

SUBJECT: RAPID RESPONSE TEAM	REFERENCE #8142
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POLICY:

- The Rapid Response Team (RRT) is a group of specially trained clinicians within _____ Hospital that nurses and other hospital staff, as well as patients and family, can call upon at any time to provide critical care expertise at the bedside (or wherever it is needed) of a patient whose condition is deteriorating, or when a staff member needs consultation for a patient who “just doesn’t seem right”.
- _____ Hospital is committed to improving quality of care for patients by reducing cardiac arrests, maternal death and other acute life-threatening events, decreasing lengths of stay and reducing patient mortality rates through the use of rapid response teams.
- The Rapid Response Team shall be available, by pager, 24 hours a day, seven (7) days a week.
- The Rapid Response Team can be activated by nurses, physicians, Rehabilitation Services staff, respiratory therapists, nurse practitioners or physician assistants who provide patient care at _____ Hospital, as well as patients and family. RRT activation does not require a physician’s order or permission. The RRT is activated by calling the following number: _____.
- NO calls to the Rapid Response Team shall be considered inappropriate. There shall be effective communication between the patient care unit RNs and the RRT.

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PROCEDURE:

- The Rapid Response Team shall be composed of:
 - A Critical Care or Intensive Care Unit Registered Nurse
 - A Respiratory Therapist
 - A Physician Assistant or Hospitalist
 - Other: _____
- Rapid Response Team members will be available to respond immediately (within five [5] minutes) when called, and will not be constrained by competing responsibilities.
- Rapid Response Team members will receive special training to ensure they have:
 - Critical care skills necessary to assess and respond to patient situations
 - Skills to provide education, support and mentoring to clinical staff as needed
 - Understand all policies and procedures related to the RRT
- Hospital staff will receive special training to ensure that they:
 - Understand the criteria for when they should use the RRT
 - Understand how to activate and contact the RRT
 - Understand all policies and procedures related to the RRT
- Patients and families will be provided with education ensure that they:
 - Understand the purpose of the RRT
 - Understand how to activate and contact the RRT

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- The following criteria shall be used to determine if the RRT should be called.

Note: This list is a guide. The RRT can be called at any time a staff member, patient or family feels that he/she needs additional consultation.

- Worried about a patient
- Worried about airway stability
- Sudden change in respiratory status
- Sudden change in oxygenation
- Sudden change in level of consciousness or mental status
- Sudden change in heart rate
- Sudden change in blood pressure
- Hemorrhage
- Seizure
- Change in urine output
- Significant changes in laboratory values, such as glucose, sodium and potassium

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- The Rapid Response Team shall immediately respond to any request for consultation by moving directly to the patient’s location, and:
 - Obtaining patient information from the patient’s nurse using an acceptable hand-off communication tool, such as Situation, Background, Assessment, Recommendation (SBAR) tool. Information communicated to the RRT shall include, but is not limited to:
 - Patient’s name and age
 - Medications and allergies
 - Medical history:
 - ◆ Including pregnancy, delivery or pregnancy termination within the past 42 days
 - Chief complaint/reported change in condition from the patient’s nurse
 - Nursing observations
 - Triaging the patient.
 - Performing intervention protocols that were developed and approved by the medical staff and nursing leadership to facilitate assessment, patient care and stabilization of the patient until a physician is notified. Protocols may include:
 - Obtaining ABGs
 - Obtaining EKG and/or chest x-ray
 - Obtaining blood tests to check glucose, electrolyte values
 - Initiating oxygen therapy
 - Initiating documentation in the patient record.
 - Contacting the appropriate physician for further recommendations and medical management and/or requesting a physician to the bedside, as appropriate.

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- The Rapid Response Team may determine that a patient’s medical status warrants immediate transfer to the ICU/CCU. The RRT shall transfer the patient and immediately inform the patient’s attending physician of the transfer.
- Performance Improvement:
 - The early intervention program shall be evaluated every _____. Appropriate actions shall be implemented to improve any issues with the program. Process improvements shall be monitored and evaluated.

REFERENCES:

- Institute for Healthcare Improvement (IHI), Topics, *Rapid Response Teams*, <http://www.ihl.org/topics/rapidresponseteams/pages/default.aspx>, last accessed May 2015
- Wachter, Robert M.; Pronovost, Peter J. The 100,000 Lives Campaign: A Scientific and Policy Review. Joint Commission Journal on Quality and Patient Safety, Volume 32, Number 11, November 2006, pp. 621-627(7)
- Thomas, Kim; Force, Mary VanOyen; Rasmussen, Debbie; Dodd, Dee; Whildin, Susan. Rapid Response Teams, Challenges, Solutions, Benefits. Critical Care Nurse. Vol. 27, No. 1, February 2007