



MODIFIED EARLY WARNING SCORE TOOL

Audit Category: Clinical Care

Audit Topic: Modified Early Warning Score (MEWS)

MEWS Objective: The MEWS calculated as part of vital signs assessment should be associated with appropriate escalation of treatment for acute deterioration in clinical condition,(Gao 2007) and form part of a monitoring plan for an individual patient (NICE, 2007).

The Key Performance Indicators that provide evidence that these objectives are being met are:

1. The MEWS is completed correctly and at the appropriate frequency.
2. All nursing and medical staff adhere to the MEWS escalation protocol.

Target Score

Part One Audit: The MEWS is completed correctly as per guideline.

Key:	Compliance ≥ 90%	Compliance ≤ 89%
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Part Two Audit: All nursing and medical staff adhere to the MEWS escalation protocol.

Key:	Compliance ≥ 90%	Compliance ≤ 89%
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Green indicates High Compliance

Red indicates Non Compliance



Organisation Name:

Ward/Department Name:

Auditor:

Date of Audit:

Number of Patients audited:

MODIFIED EARLY WARNING SCORE TOOL PART ONE:

Key Performance Indicator:

MEWS Score is completed correctly and at appropriate frequency.

Information Source: Patient MEWS Observation chart

Target Score: 90%

Inclusion Criteria: Ideally patients should be admitted for ≥ 24 hours.

AUDIT INSTRUCTIONS

- Audit MEWS charts of up to 10 patients.
- Review a 24 hour period.
- Questions 1-5 Enter Y or N, Y = Yes N = No
- Question 6 – You must enter the number of vital signs you are auditing.
- Question 7-19 – Enter the number of vital signs that meet the standard of the question asked.



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MODIFIED EARLY WARNING SCORE AUDIT TOOL PART ONE:

Q.	Patient Number	1	2	3	4	5	6	7	8	9	10
		ANSWER Y OR N FOR QUESTIONS 1-5, Y=YES N=NO									
1	Ward Name is recorded.										
2	Patient Name is recorded.										
3	HCRN is recorded.										
4	Vital Signs are assessed at least 12hrly in the past 24 hrs										
5	There is increased frequency of monitoring in response to the detection of abnormal physiology.										
		AUDIT VITAL SIGNS FOR THE PREVIOUS 24 HOURS AND ENTER A NUMBER FOR QUESTIONS 6-17									
6	Number of vital signs audited										
7	MEWS Score is Initialled. <i>(No. initialled in last 24 hrs)</i>										
8	MEWS Score is Dated. <i>(No. dated in last 24hrs)</i>										
9	MEWS Score is timed using the 24 hour clock. <i>(No. timed in last 24hrs)</i>										
10	Respiratory Rate is recorded. <i>(No. recorded in last 24hrs)</i>										
11	Pulse is recorded. <i>(No. recorded in last 24hrs)</i>										
12	Blood Pressure is recorded. <i>(No. recorded in last 24hrs)</i>										
13	Temperature is recorded. <i>(No. recorded in last 24hrs)</i>										
14	CNS Response is recorded. <i>(No. recorded in last 24hrs)</i>										
15	Oxygen Saturation is recorded. <i>(No. recorded in last 24hrs)</i>										
16	Score is totalled for each set of vital signs. <i>(No. recorded in last 24hrs)</i>										
17	Calculation for each MEWS Score is correct. <i>(No. recorded in last 24hrs)</i>										



MODIFIED EARLY WARNING SCORE AUDIT TOOL PART TWO:

Organisation Name:

Ward/Department Name:

Auditor:

Date of Audit:

Number of patients audits:

Key Performance Indicator:

All nursing and medical staff adhere to the MEWS escalation protocol.

Information Source: Patient Nursing Notes, Medical Notes, MEWS observation chart.

Target Score: 90%

Inclusion Criteria: Patients with a MEWS of 3 or higher.

AUDIT INSTRUCTIONS

1. Complete audit for patients that have triggered a MEWS of 4 or more OR 3 in any single parameter.
2. Use one tool per patient
3. **Review this patient at all stages on the MEWS escalation Scale**, i.e.
 - What was the response when this patient was at stage 2 (*MEWS 2-3 - Enter NA if this section is not applicable*)
 - What was the response when this patient was at stage 3 (*MEWS of 4 or more OR 3 in any single parameter*)
 - What was the response when this patient was at stage 4 (*MEWS 7 or more - Enter NA if this section is not applicable*)
4. Complete an Incident Form if Response to MEWS is NOT in accordance with the guideline
5. Mark Y for Yes, N for No, NA for Not Applicable
6. This audit should be completed by External Auditor unless specifically indicated.



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MODIFIED EARLY WARNING SCORE AUDIT TOOL PART TWO:

ANSWER Y, N or NA to the following questions (Y=Yes, N=No, NA=Not applicable)

Response Activation	Appropriate Action		Patient 1	Patient 2	Patient 3	Patient 4	Patient 5
Stage 2 MEWS 2-3 (Enter NA if not applicable)	2.1	RN informs CNM/Nurse in charge- <i>Check Nursing Notes</i>					
	2.2	RN informs SHO to review within 1 hour- <i>Check Nursing Notes</i>					
	2.3	Record time call sent to SHO- <i>Check Nursing Notes</i>					
	2.4	Record time SHO reviewed the patient- <i>Check Nursing Notes</i>					
	2.3	Nurse records observations at least every 30 minutes until reviewed- <i>Check MEWS</i>					
	2.4	SHO specifies frequency of observations- <i>Check Medical Notes</i>					
	2.5	SHO formulates management plan- <i>Check Medical Notes</i>					
Stage 3 MEWS of 4 or more <u>OR</u> 3 in any single parameter	3.1	RN informs CNM/Nurse in charge- <i>Check Nursing Notes</i>					
	3.2	RN informs Registrar of MEWS 4-6 & requests to review within 30 minutes- <i>Check Nursing Notes</i>					
	3.3	Record time call sent to Registrar- <i>Check Nursing Notes</i>					
	3.4	Record time Registrar reviewed the patient- <i>Check Nursing Notes</i>					
	3.5	RN records observations at least every 15 minutes until reviewed- <i>Check MEWS</i>					
	3.6	Registrar specifies frequency of observations- <i>Check Medical Notes</i>					
	3.7	Registrar formulates management plan- <i>Check Medical Notes</i>					



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	3.8	Patient transferred to higher level of care- Check Medical Notes – Mark NA if not required					
	3.9	Registrar stays with the patient- <i>Check Nursing Notes</i>					
	3.10	MET activated if available. Mark NA if not available- <i>Check Nursing Notes</i>					
	3.11	If response not carried out as above, CNM/Nurse in Charge contacts Registrar or Consultant- <i>Check Nursing Notes</i> . Mark NA if not applicable					
Stage 4	4.1	RN informs CNM/Nurse in charge– <i>Check Nursing Notes</i>					
MEWS 7 or more	4.2	RN requests immediate review by Registrar– <i>Check Nursing Notes</i>					
	4.3	Record time call sent to Registrar- <i>Check Nursing Notes</i>					
(Enter NA if not applicable)	4.4	Record time Registrar reviewed the patient- <i>Check Nursing Notes</i>					
	4.5	Nurse records observations at least every 15 minutes until reviewed- <i>Check MEWS</i>					
	4.6	Registrar specifies frequency of observations- <i>Check Medical Notes</i>					
	4.7	Registrar formulates management plan- <i>Check Medical Notes</i>					
	4.8	Patient is transferred to a higher level of care – <i>Check Medical Notes</i>					
	4.9	Registrar contacts Consultant & Anaesthetist within 10 minutes- <i>Check Medical Notes</i>					
	4.10	RN/Medical Team stay with the patient – <i>Check Nursing Notes</i>					
	4.11	MET activated if available. Mark NA if not available- <i>Check Nursing Notes</i>					

