

Project Title

Recognise and Escalate Patient's Deterioration to the Appropriate Doctor at All Time

Project Lead and Members

Project lead: Lau Meng Er

Project members: Qin Nan

Organisation(s) Involved

Ng Teng Fong General Hospital

Aims

To train all Registered Nurses (RN) from the inpatient wards to recognise patients' deterioration using a systematic A-G assessment tool and escalate to the appropriate doctor using the SBAR communication tool

Background

See poster appended/ below

Methods

See poster appended/ below

Results

See poster appended/ below

Lessons Learnt

Participants feel more confident in patient assessment using the A-G Patient Assessment Tool and escalating their concerns to doctors using a structured SBAR communication tool. A training video on patient assessment using the A-G assessment tool in our Learning Management System makes it accessible for nurses' reference and revision

Conclusion

See poster appended/ below

Project Category

Care & Process Redesign

Keywords

Ng Teng Fong General Hospital, Service Design, Quality Improvement, Improvement Tools, Ishikawa, Serious Reportable Events, Patients' Clinical Deterioration

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RECOGNISE AND ESCALATE PATIENT'S DETERIORATION TO THE APPROPRIATE DOCTOR AT ALL TIME

MEMBERS: LAU MENG ER & QIN NAN
NURSING TRAINING & DEVELOPMENT

- SAFETY
- PRODUCTIVITY
- PATIENT EXPERIENCE
- QUALITY
- VALUE

Define Problem/Set Aim

In acute clinical settings, lack of situational monitoring, standardized patients' assessment and escalation protocol process compliance has resulted in nurses failing to recognize their patients' impending clinical deterioration. The 'cost' incurred by this skills gap resulted in patient safety and quality of immediate healthcare services being compromised. These 'costs' have also resulted in Serious Reportable Events (SRE) that lead to permanent disability or death of a patient.

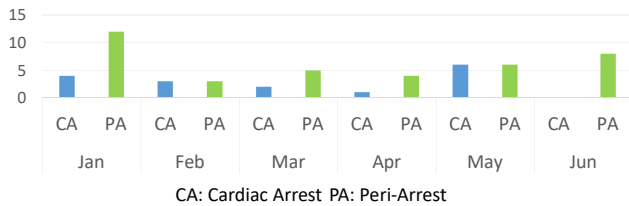
Aim

To train all Registered Nurses (RN) from the inpatient wards to recognize patients' deterioration using a systematic A-G assessment tool and escalate to the appropriate doctor using the SBAR communication tool.

Establish Measures

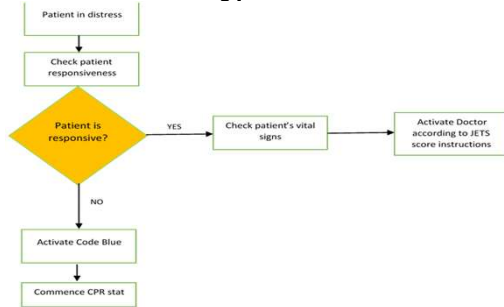
What is your current performance?

Number of CODE BLUE activation for Cardiac Arrest & Peri-Arrest cases by Inpatient Wards from Jan-June 2018

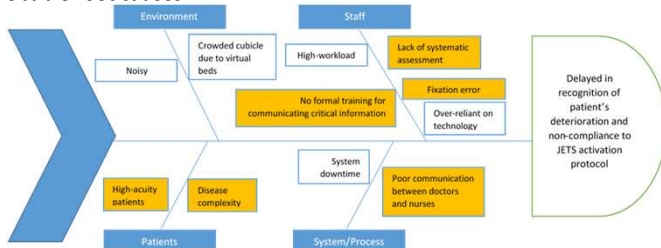


Analyse Problem

Current Process for deteriorating patient



Probable root causes



Select Changes

What are the probable solutions?

	Root Cause	Potential Solutions
Staff	Lack of systematic patient assessment	Have a systematic patient assessment tool
	Fixation error	
	No formal training on communicating critical information	Formal training programme
Patient	Disease complexity	Formal training programme to identify life-threatening symptoms and initiate proper initial intervention before the arrival of doctor
	High-acuity patients in the general wards	
System/Process	Poor communication between doctors and nurses	Introduce a standardized toolkit for communication among all healthcare professionals

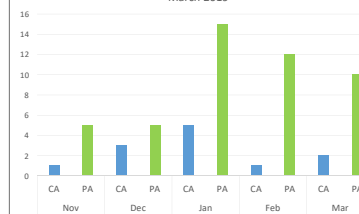
Test & Implement Changes

- The 1-day course is implemented to all Registered Nurses of all job grades (SNM, NC, ANC, SSN and SN) from the inpatient ward setting. This course consists of performing systematic simulated assessment using the A to G Patient Assessment tool and to effectively communicate using verbal communication tools: SBAR and CUS.
- The course curriculum is delivered to RNs through e-learning mode, classroom discussion and clinical simulations with two assessment modalities: theory and practical assessment. This course has successfully trained 640 RNs (97%) out of total number of 660 RNs from the inpatient ward setting from the period of 25 July to 2 November 2018.

Feel more confident with the A-G assessment tool, I am more confident in assessing patient.
Like the skills practice, able to assess patient systematically and practice how to speak with Dr when escalating a deteriorating patients.
I like the theory session a lot, it is interactive and trainer shared incidents which happened at the clinical setting which make me reflect on my own patient care. I feel more confident with the A-G pocket guide.

Some verbatim feedbacks from participants

Number of CODE BLUE activation for Cardiac Arrest & Peri-Arrest cases by Inpatient Wards from Nov 2018 - March 2019



The conclusion of the "study" is there is an increase in the Peri-arrest activation by the inpatient ward' nurses post-intervention. Nurses are able to recognize patients' deterioration and activate Code Blue at the right time before patient turns into cardiac arrest.

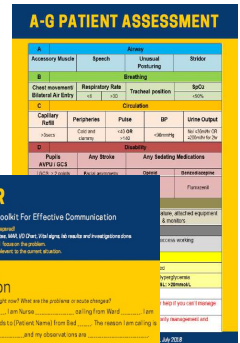
Spread Change/ Learning Points

What are the key learnings?

- Participants feel more confident in patient assessment using the A-G Patient Assessment tool and escalating their concern to doctors using a structured communication tool (SBAR).
- To develop a training video on patient assessment using A-G assessment tool and making it accessible on eLearn Learning Management System for ease of reference and revision for RNs.

What are the strategies to spread change after implementation?

There are plans to implement to other clinical settings: Specialist Outpatient Clinics, Radiology, Kidney Unit, Operating Theatre, Emergency Department, Intensive Care Unit/ High Dependency Unit and Endoscopy for FY2019. This course is currently being incorporated as a topic of Nursing Foundation Programme for all new RN hires.



Pocket Guide