



IMPROVING COLORECTAL WARD ROUNDS

BACKGROUND: In 2016, the ASPH Colorectal Surgical team felt that the experience that many patients have of surgical, daily ward rounds was poor. They felt that the rounds were not focussed on ensuring patients were effectively communicated with about their care plans; that there was variation in the ward round practice between Consultants; and that patients could become 'lost' in the paperwork, leading to increased risk of errors.

Discussions with the wider team also described that the current ward rounds did not necessarily met the needs of the MDT or the educational needs of the junior medical colorectal team members

The team set out to undertake a quality improvement project with a vision to improve patient experience and increase collaborative multi-disciplinary working and communication, by making changes to the Colorectal ward rounds

The team established a methodology based on engaging with patients and staff in an open and honest way about their experiences and their ideas.

AIM: To increase both patient and staff satisfaction by reducing variation, and thus increasing patient safety, in colorectal ward rounds by September 2016 .

MEASURES:

i) Patient and Staff Experience: The team conducted structured interviews with patients and staff to identify areas for improvement, followed by questionnaires to establish a baseline from which they would hope to improve. The overall experience of patients was measured using these questionnaires, which was repeated to show the impact of the changes made;

ii) Colorectal Patient Length of Stay in Days

THE CHANGES:

The team following a structured model for improvement, to try small tests of change in their ward round practice. These included introduction of a pre-round in addition to implementing a ward round progress sheet. These helped to standardise the round, improve documentation, kept the team focussed on patient communication and safety as well as addressing the education of junior doctors.

THE TEAM: Mr Philip Bearn, Consultant Colorectal Surgeon; Dr Nabiha Essaji, FY1 Surgery; Dr Erika Han, FY1 Surgery; Ria Wright, Quality Improvement Coach

The form is titled 'Surgical Ward Round Progress Sheet V0.5' and is from Ashford and St. Peter's Hospitals NHS Foundation Trust. It includes sections for:

- W/R Consultant/SPP/SHO/FY1, DATE, TIME
- Patient ID Sticker
- Team Members Introduced (checkboxes for Nurse Present, Admission Date, Operation Date)
- Primary Diagnosis
- Assessment (with a hexagon diagram) and Pain/Fluid Balance
- Review of Results (Bloods, Imaging, Other) and Observations Checked (Temp, HR, BP, RR, O2)
- Safety Checklist (VTE, Drug Chart, Lines, Drains, Wound, Catheter, Stoma)
- Today's Plan (Bloods, Investigations, Ceiling of Care, Oral Intake Status, Antibiotics)
- Plan Explained to Patient/Relative and Patient Understanding and Questions
- EDD, F/UP, Name, Bleep

Colorectal ward round progress sheet prompts the clinician to address and document specific key patient safety issues

OUTCOMES: The average quality of the patient experience during the ward round improved from 60% to over 90%

The number of patients who agreed or strongly agreed with the following statements also significantly increased:

- 'Doctors on the ward round listen to what I have to say'
- 'Doctors on the ward round explain things to me in a way that I understand'
- 'I feel that I am given enough opportunity to express my concerns and ask questions'

The number of patients who agreed or strongly agreed that their privacy was respected during a ward round increased to 100%

