Deteriorating Patient
Generic Response
90 Day Process
Phase 1

Aim
We have explored the potential for a method for recognition and response for people who are acutely deteriorating from any cause. This approach will be tested within boards.
The findings from the 90 day learning cycle will inform the design of the improvement support delivered by Healthcare Improvement Scotland.
Read the project charter here

Existing Work
Deteriorating patients have been a key focus for the SPSP since its launch in 2013. Acute hospitals now have an improved approach to identifying and treating deteriorating patients quickly and effectively.

National Early Warning Score (NEWS)
Sepsis recognition & treatment
Escalation processes
Person-centred care planning
31% reduction in cardiac arrest rate since Jan 2016
21% reduction in Sepsis mortality since April 2013

The work to date has identified an emerging need to better describe and support the different ways to recognise and respond to physiological deterioration from any cause.

AKI Collaborative
The impact and learning from our Acute Kidney Injury Collaborative has directly influenced this work.

Progress
Phase 1 of the 90 day cycle was completed in July – August 2019. By reviewing existing literature and talking to experts in the field, we have developed an understanding of:
• the key components in the implementation of a generic response to a deteriorating patient,
• how complex this could be, and
• the benefits of a generic response to staff and service users.

View the driver diagram

Participating NHS Boards

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Flash Report
October 2019
Deteriorating Patient
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Litigation
- A search of literature was undertaken on all articles published in the last five years.
- Key websites were searched for guidelines and summaries/overviews.
- An initial exploration of published literature suggested there are no examples of people undertaking similar approaches within hospital settings.

AKI steering group themes
- Form national and local links with the deteriorating patient workstream. Link with HSMR.
- Focus on prevention.
- AKI 3 – does patient have an escalation plan/2222 call/mortality review?
- Use AKI alerts to help identify and prioritise deteriorating patients.
- Marking AKI as a signal of deterioration and explore links with wider workstream.
- Better processes for checking results (recognition).
- Work with NEWS, AKI and Patient Centred Care.

Findings
- “Using AKI alerts to help identify and prioritise deteriorating patients”
- “Could over complicate things”
- “AKI e-alerts act as a signal for deterioration”

Expert interviews
- “Working with NEWS, AKI, person-centred care altogether for better care”

Next steps
- Phase 2 (August-September 2019) - consult with experts in the field to co-design and test a generic response for deteriorating patients.
- Phase 3 (September-October 2019) - review tests and further refine the approach. A report will be developed to outline the learning from the 90 Day Process.

Clinical Reference Group
- Board representatives and HIS colleagues have been invited to join the CRG to support the development of the next stage of the work stream.
- The group will inform methods to further improve early recognition, response and escalation of people who are suffering acute deterioration from any cause.
- The CRG’s overall aim is simplifying and standardising the current SPSP offering around process improvement for deteriorating patients.

Deteriorating Patient Networking Event
Tuesday 3 December 2019
Murrayfield Stadium
Edinburgh

To find out more about the 90 day process & deteriorating patient generic response contact hcis.acutecare@nhs.net