Improving the identification of sepsis in primary care

Dr Sally Lewis
Interim Assistant Medical Director
ABUHB
National Early Warning Score

– Not validated in the community setting

– Royal College of Physicians recommend its use to improve the communication of acute illness severity by first responders and primary care to the receiving hospital clinician

– Minimum data set
NEWS parameters

• Respiratory rate
• Oxygen saturation
• Temperature
• Systolic blood pressure
• Pulse rate
• Level of consciousness using AVPU:
  – A=alert
  – V= response to voice
  – P=response to painful stimulus
  – U=unresponsive
Assessment of febrile children

• NICE guidance recommends minimum data set
  – Temperature
  – Heart rate
  – Respiratory rate
  – Capillary refill time (CRT)
Intended impact

• Early identification of the sickest patients
• Pre-hospital baseline data allowing identification of deteriorating observations on arrival
• More rapid time to treatment
• Earlier identification of developing sepsis in the community – fewer ‘missed’ cases
How did it work?

• Admitting GP communicates parameters to call handler
• Call handler training
• Redesigned system in Royal Gwent hospital for processing admission information
• Close working relationships developed between Primary Care, AMU and ABCi
Initial data and impact

• Last audit demonstrated 70% reporting of all six parameters
• Further CPD events planned to further raise awareness
• Takes a long time to fully embed new practice
• Keep going!