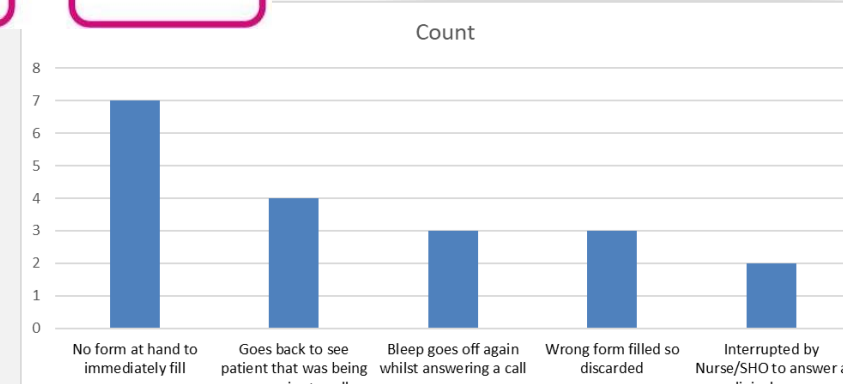
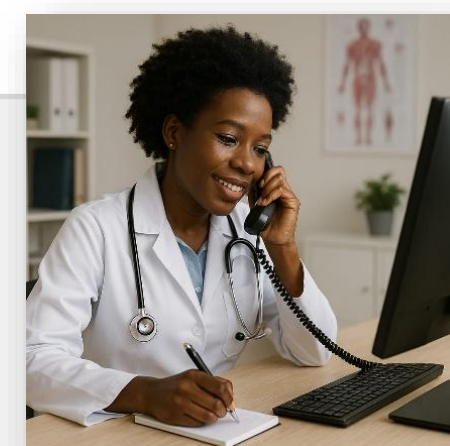
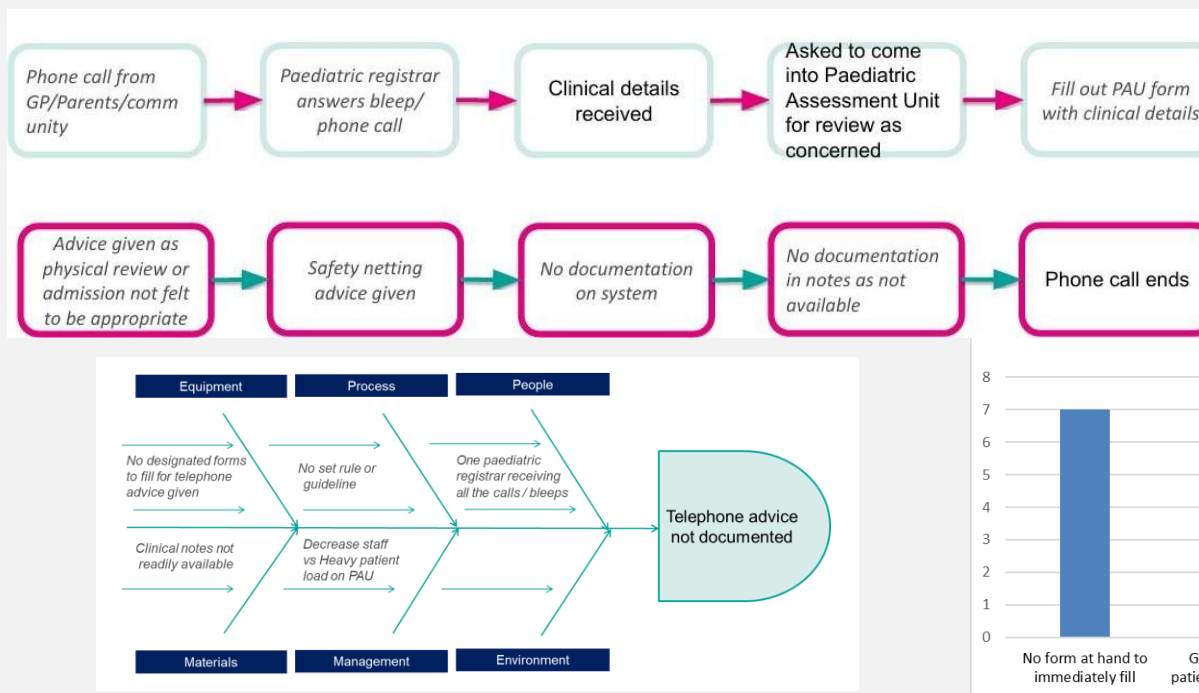


## BACKGROUND

**PROBLEM**  
Telephone advice given by the Paediatric team to parents, GPs, or community referrals is often undocumented. This leaves communication gaps, medico-legal risks, and lack of continuity of care.

On a typical shift on the Paediatric Assessment Unit, there are numerous & overwhelming phone calls from GPs, community & ED asking for advice or referrals. Not all these children are seen on the Paediatric Assessment Unit, and no records are made of these conversations when these patients are given advice over the telephone, and it is felt that a physical review is not required.

## DIAGNOSTICS



## AIM AND MEASUREMENT DEFINITION

By the end of August 2025, 8 out of 10 telephone advice given by the Paediatric team will be documented

**Chosen measure:** The number of telephone advice instances provided by the Paediatric team and clearly documented in patient notes. Score out of 2 for:

- Telephone advice calls received by the Paediatric team during the timeframe.
- Evidence of clear documentation of telephone advice to patient's electronic notes either directly or via designated paper forms.

**Inclusions:** All telephone calls from parents/GP/community where advice is given to them over the phone without the patient having to come into the hospital.

**Exclusions:** Telephone calls where the patient is asked to come in for review or assessment.

**Sampling method and frequency:** Random sampling of 20 telephone advice calls on the Paediatric Assessment Unit.

## CHANGE IDEAS

Use of an extra blank sheet to fill telephone advice given on a separate form from PAU forms already in use for patients expected to come in for a physical review.



Verbal reminders given at morning handovers.

Trial of using of already existing PAU forms that is in use for patients coming in for physical review. To add on top of the form telephone advice given when advice has been given by person giving it.



One on one daily reminders.

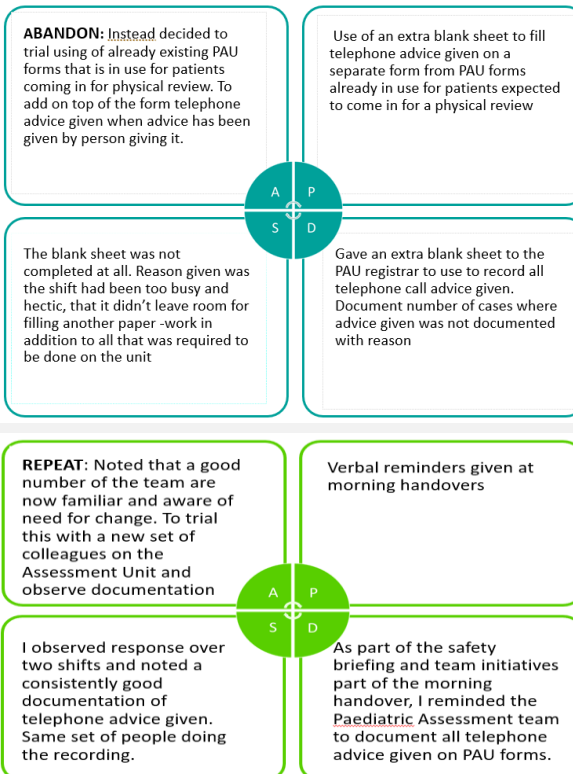
Edit PAU forms that are in use on the Paediatric Assessment Unit to include space for telephone advice given with prompt on form to document any telephone advice given.



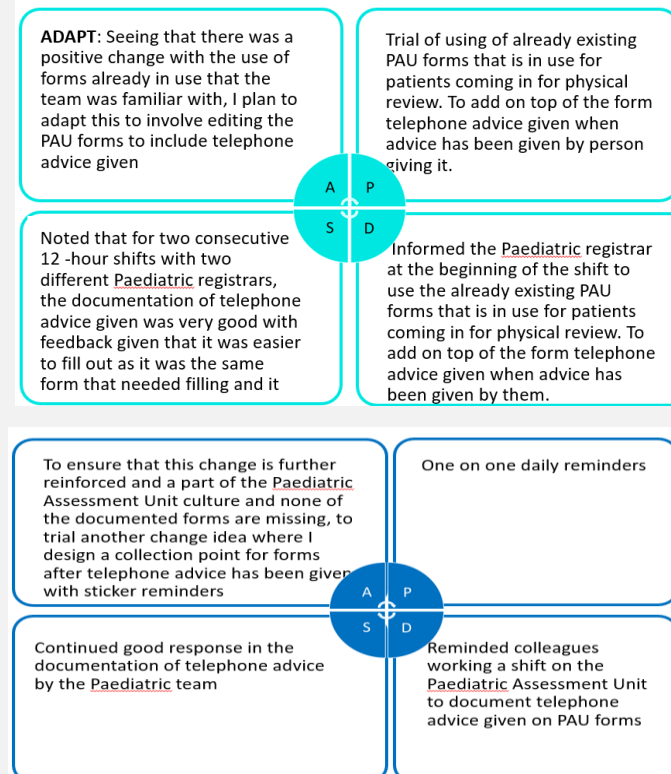
Re-design collection point for Telephone advice given PAU forms.

## PDSA cycles

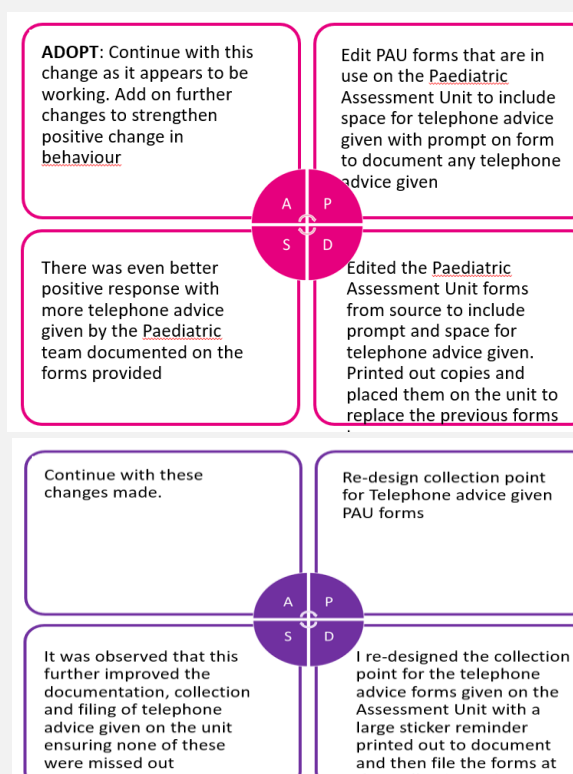
1



2.1



2.2

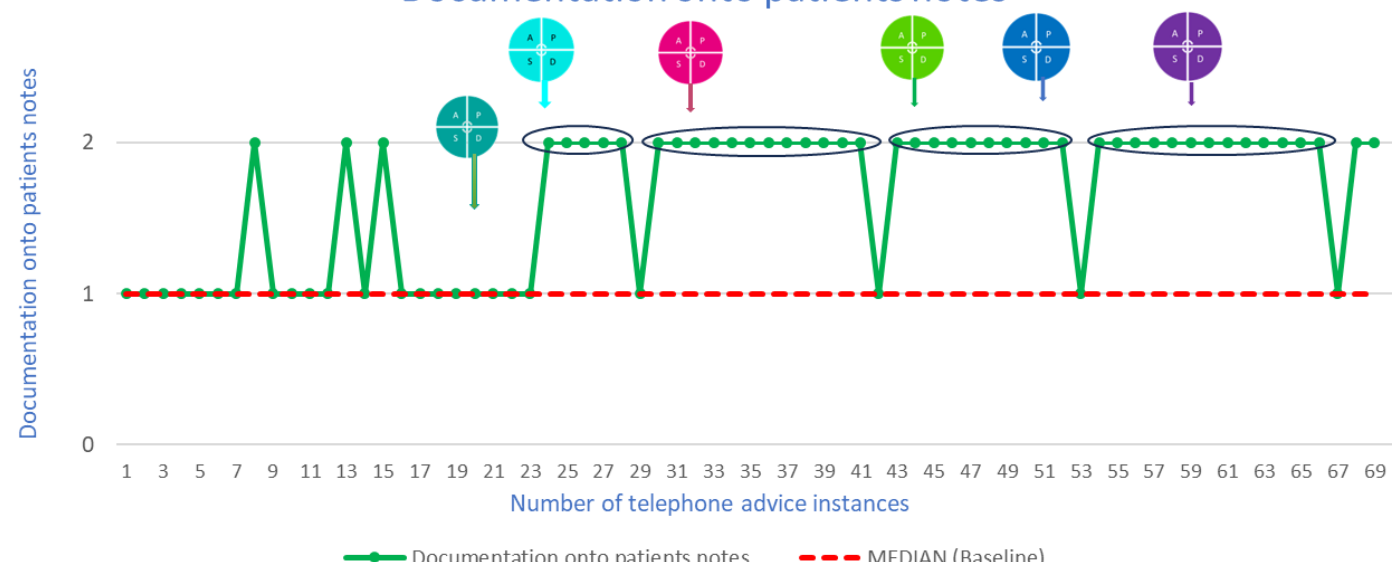


4



## RUN CHART

### Documentation onto patients notes



## CONCLUSIONS

- My aim to increase the documentation of telephone advice given by the Paediatric team was met: Baseline = 1.5 in 10 After PDSA improvements = 9 in 10.
- My aim of 8 out of 10 (80%) was achieved and surpassed as demonstrated by several runs of more than 6 data points above the median on the run chart following the introduction of change ideas.

## REFLECTIONS & LEARNING

- The improvement model provided a structured, data-driven framework to test ideas gradually and focus on impactful changes.
- The process helped identify root causes, discard less effective strategies, and strengthen successful ones, showing how small, measured adjustments can lead to lasting improvements.
- Sustainability was a key concern, with efforts made to ensure permanent staff continue championing practice of telephone advice documentation after the rotation ended.

*Acknowledgements:*  
Dionne Matthew (QIC Mentor)  
and the whole QIClearn team

