I AM GOING TO BE LATE, AGAIN!

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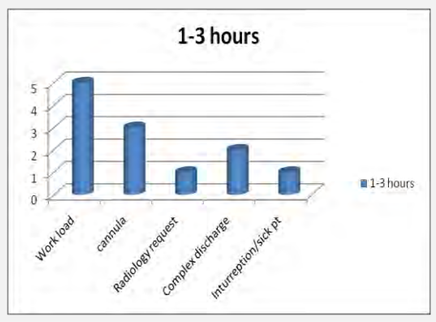
"You can't do a good job if your job is all you do." – Katie Thurms.

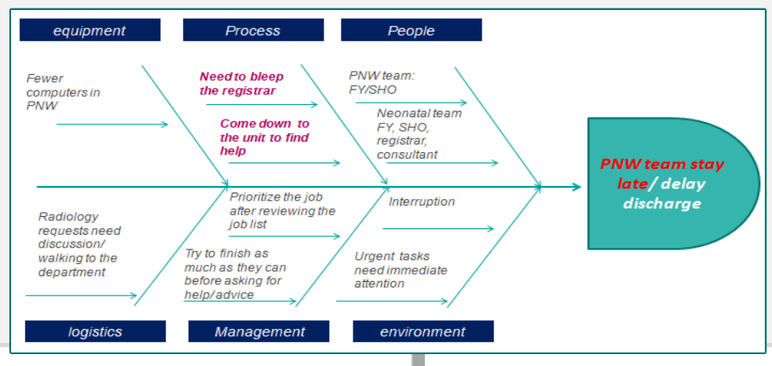
PROBLEM

**Trainees covering the postnatal ward come to us too late in the day for advice/help on tasks needed to send the baby home.
As a result: post-natal team members stay late, or babies stay yet another day.**

DIAGNOSTICS:

Post natal job list → Trainees start their review → Late request for advice/help → Stay behind to finish pending jobs/ handover to the next shift. → Baby discharged/ stay another night





AIM & MEASUREMENT DEFINITION:

Aim:
All doctors covering post-natal ward should leave on time with no pending tasks.

Measurements:
The extra time trainees at post-natal ward stayed back after working hours.

Inclusions:
All doctors on standard day shift (09:00-16:00).

Exclusions:
Doctors working long shift: 08:00-18:00 or 09:00-22:00.

Sampling and strategy:
Observational study over 2-months period.

CHANGE IDEAS:

- **Differences between workload from day to day.**
- **The training level of the doctor covering the post-natal ward can affect the workload dramatically.**
- **Trainees should call for help early if the workload is heavy or they need senior support.**
- **Start early with time-consuming tasks: needs waiting for results or radiology requests.**
- **A complete handover: when babies are discharged from the neonatal unit to PNW/TC they should have a completed discharge plan with no pending tasks for PNW doctors.**

PDSA CYCLES

Adapt:
Repeat the cycle to check whether the results were true and not co-incidence.

Early call for help:
- PNW trainees to summarise the tasks early in the morning,
- Midday huddle with the on-call consultant and the team to go through the jobs.
- If the job volume is large: support the PNW team.

Since we started this process, most days the PNW team finishes on time with no pending jobs.

- When the neonatal team with the on-call consultant finish the morning round, they go for a quick midday coffee break/huddle.
- We call the PNW team to join and discuss jobs.

Reject the idea

Starting with time-consuming tasks:
Doctors in PNW should start by doing blood investigations/ requesting scans/discussing with the consultant early.

Not possible as the tasks emerge during the day.

Before starting the ward round, the PNW team has a list of the jobs and starts with jobs requiring time to wait for results/scans.

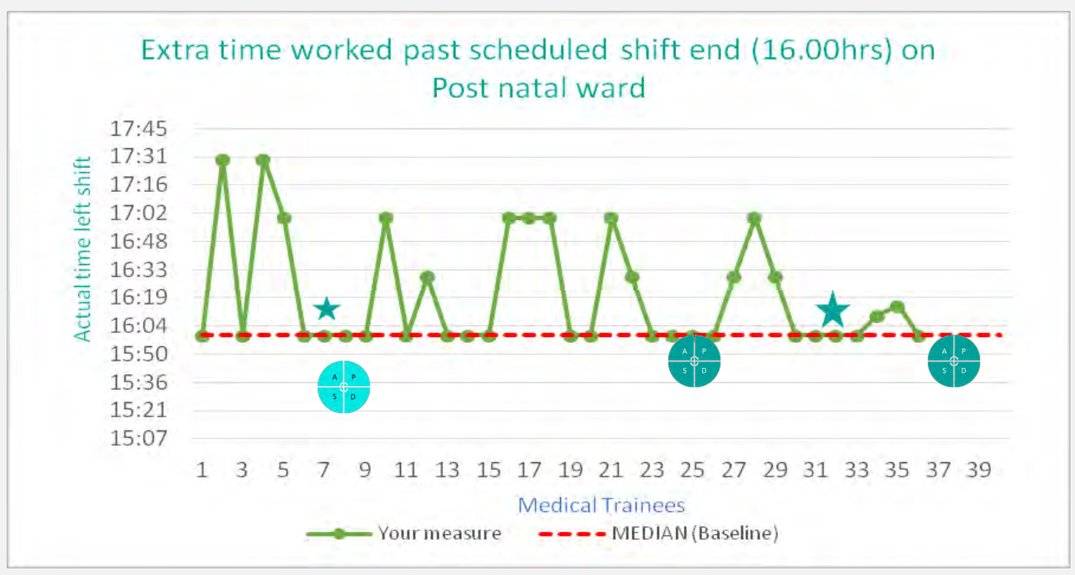
Reject:
The idea was rejected as all the staff needs to have experience on PNW cover.

Senior staff to cover PNW.
Allocating ST3/ senior clinical fellows to cover PNW.

I have shared the thought with my colleagues and we discussed the results.

It was an observation during my data collection that when a senior staff covers the PNW, the tasks are finished before the end of the day.

RUN CHART:



★ Trainees finished by 15:00-15:30

REFLECTIONS & LEARNING:

- **Quality improvement is a continuous process that requires engagement and collaboration.**
- **When choosing a project, it is important to select one that is achievable within the available resources and timeframe to ensure successful implementation and sustainable improvement.**
- **A small change can have a big impact on improving processes and outcomes.**
- **Continuing to test and iterate ideas is essential to identify the most effective solutions and ensure ongoing improvement.**