

The KIWI Project: Reducing Routine Prescribing Out of Hours

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PROBLEM

Foundation doctors are regularly contacted out of hours (OOH) to complete routine prescribing tasks that should be completed in normal working hours. This impacts negatively on nursing time, junior doctor workload and patient safety.

In October 2019, F1 doctors in BHSCT were surveyed about OOH workload. Of the 33 respondents:

- 94%** Reported regularly being bleeped OOH to complete routine prescribing tasks
- 75%** Felt routine prescribing tasks OOH negatively impacted their ability to care for sick patients

STRATEGY FOR CHANGE

The "KIWI Checklist" is a communication tool designed to be used at ward level jointly by medical and nursing staff to ensure the timely completion of 4 routine prescribing tasks.

Fig 1.

- Kardex** - Are any drug kardexes due to run out in the next 72 hours?
- Insulin** - Are regular insulins prescribed for the next 24 hours?
- Warfarin** - Are the evening warfarins prescribed?
- IV fluid** - Is there a plan for overnight fluids?

Fig 2.

MEASURE OF IMPROVEMENT

The aims of the KIWI project were as follows:

- 1. Reduce the % of routine prescribing tasks requested OOH on general medical and mixed specialty F1 rotas in BCH from 40% to 20% by April 2020**
- 2. Successfully implement the checklist on 100% of medical wards in BCH and 50% of medical wards in RVH by June 2020**

The **primary outcome measure** for the project was the % of bleeps out of hours received by the F1 doctors on the BCH medical rotas that were for routine prescribing tasks.

EFFECTS OF CHANGE

Data was collected over a 10 week period from November-December 2019. After week 5 the checklist was introduced onto 2 medical wards in Belfast City Hospital (BCH). The checklist was introduced through a brief multidisciplinary education session.

Fig 3. Ward 7N

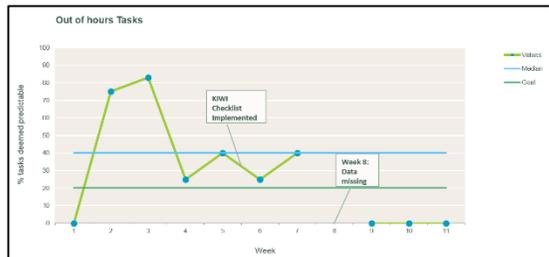
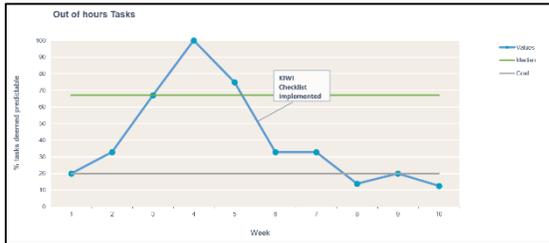
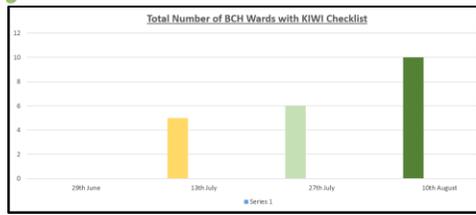


Fig 4. Ward 9N



EFFECTS OF CHANGE (ctd)

Fig. 5



Staff Feedback

- 100%** Found checklist easy to use
"really useful"
- 85%** Felt checklist improved patient safety
"ludicrous that it isn't used everywhere"

DISCUSSION

The results demonstrate that a simple checklist at ward level reduces the burden of routine prescribing, improving patient safety and reducing staff workload in the OOH period. Multidisciplinary feedback shows that use of the tool was positively received by staff.

Unfortunately due to the impact of COVID-19 the rollout phase of the project was halted. Whilst the second aim was not fully achieved, the checklist has been approved for rollout within a number of divisions within the trust. As of August 2020 the checklist has been successfully implemented in 10 wards in BCH, with plans for further rollout across the trust.