## A Model of an Acute Deterioration Policy Compliance Assessment and Action Form

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| **Compliance source:** | | | *MP \_\_\_\_/2018 Recognising and Responding to Acute Deterioration Policy, WA Department of Health* | | | | | | | | |
| **Compliance owner:** | | |  | | | | | | | | |
| **Place of audit:** | | |  | | | | | | | | |
| **Documents reviewed** | | | | | | | | | | **Attached (y/n)** | |
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| 2 |  | | | | | | | | |  | |
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| **Policy Requirements** | | | | | **Evidence summary** | **Conformance (y/n)** | | | **Non-compliance summary (major/minor and actions required to improve compliance)** | | |
| **Local deterioration policy/ies** | | | | | | | | | | | |
| Current local deterioration policy/ies | | | | |  |  | | |  | | |
| Policy is based on best available evidence at time of publication | | | | |  |  | | |  | | |
| Policy includes a documented risk assessment as part of the development process | | | | |  |  | | |  | | |
| Policy covers both mental and physiological deterioration | | | | |  |  | | |  | | |
| Policy mandates use of a specific Observation and Response Chart | | | | |  |  | | |  | | |
| Policy highlights the following high risk situations for patient monitoring:  - patient is experiencing, or at risk of experiencing deterioration  - admission/initial assessment  - prior to inter-/intra-hospital transfer | | | | |  |  | | |  | | |
| Policy requires clinicians to identify, adjust and manage required modifications to physiological escalation parameters | | | | |  |  | | |  | | |
| Policy requires all failures to recognise or respond to deterioration to be managed in accordance with the WA Clinical Incident Management Policy | | | | |  |  | | |  | | |
| **Rapid response system** | | | | | | | | | | | |
| Formal rapid response system in place | | | | |  |  | | |  | | |
| Rapid response team consists of trained and competent members appropriate to local requirements | | | | |  |  | | |  | | |
| Roles and responsibilities include:  - Ensuring emergency assistance equipment reaches the patient  - Directing and coordinating activities/treatment  - Communicating outcomes to relevant healthcare team  - Authorising intra- and inter-hospital transfer decisions  - Making treatment-limiting decisions  - Documenting care  - Communicating with patient, family and carers | | | | |  |  | | |  | | |
| Rapid response system is operational 24 hours, 7 days per week. | | | | |  |  | | |  | | |
| Rapid response system is appropriately resourced | | | | |  |  | | |  | | |
| **Observation and Response Chart** | | | | | | | | | | | |
| Observation and Response Chart incorporates a track and trigger system | | | | |  |  | | |  | | |
| Observation and Response Chart is implemented throughout the service/facility | | | | |  |  | | |  | | |
| **Training** | | | | | | | | | | | |
| All clinical staff are trained, within their scope, to use the system in place, and to be aware of their responsibilities within this system | | | | |  |  | | |  | | |
| All non-clinical staff are aware of the local policy, and the rapid response system and know how to activate this | | | | |  |  | | |  | | |
| **Advance Care Planning and Directives** | | | | | | | | | | | |
| Process/es in place to ensure clinical staff identify, and are aware of, advance care planning and directives when managing or escalating care of a deteriorating patient | | | | |  |  | | |  | | |
| **Required actions\*** | | | | | | | | | | | |
| **Action/s** | | | | | | | | | **Responsibility** | | **Completion deadline** |
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| **Auditor** | | **Name:** |  | | | | **Position:** |  | | | |
| **Date of assessment completion:** | | | |  | | | | | | | |
| **Endorsed by** | | **Name:** |  | | | | **Position:** |  | | | |
| **Date of endorsement:** | | | |  | | | | | | | |

\* Additional compliance assessment/s will be required following the completion deadline.