2016 FTR Top Ten Checklist				
Process Change	In Place	Not Done	Will Adopt	Notes (Responsible and By When?)
Develop a simple system for activating the Rapid Response Team (RRT) or Medical Emergency Team (MET) that is easily accessible for all staff, patients and families.				
To identify at-risk patients, use objective assessment criteria based on physiologic changes in patient status, e.g. the Modified Early Warning System (MEWS).				
Establish an RRT or MET which includes clinical personnel with the skills to be able to (a) provide initial diagnoses; (b) undertake initial therapeutic interventions, (c) make transfer decisions, and (d) consult and collaborate with other care providers as appropriatel.				
Develop and implement a process to inform staff, patients, and families of simple and accessible ways to activate the RRT or MET.				
Utilize electronic medical record features to flag changes in vital signs that may signal impending deterioration of a patient's condition.				
Use standardized tools to document RRT or MET assessments and treatment recommendations.				
Establish and implement standardized language to describe changes in patient conditions.				
Use a standardized method of communicating changes in a patient's condition to the RRT or MET, e.g. SBAR ("Situation, Background, Assessment, Recommendation").				
Establish and ensure that the RRT or MET has all needed equipment and supplies readily available.				
Establish proactive rounding by the RRT or MET on all patients discharged from ICU within the last 24 hours to assess condition.				





