



Sepsis in-person training resources

VEMS Sepsis Screening Tool: Scenario: General Medical

This sepsis scenario pack includes tools to assist staff to become more familiar with the sepsis pathway and to consolidate staff's learning and awareness around sepsis.

The pack uses low-fidelity Visually Enhanced Mental Simulation (VEMS) which is a form of basic simulation. VEMS is a combination of mental simulation and think out loud with external representation of a patient and the treatments applied by the participants.

Unlike high-fidelity simulations with advanced equipment, low-fidelity VEMS focuses on communication and teamwork, allowing teams to practice scenarios and address learning outcomes in a low-pressure, engaging environment with minimal technical requirements.

VEMS allows participants to practice skills and decision-making in a safe and fun environment. Participants are expected to actively be involved in the scenario.

The VEMS can be run by the nurse educator or other designated nurse, it can be run anytime that suits the ward, at handover or as an in-service, so read on and give it a go!

Learning Outcomes:

- Familiarisation and utilisation with the Raise the Flag sepsis pathways.
- Demonstrate the basic initial treatment for a patient identified as having sepsis.
- Demonstrate effective communication skills to report sepsis and escalate care.

In your VEMS pack you will find the patient, feel free to add to your patient as you wish, adjuncts for the sepsis scenario, an OBs form, adult sepsis pathway and a case scenario.

Setting up the VEMS:

Step One:

Set up:



- ➤ X1 patient to be laid out on floor or table as below.
- > Adjuncts to be placed around the patient.
- > Nurse educator or other designated nurse to have pre-read the scenario.
- ➤ Adult sepsis pathway tool









Adjuncts:









Step Two:

Introduction for the group:

The objective of this interactive short session is to familiarise yourself with the sepsis pathway. It is a VEMS based simulation. VEMS is a combination of mental simulation and think out loud with external representation of a patient and the treatments applied by you and the group. VEMS allows you to practice skills and decision-making in a safe and fun environment.

Step Three:

Allocate roles as below

Facilitator	Nurse (Group)	Patient
Facilitator to read out the yellow	Work as a group or ask for a volunteer to be the nurse. The nurse's role is to place adjuncts onto the patient and ask questions to the patient. However, the group can be recording obs and reading the sepsis screening tool to feedback to the nurse.	To be the voice of the Patient. Respond how you feel the patient might be feeling.
Ready to start:		
First: Ask the group first "Has anyone used the sepsis pathway? And how did you find it?		

This is to facilitate discussion around past	
experience when using the pathway.	
Dood and load the consistence with heless	
Read out loud the sepsis scenario below	
Sepsis Scenario: Gen medical	
Case Presentation:	
62 year old famala	
62-year-old femaleMāori	
• Maori	
Situation:	
 Pt come via ED; 4-day Hx of tiredness, weak and feeling off. Pt not wanting to come to hospital, but daughter insisted. Pt reduce appetite last two days. Seen by district nurse in home for a non-healing leg wound, but this was over a long weekend. 	
Background:	
Type 2 DM	
• HTN	
• OSA	
Hx of cellulitis in lower leg	
21 2011411112 11 129	

Assessment in ED:

- Pt had a tender right lower abdo
- At 1000hrs Vitals: Temp 36.2 pt cool to touch, RR 20, SaO2 96% on room air, BP 115/60, HR 85 bpm
- Bandage on right lower leg. Reports of a lower leg non-healing wound.

Recommendation:

- Admit gen med
- A/w further investigation from team

The coordinator has allocated you this admission and the patient has just arrived onto the ward from ED: What would you do now?

@1200hrs Obs RR 21, sat 96% on RA, HR 87, BP 110/60, temp 36, pt shivering and feels cold.

- What actions can we take at this point?
- What is the patient's EWS? 2
- When do you do the next set of obs? (within two hours)
- Invite discussions around patient care and what it might look like.

 @1400hrs RR 22 sat 94% RA, HR 92, BP 99/60, temp 36, EWS 5 What is the Adult sepsis pathway indicating you to do? Contact DR? Contact PAR team? What adjuncts would you use Invite discussions around patient care and what it might look like. 	
 @ 1500hrs RR 23 sat 94% on 1L O2, HR 100, BP 95/58, temp 35.5, EWS 9 What care adjuncts can you utilise from the sepsis pathway? 	

Take home message: Think sepsis pathway.

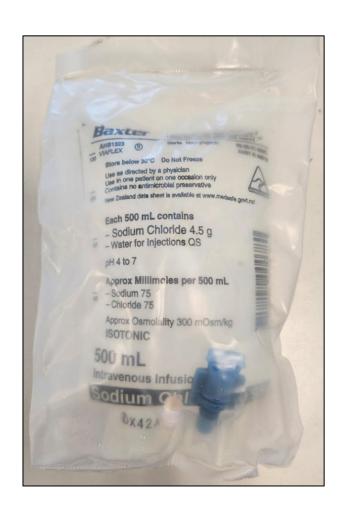
Note:

- Low temp with sepsis has a higher mortality rate
- It is an all-clinician tool, so please use it.
- Calculate your EWS correctly
 Take note of the Māori and/or Pacific ethnicity box on the sepsis pathway form.

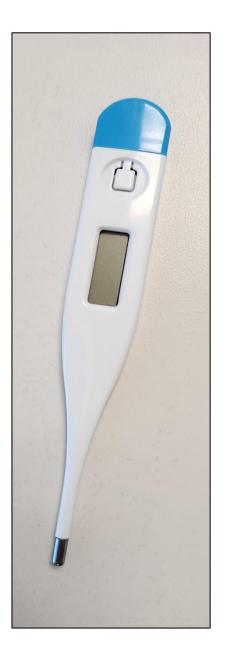
Observations

Time	1200	1400	1500
RR	21	22	23
Oxygen (L/min)	Room air	Room air	1L
O2 Sats	96%	94%	94%
HR	87	92	100
ВР	110/60	99/60	95/58
Temp	36	36	35.5
LOC	alert	alert	alert

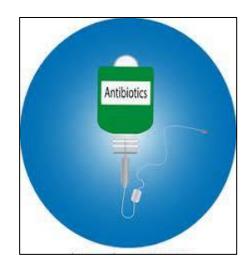
Gen med adjuncts







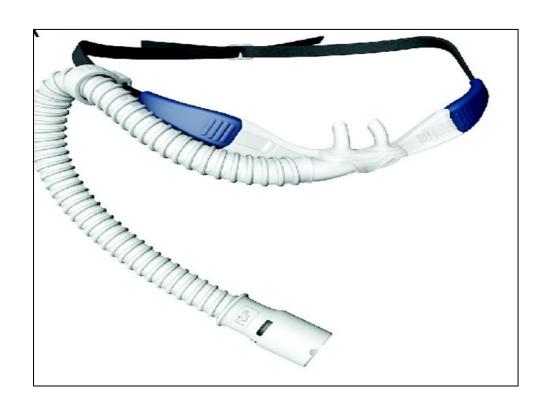


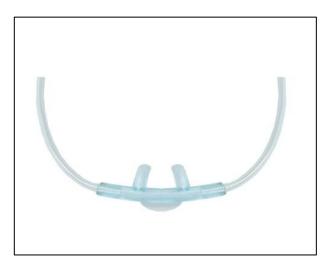


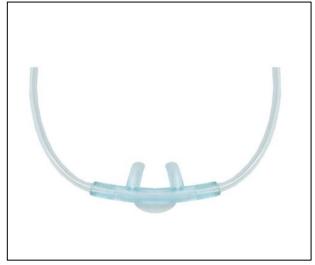






















Pathology

Faces VEMS

