REVIEW This information is protected from discovery by PA State Law.

Rapid Response Team (RRT) Post-Response Debriefing

Purpose: To determine the team members' perception of the RRT process. This form is to be completed by the team immediately after the response.

Medical Record #:	Gender:	Date of Birth	:/	_/
1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	O Male O Female Hospital: O LVH-CC O LVH-M	2 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	00000000000	
			Yes	No
1. Did the alert meet the criteria?			0	0
Did the team collaborate positively and prothe RN/staff who called the alert?	ovide appropriate feed	back to	0	0
3. Was there prior evidence of de-compensat	ion prior to the event?		0	0
Was the attending/designee aware of the p prior to an alert being called?	atient's changing pres	entation	0	0
5. Were the interventions/tasks performed pro-	omptly?		0	0
6. Is there any member of the team that feels reviewed?	that this case should b	e	0	0
7. Was the RRT order entered in CAPOE			0	0
8. Was the patient on their current unit < 6 ho called?	ours prior to the RRT l	peing	0	0
9. Medical-surgical nurse's satisfaction with a (1 = not satisfied through 5= highly satisfied through 5 = highly satisfied through				

10.	What we	nt well during the response?		
	777	-141		
11.	what co	uld have been improved during this	s response:	<u>′</u>
112.	Who this	nks this case should be reviewed?		
	o	Physician		
13.	What is t		rite a brief	explanation in question ten's box)?
	Ö	Safety – Patient Safety Report mu	ist be com	pleted
	0	Safety Tailent Safety Report In	ist oc com	Sieted
14.	What wa	as the reason for the RRT call?		
	0	Respiratory	0	Pain
	0	Heart Rate	0	Staff Concern
	0	Blood Pressure	0	Other
	0	Acute Neurological Change	0	Stroke Alert
		_		

Cedar Crest -Peer Review

Is there any member of the team that feels that this case should be reviewed?

Mean: 9.04

Response	Value	Freq.	Percent	Cum. Percent	Valid (Percent	Cum. Val. Percent	Graph
Yes	100.00	66	8.98	8.98	9.04	9.04	
No	0.00	664	90.34	99.32	90.96	100.00	100 80 60 40 20 Yes No

Total Valid	730	99.32	100.00	
Missing	5	0.68		
Total	735	100.00		

Muhlenberg – Peer Review

Who thinks this case should be reviewed?

Mean: 1.18

Response	Value	Freq.	Percent	Cum. Percent	Valid (Percent	Cum. Val. Percent	Graph
RN	1.00	18	6.10	6.10	81.82	81.82	
Physician	2.00	4	1.36	7.46	18.18	100.00	100 80 60 20 RN Physician
Total Valid		22	7.46		100.00		
Missing		273	92.54				
Total		295	100.00				

Cedar Crest- Nurse Satisfaction

Med/Surg nurse's satisfaction with the RRT response (1-not satisfied to 5-highly satisfied)

Mean: 96.87

Response	Value	Freq.	Percent	Cum. Percent	Valid (Percent	Cum. Val. Percent	Graph
1	0.00	2	0.27	0.27	0.28	0.28	
2	25.00	1	0.14	0.41	0.14	0.42	100
3	50.00	7	0.95	1.36	0.99	1.41	80
4	75.00	64	8.71	10.07	9.01	10.42	60
5	100.00	636	86.53	96.60	89.58	100.00	40
							20
							0
							1 2 3 4 5
Total Valid		710	96.60		100.00		
Missing		25	3.40				

Muhlenberg - Nurse Satisfaction

Mean: 93.71

Med/Surg nurse's satisfaction with the RRT response (1-not satisfied to 5-highly satisfied)

Response	Value	Freq.	Percent	Cum.	Valid (Cum. Val.	Graph
·				Percent	Percent	Percent	
1	0.00	3	1.02	1.02	1.03	1.03	
2	25.00	2	0.68	1.69	0.69	1.72	100
3	50.00	7	2.37	4.07	2.41	4.14	80
4	75.00	41	13.90	17.97	14.14	18.28	60 -
5	100.00	237	80.34	98.31	81.72	100.00	40
							20
							0
							1 2 3 4 5

Total Valid	290	98.31	100.00	
Missing	5	1.69		
Total	295	100.00		

Nursing Staff Satisfaction Survey

RRT Feelings & Beliefs Survey Condensed Item Analysis - 0608

Have you ever called the Rapid Response Team?

Response	Frequency	Percent	Mean: 69.49
Yes	164	69.49	
No	72	30.51	
	_		
Missing	D	0.00	

If you have not called the Rapid Response Team, were you ever involved in a Rapid Response Team call?

Response	Frequency	Percent	Mean: 71.65
Yes	91	38.56	
No	36	15.25	
Missing	109	46.19	

If "No", who did not treat you positively?

Response	Frequency	Percent	Mean: 2.38
CC RN	6	2.54	
RT	1	0.42	
Hospitalist	14	5.93	
Missing	215	91.10	

What campus do you work at?

Response	Frequency	Percent	t Mean: 1.00
LVH-CC	233	98.73	
LVH-M	1	0.42	
Missing	2	0.85	

If you have been called, how many times?

n you have been dance, now many ames.							
Response	Frequency	Percent	Mean: 2.41				
1	45	19.07					
2	48	20.34					
3	32	13.56					
4	18	7.63					
5 or more	14	5.93					
Missing	79	33.47					

Did you feel that Rapid Response Team members treated you in a positive manner?

Response	Frequency	Percent	Mean: 90.73
Yes	186	78.81	
No	19	8.05	
Missing	31	13.14	

Do you feel that the Rapid Response Team is beneficial to your delivery of patient care?

Response	Frequency	Percent	Mean: 99.57
Yes	229	97.03	
No	1	0.42	
Missing	6	2.54	

What shift do you work?

Response	Frequency	Percent	t Mean: 1.85
Days	115	48.73	
Evenings	37	15.68	
Nights	81	34.32	
Missing	3	1.27	

Patient Outcomes – Cedar Crest

	Total Codes	Total Codes Outside ICU	Total Mortality	Total Discharges	Total RRT Calls
Jan – Dec 06	156 (0.43%)	55 (0.1 <mark>5%</mark>)	715 (1.99%)	35,987	309 *Began Feb 06
Jan – Dec 07	209 (0.54%)	77 (0.20%)	678 (1.76%)	38,509	354

Patient Outcomes - Muhlenberg

	Total Codes	Total Codes Outside ICU	Total Mortality	Total Discharges	Total RRT calls
Jan - Dec 06	19 (0.43%)	8 (0.1 <mark>8%</mark>)	112 (2.52%)	4,439	97
Jan – Dec 07	57 (0.62%)	30 (0.33%)	256 (2.77%)	9,226	189

Expansion and Enhancement of Services

- Ancillary Services
 - Radiology
 - Diagnostic Care
 - MRI
- Stroke Alert Response
- Support to Mother/Baby Unit
- 17th Street transport to ED
 - TSU, Sleep Center, Short Stay Hospital
- Clinical Resource Nurses
 - Monitor and evaluate patient during the off shift status post RRT call

Future Plans for the RRT

- Develop a second RRT for the Cedar Crest site
- Support for the Pediatrics RRT
- Family Involvement
- Physician satisfaction survey
- Staff satisfaction survey
 - Muhlenberg
 - Ongoing for both sites

RRT Committee Members

- Anne Rabert, RN, Director, Co Chair
- Georgiann Morgan, RN, Director, Co Chair
- Mary Sebastian, RN, VP Clinical Services, Sponsor
- Anne Panik, RN, Administrator Clinical Services
- Holly D. Tavianini, RN, Director
- Uzma Vaince, MD
- Maryann Krobath, RN, Nursing Supervisor
- Steven Pyne, RRT
- Elizabeth Karoly, Clinical Information Analyst
- Stephanie Pacelli, Quality Analyst
- Kristie Lowery, RN, Risk Management Patient Safety