Audit of post-take ward round documentation on the Emergency General Surgical Unit Dr R Elkalbash SHO, Mr R Lunevicius, Dr T Malik

Background

Clear documentation of the post-take ward round (PTWR) management plan is essential on the Emergency General Surgery Unit (EGSU). There is anecdotal evidence among staff on the EGSU at Aintree University Hospital that the documentation of nil by mouth (NBM) status, estimated date of discharge and do not resuscitate (DNACPR) status are particularly poorly documented.

Methodology

- -Sample size: -180 cases.
- -Inclusion criteria: All patients who were admitted to Aintree hospital under SAU and seen by doctor (registrar or consultant).
- -Audit period :-17th September 2020 and 15th October 2020
- -Exclusion criteria: Urology and Major Trauma patients were not included in the study sample.

Standards

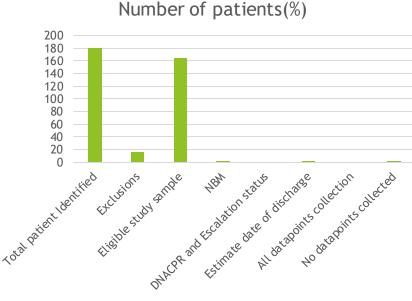
Taken from the SAFE Ward Round Tool (Royal College of Surgeons of Edinburgh)2:-

- -Documentation of NBM status: 100%
- -Documentation of DNACPR and escalation status: 100%
- -Documentation of estimated date of discharge status: 100%

Aim & Objective

- -To ensure that the team looking after the surgical patient has clear and enough information on each patient to ensure safety.
- -Assess the quality of the PTWR.
- Understand what is meant by productive PTWR.
- -Develop PTWR sheets to be more effective and efficient.

Results



■ Number of patients(%)

Recommendation

Prior to the Royal IT system going live at Aintree (due to occur in late April 2021), the audit team will ensure that the new surgical clerking proforma contains mandatory fields detailing NBM status, DNACPR/escalation status and estimated date of discharge. In addition, we will ensure that a mandatory field is included for a decision regarding whether or not antibiotics should be given. The audit loop will then be closed by a second round of 28 day data collection and analysis to investigate whether departmental practice has improved following this intervention.