

RECOGNITION OF CLINICAL DETERIORATION, AND ESCALATION OF CARE

PROTOCOL A2



BACKGROUND

The recognition of patients who are clinically deteriorating is an essential component of pre-hospital care. Failure to recognise and escalate clinical deterioration can be associated with negative patient outcomes in some cases. To aid in detection of clinical deterioration, St John (NSW) uses an adaptation of the NSW Health Between the Flags (BTF) system. The aims of this system are closely aligned with NSW Health guidelines of improving early detection of clinical deterioration and guiding escalation of care appropriately.

See Protocol A1 for adult, paediatric and neonate vital signs.


HOW TO USE BETWEEN THE FLAGS (BTF)

BTF is designed to be a point-of-care triggering system that alerts clinicians to abnormal vital signs and how to appropriately escalate care. Every patient who presents to St John (NSW) must have a set of vital signs taken. The only exclusion to this is patients who require simple self-help only.

Each coloured “zone” (red, yellow or blue) has associated recommendations or mandated actions for clinicians to follow. These include the need to increase observations, ask for a health care professional to review the patient or urgently, and arrange either NSW Ambulance, or a St John Medical Emergency Response Team (MERT) to attend to the patient.


Red Zone

Vital signs that fall within the red zone on the BTF table are associated with patients who are unstable or acutely deteriorating. If a patient has any vital signs in the red zone, the following action must be taken immediately:

- increase frequency of observations to every 5 minutes 
- do not leave the patient unattended
- urgently escalate care:
 - NSW Ambulance – either call ‘000’ or use St John radio
 - if ACMC on-site, urgent radio request for MERT to attend location
- provide resuscitation and other care as needed
- obtain a more detailed assessment where possible

Yellow Zone

Vital signs in the yellow zone represent possible patient deterioration but are not normally immediately life threatening. Some patients who have vital signs in the yellow zone may appear well, however they may be in the early stages of deterioration so it is important that clinicians act appropriately on these observations. If a patient has any vital signs in the yellow zone, the following action must be taken:

- increase frequency of observations to every 15 minutes 
- obtain a more detailed assessment
- notify the team-leader
- arrange for a clinical review:
 - from a St John Health Care Professional (Doctor, Paramedic or Registered Nurse) if one is available
 - refer patient to hospital via the most appropriate means (including ambulance)
 - referral to a GP may be appropriate in some cases
- regularly re-assess patient – if any vital signs change to the red zone, escalate care as per red zone guidelines
- always recommend that patients who have vital signs in the yellow zone seek further medical assessment

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Paediatric Blue Zone



The blue zone is only relevant to paediatric patients and indicates a need for clinicians to increase the frequency of observations in response to early changes in a child's condition. In St John (NSW), any paediatric patients with vital signs in the blue zone should all be referred to a GP or St John Health Care Professional.

Special Note

It is sometimes possible that patients who present to St John (NSW) with vital signs in the red or yellow zone may not be having a clinical deterioration. The immediate environmental context of a patient's presentation should be considered when measuring a patient's vital signs. For instance, periods of physical exercise may cause vital signs to be transiently elevated. If vital signs do not return to normal, or do not begin to normalise within a few minutes of rest, clinicians should proceed with standard escalation of care in line with the previous sections of this document.

Clinicians should always escalate care if they have concerns about a patient, even if the vital signs are normal.