

Digital Fluid Balance Chart Compliance on Ward 7B

Emma Bailey

Senior Clinical Practice Facilitator for Planned Care

emma.bailey15@nhs.net

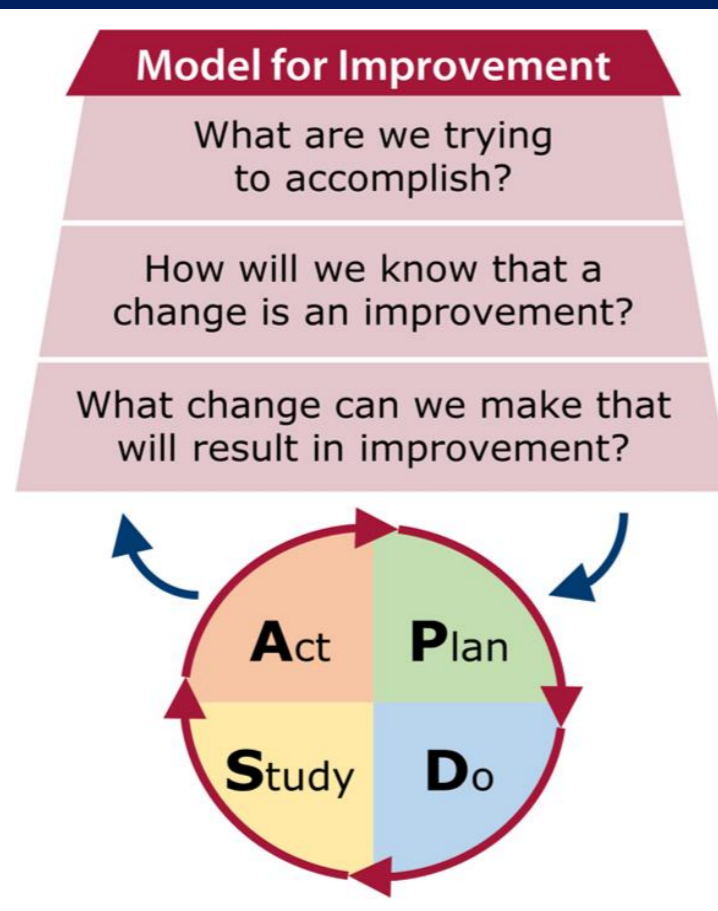
Introduction

Background: The introduction of digital fluid balance on 7B has shown a low compliance in the completion of fluid balance monitoring for staff.

GAP: This project was started due to the high demands already placed on the team with their deteriorating patient project. When the problem was looked into it was identified that staff are either not recording digital fluid balance or recording it inaccurately. Referrals are not being made due to the lack of information recorded for these patients which is leading to patients deteriorating and requiring escalation and further treatment.

Rationale: Surveys have shown that staff do not understand how to complete fluid balance appropriately and they do not always understand why patients need this recording.

Improvement methodology



Project aim

Here to improve staff confidence in the use and understanding of digital fluid balance on ward 7B by 50% by the end of December 2022

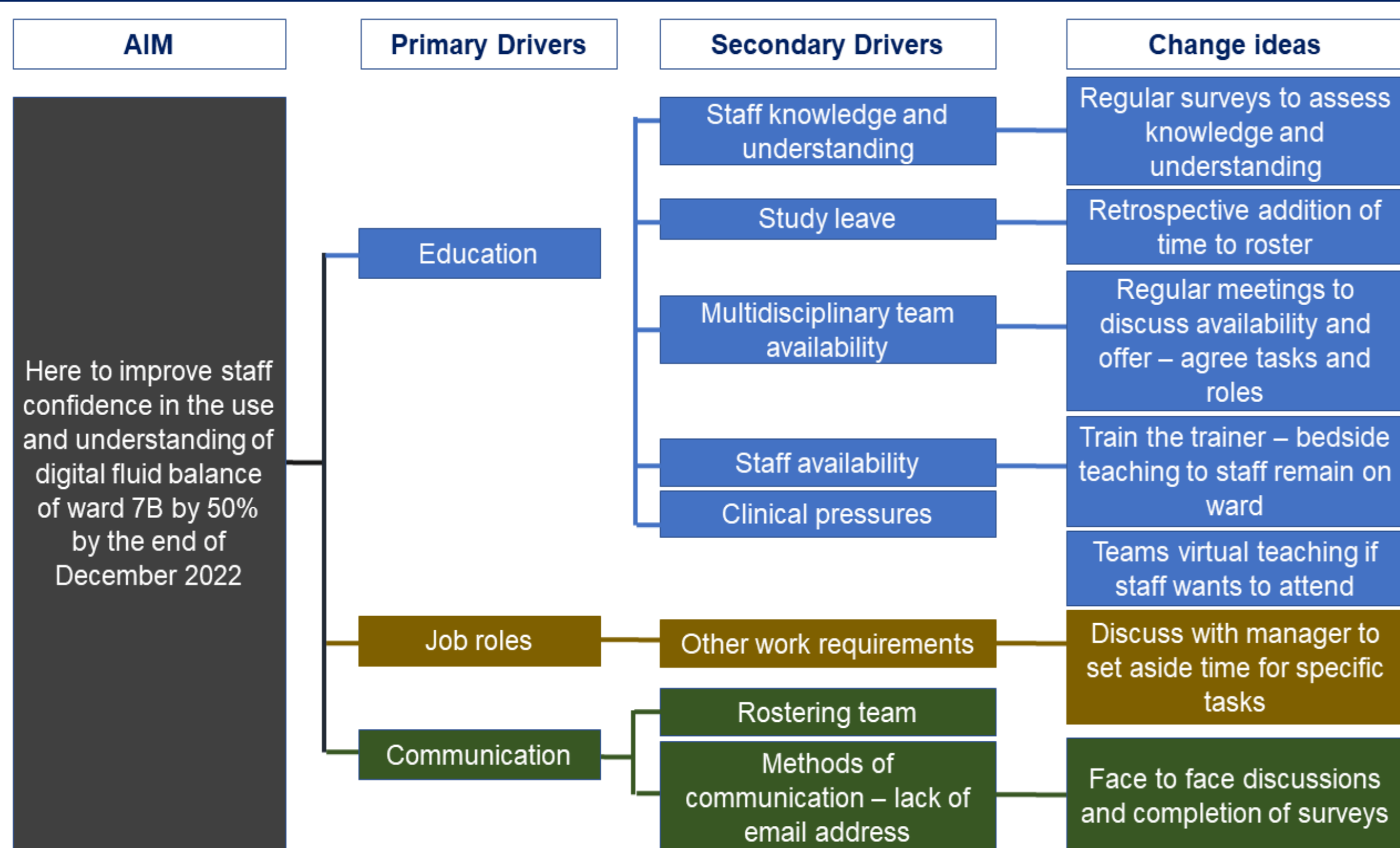
Measures

Outcome measures: Staff Digital Fluid Compliance on Ward 7B

Process measures: The total number of staff trained in Physiological/Neurological Observations

Balancing measure: Other areas of Observation recording may be affected.

Change ideas / Driver Diagram



Prediction

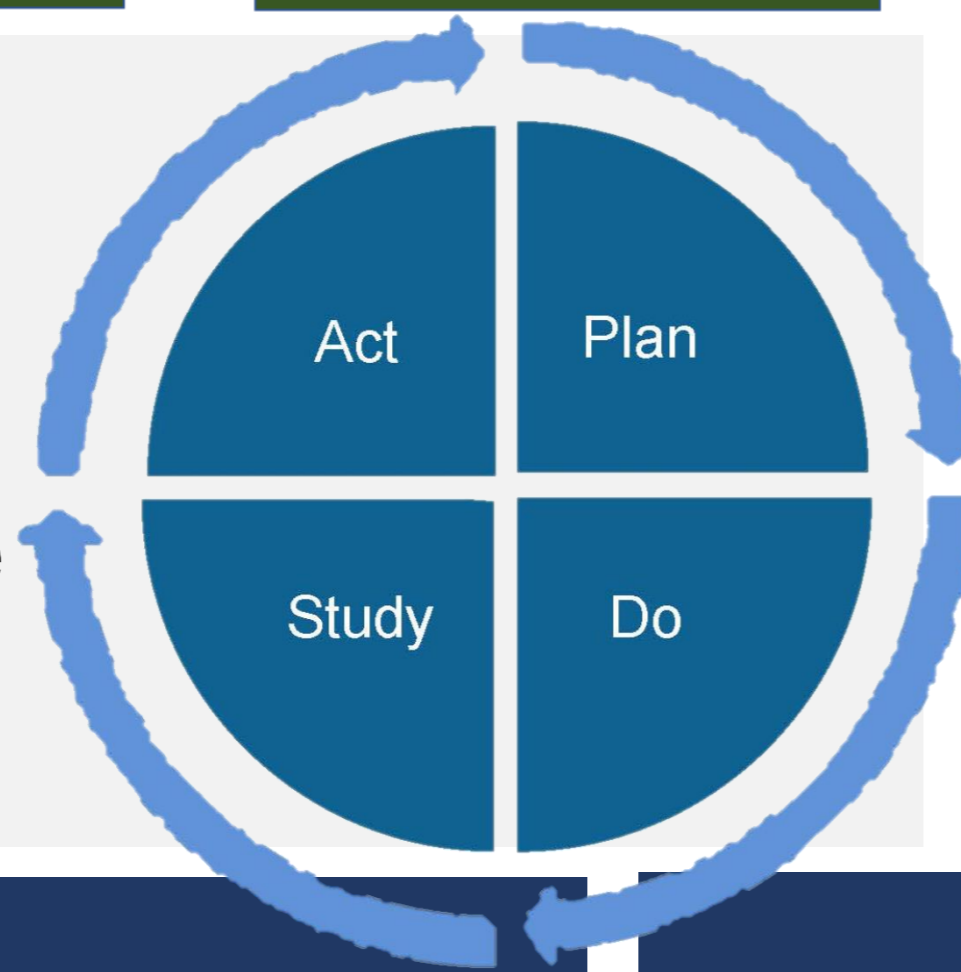
By focusing on training and teaching staff the reasons for recording fluid balance accurately, compliance will improve, referrals will increase and the number of deteriorating patients will be reduced.

Impact

- Physiological/Neurological Observation Competence has improved and currently 16 out of 33 staff are signed off as competent.
- Sepsis Compliance has increased from 38% (March 2022) to 47.1% (April 2022)
- Fluid Balance Survey – 16 random staff were chosen from Ward 7B to participate in a survey. 14/16 staff said they were confident in Colostomy care, 15/16 staff in ileostomy and urostomy and 16 staff in catheter and NG.
- Urine Output Compliance on Sepsis 6 Treatment has improved and Ward 7B have been 100% compliant since November 2021 (as part of 7B's QIP implementation).
- E-Ob Device prompts were not being used by staff and were not being seen as useful for the staff.
- Sepsis Specialist Nurses are completing Fluid Balance Chart Training every day at 2pm.
- Fluid Balance Compliance Audit completed each week to see trend from training input.

Some of our change ideas:

- Train the trainer work model
- Empower patient's to document their own fluid intake
- Regular surveys to assess knowledge and understanding of importance of fluid balance



Additional Info



Ward 7B have started to use prompts in order to record fluid balance input when completing their physiological observations. As this project continues, I will continue to monitor the compliance through staff survey's and audits to see if this prompt has improved staff compliance on inputting fluid balance data.

Leadership learning

The learning I have gained from this experience is:

- ✓ I have been able to think outside of the box when clinical pressures meant training could not be done (ie: making sure this training can be rescheduled or carried out on the ward as a bitesize session at a future date).
 - ✓ Using coaching sessions when concerned or worried about the project,
 - ✓ Team work – I was worried about stepping on toes in my new position but soon realised that I am here for patient safety and supporting staff and teams and that actually we all want the same outcome. The support from stakeholders has been very encouraging.
- Communication and Visibility - I made sure that the Ward Manager was aware of my project and the measures I was completing on the ward. I also made sure the ward staff knew who I was and knew I was there to improve compliance.

Next steps

- To continue NEWS 2 Compliance on the Ward.
- To continue FBC Compliance with Sepsis Team on the ward.
- To continue signing staff off as competent with Physiological/Neurological Observations
- To involve Stoma and Urology Specialist Nurses with support with FBC Compliance on Ward 7B
- To completed Fluid Balance Survey each month to see data trend. To look deeper into why staff are saying they are confident yet compliance is poor.