![NHS Humber Teaching NHS Foundation Trust]

STANDARD OPERATING PROCEDURE
DIGITAL NATIONAL EARLY WARNING SCORE
ON SYSTMONE (NEWS2)

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Name of Trust Strategy / Policy / Guidelines this SOP refers to:	Deteriorating Patient Policy / Protocol

CHANGE RECORD

Version	Date	Change details
1.0	*14 June 2022*	*New SOP – Approved PHMD Group (14 June 2022).*
1.1	*18 April 2024*	*Reviewed – Minimal changes to first page. Approved at Community Clinical Network Group (18 April 2024).*

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1   INTRODUCTION

The digital National Early Warning Score (NEWS2) chart was developed in parallel to support the transition from the paper NEWS2 charts to a fully digital system. The objective was to mirror the official NEWS2 chart enable users to make the switch seamlessly and minimise the risk to patients.

This SOP will be used across all Community service inpatient units within Humber Teaching NHS Foundation Trust. It includes both registered and unregistered staff that are permanent, temporary, bank and agency staff on commencement of working within the community services inpatient units.

2   PURPOSE & SCOPE

This SOP explains the process to follow when using the NEWS2 template on SystmOne to ensure continuity of observations and promote patient safety (See appendix 1). (NEWS 2 is commonly used for the assessment of unwell patients – A NEWs score of 5 or more is the key trigger threshold for urgent clinical review and action or a score of 3 in any one parameter as early intervention can reduce mortality in unwell individuals (NICE 2007) Royal College of Physicians 2017.

This procedure should be read in conjunction with- Deteriorating Patient Policy (including the Recognition and Escalation of Suspected Sepsis) (N-062) and protocol 527.The template captures clinical data on an electronic device in real-time at the point of care. It enables analysis and charting of the captured clinical data on the patients SystmOne notes. It improves the safety of identifying the deteriorating patient. It is designed to improve the daily clinical processes of observation-taking, early warning scoring and appropriate timely escalation, alongside improving timely documentation.

3   DUTIES AND RESPONSIBILITIES

Service Managers, Modern Matrons and appropriate clinical/ professional leads will ensure dissemination and implementation of the Local SOP within the sphere of their responsibility. They should also ensure staff are supported in attending relevant training and that time is dedicated to the provision and uptake of training and sign off competencies. (Competencies: Vital signs monitoring, NEWS2 and Sepsis)

 Matrons/Service managers//Ward Managers have responsibility for ensuring the quality of clinical interventions and record keeping by their staff, and monitoring compliance with this local SOP and procedure through the supervision process.

All relevant clinical staff working in the inpatient setting will familiarise themselves and follow the agreed SOP and associated guidance and competency documents. They will use approved documentation on SystmOne as seen on next page.
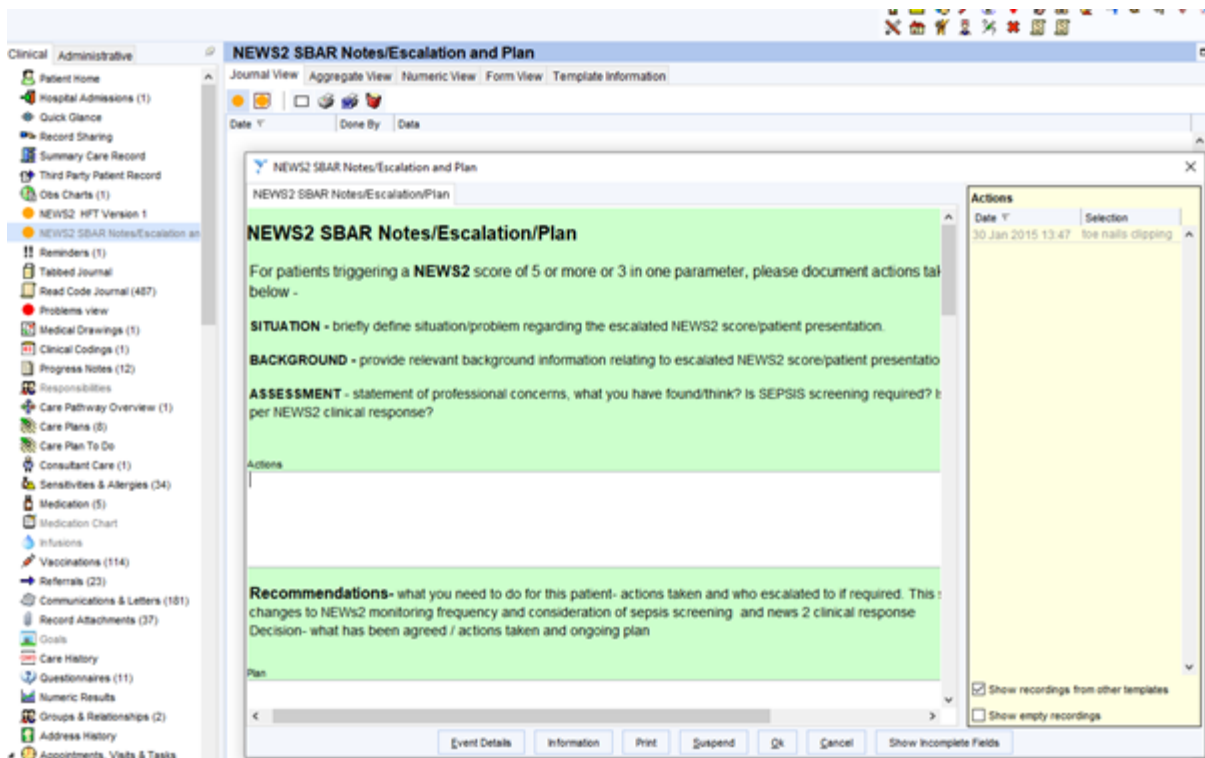
They will make their line managers aware of barriers to implementation and completion.

Registered Practitioners are responsible for:
- Determining the frequency of patient observations
- Accurate recording and documentation of patient observations on systmOne
- The registered practitioner in-charge of the clinical area must ensure that staff recording patient observations report NEWS2 scores to a senior member of staff
- Appropriate documentation to be completed when observations fall within the trigger area for a response due to physiological changes.
- Ensuring they have completed e-learning provided by the informatics systems team.-
- Ensuring they have passed clinical competencies for the deteriorating patient

Unregistered clinical staff are responsible for:-
- Responsible for accurate recording and documentation of patient observations, NEWS2 score and following NEWS2 graded response. They must also inform the registered practitioner of each individual patients NEWS2 score above 0.
- Ensure they have completed e-learning provided by the digital team
- Ensure they have passed clinical competencies for the deteriorating patient.

Medical staff are responsible for:
Responding to calls by practitioners to review a patient's clinical condition according to NEWS2 graded response and (rarely, i.e. end of life situations) authorising the discontinuation of NEWS2, making 'do not attempt cardiopulmonary resuscitation' (DNACPR) decisions (if appropriate) and initiating end of life care pathway (if appropriate).

4   PROCEDURE

Recording of Observations:
Each patient must have a set of standard observations taken regularly, as   dictate by their clinical condition. These consist of pulse rate, temperature, blood pressure, respiratory rate, conscious level (ACVPU score), oxygen saturation (SpO2).

When all parameters are entered into systmOne on the NEWS2 tool the NEWS2 score will be automatically calculated by the system using the individual scores for temperature, pulse rate, respiration rate, blood pressure, oxygen saturation, supplemental oxygen needs and conscious level (ACVPU score). The tool has a dedicated section (SpO2 Scale 2) for use in patients with hypercapnic respiratory failure (usually due to COPD) who have clinically recommended oxygen saturation of 88–92%.

The NEWS2 score assists in the identification of deteriorating patients by tracking physiological observations The importance of considering serious sepsis in patients with known or suspected infection, or at risk of infection, is emphasised.

5   MONITORING COMPLIANCE AND EFFECTIVENESS

Processes of audit and monitoring effectiveness of the policy will be performed by local audit of compliance within community hospitals

Reproduced from: Royal College of Physicians. National Early Warning Score (NEWS) 2: Standardising the assessment of acute-illness severity in the NHS. Updated report of a working party. London: RCP, 2017

Appendix A - SystmOne Community Hospital Inpatients – NEWS2 Observations

New patient on NEWS2

1. Select Obs Chart from Clinical Tree at the bed side of the patient.
2. Click Scheduled Obs Icon and complete scheduled obs, due date and time and frequency and click OK
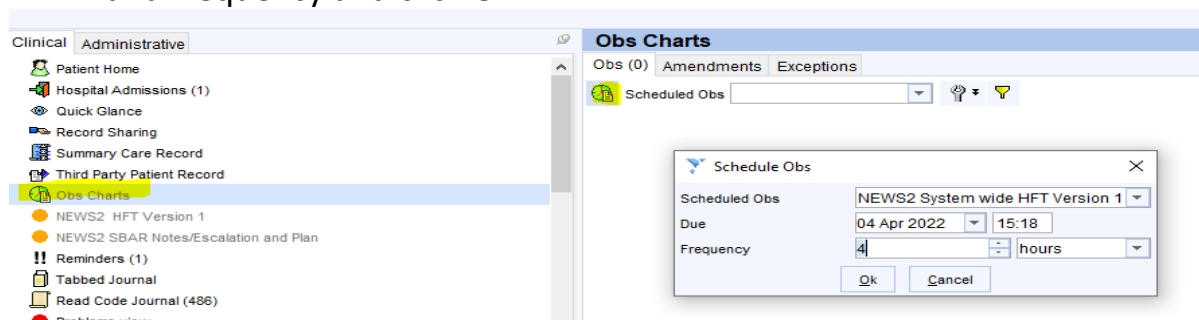
The scheduled OBS will now show with the due date and time and a blank chart is generated ready for use. There is a toolbar to the right hand side as per the screen prints below – click on **Spanner icon** to see the options available or Click Record OBSERVATIONS icon to record observations now
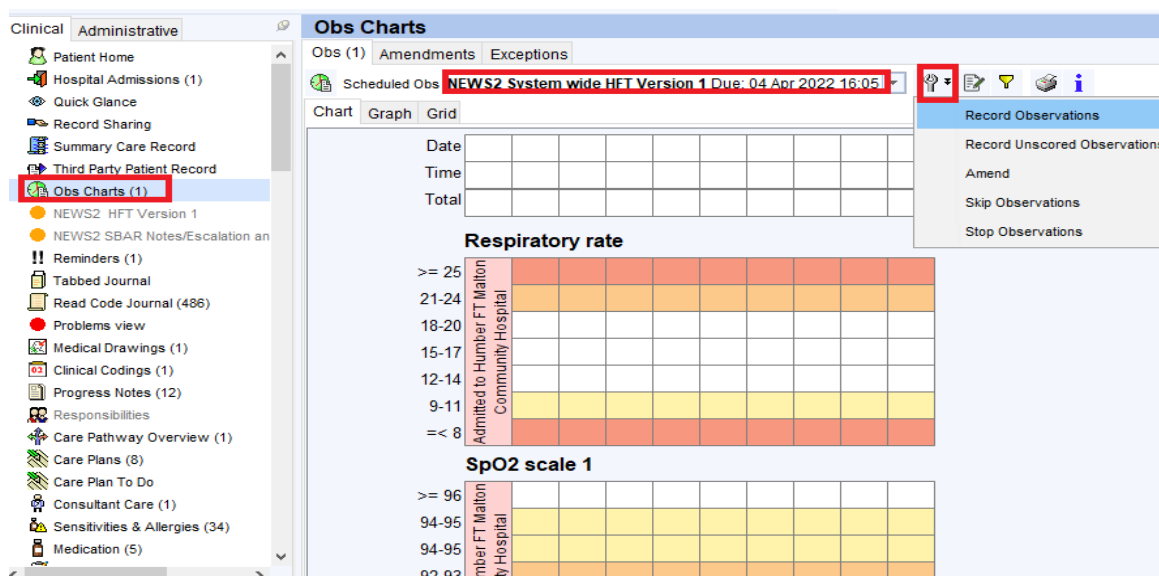
The NEWS2 template is opened – Please note: you will not see the final score until you have finished recording the template and receive warnings or the score when complete.

NEWS2 HFT Version 1

A + B

NATIONAL EARLY WARNING SCORE (NEWS2)

A + B

Respiratory rate [____] breath/min

Physiological parameter	3	2	1	Score 0	1	2	3
Respiration rate (per minute)	≤8		9–11	12–20		21–24	≥25

SpO2 on Air [____] %

Physiological parameter	3	2	1	Score 0	1	2	3
SpO₂ Scale 1(%)	≤91	92–93	94–95	≥96			

Physiological parameter	3	2	1	Score 0	1	2	3
Air or oxygen?		Oxygen		Air			

Use Scale 2 if target SpO2 range is 88-92%, e.g. in hypercapnic respiratory failure.

ONLY use Scale 2 under the direction of a qualified clinician

— NEWS2 SpO2 Scale view cannot be shown when previewing a template —

*NEWS2 SpO2 Scale [____▼]

SpO2 on Oxygen [____] %

Physiological parameter	3	2	1	Score 0	1	2	3
SpO₂ Scale 2(%)	≤83	84–85	86–87	88–92 ≥93 on air	93–94 on oxygen	95–96 on oxygen	≥97 on oxygen

*Delivered oxygen flow rate [____] L/min

Oxygen device
- ○ Nasal cannula
- ○ Non-invasive ventilation
- ○ HOME CPAP
- ○ Venturi Mask
- ○ Humidified O2
- ○ Reservoir Mask
- ○ Tracheostomy mask

Inspired oxygen concentration [____] %

NEWS2 HFT Version 1

A + B

BP & PULSE

Pulse Rate

Pulse rate [____] bpm

Physiological parameter	3	2	1	Score 0	1	2	3
Pulse (per minute)	≤40		41–50	51–90	91–110	111–130	≥131

BP [____] mmHg

Physiological parameter	3	2	1	Score 0	1	2	3
Systolic blood pressure (mmHg)	≤90	91–100	101–110	111–219			≥220

Sitting BP

Physiological parameter	3	2	1	Score 0	1	2	3
Systolic blood pressure (mmHg)	≤90	91–100	101–110	111–219			≥220

Sitting BP [____] mmHg

Lying BP

Lying BP [____] mmHg

Standing BP

Standing BP [____] mmHg

CONSCIOUSNESS

Conscious level [____▼]

Physiological parameter	3	2	1	Score 0	1	2	3
Consciousness				Alert			CVPU

Respiratory rate

Date ▽	breath/...

No previous values

☑ Show recordings from other templates
☐ Show empty recordings

[Information] [Print] [Suspend] [Ok] [Cancel] [Show Incomplete Fields]

The Outcome is displayed – you can amend frequency and reason for amending now or you can amend later when you have discussed with registered nurse or medical staff. Escalation guidance can be viewed here as can the history.

The NEWS 2 score and date and time of observation is now visible above the chart which has populated with the NEWS2 Score

The NEWS2 will be displayed in the tabbed journal

You must SAVE the record – once the record is saved the NEWS2 score will be visible on the Ward View

For patients triggering a NEWS2 score of 5 or more or 3 in one parameter, you must document your actions and plan and escalation etc. using the NEWS2 and SBAR Notes/Escalation/Plan Template so that all relevant information is recorded.