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| **Paediatric vital signs chart condensed audit form** | | | | | | | | | | | | | | |
| **Instructions**   1. Circle ‘Yes’ or ‘No’ for each question. 2. Use abbreviations for vital signs that are absent for question 2.1a-g. 3. See the operational definitions for details on what is required for each question. 4. The paediatric early warning score is abbreviated to PEW score. 5. Use the prioritised ethnicity identified in the patient clinical record. Use these abbreviations: Māori (M), Pacific peoples (P), Asian (A), Other (O), European (E) and Residual Categories (R). | | | | | **Case selection**   1. Audit 10 patient’s vital signs charts per week. 2. Select the charts for audit of patients who have been in the ward or unit for a minimum of four hours. 3. Review the charting and associated documentation in the clinical record over a 72-hour audit period. | | | | | | | | | |
| If you identify adverse events or near misses that have not been previously reported, follow your organisation’s reporting guidelines | | | | | | | | | | | | | | |
| **Hospital:** | |  | **Case numberà** | **1** | | **2** | **3** | **4** | **5** | **6** | **7** | **8** | **9** | **10** |
| **Ward:** | |  | **NHI number (optional)à** |  | |  |  |  |  |  |  |  |  |  |
| **Date:** | |  | **Ethnicity à** |  | |  |  |  |  |  |  |  |  |  |
| **Auditor:** | |  | **Age 🡪**  Include month (m) or year (y), eg, 4m = 4 month |  | |  |  |  |  |  |  |  |  |  |
| **Questions** | | | **Type of chart 🡪**  Use: 1 = 0–11m, 2 = 1–4y, 3 = 5–11y, 4 = 12+y |  | |  |  |  |  |  |  |  |  |  |
| **#** | **Observation frequency** | | **Operational definitions** |  | | | | | | | | | | |
|  | **Recognition** | | | | | | | | | | | | | |
| 2.1 | For the most recent set of vital signs, was the core vital sign set completed?  *(If yes, go to question 2.3; if no, complete question 2.1a-g)* | | Use the most recent set of vital signs except if this is the set done at the time of patient discharge. Use the prior set in this situation  The core vital sign set is complete when **all** the vital signs required to calculate the PEW score are recorded: respiratory rate, respiratory distress, oxygen, oxygen saturation, heart rate, central capillary refill, systolic blood pressure. | Yes  No | | Yes  No | Yes  No | Yes  No | Yes  No | Yes  No | Yes  No | Yes  No | Yes  No | Yes  No |
| 2.1  a-g | Note which vital sign(s) were absent | | Write abbreviations of the vital sign(s) that were absent, eg, RR, RD, O2, SpO2, HR, CR, BP |  | |  |  |  |  |  |  |  |  |  |
| 2.3 | Was whānau concern recorded for this patient? | | Circle ‘Yes’ when the whānau concern box is marked with a ‘Y’, ‘N’ or ‘A’.  Circle ‘No’ when the whānau concern box is blank. | Yes  No | | Yes  No | Yes  No | Yes  No | Yes  No | Yes  No | Yes  No | Yes  No | Yes  No | Yes  No |
| **Case number** | | | | **1** | | **2** | **3** | **4** | **5** | **6** | **7** | **8** | **9** | **10** |
|  | **Escalation and response** | | | | | | | | | | | | | |
| 5 | Did the patient reach any of the defined triggers for escalation in the 72-hour audit period? *(If yes, complete questions 5a−d; if no, audit is complete)* | | Circle ‘Yes’ if the patient had a PEW score 4–5, PEW score 6–7, PEW score 8+ or a single vital sign in the blue zone in the 72-hour audit period. | Yes  No | | Yes  No | Yes  No | Yes  No | Yes  No | Yes  No | Yes  No | Yes  No | Yes  No | Yes  No |
| 5a | Did escalation occur according to the pathway? | | If more than one escalation was triggered in the 72-hour audit period, select the most recent for inclusion in the audit.  Circle ‘Yes’ if an escalation occurred according to the pathway.  Circle ‘No’ for any deviation from the agreed escalation pathway or inadequate documentation. | Yes  No | | Yes  No | Yes  No | Yes  No | Yes  No | Yes  No | Yes  No | Yes  No | Yes  No | Yes  No |
| 5b | Did the response occur according to the pathway? | | Circle ‘Yes’ if the responder attended in the time frame specified on the escalation pathway.  Circle ‘No’ for any deviation from the agreed response pathway. | Yes  No | | Yes  No | Yes  No | Yes  No | Yes  No | Yes  No | Yes  No | Yes  No | Yes  No | Yes  No |
| Space to note comments arising from the audit. | | | | | | | | | | | | | | |