Sepsis audit results in the implementation of a NEWS 2 scoring system in the hospice inpatient setting

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Background:

Sepsis is a critical condition, and patients in palliative care are particularly at risk[1].

Those receiving hospice care often have complex needs and may be nearing the end of their lives, which complicates the process of identifying and making decisions regarding their deterioration. In acute care settings, as per NICE recommendations, routine monitoring and the National Early Warning Score (NEWS2) are employed for managing sepsis[2].

However, this approach is not typically adopted in hospice care.

To address this, Wirral Hospice St John's (WHSJ) has put into place a sepsis policy that aligns with NICE guidelines and considers the clinical complexities involved in recognising and managing sepsis among inpatient hospice patients[3].

Audit aims:

1. To ensure that the identification and treatment of sepsis at WHSJ meet the standards set in the WHSJ local sepsis policy.
2. To enhance the care provided to patients who experience sepsis during their stay.

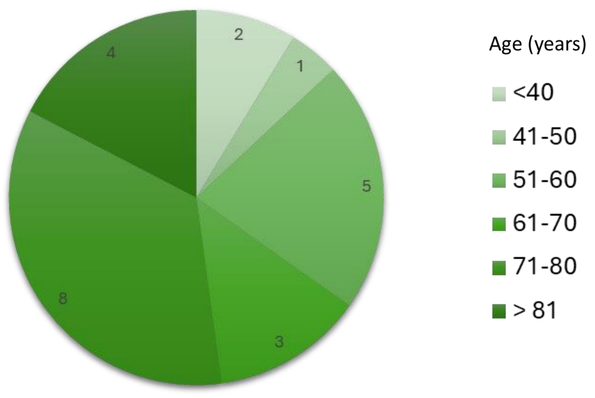
Methods:

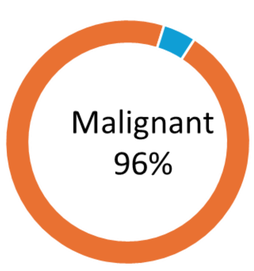
- A retrospective electronic audit of case notes was conducted for all patients who received intravenous (IV) antibiotics on the WHSJ inpatient unit between September 2023 and August 2024.
- Patients who fulfilled the sepsis criteria were identified, and their case notes were assessed according to standards in the WHSJ sepsis policy.

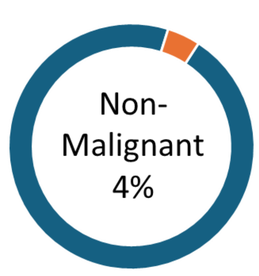
- 56 courses of IV antibiotics were prescribed
- 27/56 met the criteria for sepsis
- 4/27 had alternative explanations:
- Opioid toxicity (2), pulmonary embolism (1), flash pulmonary oedema (1)
- 23 episodes were analysed

Demographics:

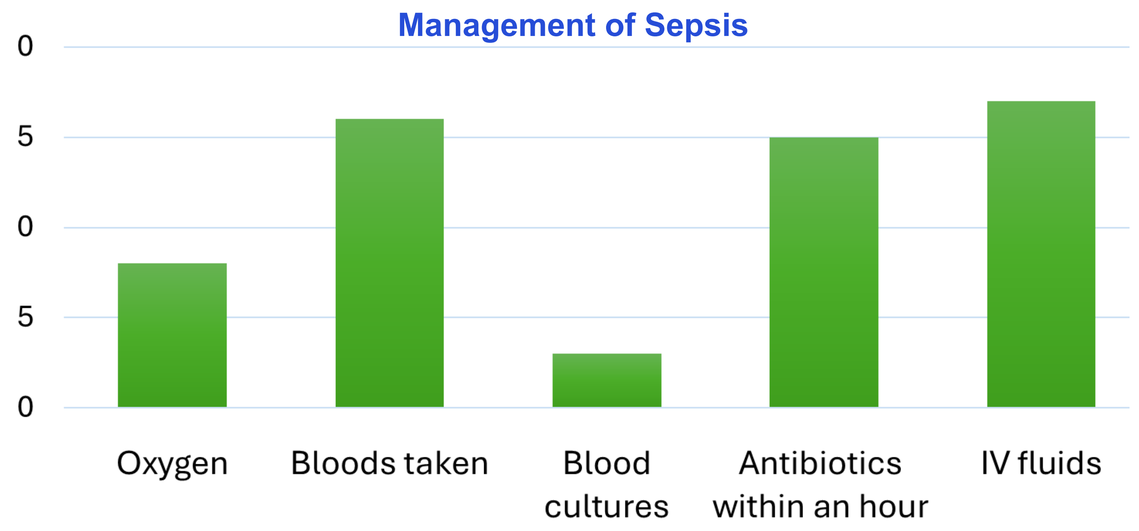
61% | 39%



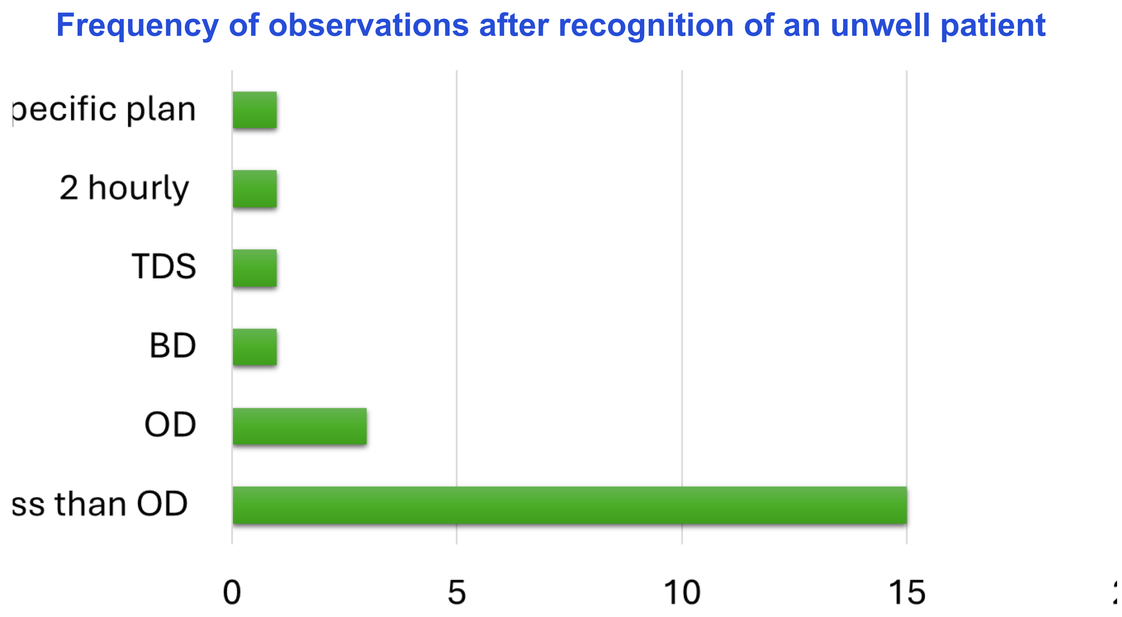




Results:



- 8/23 (35%) had a sepsis diagnosis documented in the notes
- 3/23 (13%) patients had blood cultures taken
- 15/23 (65%) of patients had antibiotics within an hour



- 22/23 (96%) of patients had an initial set of observations
- 21/23 (91%) of patients had no plan documented for observation frequency
- 15/22 (68%) of patients had observations taken less than once daily

Discussion and conclusion:

- A limitation is that patients who did not receive IV antibiotics were not included.
- Despite appropriate management with antibiotics, only 35% of patients had a diagnosis of sepsis documented in the notes.
- 35% of patients waited over an hour for antibiotics, which is an area for improvement.
- Observation frequency post-recognition of sepsis was variable, with most patients not having a plan documented, perhaps due to the lack of routine observations in the hospice setting.
- In response to this, WHSJ will be developing a sepsis protocol, involving the implementation of the NEWS 2 scoring system to improve the management of sepsis in the hospice setting.

References:
1. https://pubmed.ncbi.nlm.nih.gov/36304809/
2. https://www.nice.org.uk/guidance/ng51/chapter/Over-16s-not-pregnant-or-recently-pregnant-evaluating-risk-and-managing-suspected-sepsis
3. Wirral Hospice St John's Sepsis Policy, 2019

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