 <p><b>BAY OF PLENTY DISTRICT HEALTH BOARD HAUORA A TOI</b></p> <p><b>CARE DELIVERY PROTOCOL</b></p>	<p><b>CARE DELIVERY – PATIENT CALL SYSTEM – PRINCIPLES AND STANDARDS</b></p>	<p><b>Policy 7.104.1 Protocol 7</b></p>
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## PRINCIPLES


The provision of a three (3) tier paging system, linked to the Nurse / Midwife Call / Assist Call / Emergency Call service will ensure that patients can alert relevant staff to the need for assistance while maintaining the principles of a quiet ward.

This applies to both new and refurbished facilities.

## STANDARDS TO BE MET

1. Where a paging system is used to communicate patient calls to staff, it is compulsory for all ward/department staff to wear a pager. The exception is those staff allocated to provide one on one patient care.
2. Each ward bed will be equipped with a bed head handset complete with call point.
3. The Nurse / Midwife Call display station (main annunciator LCD touch screen panel) will be located at the main staff base in area. Standard screens and set-ups can be applied to different shift allocations, annunciator options, escalation of calls.
4. Each department/pod shall operate a separate nurse / midwife call system with the console located at each main staff station. Larger wards can be divided into zones.
5. The principles of a quiet ward will be maintained
6. Every patient will have immediate access to a nurse / midwife call via the handset at each bed and via call points in other ward areas.
7. Each activated patient call will be promptly responded to.
8. **Nurse / Midwife Call / Assist Call / Emergency Call Activation And Alerts**  
Operation of the patient nurse / midwife call will activate:
  - 8.1 Re-assurance light (on wall and handset / pendant – Nurse / Midwife call only)
  - 8.2 Over door indicator light (outside door)
  - 8.3 Visual call indication on at all annunciator panels until cancelled at associated medical service panel call point.
  - 8.4 Staff pager notification
  - 8.5 Call cancel is only via call point at the Medical Service Panel above each bed.
  - 8.6 Duress and emergency calls will sound an audible alarm. Normal Emergency process must be followed.
9. **Responsibilities**  
The Clinical Nurse Manager (CNM) / Clinical Midwifery Manager (CMM) / Shift Leader or person delegated by the CNM / CMM is responsible for:
  - 9.1 The allocation of relevant beds and call types to pagers
  - 9.2 The allocation of pagers to relevant members of nursing team
  - 9.3 Checking the audible alarm status at the beginning of each shift.
  - 9.4 If there is a problem with any pager in using a manual page from main console, return the faulty pager to Telephony who will supply a loan pager and divert the original pager number to the loan pager. Telephony will notify when repaired pager is again available.

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<p>Protocol Steward: Hospital Co-ordinator</p>	<p>Authorised by: Director of Nursing</p>	

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### 10. Escalation Of Nurse / Midwife Calls

If a registered nurse (RN) / registered midwife (RM) call is not cancelled at the call point Medical Service Panel, the call will be escalated as follows:

Tier	Description	Escalation Times
1	<ul style="list-style-type: none"> <li>Assigned Nursing / Midwifery team and Healthcare Assistant (HCA)</li> </ul>	<ul style="list-style-type: none"> <li>Receives initial call</li> </ul>
2	<ul style="list-style-type: none"> <li>All zone Nurses / Midwives</li> </ul>	<ul style="list-style-type: none"> <li>5 minutes</li> </ul>
3	<ul style="list-style-type: none"> <li>All zone Nursing / Midwifery staff and CNM / CMM or delegate</li> </ul>	<ul style="list-style-type: none"> <li>10 minutes</li> </ul>


### REFERENCES

- Patient Safety and work environment paper Project LEO June 2004
- Kuruzovich et al., Wireless Communication Role in Patient Response Time: A Study of Vocera Integration with a Nurse Call System, Robert H. Smith School of Business - University of Maryland, 16 January 2006.

### ASSOCIATED DOCUMENTS

- Bay of Plenty District Health Board policy 7.104.1 protocol 1 Care Delivery – Team Nursing Guidelines
- Bay of Plenty District Health Board policy 7.104.1 protocol 2 Care Delivery – Nursing and Midwifery Shift Handover
- Bay of Plenty District Health Board policy 7.104.1 protocol 3 Care Delivery - Observing Patients
- Bay of Plenty District Health Board policy 7.104.1 protocol 4 Care Delivery – Nursing and Midwifery Plan of Care
- Bay of Plenty District Health Board policy 7.104.1 protocol 5 Care Delivery - Nursing and Midwifery Assessment Standards
- Bay of Plenty District Health Board policy 7.104.1 protocol 8 Care Delivery – Physiological Observation Standards for Inpatients (Adult)
- Bay of Plenty District Health Board policy 7.104.5 Safe Staffing
- Bay of Plenty District Health Board policy 6.3.5 protocol 1 Falls – Risk Reduction and Management of Inpatient Falls
- Bay of Plenty District Health Board policy 6.5.1 Discharge Planning - Inpatient
- Bay of Plenty District Health Board policy 2.5.2 Health Records Management
- Bay of Plenty District Health Board Integrated Operations Centre (IOC) protocol IOC.B1.1 Business Continuity - Variance Response Management (VRM) - Ward / Unit
- Bay of Plenty District Health Board Integrated Operations Centre (IOC) protocol IOC.S1.1 SOP - Acute Patient Journey
- Bay of Plenty District Health Board Integrated Operations Centre (IOC) protocol IOC.S1.2 SOP - Acute Patient Journey - ED, Inpatient Teams, Bed Management and Wards
- Bay of Plenty District Health Board Integrated Operations Centre (IOC) protocol IOC.S1.3 SOP - Acute Patient Journey - Diagnostics, Allied Health and Hospital Support Services
- Bay of Plenty District Health Board Integrated Operations Centre (IOC) protocol IOC.S1.4 SOP - Acute Patient Journey - Daily Operations Management

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- Bay of Plenty District Health Board Daily Safety Watch Form (8103) – *viewable only. Order through Design & Print Centre*
- Bay of Plenty District Health Board Nursing / Midwifery Assessment Form
- Bay of Plenty District Health Board Nursing / Midwifery Plan of Care Form
- Bay of Plenty District Health Board Reportable Event Input form
- Bay of Plenty District Health Board policy 6.3.7 Cardiopulmonary Resuscitation (CPR)

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