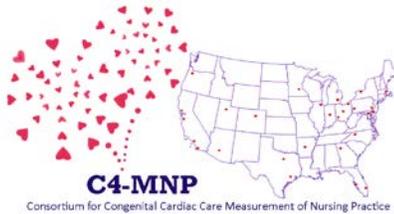




**Consortium for Congenital Cardiac Care Measurement of Nursing Practice
Quality Measurement Plan**

Utilization of Early Warning Scores	
Measure Description	Use of early warning scores is a unit-level measure of the rate of unplanned transfers to the CICU associated with code blue, resuscitation, or unprecedented need for escalation in care among patients on an acute cardiac care unit.
Type	<input type="checkbox"/> Outcome <input checked="" type="checkbox"/> Process <input type="checkbox"/> Balancing <input type="checkbox"/> Structure
IOM Domain	<input checked="" type="checkbox"/> Safety <input checked="" type="checkbox"/> Efficient <input type="checkbox"/> Effective <input type="checkbox"/> Equitable <input checked="" type="checkbox"/> Timely <input type="checkbox"/> Patient Centered
Background/Rationale	A preliminary survey of participating C4-MNP sites in July 2014 revealed that 76% of participating programs currently implement an Early Warning Score System, including: CHEWS (7.5%), PEWS (85%) and PAWS (7.5%). Unplanned transfers from the inpatient floor to the ICU imply that significant clinical deterioration has occurred in the medical status of the patient either a) over a short interval or b) over a longer interval, without it being appreciated. The goal of medical therapy is to prevent the former from occurring, or recognize deterioration sufficiently early so that transfer to the ICU is not emergent. Reducing unplanned transfers would imply improved medical management and more effective monitoring of the condition of patients on the unit. This measure attempts to understand whether the use of early warning score systems is associated with the rate of unplanned ICU transfers in the cardiac inpatient unit.



Utilization of Early Warning Scores	
Operational Definitions	<p>Unplanned transfer to CICU = code blue, resuscitation, or unprecedented need for escalation in care among patients on an acute cardiac care unit.</p> <p>Numerator – Number of unplanned transfers to the CICU among cardiovascular patients on an acute cardiac care unit during the measurement period (one month)</p> <p>Denominator – Total number of cardiovascular patient days on an acute cardiac care unit during the measurement period (one month), normalized to 1,000 for comparison across units</p> <p>Inclusion criteria – All cardiovascular patients on acute cardiac care unit. If your hospital has a step-down unit in place of a cardiovascular acute care unit, use unplanned transfers from this step-down unit to the CICU.</p> <p>Exclusion criteria – Planned ICU transfers; intensive care unit patients; non-cardiovascular (off-service) patients</p>
Data Collection & Sampling Method	Data will be collected monthly through chart review of the unplanned transfer episode, including the early warning score (if one was in use) at time of transfer.
Data Analysis	Data will be analyzed as an unplanned transfer to CICU rate normalized to 1,000 eligible patient days each month.
Data Display	Data will be displayed graphically as a rate of unplanned transfers to the CICU per 1,000 eligible patient days over time.
Target	External: To be determined based on consortium data
Sources/References	<ul style="list-style-type: none"> • McLellan, MC. Connor, JA. The Cardiac Children’s Hospital Early Warning Score (C-CHEWS). J Pediatr Nurs. 2013 Apr;28(2):171-8. • McLellan, MC. Gavreau, K. Connor, JA. Validation of the Cardiac Children’s Hospital Early Warning Score: An Early Warning Scoring Tool to Prevent Cardiopulmonary Arrests in Children with Heart Disease. Congenital Heart Disease. 2014 May;9(3): 194-202.
Last Updated	January 2016