

Improving the Quality of Care through Sharing Knowledge

BACKGROUND

The Care Quality Improvement collaborative was set up to focus on four key areas following the CQC inspection in November 2013. The four areas identified were:

- **Deteriorating patient**
- **Falls**
- **Infection Control**
- **Pressure Ulcers**

The aim of creating the knowledge portal was to enable easy access to key policies, tools, guidelines, reports and evidence for the Care Quality Improvement Facilitators and ward staff.

LIBRARIAN'S ROLE

- Topic leads suggest new evidence needed
- Evidence searches are done by Librarian
- Information is loaded onto the knowledge portal by Librarian
- Quality Facilitators update information on driver diagrams

RESULTS

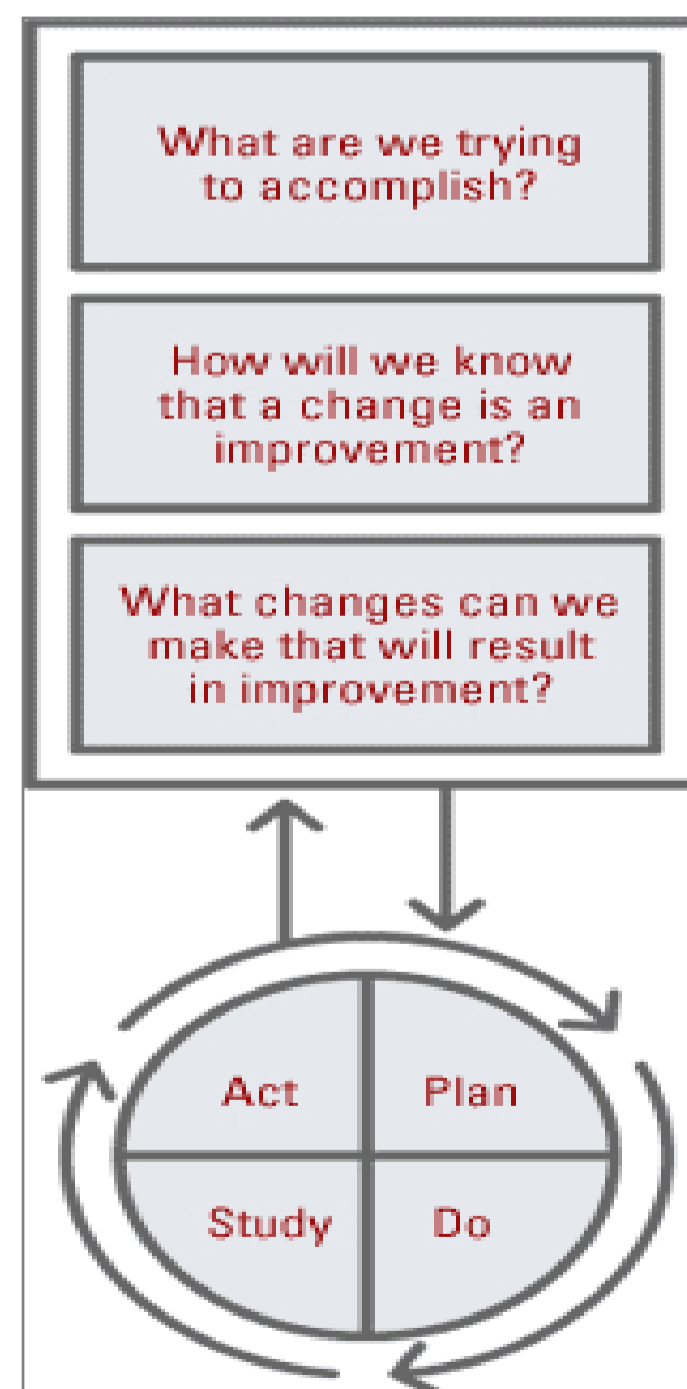
What went well:

- **67%** of wards that focused on reducing pressure ulcers in the collaborative achieved improvement
- Participating wards have achieved:
 - **19%** reduction in pressure ulcers
 - **29%** reduction in falls
 - **50%** reduction in cardiac arrests
- An increase in requests for literature searches and training
- The Library's role in improving care quality has become more recognised
- Better collaboration with the Trust's Clinical Academic Groups

(The Evidence Centre, 2014)

METHOD

The Care Quality Improvement Collaborative uses the Institute for Health Care Improvement (IHI) Methodology and Model for Improvement. PDSA Cycle (IHI, 2014)



CONTACT

Isatou N'jie
Clinical Support Librarian
Barts Health NHS Trust



Knowledge Portal

Welcome to the Barts Health Quality Collaborative Knowledge Portal. This is a space to share evidence and good practice. Please click on one of the topics below:

About us

- [Vision](#)
- [Improvement Journey](#)
- [Teams](#)
- [Organisational Development](#)
- [IHI](#)
- [CQC](#)

Driver Diagrams

- [Deteriorating Patient](#)
- [Falls](#)
- [Infection Control](#)
- [Pressure Ulcers](#)

- [Cohort 1](#)
- [Cohort 2](#)

Overarching evidence

Primary drivers

Secondary drivers

Supporting evidence

Primary Drivers	Secondary Drivers	Supporting Evidence
Admission observation baseline and plan undertaken within 2 hrs and communicated to team	Full Set of observations on admission Monitoring Plan in place showing expected parameters for each patient Communicate/document to team responsible for care	Guidance Background reading
Deterioration identification and risk stratification of the deteriorating patient	Record Vital Sign observations Detail the track and trigger score: MEWS/PAR/EWS/NEWS Perform assessment, escalate as required Communicate escalation using communication tool (SBAR)	Guidance Background reading
Responding to deteriorating patients	First responder/CCOT/clinical team review to prevent further deterioration Reassess frequency of observation Undertake additional monitoring if needed Implement changes to treatment plan	Guidance Background reading
Provide appropriate, reliable, timely care based on recognised evidence	Refer to Clinical Teams/CCOT, use of sepsis bundle Optimise ward support by reviews from CCOT/Acute responders Optimise transition between departments Ensure speedy admission to ICU/HDU when required Use care bundles where developed to ensure consistent care	Guidance Background reading
Built capability and competence	Multidisciplinary training to enable recognition and treatment of acute illness through Acute Skills courses SBAR Sepsis	Guidance Background reading

WHAT WE LEARNED

- The portal is functioning but needs to be improved, to become more user-friendly and easy to navigate.
- Trust should fund creating a very good website or use Moodle rather than wiki to have a good tool for ward staff
- Staff should be able to ask questions and make comments and seek advice from other team members, like a discussion forum.
- Library involvement at the early stages is important in improving quality of care.
- Improved patient care can be achieved by sharing good practices.

REFERENCES

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- The Evidence Centre. (2014). *Where to from here with the care quality collaborative? Outcomes and learning: March-August 2014*. [Online] Available from: <http://www.evidencecentre.com> [Accessed: 31 October, 2014]
- The Institute for Healthcare Improvement (2014). *Model for Improvement*. [Online] Available from: <http://www.ihl.org/resources/Pages/HowtoImprove/default.aspx> [Accessed: 28 October, 2014]