

**Quality Improvement Activity: Rapid Response: Delayed care due to a lack of supplies.**

A 65-year-old female with COPD was recently admitted to the hospital on the medical surgical floor for hypoxia and confusion. The night shift nurse reported to the new oncoming day shift nurse that the patient was on BIPAP but had continuously been taking it off through the night and had been combative. The new day shift nurse caring for the patient went into the patient's room to complete their initial assessment. In their assessment the nurse found that the patient's BIPAP mask was not on correctly. The nurse also noticed that the patient's skin was cold and had some cyanosis around the lips. The patient seemed to be short of breath and her oxygen saturation level was 88%. The nurse had a gut feeling that something was wrong. The nurse decided that it was best to call a rapid response. Once the rapid response team arrived to the patient's room, they then determined that it was best for the patient to be intubated. While preparing to intubate the patient, members of the rapid response team noticed that the supplies that were needed for intubation were not readily available in their rapid response cart and on the floor. As they were searching for all of the equipment they needed, the patient's oxygen saturation levels began to drop rapidly, and her respirations began to be shallow. One of the rapid response team members had to go two floors down to get everything they needed. While that member was retrieving the equipment, the patient went into cardiac arrest. Unfortunately, because of the delayed care and lack of equipment readily available, the patient did not make it.

**Describe the scenario. In what way did the patient care or environment lack? Is this a common occurrence?**

In the scenario above the patient was admitted to the hospital for hypoxia and confusion related to having COPD. After assessing the patient, the nurse decided to call a rapid response due to the patient having signs and symptoms of respiratory failure. Rapid response was quick to arrive to the floor the patient was on, but the equipment that they needed was not readily available in their rapid response cart or even on the floor. No one made sure that the resources the rapid response team needed or anyone in general needed were stocked and readily available. Because it took some time to acquire the equipment they needed, precious minutes were wasted. The patient went into cardiac arrest and everyone on the healthcare team attempted to do everything in their power to resuscitate the patient, but it was too late. Any nurse on any unit should have all of the equipment stocked and ready to go no matter the situation. The rapid response cart also should be evaluated at the end of every shift and beginning of every shift to make sure that everything is restocked and ready to go. Anything can happen at any given time. In this situation the unit nor the rapid response team were prepared. It is best practice to always prepare for the worst and to have emergency supplies in and out of the patient's room.

**What circumstances led to the occurrence?**

The circumstance that led to the situation was that the rapid response team and the medical surgical floor were not prepared enough for an emergent situation.

**In what way could you measure the frequency of the occurrence? (Interview nurses, examining charts, patient surveys, observation, etc.)**

A way the frequency of occurrence could be measured is conducting a debriefing event at the end of each rapid response. In the debriefing a checklist of all the supplies that were used should be checked off so that way each member knows what was used during the response and what to replace immediately.

**What evidence-based ideas do you have for implementing interventions to address the problem?**

Preparing a rapid response kit/ cart on every hospital floor for the rapid response team, can ensure that units are adequately and regularly stocked with supplies that are regularly used during rapid response calls. In this cart a checklist of every supply should be available. When unit staff also come across some free time or they could set aside some time at the beginning or end of the shift to make sure that each supply room and patient room is fully stocked, this sets everyone up for success.

**How will you measure the efficacy of the interventions?**

Measuring the efficacy of these intervention scan be accomplished by having rapid response cart on every floor. Each cart should be evaluated before each shift, the end of each shift, and especially when the cart has been recently used. Not only should the rapid response cart be fully stocked at all times but so should each hospital floor. By doing this, it ensures that everything is readily available for emergent situations. Precious minutes should not be wasted trying to find supplies that are needed, when they can be right there within reach.