

PRACTICUM SUMMARY REPORT

Project Title: Documentation of the Clinical Decisions Bundle on Consultant Ward Rounds in AMU

University/Organization Name: University of Dundee, School of Medicine

Health System Sponsor Name: Dr A. Chaudhuri, Professor P. Davey, Vicki Tully

Aim of project (1-2 sentences)

95% compliance with documentation of the clinical decision bundle by 4 weeks. (Clinical Decision Bundle: VTE prophylaxis prescribed, PVC required, antibiotics reviewed, patient for CPR, CPR documented).

Planned changes tested (2-3 sentences)

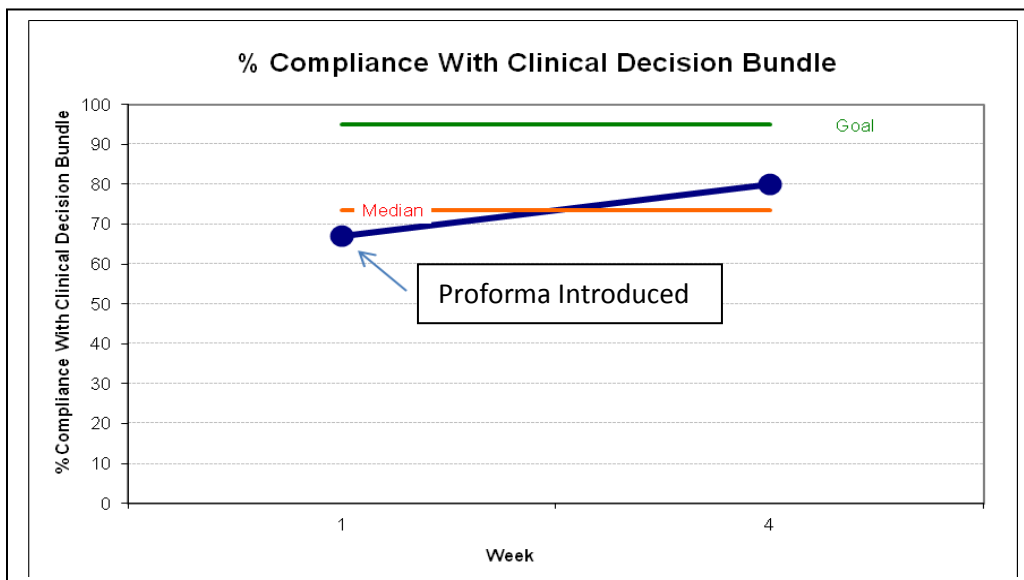
We introduced and continually developed a standardized nursing document. Initially, we tested the document with one nurse, one patient and one doctor. Based on feedback, we made various changes over the 4 weeks: We added a "not applicable" column in the clinical decision bundle, space for other management issues, and we developed a sticker sample of the proforma. To gain confidence in the project, we used multiple nurses for the one nurse, one patient, one doctor sample. We then expanded to 1 nurse, 1 doctor and 5 patients. Our final change was to include different doctors.

Predictions (2-3 sentences)

We expected an improvement in the percentage of clinical decisions being documented in patients' notes. Secondary to this, we expected to improve communication between nurses and doctors about the clinical plan for patients.

Results

Present your results with a graph(s).



Summary of results (3-4 sentences):

At the end of the 4 week period, there was 80% compliance with documentation of the clinical decision bundle in the AMU.

Learning (4-5 sentences)

Comparison of questions, predictions, and analysis of data:

There was an overall improvement in the documentation of the clinical decision bundle when compared with baseline data. For the patients that were included in testing of the proforma, there was 100% documentation of the clinical decision bundle. We assessed the impact of the proforma on communication between nurses and doctors on consultant ward rounds, by gathering feedback from nursing staff following testing.

Impact on systems (3-4 sentences)

Discuss the project's significance on the local system and any findings that may be generalizable to other systems:

Thus far, the proforma is still in the developing stages and has yet to be introduced to the entire AMU. Because of this, it is difficult to assess the impact that this would have on the local system.

Conclusions (3-5 sentences)

Summarize the outcome of the project. Is this project sustainable? What are the requirements for sustainability?

We improved the compliance with documentation of the clinical decision bundle from 67% to 80%, but not to our target of 95%. Due to a mixed response from staff, we believe it is not sustainable in its current format. To change this, we would hold a departmental meeting to encourage discussion on how to improve documentation of the clinical decision bundle on AMU.

Reflections/Discussions (5-7 sentences)

Discuss the factors that promoted the success of the project and that were barriers to success. What did you learn from doing this project? What are your reflections on the role of the team?

When the proforma was used, there was 100% documentation of the clinical decision bundle for the patient involved. Factors that promoted this success were enthusiastic staff and having a standardized nursing document, which lead to increased nursing presence. Barriers included the reluctance of senior nursing staff to engage with the project and nursing priorities restricting presence on ward round. When carrying out health improvement projects in the future, it is crucial to ensure all members of the MDT are "on board". We have identified the importance of working as a team, identifying individuals' strengths to achieve the common goal of patient safety.

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Authorization - Do the learners, faculty sponsor, and health system sponsor authorize this project for publication at www.ihl.org? Yes No