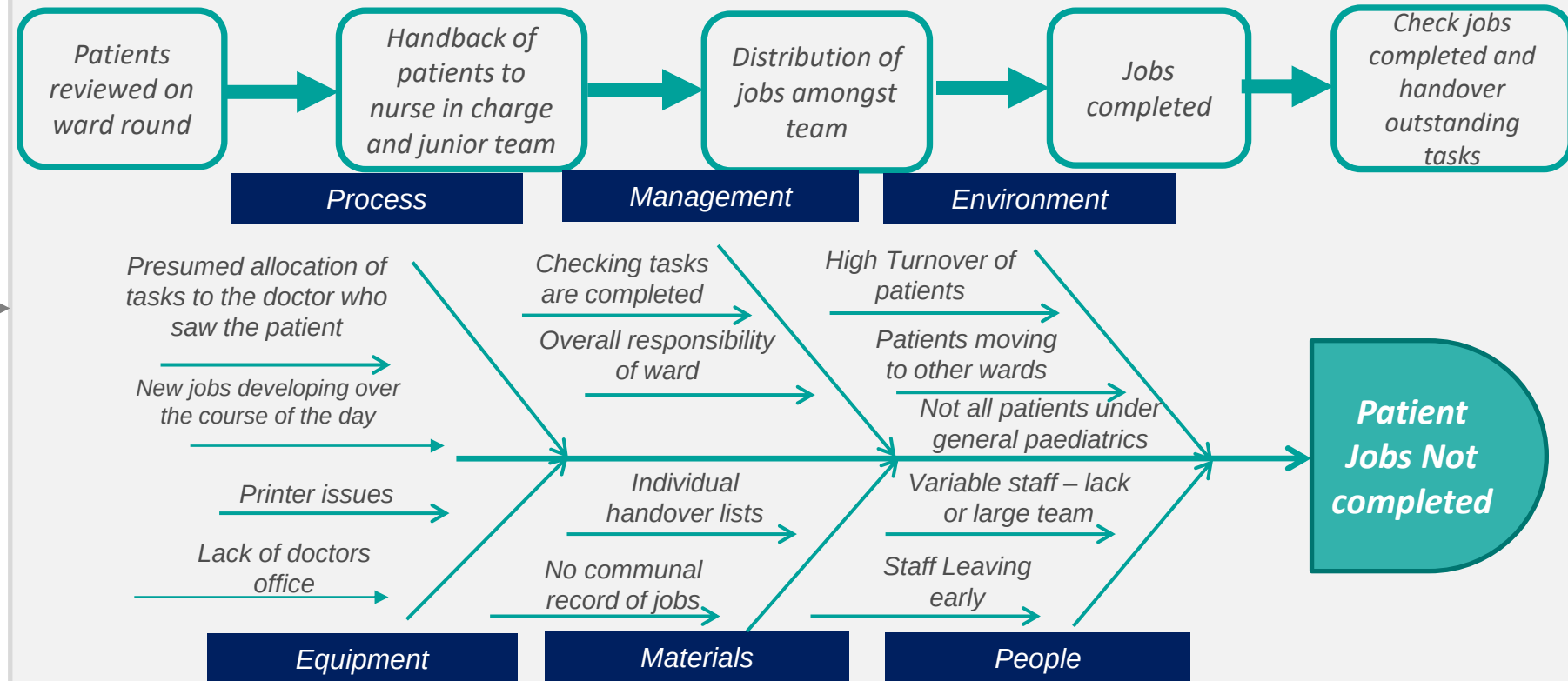


BACKGROUND

There is a high turnover of patients in the paediatric assessment unit. Medical and nursing teams change daily. Unclear task allocation leads to patient journey delays. Teams can feel uncoordinated as a consequence.



DIAGNOSTICS



AIM & MEASUREMENT DEFINITION

Aim

By the end of June 2021, 100% of patient jobs to be assigned to a named general paediatric team member following the ward round

Chosen measure

Total number of patients under general paediatrics on the paediatric assessment unit each day
Percentage/Number of patients jobs assigned to a junior doctor or handed over to another named junior or hospital on call team

Inclusions

All patients (0-16) under general paediatrics on the paediatric assessment unit on the handover list at the beginning of the day

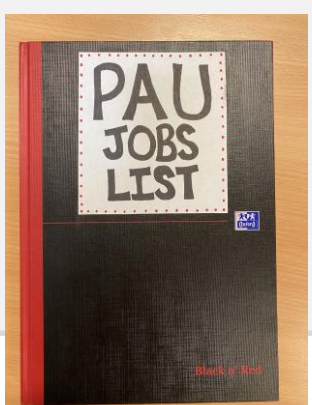
Exclusions

Patients admitted during the course of the day to the paediatric assessment unit, not on the morning list.
Patients under other specialities, patients on our consult list

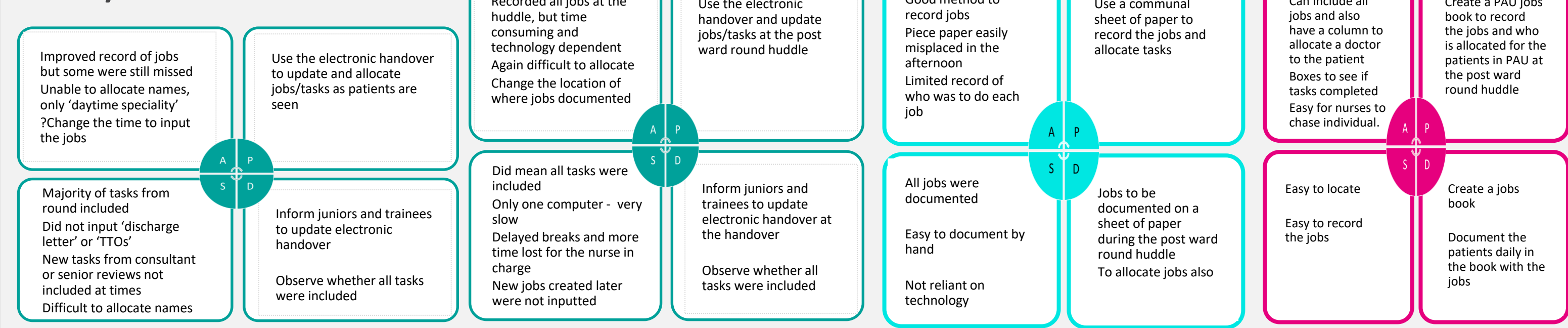
Sampling method & frequency Prospectively collect data for 2 weeks – list changes ever day so can't do retrospective

CHANGE IDEAS

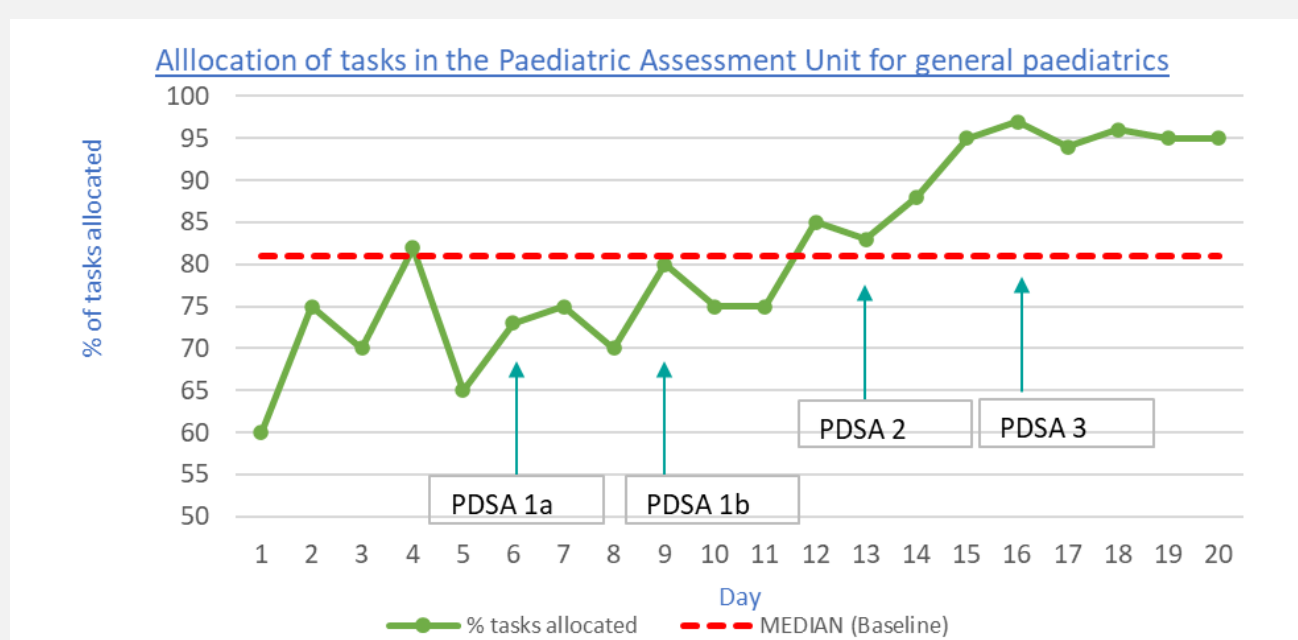
- Electronic handover
- Individual lists
- Regular huddles with the team
- One person overseeing the jobs
- PAU jobs book
- Single piece of paper
- Do jobs as you go along



PDSA cycles



RUN CHART



REFLECTIONS & LEARNING

- Small aims are better
Think minute when it comes to a change
Bold and powerful problem statement
Small changes can make a big difference
- Define your measures
What is easily measurable?
Pick a simple measure
- List all your change ideas – no matter how daft
Rate your ideas and decide which ones you want to test
- Regular small PDSA cycles
Abandon or build upon ideas
Measure changes
Reflect on each change – positives and negatives
Still not achieved 100% so always can improve