



## CLINICAL POLICY

### Rapid Response System (Upper Campus only)

**A. EFFECTIVE DATE :**

January 18, 2022

**B. PURPOSE :**

To outline process for Rapid Response Team (RRT) activation and response

**C. POLICY :**

UConn Health will provide to the Upper Campus areas appropriate on-site response for individuals with acute instability, at risk for instability or any staff concern for acute medical issues requiring immediate medical assistance through activation of the Rapid Response Team. While primarily for patients, an RRT may also be called for assistance with a visitor or staff medical emergency.

**D. SCOPE :**

This policy applies to all Registered Nurses and Advanced Practice Providers

**E. DEFINITIONS :**

"RRT" is the term used to identify a medical response team that responds to provide medical assistance for individuals (patient or other) with acute instability, at risk for instability or any staff concern for acute medical issues.

**F. MATERIAL(S) NEEDED :**

Code Cart, as available. (Pharmacy maintains a list of Adult Code Cart locations.) AED / Defibrillator as available. Other emergency equipment as indicated for emergency medical management of the patient.

**G. PROCEDURE :**

**1. Activate Emergency Response:**

- a) For activation of RRT Dial "7777"
- b) Public Safety Dispatcher and the Hospital Operator will answer all "7777" calls.
- c) If a unit has a "Staff Assist" button, this should be pressed to alert unit staff of the RRT. A call to 7777 must still be placed.

**2. Primary responders:**

- a) **UConn Health Upper Campus Patient Care Areas:** UConn Health Rapid Response Team will respond; UConn Health Paramedics will also respond, with the exception of RRTs called for inpatients (including observation or extended stay) to which they would respond if specifically requested by the Rapid Response Team.

- b) **UConn Health Upper Campus Non-Patient Care Areas:** Primary responders are UConn Health Paramedics. If paramedics are not available, the Rapid Response Team will assume primary response. The Rapid Response Team will also respond if specifically requested by staff.
- c) If the paramedics are not available to respond; Community Ambulance will provide backup response.

3. **UConn Health Upper Campus Areas:**

- a) Attending Physicians are ultimately responsible for the care of the patient. When they are present they may direct the medical interventions in collaboration with the Rapid Response Team and the assigned patient care team.
- b) ICU Advanced Practice Provider (APP) will act as Team Leader; and provide critical care expertise needed to initiate early intervention for the patient exhibiting symptoms of medical/surgical instability; and will collaborate with assigned patient care team. They are responsible for completing RRT documentation in the medical record; if not completed by the patient care team providers.
- c) The Senior Medical Resident (Medical Officer of the Day/MOD) will assume the role of Team Leader if the ICU APP is not available and will collaborate with assigned patient care team.
- d) The ICU covering Resident as available, may also act as Team Leader when ICU APP is not available and will collaborate with assigned patient care team.
- e) Respiratory Therapist(s) will assist in the establishment of an airway, ventilation, and arterial blood gas (ABG).
- f) Area Personnel / Nursing Staff: will activate the Rapid Response System and perform care within their level of training and scope of practice.
  - The nurse assigned to the patient will stay with the patient to provide pertinent data to the responding team.
  - Nursing is responsible for assuring that RRT documentation is completed.
- g) Nursing Administrative Manager/Designee will assure that necessary resources (equipment, supplies and personnel) are available, facilitate patient transfer as needed, procure or release extra responding personnel as appropriate.
- h) ICU or Critical Care RN will respond to assist in care, administration of medications, stabilization of patient and preparation for transport to the higher level of care.
- i) UConn Health Paramedics respond for all non-inpatients, visitors or staff; they provide care as the primary responder for these individuals. Documentation will be provided on the Paramedic Run form.
- j) Area Personnel will assist to their level of ability and training as directed and inform the Department Manager/Designee of the RRT activation.
- k) The following staff do not respond to RRT, but may be called for assistance if needed:
  - Anesthesiology
  - Pharmacist
  - Transport
  - UConn Health Police

H. **ATTACHMENTS :**

None

**I. REFERENCES :**

None

**J. SEARCH WORDS :**

RRT, Rapid Response Team, Rapid Response System

**K. ENFORCEMENT:**

Violations of this policy or associated procedures may result in appropriate disciplinary measures in accordance with University By-Laws, General Rules of Conduct for All University Employees, applicable collective bargaining agreements, the University of Connecticut Student Code, other applicable University Policies, or as outlined in any procedures document related to this policy.

**L. STAKEHOLDER APPROVALS :**

On File

**M. COMMITTEE APPROVALS :**

None

**N. FINAL APPROVAL :**

- |  |                                   |
|--|-----------------------------------|
| <p>1. <u>Bruce T. Liang, MD (Signed)</u><br/>Bruce T. Liang, MD<br/><b>Interim Chief Executive Officer &amp; EVP for Health Affairs<br/>Dean, School of Medicine</b></p>         | <p><u>02/8/2022</u><br/>Date</p>  |
| <p>2. <u>Anne Horbatuck (Signed)</u><br/>Anne D. Horbatuck, RN, BSN, MBA<br/><b>Clinical Policy Committee Co-Chair</b></p>   | <p><u>02/04/2022</u><br/>Date</p> |
| <p>3. <u>Scott Allen, MD (Signed)</u><br/>Scott Allen, MD<br/><b>Clinical Policy Committee Co-Chair</b></p>  | <p><u>02/04/2022</u><br/>Date</p> |
| <p>4. <u>Caryl Ryan (Signed)</u><br/>Caryl Ryan, MS, BSN, RN<br/><b>Interim Chief Operating Officer, JDH<br/>VP Quality and Patient Services &amp; Chief Nursing Officer</b></p> | <p><u>02/07/2022</u><br/>Date</p> |

**O. REVISION HISTORY :**

Date Issued: 10/88

Date Revised: 12/94, 12/97, 8/00, 2/07, 9/07, 9/08, 11/08, 1/09, 12/11, 9/12, 3/14, 7/19

Date Reviewed: 12/91, 10/03, 3/05, 4/12, 1/22