A pilot project at the Rockyview General Hospital has cut cardiac arrests among in-hospital patients by about 40 per cent. Launched in 2004, the Intensive Care Outreach Team was designed to identify and treat patients at risk for cardiac arrest, respiratory illness or the onset of critical illness. “The idea was to try and get to these patients before a code blue (cardiac arrest) had to be called and before they had to be transferred to ICU”, said Elaine Rose, Coordinator of the Outreach Program.

As part of the pilot project, staff are encouraged to be aware of physiological changes that indicate that a patient may be deteriorating. When these signs are evident, a three person team with critical care experience, skills and knowledge is called. The program, developed locally by Dr. Ann Kirby, an ICU physician at the Rockyview Hospital, Coordinator Elaine Rose, and an outreach committee, builds on best practices from around the world, including Australia and the United Kingdom.

The ICU Outreach Team is comprised of a doctor, nurse and respiratory therapist. The team responds to calls from any staff member who has a serious concern about a patient. When the Code 66 is called, the patient’s immediate caregiver becomes part of the team.

Symptoms that may trigger staff to call for the team include a threatened airway, poor vital signs, and prolonged or repeated seizures.

The Outreach Team responds to the Code 66 calls within 5 – 15 minutes. They work to assist in stabilizing the patient and assessing medical needs. During the six month pilot project the Team responded to 112 calls. On average there are about 20 calls to the Team each month.

The Outreach Team is drawing high praise from hospital staff. “I think the team is a valuable resource to support the floor nurses. Often we can see patients ready to crash long before they actually code. I think the early intervention has been beneficial and life-saving”, were comments by one nurse who used the service.

“We are now currently rolling out the project into all of our hospital operations”, explains Rose who is now responsible for orientation and training of the full implementation. The initiative is now part of a national safety campaign – Safer Healthcare Now! – and will be implemented in the next few years in hundreds of hospitals across Canada.

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