

Theme | ACCS1 QIP
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REASON WHY?

In the acute medicine wards, a notable issue has been identified concerning incomplete allergy documentation of patient drug charts. This concern was underscored during a weekly teaching session by an acute medical consultant. To quantify the problem, a baseline audit of a sample of drug charts revealed that only 12.9% were fully completed with necessary allergy information. Given the crucial role of accurate documentation in patient safety, particularly in preventing medication administration to which patients may be allergic, this project aims to elevate the completeness of allergy information on drug charts to 50%.



Achieve complete allergy documentation on 75% of a representative sample of drug charts in the acute medicine wards by the 1st of July.

PLAN

A poster was created as a communication tool/reminder about allergy documentation and placed in each doctor's office, the handover room, A&E and the doctors' mess.

The poster was shared in the acute medicine Whatsapp group, and people were made aware of the ongoing project.

The poster was highlighted during the medical handover in the initial week, and the importance of accurate documentation was reinforced to the clerking team.

As part of the initial phase, some of the acute medicine ward pharmacists were asked to complete the allergy box and highlight to ward doctors if incomplete.

DO

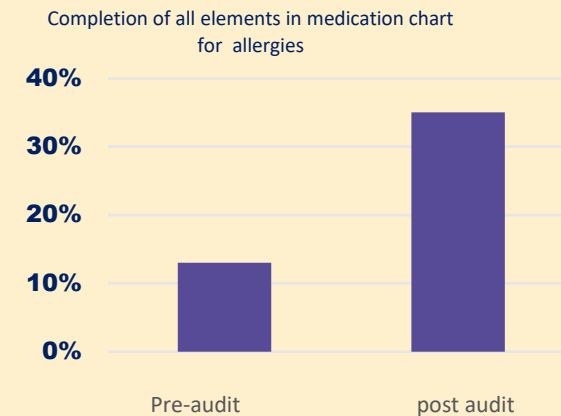
During a 6-week period, I supported doctors on Acute Medicine Floor to improve the completion of documentation for allergies on drug charts. This was achieved as planned using a Whatsapp group, individual conversations and the use of a poster.



STUDY

Colleagues were very receptive to the aim of the project, and it was agreed that practice in this area could be improved. It was an issue that the pharmacists had been aware of previously.

The poster was well received and worked well as a prompt for clerking doctors to complete the drug chart appropriately. During this 6-week period, there seemed to be a greater focus on allergy documentation which is seen in the post-audit results. The post-audit showed a completion rate of 35%.



ACT

Overall, the use of the poster, as well as individual conversations about the project has proved helpful in supporting colleagues to complete medication charts accurately.

During the study phase it was noted that in incomplete documentation, usually one element had been omitted, but this led to a reduction in the overall post-audit score. It is expected that if these small variations were improved over time, the overall improvement would rise much higher. Therefore, it is intended to retain the poster and continue to support colleagues to achieve this.

We intend to retain the poster and will re-audit in another 6 weeks.