

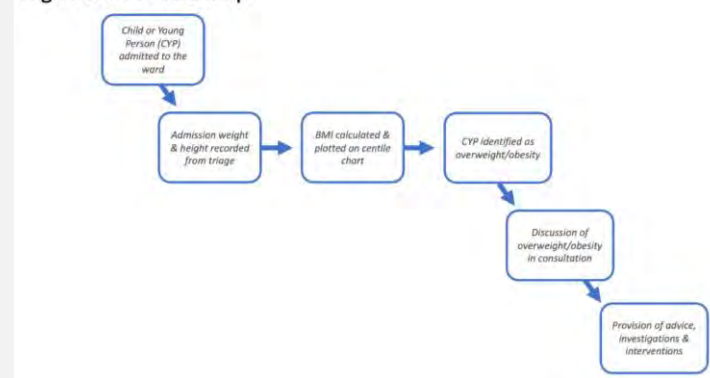
### BACKGROUND

Many children presenting to hospital are overweight or obese. Yet, Paediatricians often overlook this problem, failing to prevent long-term harm.

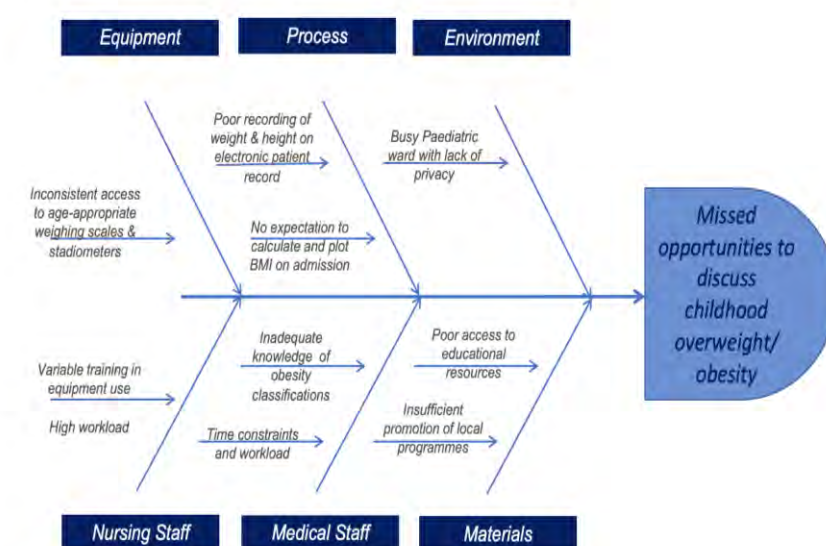


### DIAGNOSTICS

#### High Level Process Map

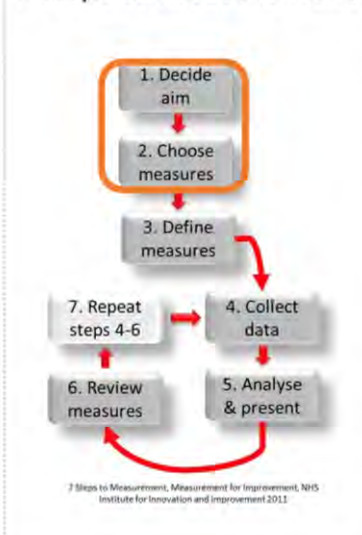


#### Fishbone Diagram



### AIM & MEASUREMENT DEFINITION

#### 7 steps to measurement



**Aim**  
By August 2021 all children admitted to the general paediatric ward should have their height, weight and BMI measured, documented and discussed.

**Chosen measure**  
Documentation of height, weight and BMI on growth chart in electronic patient record during current admission

**Inclusions**  
All patients admitted under the general paediatric team

**Exclusions**  
Patients primarily under other speciality teams

**Sampling method & frequency**  
Can you do this for cases retrospectively? Yes  
Weekly review of electronic patient records for admission to the general paediatric ward

### CHANGE IDEAS

Ideas to encourage measurement of height & weight:

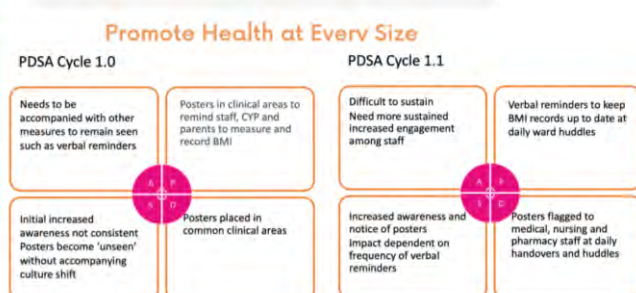
- ❖ Posters in clinical areas to remind staff, CYP and parents
- ❖ Encourage and empower families to ask for measurements
- ❖ Verbal reminders to keep records up to date at daily ward huddles
- ❖ Education sessions for nursing and medical staff
- ❖ Ward round template including height, weight, BMI
- ❖ Make height & weight information an Integral part of handover from ED
- ❖ Electronic patient record reminders
- ❖ Electronic bar to prescribing without height & weight
- ❖ Ward round template including height, weight, BMI

### PDSA cycles

#### PDSA Cycles

| PDSA PLAN         |                                                            |
|-------------------|------------------------------------------------------------|
| ONE thing to test | Posters in clinical areas to remind staff, CYP and parents |
| What to do        | Design an eye-catching poster                              |
| When to do it     | This week at handovers/huddles                             |
| Where to do it    | Ward bed-board, nursing station and drug rooms             |
| Who to do it      | Myself in discussion with ward medical and nursing team    |
| Predict outcome   | Some increase to recording of weight and height            |
| Data to collect   | % general paediatric admissions for which BMI is recorded  |

website | qiclearn.com



#### PDSA Cycle 2.0



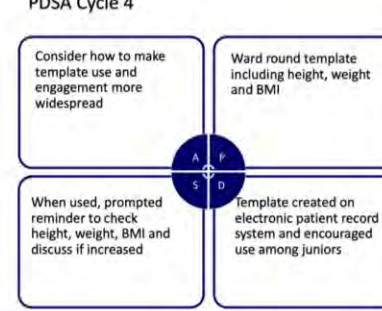
#### PDSA Cycle 2.1



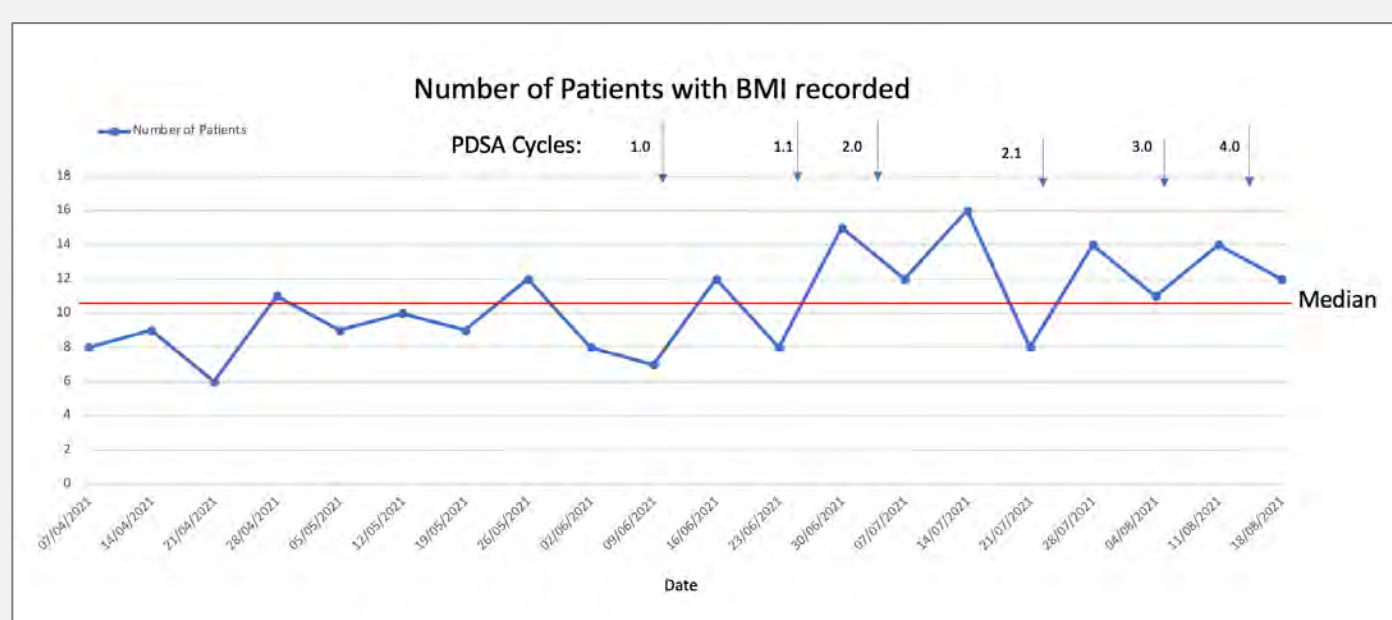
#### PDSA Cycle 3



#### PDSA Cycle 4



### RUN CHART



### REFLECTIONS & LEARNING

- Taking the time to identify a specific goal and sphere of influence enabled targeted strategies to improve healthy weight promotion
- The importance of involving key stakeholders in early stages, including CYP, parents, dieticians, nursing staff and doctors to enable practical and feasible solutions
- Increasing the awareness of the need to identify CYP with raised BMIs via visual and verbal reminders in posters, meetings and education sessions demonstrated some improvements
- Difficulties were identified in sustaining these improvements, for which recruiting more project champions was shown to be helpful
- Next steps will be to expand on the electronic change ideas including ward round templates and electronic reminders