Rapid Response Team Composition Effects on Outcomes for Adult Hospitalized Patients: A Systematic Review

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Project Background
Rapid Response Teams (RRT)

- Recognition of Need
- Development of various team models
  - Name
  - Structure
  - Composition
  - Criteria for calling
- Recommendation by national organizations
  - Institute of Medicine
  - Institute for Healthcare Improvement
  - The Joint Commission

Major Outcome Variables

- Cardiac arrest outside the intensive care unit (ICU)
- Unplanned transfer to the ICU
- In-hospital mortality
Other Outcome Variables

- Staff satisfaction (many are qualitative studies)
- Activation criteria
- Mandatory versus voluntary
- Staff training
- Dose

Value of the Project to NP Practice

- Once published the review is available for use globally
- Impact on all key variables can be seen
- NPs can:
  - Incorporate the findings as indicated for their healthcare practices
  - Use findings to support current practices
  - Use designs of the studies to conduct a retrospective study of impact of RRTs here

Our Focused Clinical Question

Population – adult, hospitalized, medical-surgical, non-ICU, non-palliative care patients

Intervention – rapid response team

Comparison – no rapid response team intervention

Outcome – cardiac arrest outside the ICU, unplanned transfer to ICU, in-hospital mortality, length of hospital stay, staff satisfaction
The Question

In hospitalized non-intensive care unit (non-ICU) adult medical-surgical patients, what is the impact of rapid response team composition on cardiopulmonary arrest outside the ICU, unplanned transfers to ICU, in-hospital mortality, length of hospital stay and staff satisfaction?

Systematic Review Process

• Joanna Briggs Institute Protocol submission and acceptance
• Database searching using keywords
• Exclusion based on title and abstract
• Retrieved full text for review
• Data extraction from included studies
• Data analysis and synthesis
• Submission of SR for publication

Methods of Inquiry Table

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## Inclusion/Exclusion Criteria

### Inclusion
- Adult
- Hospitalized
- Non ICU
- RRT Team Composition stated

### Exclusion
- Pediatric
- ICU
- Palliative Care

## The Findings Suggest:
- Team composition did not affect the three major outcome variables nor secondary outcomes.
- Variables that have an impact are:
  - Team leader dedication
  - Mandatory team activation
  - Number of RRT activations
  - Team maturity
  - Making rounds
Recommendations

- Research directed towards:
  - Team maturation
  - Mandatory versus voluntary team activation
  - Team dedication
  - Making rounds
  - Staff satisfaction
- Cultural aspects should be considered as important variables in future studies.

References


See Systematic Review for full list of references.