## 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)** |
| 1 |  |  |
| 2 |  |  |
| 3 |  |  |
| 4 |  |  |
| **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.