Inpatient Rapid Response Team: Creating a standardized approach

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Problem: Evidence-based literature supports Rapid Response Teams (RRTs) in the inpatient setting. The existing Rapid Response Team was under-utilized, had inconsistent responders, and was not evaluated for performance improvement purposes.

Literature Review:

Objectives:
- Provide a reliable resource for nurses concerned about patient safety or unresolved patient conditions
- Educate and empower nurses within the institution to reach out for assistance when needed
- Encourage early intervention for decompensating patients
- Reduce the number of codes hospital-wide

Interventions:

Institution support
- Formation of the Rapid Response Committee including: SICU Management, Capacity Management, SICU Attending, Internal Medicine Attending, IT representative, data analyst
- Identification of current responders
- Rework RRT procedure so SICU nurses consistently respond to inpatient RRT calls
- CVO and Director involvement
- Recruit nursing leaders in SICU
- Formation of the RRT: SICU RN, SICU CN, House Supervisor, Internal Medicine resident, pharmacist
- Collaborate with ICU Attending physicians to ensure patients requiring transfer to higher level of care are accepted
- Modified Early Warning Score (MEWS) built into EPIC with automated RRT firing

Education
- Identify roles of responding team members
- Develop and implement training course for SICU RN responders and house supervisors
- Development of a Rapid Response Team algorithm
- SICU RN presence at Internal Medicine MD case review
- Data collection, evaluation and performance improvement
- Monthly case review with SICU Management, Capacity Management, SICU Attending, Internal Medicine Attending, IT representative, data analyst

Marketing
- Outreach to hospital committees and unit managers to raise awareness
- Individualized education to acute care units through staff meetings and RRT review
- Posters throughout hospital and Pulse banner RRT story
- Relationship building among ICU RNs and acute care/medicine/rehab RNs in order to promote trust and establish RRT expectations
- RRT promotion via tabling in the main hospital atrium

Results:
- Early data collection shows significant increases in the number of RRT calls

Next steps:
- Modify staffing to allow SICU availability to respond to increasing calls
- Analyze data to determine trends and education gaps
- Tailor RRT training course and education outreach to RRT trends
- Improve response time, triage time and transfer to ICU time
- Finalize and implement RRT order set
- Determine need for respiratory therapist responder