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‘Every Patient, Every Day’

Service improvement initiative

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Yorkshire Vascular Forum

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Introduction

- The Trust is assessed on a number of objectives and interventions:
 - Patient experience
 - Patient safety
 - Trust measures and quality indicators
- Some of these include:
 - Documentation
 - GMC standards
 - Antibiotics
 - Antibiotic stewardship
 - VTE
 - Coding
 - Income and Mortality Rates
 - Communication
 - Inpatient RTM
- Currently there are many separate initiatives to address the trusts 'Must Do's'
- We aimed to consolidate this to one intervention delivered in one place
- We created a prompt card to be followed on the morning ward round for 'Every Patient, Every Day'



Prompt card for implementation

EVERY PATIENT, EVERY DAY

Documentation	Does the entry have patient details, legible date, time, name, GMC no, and contact details with a signature?
Antibiotics prescription	Is the patient on Antibiotics?
	If yes, is there a documented indication and review date, have they been reviewed?
VTE prescription	Has the VTE prescription been appropriately completed/updated?
	Is the VTE being appropriately given/omitted?
Coding sheet	Has the co-morbidity coding sheet been completed/updated?
Communication	Has the patient been asked if they have any questions and/or understand the plan?



Introduction and Methods

- This 'prompt' was piloted on the Vascular Ward with significant improvements in all areas
- There is no document to complete or fill out, just go through the prompts at each question
- This was rolled out across General and Vascular Surgery, Urology, and Orthopaedics
- Pre-implementation data collection by 'covert' shadowing ward rounds
- The results were presented to the ward MDT with education around the tool which was then implemented
- Post-implementation data collection by 'covert' shadowing ward rounds
- Statistical analysis by University Senior Lecturer in Biomedical Statistics



Parameter	Pre-implementation (%) (n=95)	Post-implementation (%) (n=97)
Documentation		
Patient Name	60.7	95.9
Hospital number	61.3	95.9
Place	3.2	61.9
Person leading ward round	75.4	99.0
Date	82.5	100.0
Time	80.4	100.0
Plan	82.5	100.0
GMC number	0.0	74.2
Signed	75.4	99.0
Contact number	51.7	96.9



Parameter	Pre-implementation (%) (n=95)	Post-implementation (%) (n=97)
Antibiotic treatment		
On Antibiotics	37	41.2
Indication documented	77	97.5
Length of treatment documented	63	97.5
Requirement or de-escalation reviewed	83	100.0
Coding		
Coding sheet in the notes	78	55.7
Coding sheet completed	54	74.1
Communication		
Patient asked if they had any questions	24	86.6



Parameter	Pre-implementation (%) (n=95)	Post-implementation (%) (n=97)
Venous Thromboembolism Prophylaxis		
Admission assessment performed	81	91.8
Post 24 hour review completed	29	81.4
Prophylaxis given appropriately	97	92.8



General and Vascular

Parameter	OR/RR	95% CI
Documentation	1.53	1.38 – 1.69
Antibiotics	1.44	1.06 – 1.94
Coding	NS	NS
Communication	18.60	8.1 – 41.09
VTE	1.25	1.05 – 1.50



Conclusion

- Electronic Patient Records
 - Documentation
 - Antibiotics
 - VTE
 - Issues with coding and communication
- We are not meeting the needs of the patients in some safety and experience measures
- This simple, quick, cheap intervention is designed to address that for 'Every Patient, Every Day'
 - Increases compliance with a number of quality indicators
 - Could increase income
 - Improve patient experience and safety

