

NSQHS Standard 9 Clinical Deterioration

Facility audit tool



Hospital and Health Service:	Facility:	Audit Date/Period:
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Facility audit tool: collects facility level data and collates the ward/unit level responses.

- Notes:
- Each facility needs to determine those audit questions that are applicable to their facility / health service circumstances for review
 - Some questions and responses may not be applicable (eg. at a ward/unit level) and can be adapted to suit individual requirements
 - The measurement plan details each audit question and the action/criteria it aligns to in the standard

Facility Questions		Response
1.0	Is there evidence that the facility (or at service level) has a committee that oversees the recognition and response to clinical deterioration?	<input type="checkbox"/> Yes <input type="checkbox"/> No
1.1	If yes: Is there evidence of Terms of Reference?	<input type="checkbox"/> Yes <input type="checkbox"/> No
1.2	If yes to 1.0: Outline details of the committee, when they meet, who the members are etc.	
2.0	Is there evidence that the facility (or at service level) has a recognition and response framework/policy?	<input type="checkbox"/> Yes <input type="checkbox"/> No
2.1	If yes: Does the framework/policy address:	<input type="checkbox"/> Yes <input type="checkbox"/> No
	• governance arrangements for overseeing the performance of recognition and response systems	<input type="checkbox"/> Yes <input type="checkbox"/> No
	• roles, responsibilities and accountabilities for key clinical and facility support activities	<input type="checkbox"/> Yes <input type="checkbox"/> No
	• resources for the recognition and response systems, such as equipment and staff	<input type="checkbox"/> Yes <input type="checkbox"/> No
	• processes to support prompt and effective recognition of, and response to, clinical deterioration that apply across the facility, including identification of any areas where variations to these arrangements apply	<input type="checkbox"/> Yes <input type="checkbox"/> No
	• evaluation, audit and feedback processes and tools	<input type="checkbox"/> Yes <input type="checkbox"/> No
	• arrangements with external organisations that may be part of the rapid response system	<input type="checkbox"/> Yes <input type="checkbox"/> No

Facility Questions		Response
2.2	If yes to 2.0: Is there evidence that the framework/policy: <ul style="list-style-type: none"> is tabled at a governance committee/s or group meeting/s? If yes: Specify the committee/group. 	<input type="checkbox"/> Yes <input type="checkbox"/> No
	<ul style="list-style-type: none"> defines the audit process to be undertaken against it? 	<input type="checkbox"/> Yes <input type="checkbox"/> No
	<ul style="list-style-type: none"> references the consultation processes or collaborative group/s involved in its development? 	<input type="checkbox"/> Yes <input type="checkbox"/> No
	<ul style="list-style-type: none"> details the date it became effective? 	<input type="checkbox"/> Yes <input type="checkbox"/> No
	<ul style="list-style-type: none"> details the date of the next revision? 	<input type="checkbox"/> Yes <input type="checkbox"/> No
	<ul style="list-style-type: none"> references the source documents (if applicable) particularly where they are represented as best practice? 	<input type="checkbox"/> Yes <input type="checkbox"/> No
2.3	If yes to 2.0: Does the workforce know the document exists, can access them and know and use the contents?	<input type="checkbox"/> Yes <input type="checkbox"/> No
2.4	If yes to 2.0: Outline details of the document, where kept, review date/s and the 'owner'.	
3.0	Is there evidence that the facility (or at service level) has a recognition and response protocol/procedure/guideline?	<input type="checkbox"/> Yes <input type="checkbox"/> No
3.1	If yes: Is there evidence that the protocol/procedure/guideline addresses: <ul style="list-style-type: none"> measurement and documentation of observations 	<input type="checkbox"/> Yes <input type="checkbox"/> No
	<ul style="list-style-type: none"> escalation of care 	<input type="checkbox"/> Yes <input type="checkbox"/> No
	<ul style="list-style-type: none"> establishment of a rapid response system 	<input type="checkbox"/> Yes <input type="checkbox"/> No
	<ul style="list-style-type: none"> communication about clinical deterioration 	<input type="checkbox"/> Yes <input type="checkbox"/> No
3.2	If the protocol/procedure/guideline addresses escalation of care: Is there evidence that it provides a graded response to abnormal physiological observations?	<input type="checkbox"/> Yes <input type="checkbox"/> No
3.3	If the protocol/procedure/guideline addresses a rapid response system: Is there evidence that the system operates in partnership with, and as an extension of, the health care team?	<input type="checkbox"/> Yes <input type="checkbox"/> No
3.4	If the protocol/procedure/guideline addresses communication: Is there evidence that it develops a system for communicating with patients, families and carers about possible deterioration?	<input type="checkbox"/> Yes <input type="checkbox"/> No
3.5	If yes to 3.0: Is there evidence that the protocol/procedure/guideline: <ul style="list-style-type: none"> is tabled at a governance committee/s or group meeting/s? If yes: Specify the committee/group. 	<input type="checkbox"/> Yes <input type="checkbox"/> No
	<ul style="list-style-type: none"> defines the audit process to be undertaken against it? 	<input type="checkbox"/> Yes <input type="checkbox"/> No
	<ul style="list-style-type: none"> references the consultation processes or collaborative group/s involved in its development? 	<input type="checkbox"/> Yes <input type="checkbox"/> No
	<ul style="list-style-type: none"> details the date it became effective? 	<input type="checkbox"/> Yes <input type="checkbox"/> No
	<ul style="list-style-type: none"> details the date of the next revision? 	<input type="checkbox"/> Yes <input type="checkbox"/> No

Facility Questions		Response
	<ul style="list-style-type: none"> references the source documents (if applic) particularly where they are represented as best practice? 	<input type="checkbox"/> Yes <input type="checkbox"/> No
3.6	If yes to 3.0: Does the workforce know the document exists, can access them and know and use the contents?	<input type="checkbox"/> Yes <input type="checkbox"/> No
3.7	If yes to 3.0: Outline details of the document, where kept, review date/s and the 'owner'.	
4.0	Is there evidence that the facility (or at service level) has evaluation, audit and feedback processes for recognition and response systems?	<input type="checkbox"/> Yes <input type="checkbox"/> No
4.1	If yes: Is there evidence that the audit process includes a mortality review AND a near-miss review?	<input type="checkbox"/> Yes <input type="checkbox"/> No
4.2	If yes to 4.0: Is there evidence that the evaluation and feedback is reviewed by a committee/group?	<input type="checkbox"/> Yes <input type="checkbox"/> No
4.3	If yes to 4.2: Which committee/group?	
4.4	If yes to 4.0: Outline the processes, where the plans are filed and where/who/how often they are reported to.	
5.0	Is there evidence that the facility (or at service level) has a system for reporting, investigating and analysing recognition and response incidents?	<input type="checkbox"/> Yes <input type="checkbox"/> No
5.1	If yes: Outline the process for reporting, investigating and analysing recognition and response incidents.	
6.0	Is there a rapid response system team in the facility (or at service level)?	<input type="checkbox"/> Yes <input type="checkbox"/> No
6.1	If yes: Is there evidence that the team regularly audits and monitors processes?	<input type="checkbox"/> Yes <input type="checkbox"/> No
6.2	If yes to 6.1: Is there evidence that the team feeds back processes and outcomes to ward / facility staff for staff upskilling? Outline details.	<input type="checkbox"/> Yes <input type="checkbox"/> No
7.0	Is there evidence that the facility (or at service level) provides staff education on recognition and response / clinical deterioration systems (in line with the policy, procedure or protocol)?	<input type="checkbox"/> Yes <input type="checkbox"/> No
7.1	If yes: Is there evidence that attendance at the education sessions is recorded?	<input type="checkbox"/> Yes <input type="checkbox"/> No
7.2	If yes to 7.0: Is education provided to both the clinical and non-clinical workforce?	<input type="checkbox"/> Yes <input type="checkbox"/> No
7.3	If yes to 7.0: Is there evidence that education is matched to staff training needs?	<input type="checkbox"/> Yes <input type="checkbox"/> No

Facility Questions		Response
7.4	If yes to 7.0: Is there evidence that staff feedback reports of the sessions are evaluated and incorporated into the next revision?	<input type="checkbox"/> Yes <input type="checkbox"/> No
7.5	If yes to 7.0: Provide comments on the education sessions and resources that are provided and when.	

Collation of ward/unit data (This section is only needed to be used if the data was collected at the ward/unit level. Enables whole of facility reporting)		Count of No. of wards who meet criteria	Count of Total No. of wards audited	Calculate the %
	(as per measurement plan)	Numerator (N)	Denominator (D)	(N/D*100)
8.0	What is the number of wards/units that have evaluation, audit and feedback processes for recognition and response systems? (CD_Ward_Q1.0)			
8.1	Collate information on the processes, where the plans are filed and where/who/how often they are reported to. (CD_Ward_Q1.1)			
8.2	What is the number of wards/units that review and report recognition and response data and undertake quality improvement activities as needed?(CD_Ward_Q1.2)			
8.3	Collate information on the activities that were undertaken and when (CD_Ward_Q1.3)			
8.4	Collate information on methods that can be undertaken to address review / reporting and quality improvement activities (CD_Ward_Q1.4)			
9.0	What is the number of wards/units that use a general observation chart? (CD_Ward_Q2.0)			
9.1	What is the number of wards/units that use a Q-ADDS tool? (CD_Ward_Q2.1)			
9.2	What is the number of wards/units that use a CEWT tool? (CD_Ward_Q2.2)			
9.3	Provide a breakdown of the number of wards/units that use a single parameter tool, aggregate scoring system, combination system, non track and trigger. (CD_Ward_Q2.3)			
10.0	What is the number of wards/units that have a chart that is known to be designed according to human factors principles? (CD_Ward_Q3.0)			

We recognise and appreciate that there may be gaps in the scope and questions included in these tools, however, as this is a **'Work in Progress'**, future versions will build upon the existing scope and questions, and incorporate staff feedback and suggestions for improvement.

The Patient Safety and Quality Improvement Service, Clinical Excellence Division, welcomes feedback on the audit tools and the measurement plans, to ensure the tools meet the needs of Hospital and Health Services. We appreciate any feedback you can provide for the next version.

Please email Patient Safety and Quality Improvement Service on PSQIS_Comms@health.qld.gov.au for feedback or comments.

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