#SpreadtheNEWS15
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Introduction
• Early warning scores are designed to recognize the acute deterioration of a patient with the aim of reducing the incidence of cardiac arrests, ITU admissions and death.
• Many EWS exist across the NHS. Designed by a group of clinicians, Muskogee Park Hospital has used the ‘patient at Risk’ score for 8 years.
• The PAR score was based upon blood pressure, heart rate, respiratory rate and urine output and does not include parameters such as temperature, oxygen saturations or oxygen requirement.
• The use of the PAR score is limited to MPH making it unfamiliar territory for new staff and those rotating through the trust, in particular junior doctors.

Aim:
1. Convince senior staff of the requirement for change
2. Develop a multidimensional training module to improve recognition of the acute deterioration of the patient
3. Implement the National Early Warning Score at MPH endorse by the Royal College of Physicians
4. Ensure a safe transition to a new early warning score and improve patient safety.

Method:
Phase 1: Evidence for change
• Questionnaires were used to gain a general opinion of the PAR scoring system, its flaws and how it compared to NEWS.
• Qualitative data was collected in the form of audits looking into the number of correctly calculated PAR scores, fully completed charts and appropriate escalation.

Phase 2: Develop a training Model
• #SpreadtheNEWS was developed as a multidimensional, multidisciplinary training model to train and educate 4000 healthcare professionals at MPH between April–July 2015.
• The focus was to educate and empower frontline staff in the importance of NEWS and make them an extension of the critical care outreach teams.
• After 2 months of using the #SpreadtheNEWS model a test of change was conducted.
• After implementation an audit was conducted evaluating the NEWS score and effectiveness of #SpreadtheNEWS

<table>
<thead>
<tr>
<th>#SpreadtheNEWS</th>
<th>Social media provided a modern platform to educate, raise awareness and address concerns</th>
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<tbody>
<tr>
<td>#SpreadtheNEWS educator teams</td>
<td>A named consultant, lead nurse, healthcare assistants, junior doctor and a critical care outreach team member for each ward</td>
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</table>
| Publicity | Posters
Information packs
Musgrove Matters news article
Email Bulletin |
| eLearning | Online RCP elearning module
Musgrove eMollie course |
| Ward based training | Provided by junior doctors and critical care outreach nurses. |

<table>
<thead>
<tr>
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<th>PAR Audit (n=208)</th>
<th>NEWS Audit (n=200)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Correct score</td>
<td>68%</td>
<td>87%</td>
</tr>
<tr>
<td>Completed charts</td>
<td>48%</td>
<td>90%</td>
</tr>
<tr>
<td>Appropriate escalation</td>
<td>32%</td>
<td>98%</td>
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Conclusion
• Patient safety is paramount. The #spreadtheNEWS initiative is an effective, modern training tool. It has provided a useful platform to implement a new trust-wide early warning score at MPH. The project has empowered frontline staff, making them an extension of the critical care outreach team and has improved recognition of acutely deteriorating patients.
• Clinical standards cannot improve unless a national scoring system for acute illness severity is adopted by every hospital. If we are not speaking the same language how can we improve patient safety?