

### CLINICAL EMERGENCY RESPONSE SYSTEM (CERS) – Management of the deteriorating patient

*This LOP is developed to guide clinical practice at the Royal Hospital for Women. Individual patient circumstances may mean that practice diverges from this LOP.*

#### 1. AIM

- Implementation of a local CERS system

#### 2. PATIENT

- Acutely unwell woman, visitor or staff member

#### 3. STAFF

- All hospital staff

#### 4. EQUIPMENT

- Cardiac arrest trolley and defibrillator (See Appendix 1 for locations)

#### 5. CLINICAL PRACTICE

- Activate CERS call as determined by Standard Maternity Observation Chart (SMOC) dialling emergency number 2222
- Request appropriate rapid response team by stating response required, location and admitting consultant (if known). If CERS called in Delivery Suite, care defers to the on-call obstetric consultant
  - **Clinical Review: 30 minutes response time**
    - obstetrics/gynaecology resident
  - **Rapid Response: 5 minutes response time**
    - woman's primary care medical team
    - 'Outside' anaesthetic fellow/registrar
    - Access and Demand Manager (ADM)/After Hours Nurse Manager (AHNM)
    - CERS Clinical Nurse Consultant (CNC) (during working hours)
    - Acute Care CNC (0700-1530 hours Monday-Friday)
    - Porter
  - **Adult Code Blue: Immediate response for life threatening conditions**
    - All available medical staff
    - Inside and outside anaesthetic fellow/registrar
    - ADM/AHNM
    - Acute Care Centre (ACC) staff member (if available)
    - Porter
- Escalate to Prince of Wales (POW) to obtain the POW arrest team as appropriate if assistance or support is required. **The POW adult cardiac arrest team can be activated by dialling 2222 and asking for the POW "Adult Code Blue Team" for The Royal Hospital for Women, stating exact location. It is advised to have a staff member direct the POW team in from the lift**
- Escalate all woman, visitor and staff collapses in non-clinical areas as an Adult Code Blue.
- Ask the ADM/AHNM to obtain or arrange for the closest cardiac arrest trolley to be brought to the area.
- Use maxi lifter located in Macquarie Ward or the slide lifter located in the mail room, to lift person from the floor to a bed or trolley
- Notify the person's family/carer of clinical deterioration and/or change of location
- Complete the emergency resuscitation record located on the emergency trolley. Send copy to the CERS CNC for review and file the original appropriately
- Document the events in the medical record

## CLINICAL EMERGENCY RESPONSE SYSTEM (CERS) – Management of the deteriorating patient cont'd

- Document CERS call on the eMR form (either Clinical Review form or Rapid Response form).
- Complete Incident information management system (IIMS) notification if criteria met
- Alter calling criteria only after consultation with the attending Medical Officer (MO). Document the alterations on appropriate observation charts. Review alterations of criteria for changes by the attending MO within 24 hours
- Ensure annual Adult Basic Life Support (ABLS) assessments are attended by all medical, midwifery, nursing, and allied health staff and porters

### 6. DOCUMENTATION

- eMR Clinical Response Form
- eMR Rapid Response Form
- Emergency Resuscitation Record
- Medical record
- Standard Maternity Observation Chart (SMOC)
- Standard Adult General Observation (SAGO) Chart
- IIMS

### 7. EDUCATIONAL NOTES Nil

### 8. RELATED POLICIES / PROCEDURES / CLINICAL PRACTICE LOPs

- Acute Care Centre (ACC) - Admission Criteria, Process Management and Escalation
- Escalation for Birthing Services
- Collapse - Maternal
- PACE Management of the Deteriorating Adult and Maternity Inpatient - SESLHDPR/283
- Emergency Equipment – Checking and Maintenance

### 9. RISK RATING

- Medium

### 10. NATIONAL STANDARD

- Standard 8 – Recognising and responding to the deteriorating patient

### 11. REFERENCES

- 1 NSW Health NSW Health PD2013\_049 Recognition and Management of a patient who is Clinically Deteriorating
- 2 NSW Health Policy Directive PD 2019\_020 Clinical Handover

### REVISION & APPROVAL HISTORY

Reviewed and endorsed Maternity Services LOPs group November 2019 – previous title *Patient (Adult) with acute condition for escalation (Pace) criteria and escalation*

Amended August 2019 – change from PACE to CERS

Change 777 to 2222 February 2019

Approved Quality & Patient Care Committee 21/6/18

Reviewed and endorsed Maternity Services LOPs 19/6/18 – previous title *Adult Clinical Emergency Response System (CERS) and Escalation*

Approved Quality & Patient Safety Committee 17/7/14

Approved Quality & Patient Safety Committee 18/11/10

Gynaecology Services Management Committee 11/11/10

**FOR REVIEW : DECEMBER 2022**

# APPENDIX 1

## RHW CARDIAC ARREST TROLLEY/DEFIBRILLATOR LOCATIONS

LEVEL	WARD	DEFIBRILLATOR
Level 4	Acute Care Centre (ACC) – near staff station	Yes – M Series and Automated External Defibrillator (AED)
Level 3	Oxford (North) - equipment room next to room 18	Yes – AED and Cardiac arrest trolley
Level 2	Day Surgery - at nurses' station	No defibrillator/AED Cardiac arrest trolley only
Level 2	Gynaecology Outpatients - near procedure room next to staff station	Yes – AED
Level 2	Macquarie Ward - opposite room 4	Yes – AED
Level 1	Delivery Suite - in vestibule near staff station between rooms 2 and 3	Yes – AED
Level 1	Recovery RHW - walkway between theatre and recovery	Yes – M Series
Level 0	Admissions and Antenatal Outpatients - behind main admissions front desk	Yes – AED
Level 0	Reproductive Medicine - ultrasound room 1	No defibrillator/AED Cardiac arrest trolley only