The Introduction of a Ward Round Proforma to a Geriatric Medical Ward

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Ward round entries were surveyed as to whether they included 17 features

Entries from three wards were surveyed prior to the introduction of the

Entries from one ward were surveyed following the introduction of the

that were deemed to be key to patient care by a team of geriatric

Background

- Ward rounds form the basis of secondary care.
- Ward round entries often sparse without important information.
- Absence of documentation causes ambiguity.
- Doctors should leave a record of having checked important aspects of care, even if unremarkable.
- Lower ward round quality is linked with a higher incidence of preventable outcomes. 1

proforma.

proforma.

Consultants, Registrars and Juniors.

- To assess the completeness of ward round entries
- To introduce a tool to improve this

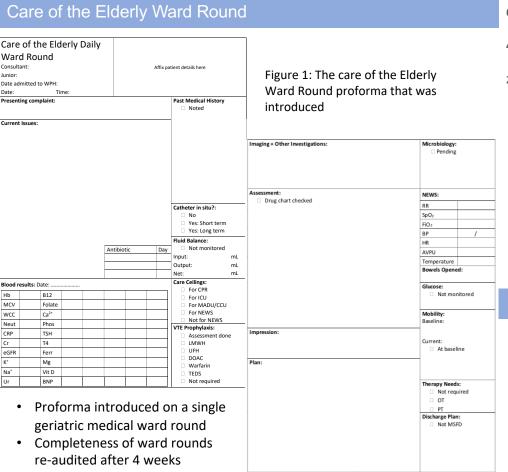
Method

Aims

Examined 139 ward round entries prior to introduction of proforma and 98 following the introduction of the proforma.

| Consideration | Inclusion Criteria | Consideration | Inclusion Criteria |
|--|--|--------------------|---|
| Leader Date and time PC Issues Signature | Obvious | D/C plan | ✓ Not MFFD ✓ D/C destination ✓ OT/PalCare/SS-led D/C ✓ A/w D2A/POC etc. X MFFD alone |
| Recent bloods | Results and date 'W' "No bloods since x" "No new bloods | PT/OT | Any indication that patient does or does not require OT or PT |
| Care ceilings | ✓ Clear indication of ceiling of care X DNAR—i.e. not saying what patient <i>is</i> for | Catheter situation | ✓ No catheter ✓ Catheter present and whether it is short/long-term |
| Bowels opened | ✓ Date last opened ✓ "BNO since admission" X "BNO" X "BO [regularly]" | NEWS | ▼ NEWS score and all obs for which a patient is scoring ➤ NEWS score alone ➤ "Obs stable" |

Table 1: Criteria for an entry to have been deemed to have assessed a particular consideration



Results

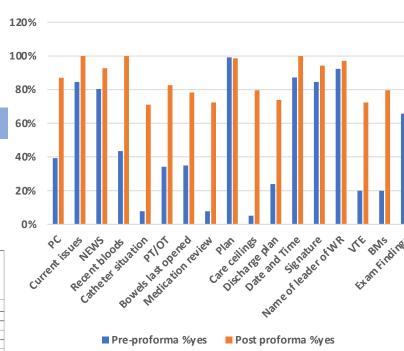


Figure 2: Graph showing the improvement in the number of ward round entries recording salient features of patient care

Discussion

- · Significantly more ward round entries were recording salient features of patient care following the introduction of the proforma.
- Feedback from juniors was that the proforma was simple and easy to use.
- It improved the quality of clinical handover and therefore had positive implications for patient safety.

References: 1) Pucher PH, Aggarwal R, Darzi A. Surgical ward round quality and impact on variable patient outcomes. Ann Surg. 2014 Feb;259(2):222-6. doi: 10.1097/SLA.000000000000376. PMID: 24263319

Background

- Ward rounds form the basis of secondary care.
- Ward round entries are often sparse, missing key information.
- Lower quality ward round entries are linked to a higher incidence of preventable complications.

Aims

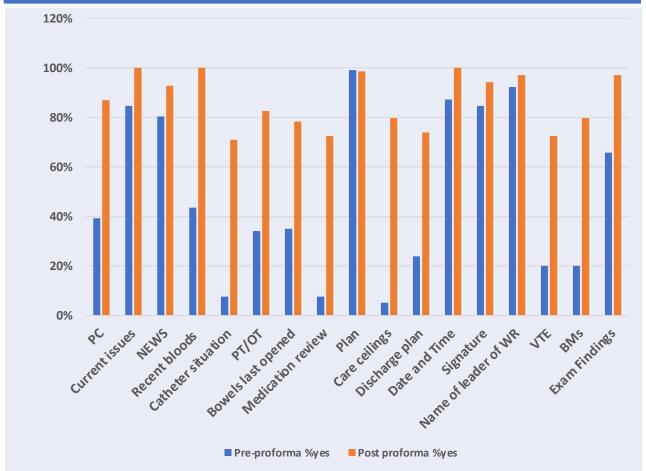
- To assess the completeness of ward round entries.
- 2. To introduce a tool to improve this.

Methods

- A total of 237 ward round entries were evaluated (139 and 98 pre- and postintroduction of the proforma, respectively)
- Entries were surveyed as to their inclusion of 17 salient features of patient care.

Introduction of a ward round proforma on a geriatric medical ward was associated with improved completeness of ward round entries.

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| Care of | f the Elderly [| Jally | | | | |
|--------------------------------|--|---------------------|----------------------------|-----|--|----------|
| Ward F | | | | | | |
| Consultant: | | | Affix patient details here | | | |
| Junior: | | | | | | |
| Date admits | ted to WPH: | | | | | |
| Date: | Time: | | | | | |
| Presenting | complaint: | Past Medical Histor | y | | | |
| | | | | | □ Noted | |
| Current Issu | ies: | | | | 1 | |
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| | | | | | Catheter in situ?: | |
| | | | | | ☐ No ☐ Yes: Short terr | |
| | | | | | ☐ Yes: Long tern | |
| | | | | | Fluid Balance: | |
| | | Ant | tibiotic | Day | □ Not monitore | d |
| | | AIII | ibiotic | Day | Input: | mL |
| | | | | | Output: | |
| | | | | | | mL |
| | | | | | Net: | mL mL |
| Blood resul | ts: Date: | | | | Net: Care Ceilings: | |
| Blood resul | ts: Date: | | | | Net: Care Ceilings: For CPR | |
| Hb | B12 | | | | Net: Care Ceilings: For CPR For ICU | mL |
| | | | | | Net: Care Ceilings: For CPR | mL |
| MCV WCC | B12 Folate | | | | Net: Care Ceilings: For CPR For ICU For MADU/CC For NEWS Not for NEWS | mL :U |
| Hb MCV WCC Neut | B12 Folate Ca ²⁺ Phos | | | | Net: Care Ceilings: For CPR For ICU For MADU/CC For NEWS Not for NEWS VTE Prophylaxis: | mL |
| Hb MCV WCC Neut CRP | B12 Folate Ca ²⁺ Phos TSH | | | | Net: Care Ceilings: For CPR For ICU For MADU/CC For NEWS Not for NEWS VTE Prophylaxis: Assessment deligation | mL |
| Hb MCV WCC Neut CRP Cr | B12 Folate Ca ²⁺ Phos TSH T4 | | | | Net: Care Ceilings: For CPR For ICU For MADU/CC For NEWS Not for NEWS VTE Prophylaxis: Assessment d LMWH | mL |
| Hb MCV WCC Neut CRP Cr eGFR | B12 Folate Ca ²⁺ Phos TSH T4 Ferr | | | | Net: Care Ceilings: For CPR For ICU For MADU/CC For NEWS Not for NEWS VTE Prophylaxis: Assessment deligation | mL |
| Hb MCV WCC Neut CRP Cr eGFR K+ | B12 Folate Ca²+ Phos TSH T4 Ferr Mg | | | | Net: Care Ceilings: For CPR For ICU For MADU/CC For NEWS Not for NEWS VTE Prophylaxis: Assessment d LMWH UFH | mL |
| Hb MCV WCC Neut CRP Cr eGFR | B12 Folate Ca ²⁺ Phos TSH T4 Ferr | | | | Net: Care Ceilings: For CPR For ICU For MADU/CC For NEWS Not for NEWS VTE Prophylaxis: Assessment d LMWH UFH DOAC | mL |

Discussion

- Feedback from juniors was the proforma was easy to use.
- Improved quality of documentation and handover therefore. improving patient safety
- Transferrable to electronic systems.