

Spreading the NEWS

Collaborative working to spread the National Early Warning Score (NEWS) to identify the deteriorating patient

Background and aims

In 2012 the Royal College of Physicians developed the National Early Warning Score (NEWS) to facilitate a consistent approach to identify patients who are deteriorating. In the West of England, we introduced NEWS to pre-hospital settings in 2015 with the aim of standardising communication across the system, ensuring the sickest patients are seen in the right place, at the right time, by the right clinician.

Our NEWS programme aims to improve:

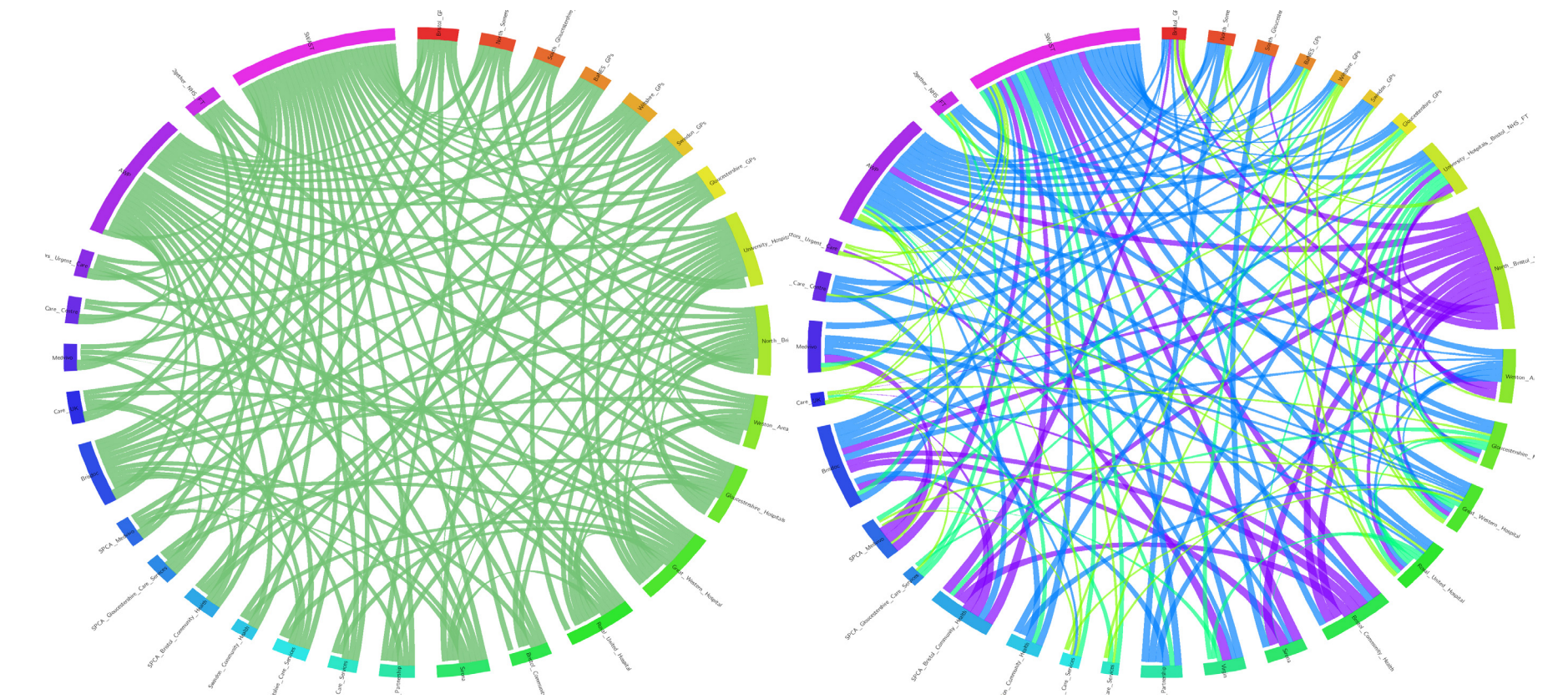
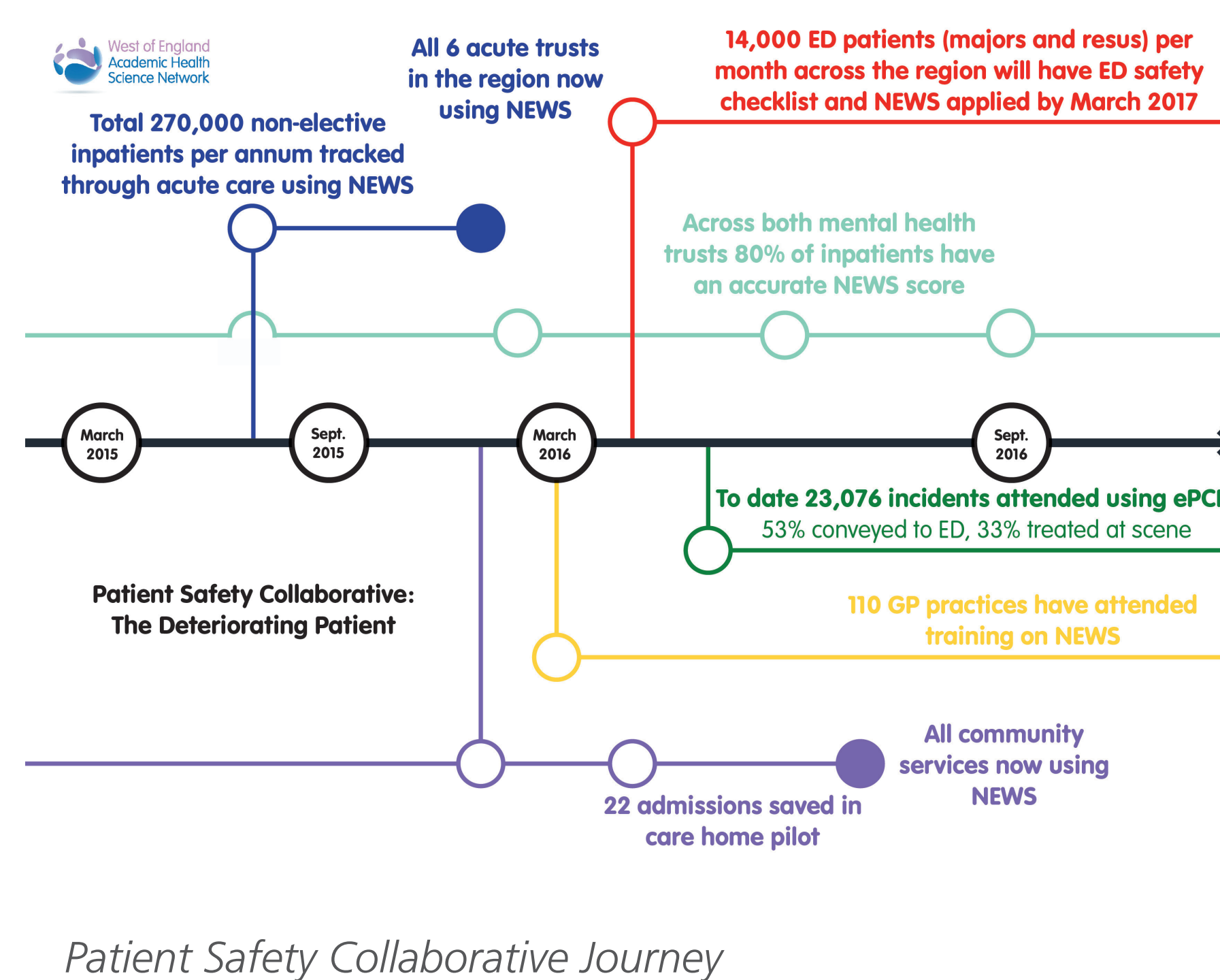
- the ability to recognise a patient at risk of deterioration and institute rescue
- detection and treatment of sepsis
- communication between the ambulance trust, primary care, acute hospitals, community and mental health services
- detection of acute illness in a pre-hospital setting compared to clinical judgement alone
- triaging patients to the most appropriate service
- patient outcomes.

Method

We implemented NEWS across the West of England using the Institute for Healthcare Improvement (IHI) breakthrough collaborative model to bring people together regularly to share and learn, and developed resources, such as patient stories and toolkit.

Health community task groups met more frequently to lead the work where teams met under existing NHS structures.

The West of England AHSN facilitated the introduction of NEWS into the South Western Ambulance NHS Foundation Trust electronic patient care record (ePCR). This was a key enabler in the spread and success of NEWS across the West of England region.



These diagrams show the difference between 2015 - when NEWS was not in use (green lines indicate connections between organisations), and 2017 - where the blue and purple lines show where NEWS is now in place at transfer of care between organisations.

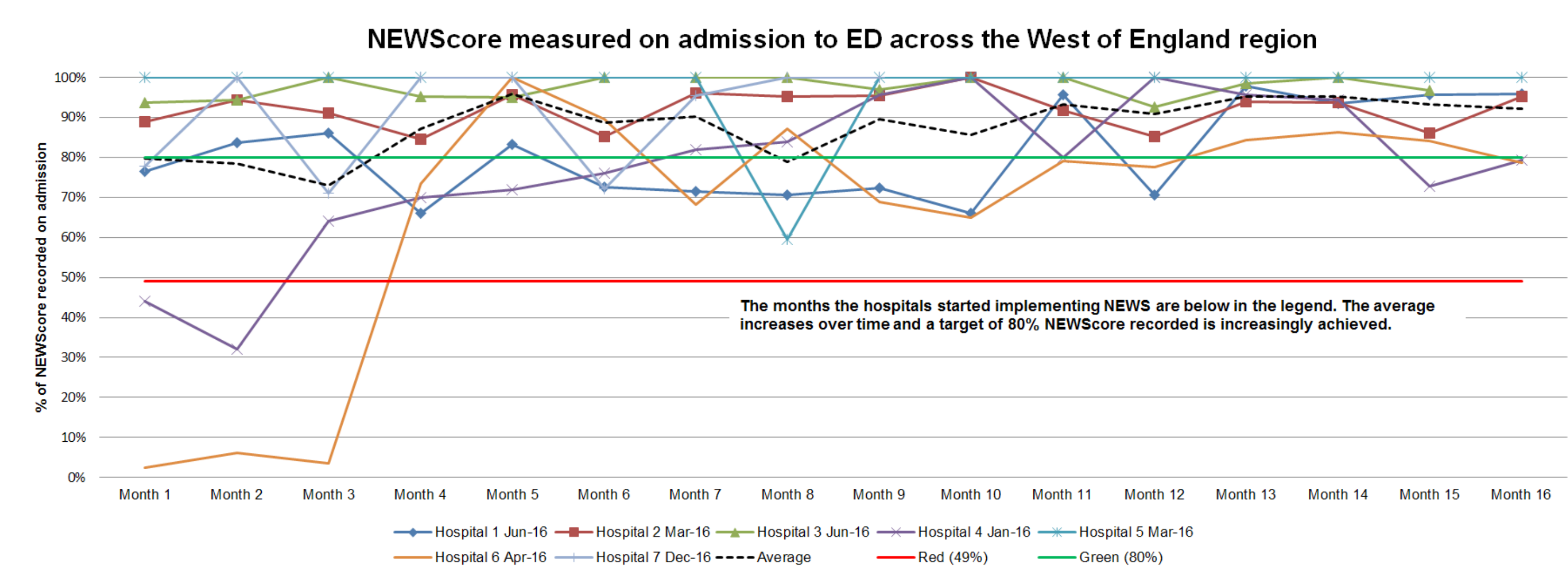
Outputs

- All acute trusts in the West standardised to NEWS in 2015.
- Emergency Department (ED) and primary care collaboratives were established to support implementation.
- ED Safety Checklist was rolled out, which includes NEWS at triage
- Neuro NEWS chart developed
- NEWS introduced in mental health settings and prisons
- Piloted NEWS in care homes in combination with rapid response reduced admissions
- Human factors training delivered to support implementation in the community.

Results

Qualitative evaluation carried out by the Collaboration for Leadership in Applied Health Research and Care (CLAHRC) West highlights the following themes:

- Communication:** improved communication between all staff regardless of hierarchy as well as across organisations
- Prioritisation of care:** key tool to enable staff to prioritise patient care
- Adjunct to clinical judgement:** supplementary for both clinical judgement and decision-making for staff
- Integration into clinical practice:** formalisation and integration with existing clinical practices and processes.



Conclusion

The West of England AHSN has successfully introduced NEWS into all settings in the healthcare system in the region, although there is still scope to ensure it is fully embedded everywhere.

Qualitative evaluation shows NEWS has standardised communication and supports clinical decision making.

Early evidence shows NEWS has also reduced mortality from sepsis in implementing trusts at a greater level than the general national improvements in sepsis.

The next steps regarding NEWS are to further develop its use in care homes across the West of England and to continue collecting data to show the impact of NEWS.

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References: Supporting resources are available at www.weahsn.net/dp
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A full evaluation of the implementation of NEWS is due to be published in late 2017 by the Collaboration for Leadership in Applied Health Research and Care (CLAHRC) West.

West of England
Patient Safety Collaborative