

Pediatric Code Blues & Medical Emergency Responses: Are Ambulatory Staff Prepared?

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Introduction

Pediatric patients experience optimal health outcomes when emergency scenarios are met with timely and effective responses. Despite life support training, ambulatory clinical staff rarely utilize these skills, making it difficult to maintain expertise in emergency situations. Increasing knowledge of resuscitation guidelines enhance skill performance emphasize the need for effective educational approaches (1,3).

A learning needs assessment with over 40 outpatient clinics revealed a demand for increased education surrounding emergency responses. Research indicates that an increase in knowledge is crucial for enhancing skill performance in emergencies, emphasizing the need for effective educational approaches to bridge the training-practice gap.

Technology tools and engagement strategies such as group discussions, low-fidelity simulations, and educational games were utilized to promote communication, innovation, and efficiency (1,2). Ultimately, this proactive approach anticipates timely clinical interventions, and subsequently, improved patient outcomes, highlighting the crucial role of ongoing education.

Nursing Professional Development Practitioners developed and implemented an innovative solution aimed at fortifying the capabilities of ambulatory staff to ensure the best possible outcomes for pediatric patients in emergency situations.

Aim

This project aimed to enhance the knowledge and competence of ambulatory staff when responding to emergency scenarios.

Objectives

- 1 Improve understanding of roles and responsibilities during an emergency response in the ambulatory setting
- 2 Recognize clinical situations that would warrant Code Blue or Medical Emergency Team (MET) activation in the ambulatory setting.
- 3 Demonstrate enhanced awareness and confidence in use of the code cart and in the materials therein.

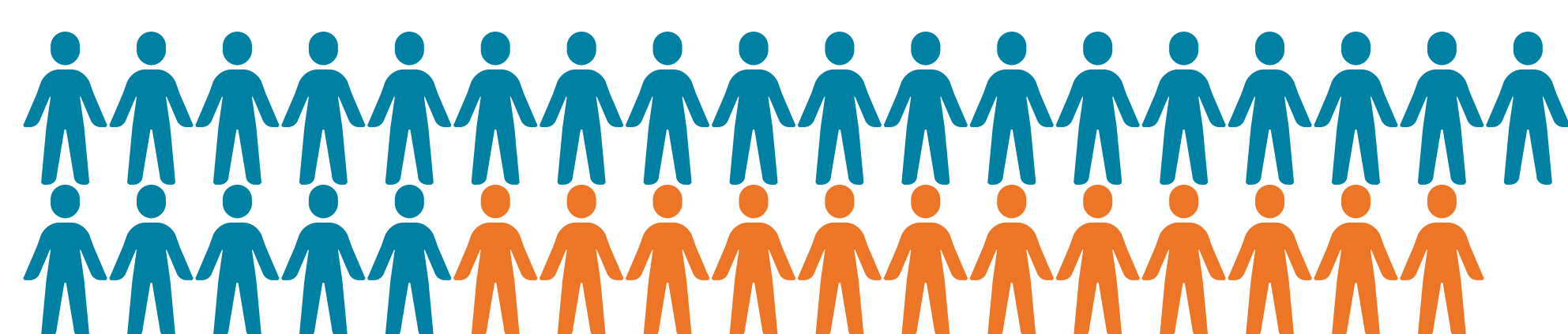
Methods

- Non-mandatory drop in sessions
- Flexible date & time class offerings
- Adaptive curriculum
- Didactics teaching session
- Self-directed hands-on learning
- Gamification

Teaching Materials

The teaching materials include a 'Review of Roles for RNs' slide detailing the responsibilities of the 1st RN on site (start CPR, delegate, stay with patient, begin assessment), the 2nd RN on site (standby assist, ensure code cart is in site, document), and the 1st RN leader on site (ensure patient and caregiver are supported, ensure documentation has begun, delegate other leaders, ensure patient privacy, ensure base off to code team, ensure code cart is restocked, ensure equipment is cleaned and returned). Other materials include a 'WHAT'S IN THE CODE CART?' guide with photos of drawers containing airways/masks/intubation kits, syringes/IV needles, and a monitor/supplies. An 'RN - CODE CART SCAVENGER HUNT' slide lists tasks like finding the backboard, oxygen device, dinamap, suction device, and stethoscope. A final slide asks 'What is the function of the Medical Emergency Team?' and lists five key functions: immediate resuscitation, escalation to Code Blue, triage and disposition, safe transport, and coordination with ED/EMS.

Findings

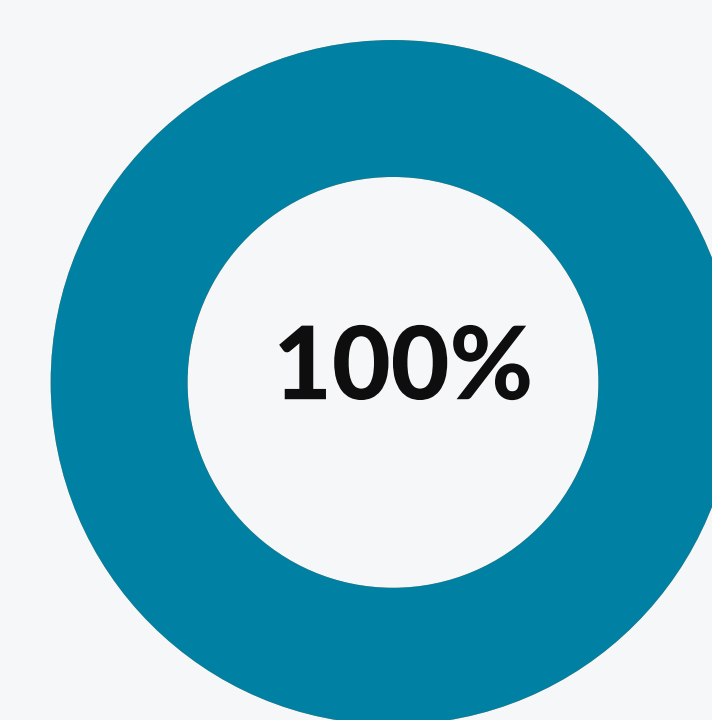


60% of main campus-based clinics had at least one staff member attend our learning session

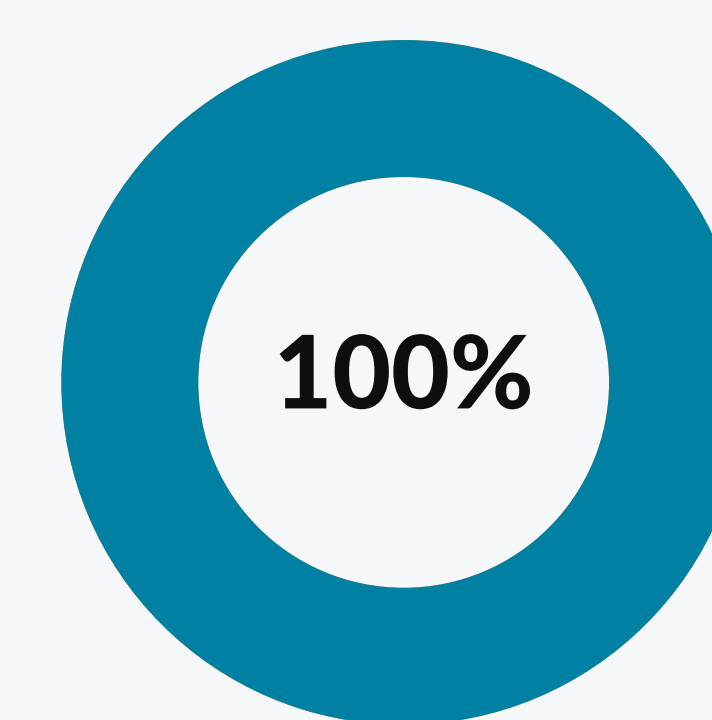
“Being able to go over the differences between MET and Code Blue was incredibly helpful. I appreciated the open conversations...I found it very helpful being able to familiarize myself with feeling comfortable of supplies on and within the code cart.”

-Staff member in attendance

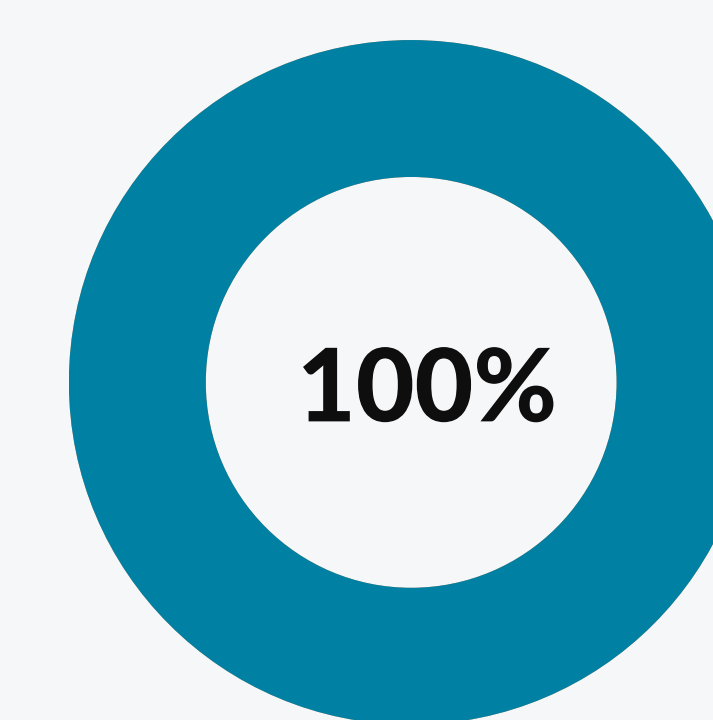
Post Survey Results



Of staff felt the learning session was applicable to their practice



Of staff felt it was a valuable learning experience.



Of staff felt better prepared to respond to ambulatory emergencies after the lesson

Conclusion

- ➔ Staff reported they feel more engaged in their learning when they take their education into their own hands vs mandatory classes
- ➔ Appealing to different learning styles allows for all learners to be engaged and produces more valuable learning experiences.
- ➔ Refresher education and reviewing current policies surrounding emergency response are essential for staff comfort and competence when responding to emergencies

Next Steps

- 1 3-Month post-survey: within the following months, participants will be surveyed to measure the impact of learnings on emergency response.
- 2 Rollout phase 2: Learning sessions will be expanded on to include high fidelity mock emergency scenario-based learning.
- 3 Satellite clinic expansion: In response to overwhelming positive feedback, education sessions will be expanded and tailored to emergency response in regional sites.

Want to reach us?



References

1. D'Cunha, R. J., Fernandes, S. F., & Sherif, L. (2021). Utility of Simulation as a Teaching Tool for Nursing Staff Involved in Code Blue Management. *Indian Journal of Critical Care Medicine: Peer-reviewed, Official publication of Indian Society of Critical Care Medicine*, 25(8), 878-880.
2. Kress, T. L., Conlin, T. L., & Jackson, J. (2019). Enhancing readiness and safety through emergency response training in hospital-based clinics. *Nursing*, 49(8), 66-69.
3. Mariani, B., Zazyczny, K., Decina, P., Waraksa, L., Snyder, P., Gallagher, E., & Hand, C. (2019). Simulation for Clinical Preparedness in Pediatric Emergencies A Pilot Study. *JNPD*, 35(1) 6-11.