

Emergency Department Escalation Aid

PEWS Score	0 - 1	2	3 (For a score of 3 in any one category, consider higher escalation)	4 AND/OR score increases by 2 after interventions	5 - 13 or score of 3 in one category
Notify		RN reviews patient with the ED senior nurse (e.g. charge nurse, PCC) and identifies if escalation is required; if so, notify the most responsible physician (MRP)	As per PEWS Score 2	RN notifies MRP or physician delegate; based on rate of deterioration, Emergency Physician (EP) to consider consulting a pediatrician	MRP to assess patient immediately (and also pediatrician if available); if MRP unable to attend, RN calls EP for a STAT physician review; appropriate 'senior' review
Plan				MRP or physician delegate communicate a plan of care to mitigate factors contributing to deterioration	As per PEWS Score 4
Assessment	Nurse (RN) continues assessments and monitors; RN documents vital signs and PEWS score as per unit/ Health Authority guideline	As per PEWS Score 1	Increase frequency of assessments and documentation as per plan from consultation with more experienced healthcare provider	RN increases frequency of assessments and documentation of vital signs and PEWS score	As per PEWS Score 4
Resources				ED senior nurse will assess RN-to-patient ratio to make changes as needed; also care location to ensure skill mix, equipment, medication, and resources are available; senior nurse and MRP or delegate considers internal or external transfer to higher level of care	Senior nurse arranges increased nursing care (1:1) with increasing interventions as per plan; patient will be moved to an acute space within the ED; senior nurse and MRP or delegate considers transfer to higher level of care
Situational Awareness	<p>If patient is assessed with one or more of the following situational awareness factors:</p> <ul style="list-style-type: none"> ▪ Parent concern ▪ Watcher patient ▪ Unusual therapy ▪ Breakdown in communication <p>THEN: Follow PEWS Score 2 actions</p>				