

Identifying factors that influence nurse use of the Medical Emergency Team (MET) in the care of the deteriorating patient

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Background

- Medical Emergency Teams have been implemented since the early 1990s in some hospitals/states of Australia (Lee *et al.* 1995) leading to significant changes in the way that hospitals manage critically ill ward patients.
- South Australian hospitals introduced Medical Emergency Team systems with set call criteria for the care of deteriorating patients in the late 1990s (specific private hospitals) and from 2002 onwards (specific public hospitals).

Background

- Ward nurses are recognised as frequent MET activators during patient care
- Patient outcomes therefore remain dependent in part on ward nurses' abilities to:
 - first identify and respond to signs of deterioration and
 - second, if appropriate, to seek MET intervention.

Background

- Research in the MET field has provided evidence of important aspects e.g.- numbers of cardiac arrests, unanticipated intensive care unit admissions and frequency of MET activation.
- These studies often indicate MET activation is delayed and at times a non-occurrence.
- To date there has been limited focus on factors influencing nurses' activation of the MET.

This presentation focuses on:

- the findings from 16 studies that inform understanding of factors that influence nurses' MET activation for patients in their care.
- potential implications of these findings for clinical practice and education.

Investigation of factors influencing MET activation

King's initial research study goals were:

1. Identification of the factors that influence nurses' MET activation in the hospital setting.
2. Inform undergraduate and hospital in-service programs of the factors to maximise multidisciplinary graduate understanding/use of the MET.

A study of RNs MET activation

King's qualitative study explored five newly registered and five experienced RNs' MET call activation in a surgical ward setting of a metropolitan South Australian hospital.

RNs were interviewed following multiple experiences of MET activation for patients in their care. Thematic analysis for influencing factors.

Findings

Influencing factors from King's study:

- RNs levels of expertise

Findings

- RNs knowledge of the patients in their care

Findings

- RNs observations of the patient

Findings

- RNs level of confidence to call
 - increased by previous observation of MET initiated treatment and/or transfer to ICU of the patient

Findings

- RNs level of confidence to call
 - increased by previous positive responses by MET members to calls made

Findings

- RNs level of confidence to call
 - increased by previous debriefing of staff after traumatic calls

Aims of review of related literature

The initial study was followed by an exhaustive literature review of fifteen research studies (Jones, King & Wilson 2009). The aims were to:

- identify positive and negative factors that impact on nurses' effective use of the MET in ward settings,
- share these factors so that organisations might consider their impact on their own MET systems and develop strategies to overcome them.

Findings from Review

Five major influencing positive/negative factors emerged on RN MET call activation:

Factor 1 - education on the MET

Findings from Review

Five major influencing positive/negative factors emerged on RN MET call activation:

Factor 2 - expertise

Findings from Review

Five major influencing positive/negative factors emerged on RN MET call activation:

Factor 3 –
support given by medical and nursing staff

Findings from Review

Five major influencing positive/negative factors emerged on RN MET call activation:

Factor 4 –
familiarity with and advocacy for patients

Findings from Review

Five major influencing positive/negative factors emerged on RN MET call activation:

Factor 5 - RN workload

Implications of Findings for clinical practice and education

Ongoing education on all aspects of the MET system is recommended for nursing, medical and MET staff

Implications for clinical practice and education

Ongoing multidisciplinary staff education on patient assessment

Implications for clinical practice and education

Increasing MET and ward nursing and medical staff awareness of behaviours / responses that influence RNs making MET calls

Implications for clinical practice and education

Recruitment and retention of skilled permanent nursing staff to increase familiarity with, and ability to, advocate for patients

Implications for clinical practice and education

***Junior doctors' and nurses' attendance at MET
calls to gain skills in patient management***

Implications for clinical practice and education

Undergraduate education through simulated MET activation to prepare for patient care

Further research into factors impacting on MET activation

- Critical Care RNs who are members of MET teams have a unique perspective on factors that influence ward nurses MET activation.
- A research study incorporating MET RN identification of impacting factors is currently underway.

Reference

Jones L, King L & Wilson C (2009) Factors that impact on nurses' effective use of the medical emergency team. *Journal of Clinical Nursing* 18: 3379-3390.