

Project Title

Nursing Compliance With Speech Therapist (ST) Recommendation

Project Lead and Members

Project lead: Sa'adiyah Arsad

Project members: Mohd Alif Bin Mohd Zin, Harini S Shunmuga Velu, Gladys Tan Li
Yue, Shafina Rostaza, Eme Rose Ibarra

Organisation(s) Involved

Ng Teng Fong General Hospital

Healthcare Family Group Involved in this Project

Nursing, Allied Health

Applicable Specialty or Discipline

Speech Therapy

Project Period

Start date: Nov-2017

Completed date: Apr-2018

Aims

To reduce the number of errors and non-compliance rate to ST's recommendations from six to zero by April 2018 in Ward B16S.

Background

See poster appended / below

Methods

See poster appended / below

Results

See poster appended / below

Lessons Learnt

Engaging and working with other stakeholders is vital to ensure that patient safety was not compromised in all aspects of care. Engagement of staff and sharing of knowledge raised awareness on the significance of being compliant to ST's recommendation which directly contributed to patient safety.

Conclusion

See poster appended / below

Project Category

Care & Process Redesign, Value Based Care, Safe Care, Adherence Rate

Keywords

Dysphagia Chart, Speech Therapist In-Service Training, Nursing Compliance, Swallowing-Related Complications, Modified Diet And Fluids

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NURSING COMPLIANCE WITH SPEECH THERAPIST RECOMMENDATION

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- SAFETY
- PRODUCTIVITY
- PATIENT EXPERIENCE
- QUALITY
- VALUE

Define Problem, Set Aim

Problem Statement

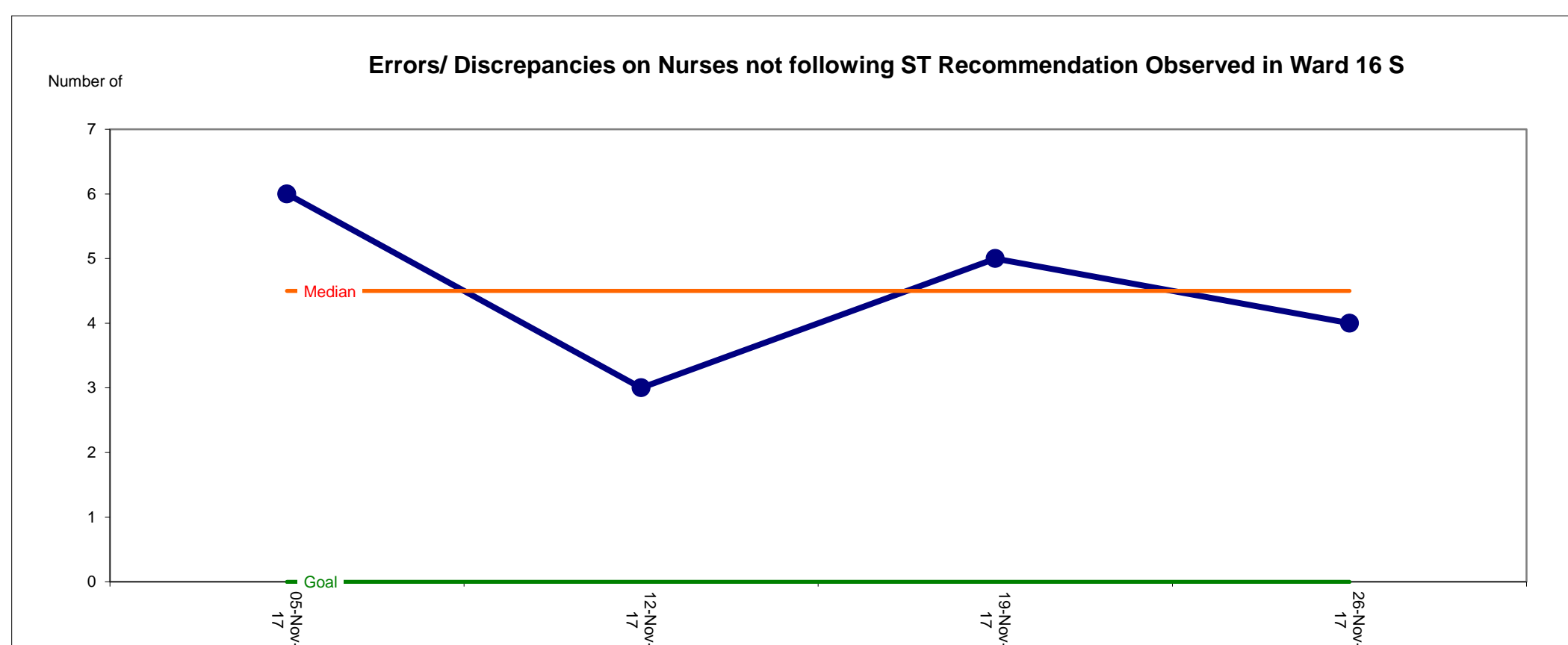
In November 2017, it was noted that there was an average of 6-7 patients per day who were admitted into Ward 16 Subsidised and required modified diet and fluids consistencies after the Speech Therapist's assessment. From 1 November to 7 November 2017, the Speech Therapist flagged out 6 major errors where ST's recommendations were not adhered to, e.g. incorrect diet ordered, fluids thickened inaccurately and feeding mode not enforced. This lack of compliance could lead to serious swallowing-related complications, including aspiration pneumonia.

Aim

Ward B16S nursing staff and Ward ST aimed to reduce the number of errors and non-compliance rate to ST's recommendations from six to zero by April 2018 in Ward B16S

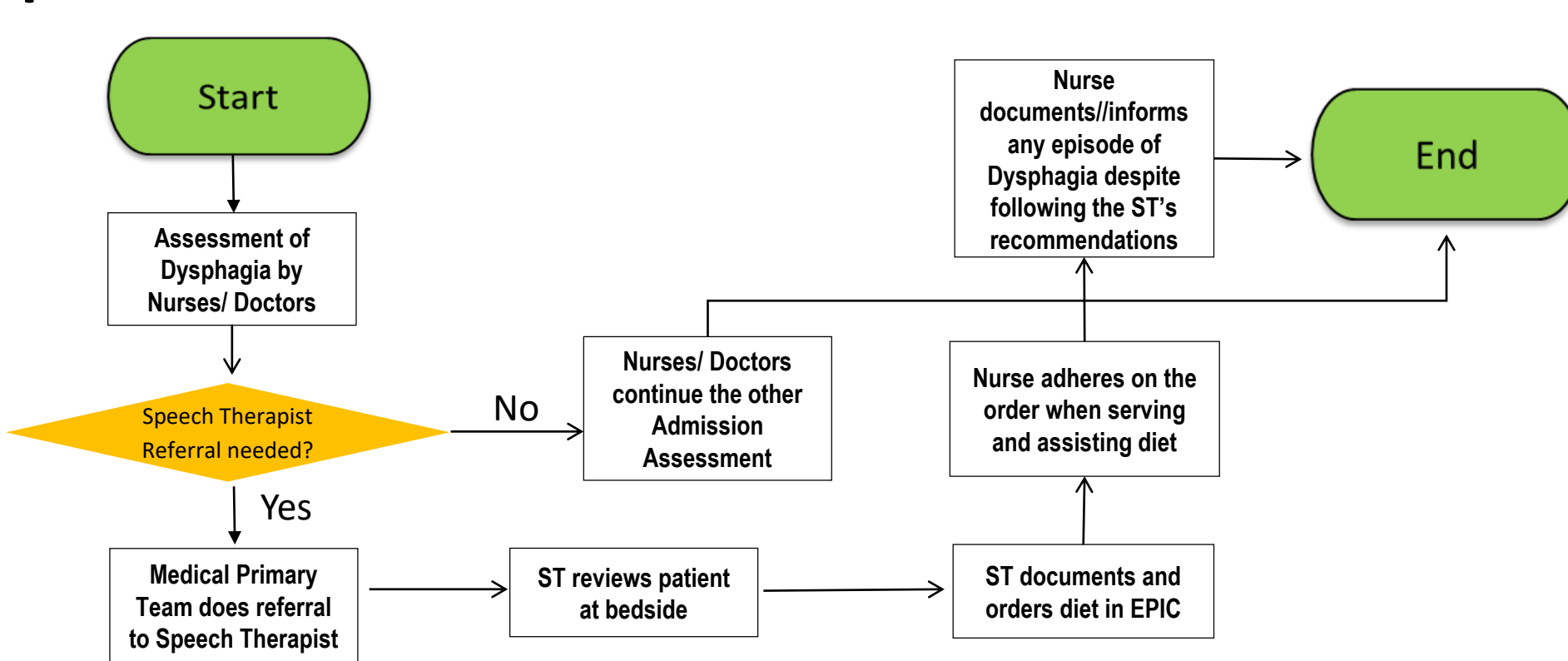
Establish Measures

Outcome Measure: Number of Errors/ Discrepancies on Nurses not following ST's recommendations in Ward B16S

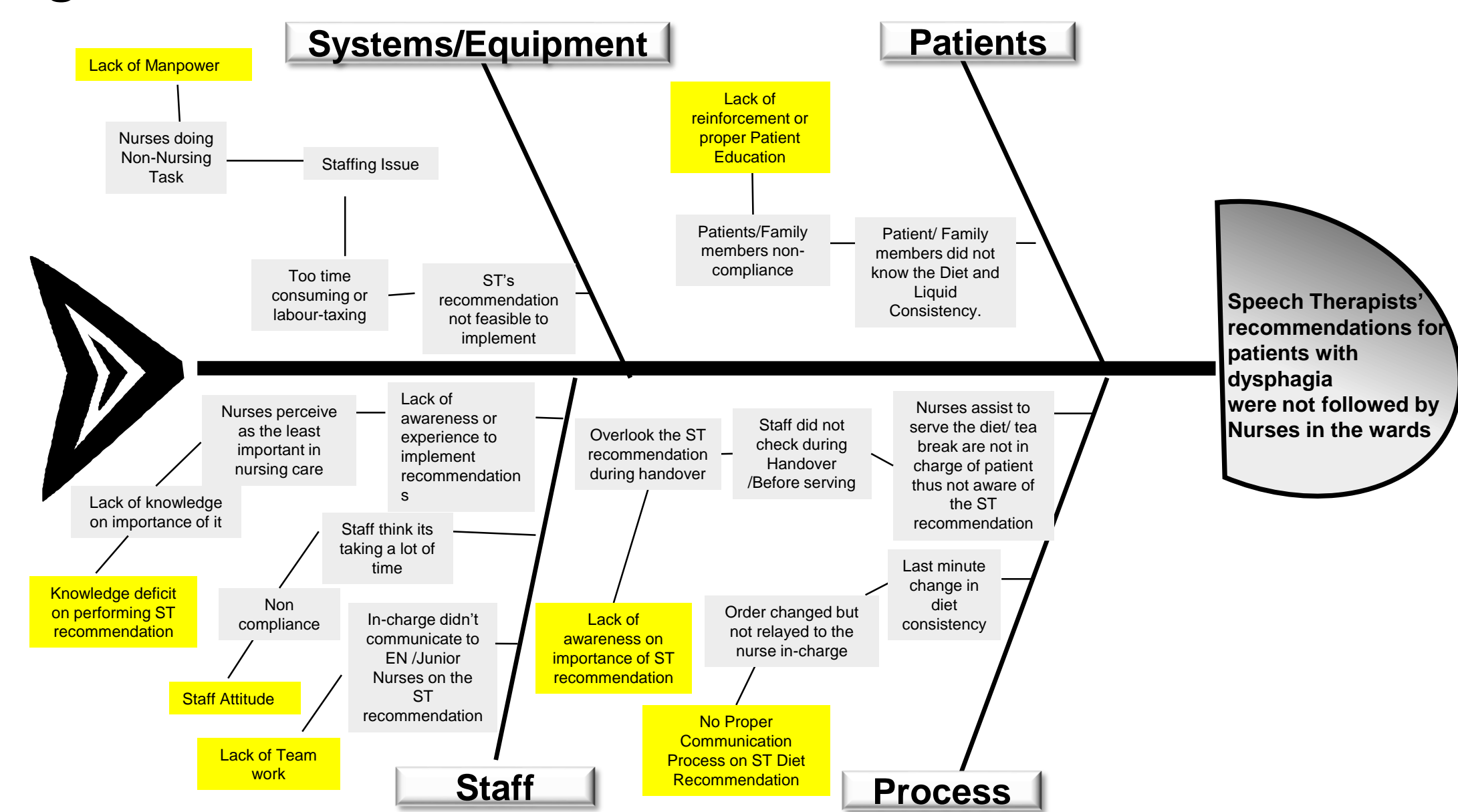


Analyse Problem

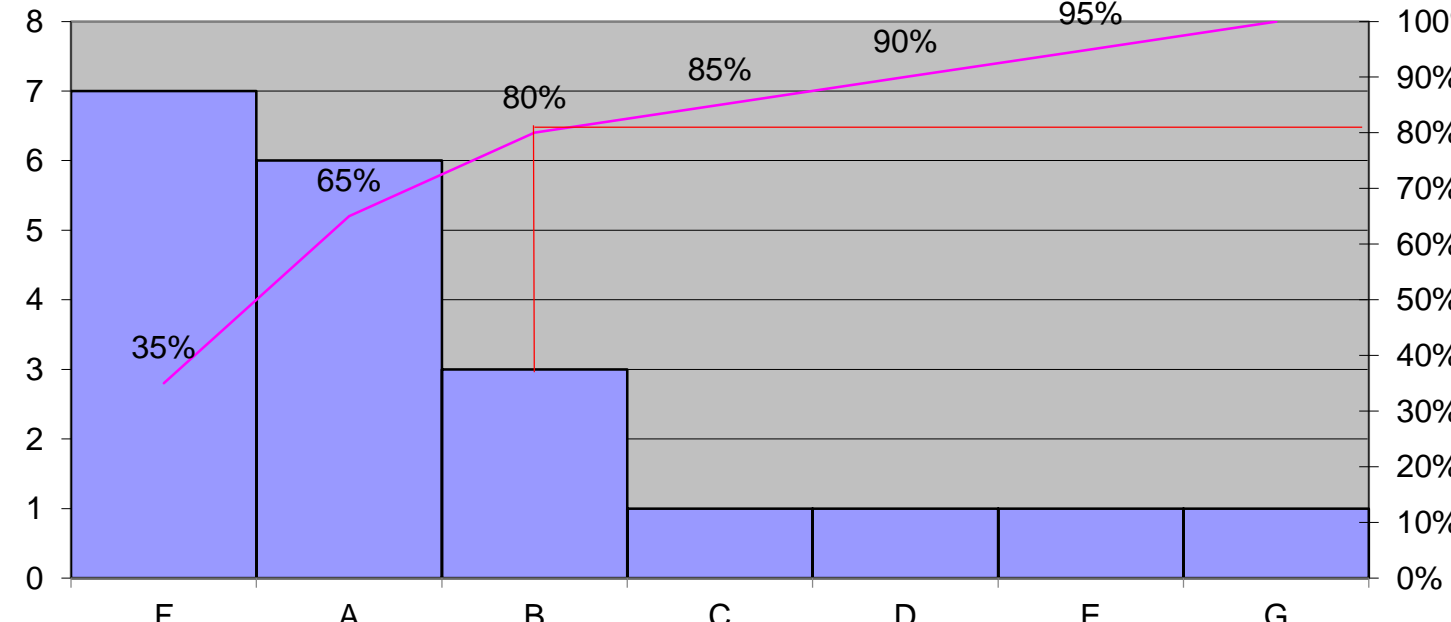
Process Before Improvement



Fishbone Diagram



Pareto Chart



Legend	Root Causes
A	No proper communication process on ST Recommendation
B	Lack of awareness on importance of following ST recommendation
C	Lack of reinforcement/education to patient and family members
D	Staff attitude
E	Lack of teamwork
F	Knowledge deficit on performing ST recommendation
G	Lack of Manpower

Select Changes

Root Cause F	Potential Solutions	Root Cause A	Potential Solutions
Knowledge deficit on performing ST recommendation	1 Speech Therapist Talk and Assessment	No proper communication process on ST Recommendation	1 Reminder in Epic
	2 E-Learning		2 Communication Chart at Bedside
	3 Nurse Champion		3 Nurse Champion
	4 ST Information Card		4 Reminder Diet Board
	5 New Process and Protocol		5 New Process and Protocol
			6 To include in the NIC Shift Roll Call List

Impact: High (5), Low (1)

Implementation: Hard (4), Easy (2)

Do Last 5, Do First 1

Never Do 4, Do Next 2

Impact: High (6), Low (1)

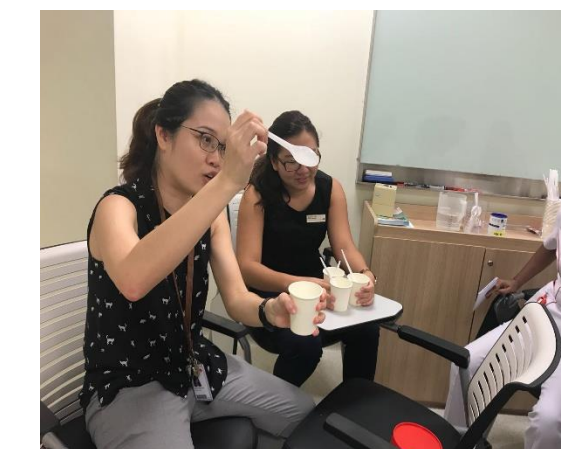
Implementation: Hard (5), Easy (1)

Do Last 5, Do First 1

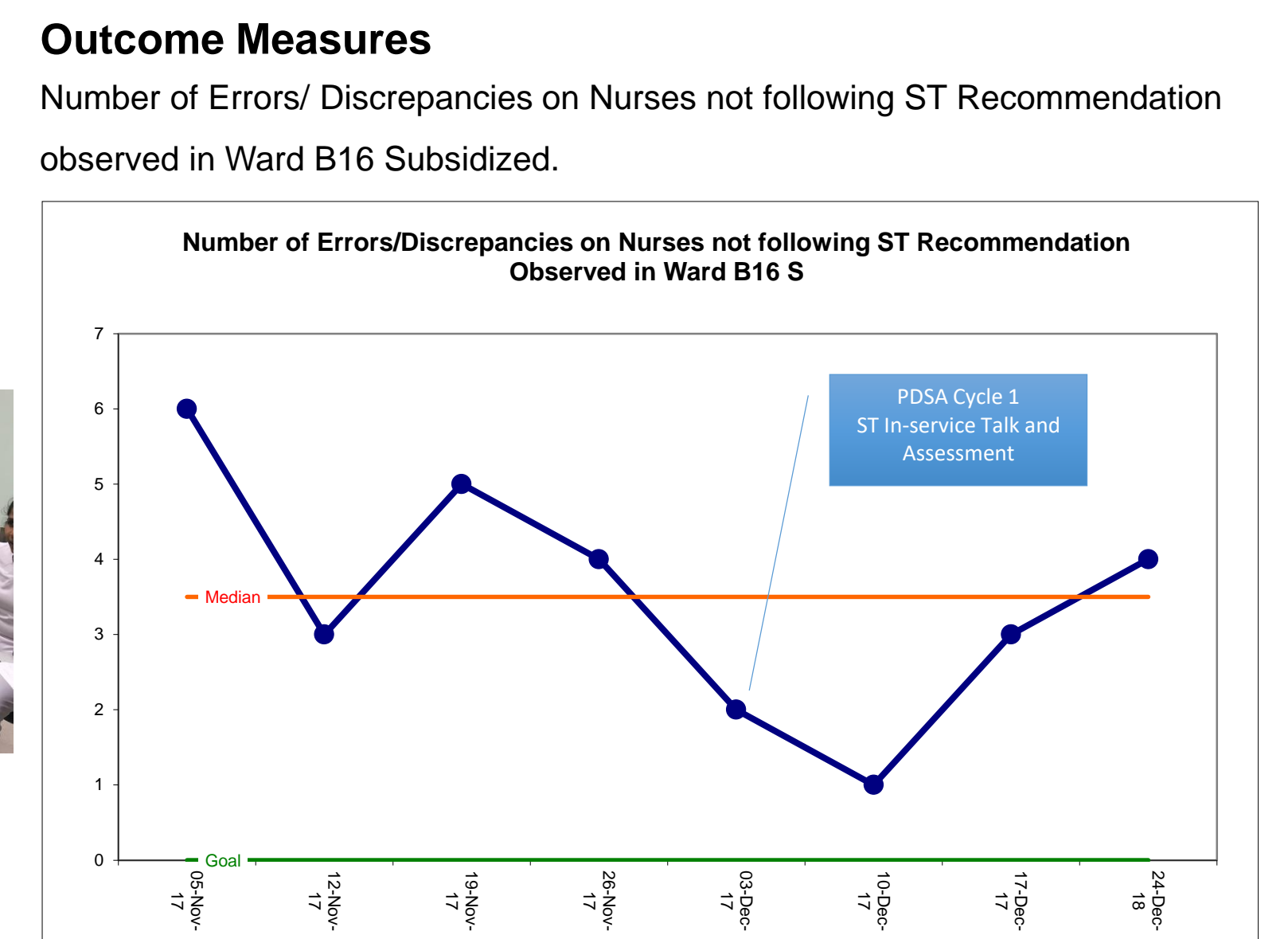
Never Do 5, Do Next 1

Test & Implement Changes

CYCLE	PLAN	DO	STUDY	ACT
1	Speech Therapist team will conduct in-service talk and practical assessments to all nurses in Ward B16S. All staff are expected to pass the assessment.	Completed by December 2017. All nursing staff passed the assessment. Feedback: increased understanding on the importance of ST's recommendations and ability to enforce diet and fluid consistencies, and feeding recommendations. However, this information may occasionally be overlooked as the Patient Information Board (PIB) and EPIC order is not visible or clear enough at all times.	The errors have reduced but there was a gradual increase over time.	Carry out PDSA Cycle 2: Proper communication / visual reminders to be in place.



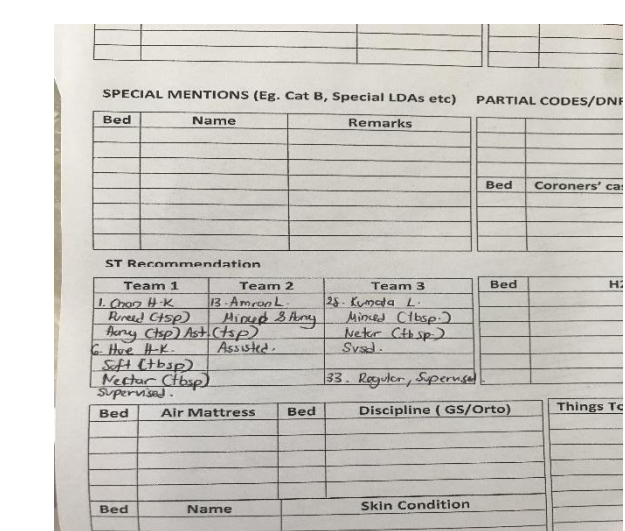
Speech Therapist (ST) In-service Talk and Practical Assessment to Nurses.



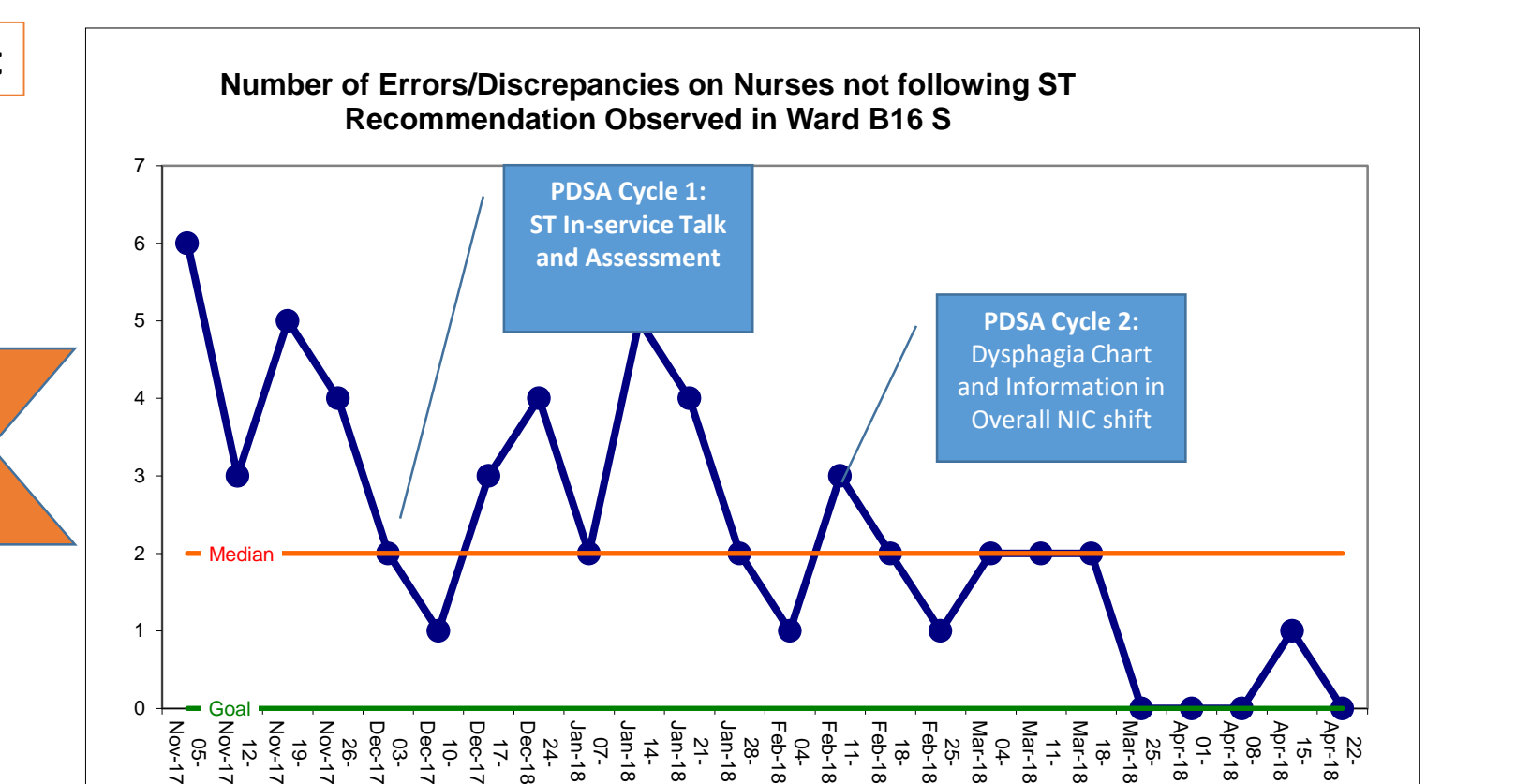
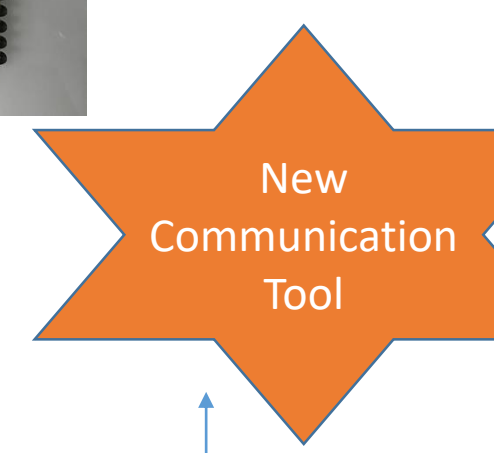
CYCLE	PLAN	DO	STUDY	ACT
2	Develop Dysphagia Chart (simple and clear information and colored) reflecting ST's diet, fluid and feeding recommendations. These charts are kept in Nursing office, ST or Staff Nurse In-Charge will place this chart on the patient's whiteboard after ST assessment. The SN In-Charge will then inform the Overall Nurse In-Charge (NIC) to include this information in NIC Shift Roll Call Summary.	Completed 2nd week of February 2018. Feedback: Staff found that the chart was easily accessible and useful as a constant visual reminder.	The errors/ discrepancies reduced. Goals achieved in some of the weeks. Staff surveys showed major improvement on the staff awareness and understanding and perception on Feeding and Swallowing issues.	To adopt and spread the changes



Dysphagia Chart



NIC Shift Roll Call Summary.



Outcome Measures: Number of Errors/ Discrepancies on Nurses not following ST Recommendation observed in Ward B16 Subsidized.

Nurses Perception on Handling patients with Speech Therapist's Recommendation



Learning Points

This QI Project involved collaboration with Allied Health staff. Engagement and teamwork with other stakeholders was vital to ensure patient safety was not compromised in all aspects of direct care. Engagement of staff and sharing of knowledge raised staff awareness on the significance of being compliant to ST's recommendation which directly contributed to patient safety. Ideas and creativity were generated in performing and driving change in the ward. Enhanced team work and leadership roles among staff members.

Team will continue to sustain the project by conducting a compulsory Practical Assessment to all new staff coming on board during their Ward Induction program. Overall Nurse In-Charge (NIC) will continue to highlight in every roll call those patients with ST recommendations. NIC will also ensure Dysphagia Charts are being put up and replaced if spoilt.