Rapid response team nurses' beliefs and attitudes to the rapid response system: a multicentre survey

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PURPOSE OF THE STUDY: Rapid response teams (RRTs) have been implemented as an in-hospital cardiac arrest prevention strategy. We investigated RRT nurses' attitudes to their work and the concept of the rapid response system.

MATERIALS AND METHODS: We conducted a multicentre survey including all Finnish tertiary hospitals' RRT nurses. We used a 5-point Likert-type agreement scale in our anonymous questionnaire.

RESULTS: The response rate was 46% (range 34-93% between the hospitals). The respondents' had median three years' experience on RRT duties. Over 90% of the respondents felt that RRT both prevents cardiac arrests and improves patient safety. Seventy-eight percent considered that their critical care skills had improved through the RRT duties; this response was more common among the nurses with five or more RRT activations per month (94% vs. 71%, $p=0.002$). Similarly, nurses with five or more RRT activations per month considered their work meaningful (94% vs. 76%, $p=0.017$) and wanted to continue as RRT nurses (91% vs. 74%, $p=0.022$) more often as compared with those nurses with four or less RRT activations per month. The respondents considered that ward nurses are able to detect patient deterioration (75%), but half (49%) answered that ward doctors are not capable to treat deteriorating patients. Two thirds (67%) felt that their workload was greater as compared with their non-RRT associated colleagues.

Respondents' characteristics	
Age (years)	41 (35, 47)
Sex (female)	76%
Working experience as a nurse (years)	15 (9, 20)
Working experience as an ICU nurse (years)	12 (7, 17)
Working experience as a RRT nurse (years)	3 (0.75, 5)
RRT shifts per month (count)	3 (1, 5)
RRT calls per month (count)	2 (2, 5)

CONCLUSIONS: RRT nurses feel their work important with improved critical care skills; these experiences are highlighted among the RRT nurses with more frequent RRT participation. The increased workload issues should be addressed.