Be Consistent Until You're Competent

How to ensure safe practice while providing training

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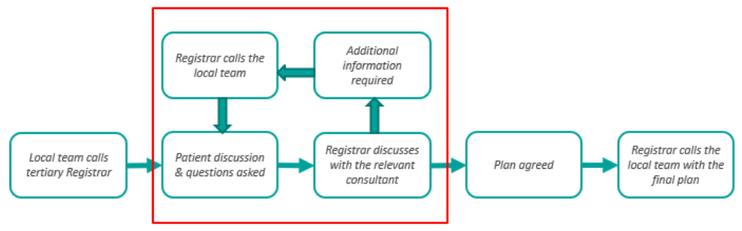
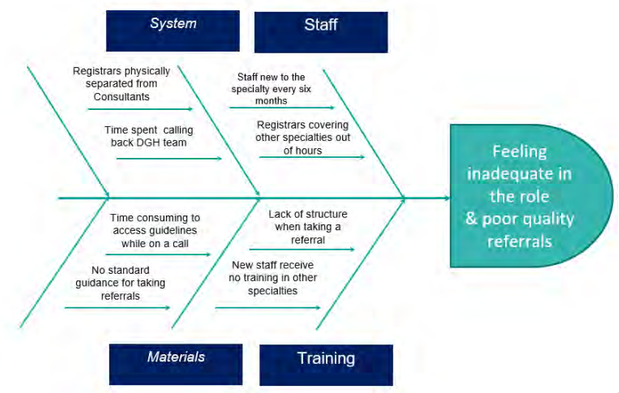
BACKGROUND

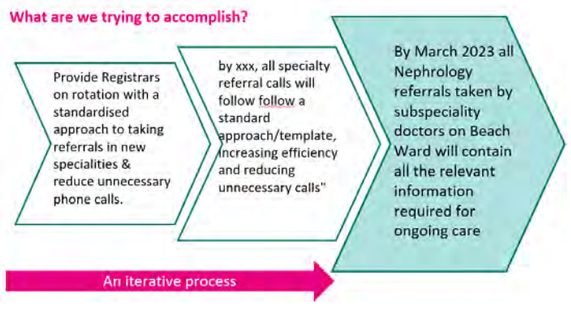
Registrars new to a subspecialty lack the knowledge required to take effective referrals. This results in an inefficient referral system leaving Registrars feeling inadequate and incompetent

Understanding the Problem





AIM & MEASUREMENT DEFINITION



Measurement Definition:

Aim
By March 2023 all Nephrology referrals taken by subspeciality doctors on Beach Ward will contain all the relevant information required for ongoing care.

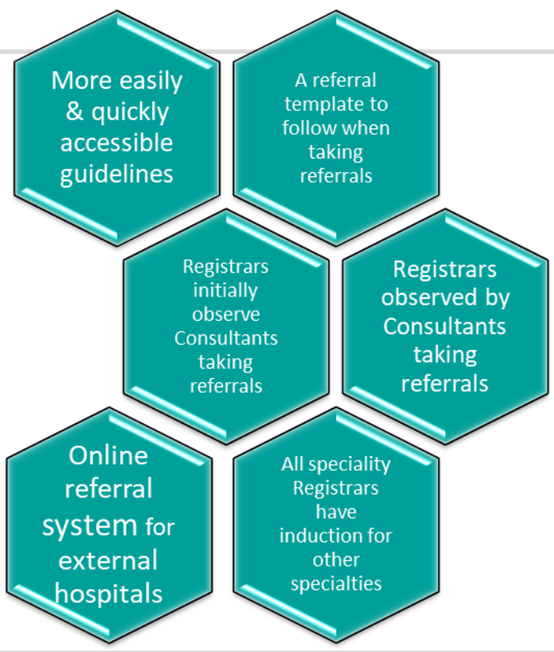
Chosen measure
The number of incomplete referral phone calls taken by specialty doctors.

Inclusions
Phone call referrals documented on our referral system that make a note of additional information requested by the Consultant not taken during the initial referral.

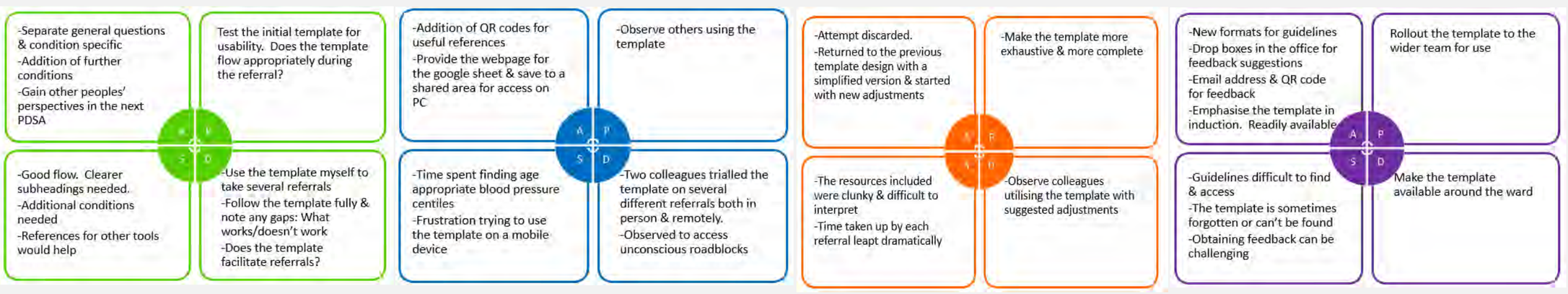
Exclusions
Referrals not documented on the online referral system.
Referrals with no documentation of discussion with the consultant.
Days when no referrals received

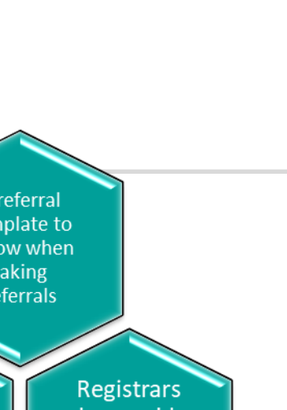
Sampling method and frequency
After collecting your baseline measure (retrospectively if possible)
continue to collect small amounts of data on a regular basis throughout your tests of change

CHANGE IDEAS

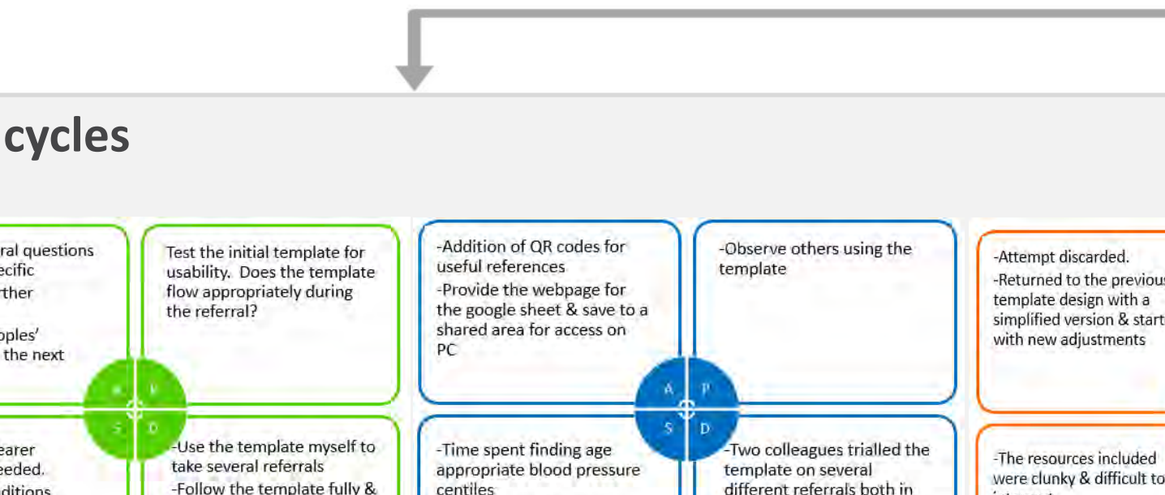


PDSA cycles





RUN CHART



REFLECTIONS & LEARNING

- Before finalising my aim I needed to examine the problem in depth & identify which part I felt emotionally invested in; this helped shape the aim
- Rather than leaping immediately to a change idea, forcing myself to consider alternatives helped shape the idea, change it and allowed me to pivot
- The smaller the initial PDSA the easier it is to carry out, review & repeat and to mentally prepare for each cycle
- What starts as a small project can (and has) opened up the potential for multiple further QI projects with the ideas discussed

QI Change Champion
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