

Usage patterns of the patient and carer escalation pathway at Northern Health – a retrospective descriptive study

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Introduction

Many health services have begun to acknowledge the role of patients and carers in recognising early clinical deterioration. Evidence supporting this is well established in the paediatric population, but remains speculative in the adult patient population due to a relative scarcity of high-quality research, despite widespread implementation (1,2). Northern Health has developed the REACH (**fig 1**) protocol as a means for patients and carers to escalate their concerns, triggering senior clinician review.

**Are you worried
you or your loved one is getting sicker?**

If yes... REACH out

Step 1 **Speak to a nurse.**
Tell them your concerns.

Step 2 **Still worried? Ask your nurse for a
'clinical review'**
A doctor should come within 30 minutes.

Step 3 **If a doctor has seen you or your loved
one and you are still worried call
1800 897 216 and ask for REACH**

Study Aims

1. To determine if REACH identifies clinically deteriorating patients.
2. To characterise the reason for REACH calls, common outcomes, and compare medical and surgical patients.

Results

211
REACH calls
made



3.5
REACH calls
per month

- No REACH calls were made to escalate concerns of clinical deterioration.
- REACH was primarily called to escalate **communication concerns** and **pain/discomfort**.
- A total of 44 (**20%**) **REACH calls** were made due to **pain**, with medication changes occurring in 77.3% of these cases.
- In **64.5%** of cases, the primary issue identified by the medical team was the requirement for a **patient/family update/reassurance**.
- The majority of surgical patients expressing concern around the timing or delay of services, compared to medical patients who more often expressed dissatisfaction with staff or services.

15.6%
Other

63.5%
Communication
concerns

Pain/discomfort
20.5%

**Timing/delay of
services (35.8%)**

**Dissatisfaction
(35.1%)**

**Requesting
update/clarification
(21.6%)**

**Logistical concern
(3.7%)**

Discussions and Conclusion

Our study highlights REACH has not been used to identify or escalate clinical deterioration, but rather as a means to **facilitate communication** with the treating team, or **escalate a clinical review of pain**. The data prompts re-evaluation of the appropriate method of escalation of REACH calls.

Acknowledgements and References

Please scan the QR code
to see references and
acknowledgements.



Figure 1: Northern Health Epping REACH poster