

BC PEWS ED QI Audit tool

Case: _____ Auditor: _____ Date: _____ Quarter: _____

INSTRUCTIONS FOR USE

Randomly select 20 patient charts (or all charts if less than 20 patients seen) for the audit period. Audit only one PEWS flowsheet per chart.

Number of sets of Vital Signs assessments done: Please record the number of sets of VS assessments completed (even if some components missing)

PEW score documentation: Please note how many times PEW Score was documented when VS assessed (should be less than or equal to # of VS)

PEW Score accuracy: Please **re-calculate** all PEW Scores documented and report the number of times PEW Score was **accurate**

Situational Awareness: Please record 'Y' if a situational awareness factor was documented, 'N' if it was negative & 'N/C' if field was not complete

Escalation: Please indicate whether there was a PEW score of 4 or more on the vital sign record and whether there was documentation of escalation on the vital sign record (or documentation of why care was not escalated)

Background information	Form	1	2	3	4	5	6	7	8	9	10
	Admission Date (day/mo/yr)										
	CTAS Score										
	PEWS Vital Sign record used										
	Pediatric ENAR used										
	Pediatric treatment form used (Short form)										
PEWS	Number of times VS assessed (regardless of where documented)										
	Number of times PEW Score done										
	Number of accurate PEW Scores										
	PEWS completed at Triage	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N
Situational Awareness factors (Y/N/NC)	Family/Caregiver Concern										
	Unusual Therapy										
	Watcher Patient										
	Communication Breakdown										
	PEWS 2+										
Escalation & documentation	Was there a PEW Score of 4 or more on this vital sign record?	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N
	If YES, was there escalation activation documentation?	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N

BC PEWS ED QI Audit tool

Case: _____ Auditor: _____ Date: _____ Quarter: _____

INSTRUCTIONS FOR USE

		11	12	13	14	15	16	17	18	19	20
Background information	Flowsheet										
	Admission Date (day/mo/yr)										
	CTAS Score										
	PEWS Vital Sign record used										
	Pediatric ENAR used										
	Pediatric treatment form used (Short form)										
PEWS	Number of times VS assessed (regardless of where documented)										
	Number of times PEW Score done										
	Number of accurate PEW Scores										
	PEWS completed at Triage	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N
Situational Awareness factors (Y/N/NC)	Family/Caregiver Concern										
	Unusual Therapy										
	Watcher Patient										
	Communication Breakdown										
	PEWS 2+										
Escalation & documentation	Was there a PEW Score of 4 or more on this vital sign record?	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N
	If YES, was there escalation activation documentation?	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N

Comments: