

Quality Improvement Project at New Cross Hospital (2022-2023): Improving Patient Outcomes in Acute Hypercapnic Respiratory Failure

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Quality Improvement Awards 2024

Introduction:

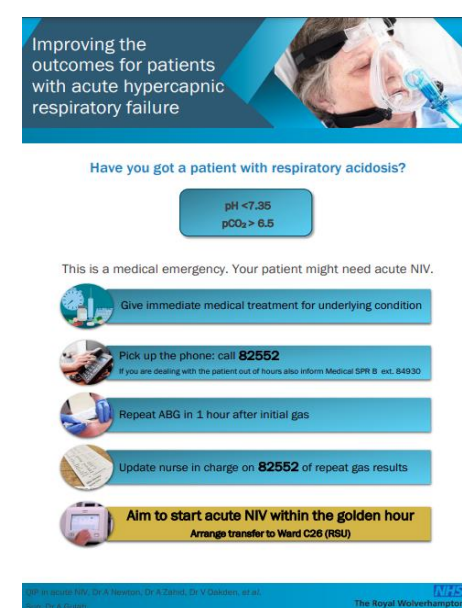
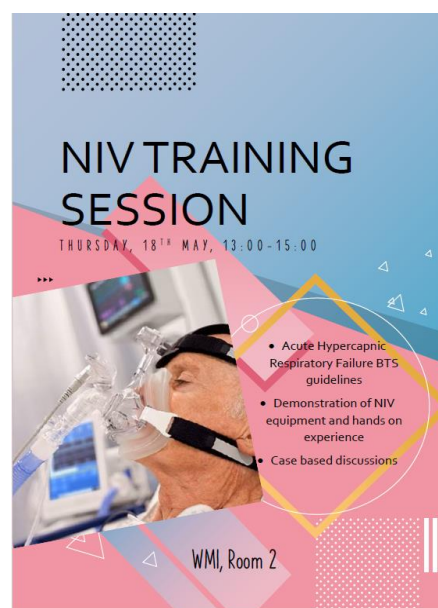
Prompt administration of acute NIV, as per BTS standards, within 60 minutes after initial medical treatment and blood gas results, has been associated with reduced mortality rates and enhanced patient outcomes.

Aim:

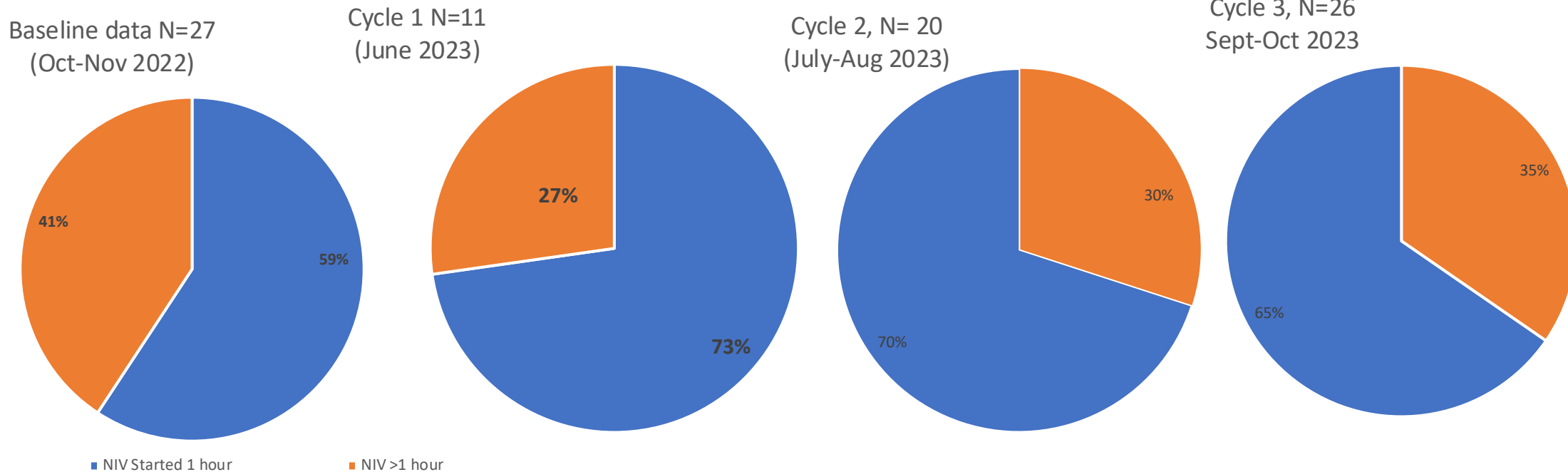
Improve the compliance of delivery of NIV to patients with acute type 2 respiratory failure as per BTS standards at New Cross Hospital.

Interventions:

- Structured workshop for registrars and tier 2 doctors on acute NIV guidelines at the trust
- Introducing new acute NIV referral process and poster sharing new NIV pathway throughout medical wards of the trust
- Dedicated 24h-telephone for direct referrals to acute NIV carried by a nurse in charge on respiratory ward
- Ring Fence bed dedicated for patient with acute T2RF on respiratory ward.



Results:



Conclusions:

- The baseline data underscored a moderate degree of noncompliance with BTS NIV standards.
- Continuous interventions implemented held promise in rectifying these deficiencies and showed sustained improvement
- Through a combination of education, enhanced processes, and streamlined communication, New Cross Hospital is poised to enhance patient outcomes in cases of acute hypercapnic respiratory failure.