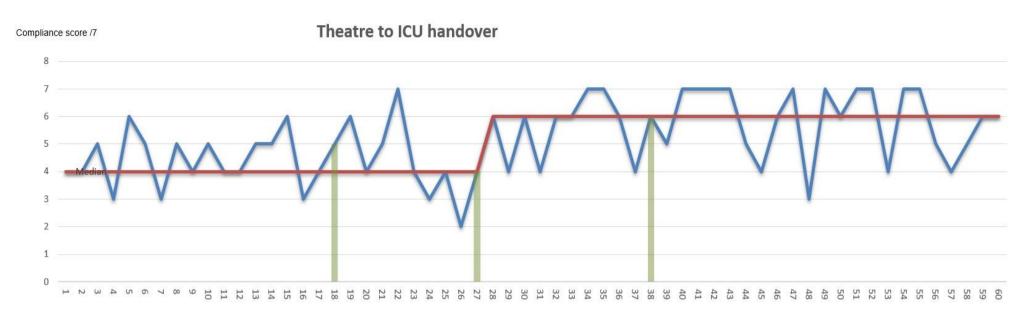


Theatre to ICU Handover

Dr Matthew Byrne ST6 ICM Dr Maddiha Anwer SAS Anaesthetics





Abstract

Effective handover plays a key part in ensuring continuity, quality and safety of patient care, with robust, standardized handover processes being key in minimizing complications and adverse events in sick patients. We carried out a quality improvement project consisting of several PDSA cycles with an aim of reducing the number of potential missed doses of medication in patients transferred from theatre to intensive care to <5% by August 1st. An upward shift in compliance can be seen after the second PDSA cycle, highlighting the importance of stakeholder engagement

in QI projects. Further cycles are ongoing.

Further info

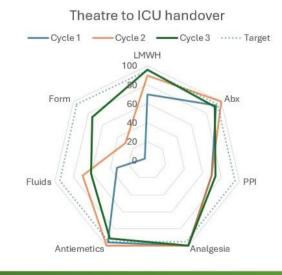
We studied the handover process by reviewing prescriptions for antibiotics, analgesia, anti-emetics, VTE prophylaxis, and PPIs.

Interventions included:

- 1 email reminders;
- 2- presentation of data, process and aims at departmental meetings;
- 3 -engaging with theatre managers to discuss of the project with theatre staff.

Future interventions will include changes to the handover proforma and further discussion at departmental meetings. This will help to reach the target of 95% in all domains and improve sustainability of change.

Satisfy Manage / Engage Stakeholder has High Power POWER OVER THE Theatre manager Anaesthetists over project **ODPs** Clinical leads Patients has Little / Recovery staff Surgical teams No Power IMPACTED BY THE PROJECT



Anaesthetics/Intensive care

Quality improvement project in theatre to ICU handover. Highlights the importance of stakeholder engagement across several PDSA cycles.

Working in partnership
The Royal Wolverhampton NHS Trust
Walsall Healthcare NHS Trust