

Safer Care for Kids:

Refined ViCTOR chart Implementation guide



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Executive Summary

Background

- A 2023 review found delayed recognition of deterioration was the leading cause of preventable harm in hospitalised children in Victoria.
- Victorian Children's Tool for Observation and Response (ViCTOR) charts, introduced in 2014, help track paediatric vital signs and identify deterioration early.
- In 2024, the Minister for Health endorsed mandatory use of age-appropriate ViCTOR charts wherever paediatric vital signs are recorded.

Refinement

- A new "vital sign" has been added: "Are you worried your child is getting worse?".
- Research shows that caregiver concern is more strongly associated with critical illness than abnormal vital signs alone.

Health service expectations

All Victorian health services are expected to:

- Adopt the ViCTOR chart in all areas where paediatric vital signs are recorded.
- Transition to the refined ViCTOR chart, incorporating the caregiver concern question as a standard part of vital sign documentation.

Implementation support

SCV has piloted the refined chart in eight diverse Victorian health services. Statewide rollout is now underway, supported by:

- A comprehensive implementation guide
- Frequently asked questions
- Supporting resources for staff education and system integration.
- Please email us (victor@safercare.vic.gov.au) for any additional support requirements.

Clinical application example

- With each set of vital signs (after triage), ask the bedside parent/carer:
 "Are you worried your child is getting worse?"
- If "yes" and concern is clinical → document "Yes" and escalate care.
- If concern is non-clinical → address separately, document "No".
- If carer is unavailable → document "U".

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Victorian Children's Tool for	r	1-4			Actual age:) L	Surname:						Given name:						
Observation and Response		year	S		Weigh	ıt:							UR:											
	Date																						1	
	Time																						1	
Staff initial <i>(with ea</i>	ch set of obs)																						1	
Family/ Carer Concern Are you worried your child is getting worse?	Yes																						1	
Please record reason for concern in the Events/Comments section. Record as "U" if a family member or carer is unavailable.	No																						1	
02 Saturation (%) (write value)	≥94			Т														Π			Т	Т	≥94	
Modifications Purple	90-93																						90-93	
Orange Duration	≤89																						≤89	
(maximum 24 hrs) Date	O ₂ delivery L/min or %																					П	O ₂ deliver	
Time	Device																						Device	
Dr Signature	Probe change																						Probe change	
Respiratory Rate (breaths/min)	Write ≥76																						Write ≥76	
	72																						72	
Modifications	72 68 64 60 56 52 48																						72 68 64	
Purple	60 56																						60 56 52	
Orange	52 48																						52 48	
Duration (maximum 24 hrs)	44 40				+																		44	
Date	36			-																	_	=	36 32	
Time	36 32 28 24 20																				=	=	28	
Dr	24																						24 20	
Signature	16 12																						16 12	
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Image 1: Refined ViCTOR chart.

Considerations *prior* to implementation of the refined ViCTOR charts

Order refined ViCTOR charts which now include the family/carer concern question

- These are available from <u>Allanby Press</u> stock numbers for ordering remain the same.
- Avoid stockpiling; adequate supply of charts are available.

ViCTOR chart accessibility across all entry points

- Health services need to identify all 'entry points' where paediatric patients may present (ED, ward, outpatient, theatre).
- Ensure correct age-based paper ViCTOR charts are included in the admission paperwork and they should be clearly labelled and accessible.
- Administration staff can support by applying patient labels to the correct ViCTOR chart on arrival and preparing admission packs.

Engage a multidisciplinary team of champions

- Nominate clinicians to oversee implementation.
- Engage champions including medical, nursing, consumer and clerical groups.
- Support education and model best practices.

Leadership support

- Engage executives and clinical leaders.
- Include leaders in implementation team.
- Encourage leaders to reinforce chart use and model escalation response.

Review and strengthen escalation pathways

- Align with national standard for deteriorating patient response.
- Review paediatric escalation pathways.
- Specify documentation frequency and response expectations.
- Refer to the National Consensus Statement (3rd Edition, Nov 2021) for further detailed guidance.

Promote the refined ViCTOR charts and educate staff

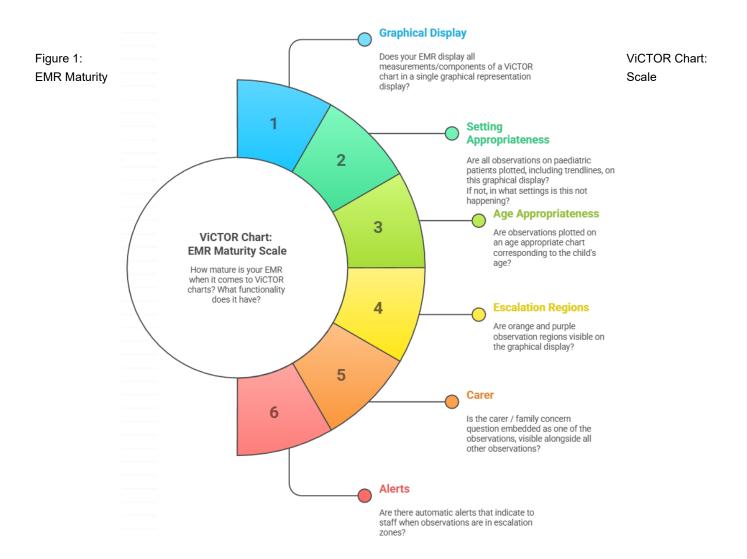
- Educate all relevant staff on chart use and concern family/carer concern component.
- Consider a widespread promotional campaign.
- Use varied education methods: huddles, emails, sessions, posters, etc.
- Include multi-disciplinary training and share success stories
- Please email us (victor@safercare.vic.gov.au) for any additional support requirements.

Implementation Day

- All Victorian health services should be working towards transitioning to the refined ViCTOR chart in all clinical areas where paediatric patients have vital signs recorded.
- Choose rollout timing to minimise workload impact.
- Ensure staffing support and identify any patients who may require immediate modification of vital sign parameters due to specific circumstances and plan accordingly.

Consider compatibility of how ViCTOR charts interact with your organisational electronic medical record (EMR)

 Six key factors to consider when assessing your EMR's capability or maturity in relation to ViCTOR charts are listed below.



Suggested actions based on ViCTOR chart: EMR Maturity Scale

Capability Achieved	Suggested Action
None of 1–4	Use paper charts; request EMR updates for all factors
Only 5–6	Use paper charts; prioritise EMR updates for 1–4
1–4 only	Continue EMR use; request updates for 5–6
1–4 + 6	Continue EMR use; request update for 5
All 1–6	Continue using EMR-based ViCTOR chart

Considerations *after* implementation of the refined ViCTOR charts

Celebrate success

- Share 'wins' with the team and wider organisation.
- Build off success in champion areas (use stories of their success to overcome barriers in areas with teams more resistant to change).

Auditing

- Health services must audit the use of age-appropriate ViCTOR charts to meet Standard 8: Recognising and Responding to Acute Deterioration.
- Audits should confirm correct chart usage, family/carer engagement, and follow a structured process.
- Findings should be shared and monitored to drive continuous quality improvement.
- Audits should align with existing Standard 8 formats and frequencies.
- Use Measurement, Analysis, Reporting System (MARS) or another approved tool for conducting audits.
- Governance and reporting follow Standard 8 structures, with leadership teams ready to present results and compliance at quarterly Safer Care Victoria meetings.

Proposed Audit Tool

- Two questions should be added to current Standard 8-audit processes where paediatric patients have observations recorded:
 - 1. Is the correct age-based ViCTOR chart being used? (Yes/No)
 - 2. Is there a documented response (Yes/No/Unable to ask) on the ViCTOR chart for family/carer concern with at least one of the last two vital sign sets? (Yes/No)

Tailored implementation considerations

Theatre/Recovery

- o There is no need to ask the concern question during procedures.
- Parents should be informed of expected post-operative recovery to reduce unnecessary worry.
- o Ask the question with the final set of vital signs before transfer or discharge.
- Suggested script: "We'll ask if you have any concerns before your child leaves, because
 you know them best and we value your expertise."

Birth suite/Maternity/Special Care Nursery

- o The process applies to all paediatric patients, including newborns.
- o There is no need to ask immediately after birth; begin once routine monitoring starts.
- Only concerns about clinical deterioration should be documented on the ViCTOR chart.
- o Rates of documented concern in newborns are very low (approximately 1 in 1000).

Emergency Department

- o Asking the question helps identify children needing prioritised clinical review.
- o In one service, approximately 1 in 25 parents said "yes," and approximately 7% of those children were admitted to PICU.
- o This question is a useful tool in a busy, high-turnover environment.

Ongoing support for implementation

- The Safer Care for Kids team will be providing additional support to the sector.
- If you need any further clarification on implementation of the refined ViCTOR, please contact us (victor@safercare.vic.gov.au).