**Quality Improvement Abstract**

The following information will be used on the Academy website and in the graduation materials. It will also form the basis of the information for online voting in the ‘Best Project’ category.

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| **Quality Improvement Title** | Quality Improvement initiative to improve staff experience that could lead to effective communication, good team relations, retention and enhanced patient care. |
| **Quality Improvement Presenter(s)** | Your Name, title and a brief background  **Khoboso Hargura-Adichareh – RN, Chief Nurse Fellow** |
| **Quality Improvement Team** |  |
| **Abstract**  Maximum of 300 words total. Please write in plain English. | |
| ***Background & Problem:***  *Describe the department where the work was done, the team involved and the patient group that is the focus of your work. Outline briefly the specific problem that you aimed to improve, what baseline data you collected and whether you completed a library evidence search.* | The project was carried out at Woodmancote ward, Cheltenham General Hospital. The ward team involved in the project were Nurses, Health Care Assistants (HCA’s), Ward Sisters, Ward Manager and the Matron. Woodmancote ward is a 32 bedded ward caring for both care of the elderly and also a few beds of Endocrine.  Having worked on the ward for nearly two years at the time of the project, I noticed lack of efficient communication and high staff turnover. I picked on this particular aspect that really concerned me when this project opportunity came about.  Patient experience and staff satisfaction go hand in hand. The key findings in the article written by Prof J Dawson (2018) indicate that patient satisfaction is strongly dependant on staff satisfaction with resourcing and support. Once this is in place then there is an effective team working leading to high deliverance of high standard of patient care. This project aims to identify staff experience on the ward, and how some of the findings can be implemented so as to improve team work, communication and patient care.  After indications of high staff turnover a questionnaire was distributed to the team for fact finding mission of their own experience and feelings on the ward. The questionnaire contained eleven questions, which were qualitative in nature and contained both open and closed questions. A total of 22 staff responded with 41% responding with poor to average support. Additionally almost 70% indicated below average experience at work.  The staff were very cooperative and supported the project initiative as they all believed it was a very good idea that could improve our work as a team.  · |
| ***SMART Aim:***  What were you trying to improve, by how much and by when? | The Smart aim is to improve communication, relations and building teamwork. Some of the key improvements was to have systematic break times on every shift and the introduction of the buddy system on the ward. Trial of these two systems started in November 2018 and a review carried out in January 2019 and December 2019. The feedback has been very positive so far and we hope to continue making improvements where necessary. |
| ***Method:*** *Describe the process undertaken including stakeholder engagement, and the tools used to test and implement changes and measure improvement.* | After indications of high staff turnover a questionnaire was distributed to the team for fact finding mission of their own experience and feelings on the ward. The questionnaire contained eleven questions, which were qualitative in nature and contained both open and closed questions.  The tool used was PDSA cycle. PDSA cycle is used to test an idea by trialling a change on a small scale and assess its impact. Once successful it can be implemented into a large scale for better improvement.  The improvements made were measured by review questionnaires issued to staff so as to feedback on the improvements/progress made as a result of the new changes. The review questionnaires were issues in January and December 2019. |
| ***Results:***  *Analysis of your data - what was the impact, describe the benefits. Did the changes result in improvement?* | The data analysed from the review questionnaires indicated that staff are able to take their breaks during every shift due to well co-ordinated shift plan.  The buddy system improved team communicated, clearly defined roles and responsibilities during every shift.  These changes eventually led to improved and efficient patient care. |
| ***Lessons Learnt:***  *What lessons were learnt, what could others learn from your work? What are the opportunities for scale up and spread?* | The staff feedback from the reviews carried out suggest improved efficient and effective communication and buddy system could lead to improved patient are too.  The introduction of the systematic breaks has thought the team to understand how important it is to have that break and for it to be effective it goes.  The challenges faced in full implementation of this the frequent staff shortages that sometimes made systematic break systems tricky to implement on some shifts.  There is very good opportunity to scale this to other wards as this does not require any additional resources e.g. financial |
| ***Next steps:***  *What are you next steps as part of your project?* | For now the intention is to continue the project on Woodmancote so as to see further results and identify challenges that need addressing. The next step is to share the idea with other wards so that they could try too. Another step is also development of staff Induction Booklet. |

Please ensure that you have not exceeded the 300 word limit for your abstract, check for errors and then submit via email to [ghn-tr.gsqia@nhs.net](mailto:ghn-tr.gsqia@nhs.net)