

Quality Improvement Project on Documentation of Trauma Quality Indicators in Nurse's Report

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Background

- Nursing documentation can serve as an indicator of quality nursing practise. According to Wilson et al. (2012) Journal of emergency nursing September–October 1989 Volume 15, Issue 5, Pages 393–398
- Nursing records are legal documentation of ongoing patient care delivery and the chronicle of the patient's responses to therapeutic interventions. Journal of emergency nursing September–October 1989 Volume 15, Issue 5, Pages 393–398
- Documentation is important for education, research and quality assurance. Fundamental of nursing, DeLaune & Ladner 2011:216
- For the trauma patient, status of airway, breathing, and circulatory systems must be recorded. Mechanisms of injury, GCS, trauma score (or essential components), spinal immobilization is also important. Journal of emergency nursing September–October 1989 Volume 15, Issue 5, Pages 393–398.
- Trauma quality in-hospital to consider in documentation include:
 - Airway
 - Haemorrhage control
 - Chest
 - Fluid resuscitation
- Guidelines for trauma quality improvement programmes ©World Health Organization 2009

Aim of the study

- To improve the documentation of trauma quality indicators in Red area nurse's reports by 50% from the baseline median of trauma quality indicators (median 33.3%) over 4months (1st January -30th April 2017).

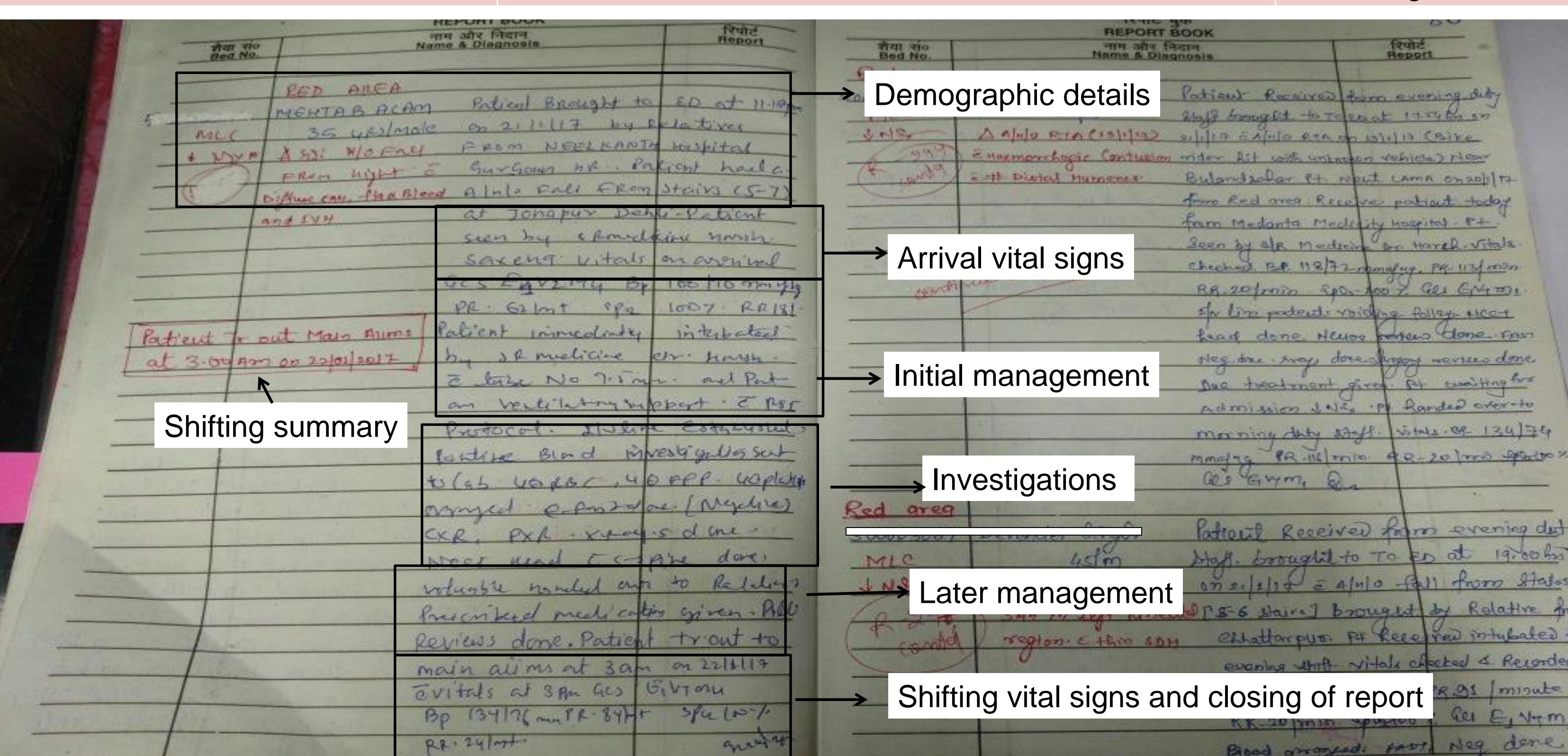
Criteria for the study of T.Q.I

- Inclusion -All red area patients report documented in red area book.
- Exclusion - Brought dead patient report.

Data source (Red area nurses report)

Data calculation of T.Q.I

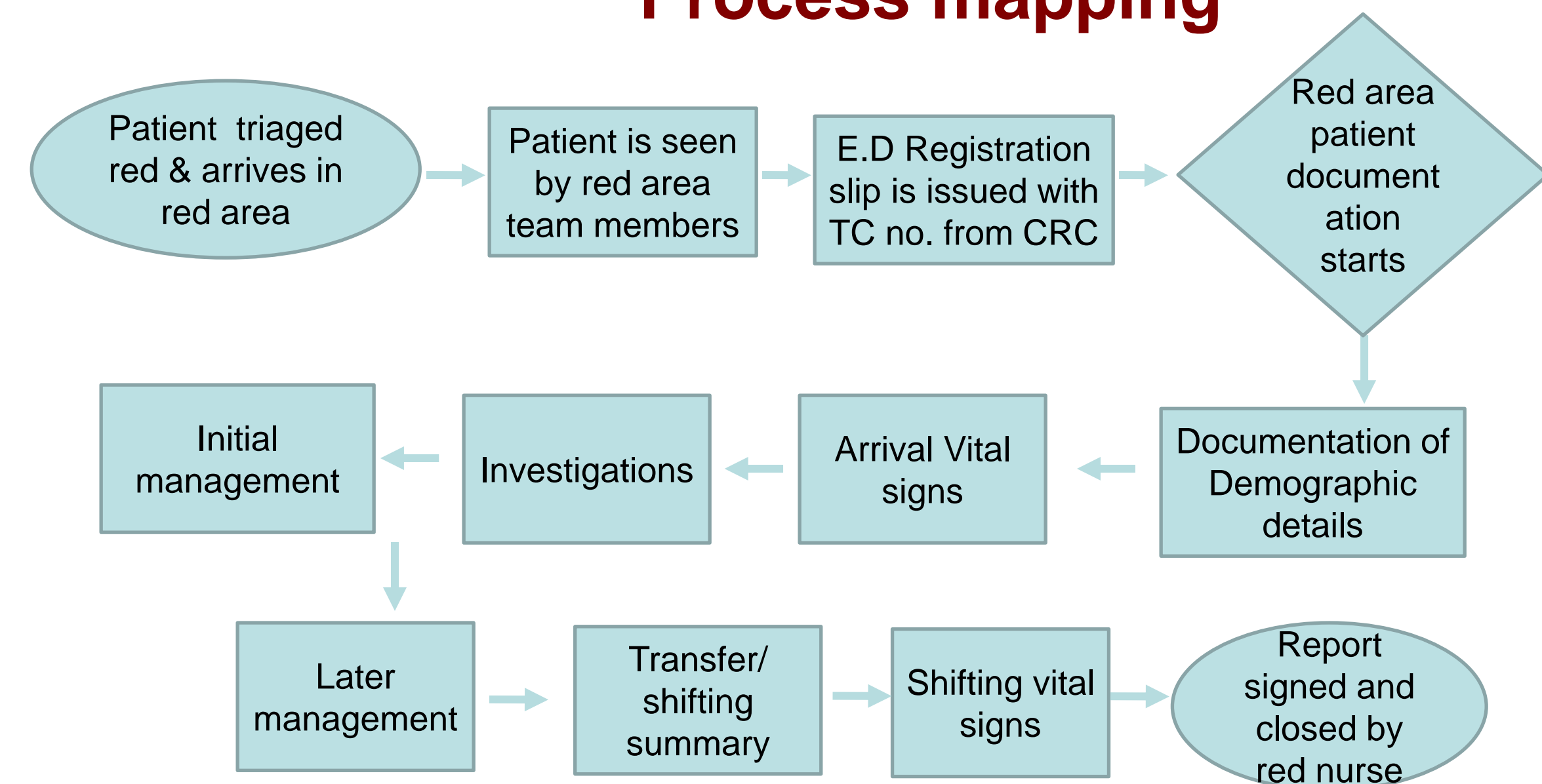
Trauma Q.I	Words documented in red report book	Marks
Airway Assessment	•Patent •Compromised	
Airway Management	•O2 mask •Intubation •Cricothyrotomy	
Breathing Assessment	•B/L Air entry status •CCT •Respiration rate(min)	
Breathing intervention	•ICD inserted(Rt / Lt)	
Circulation assessment	•Pulse(min) •B.P(min) •FAST(positive/negative)	
Circulation Management	•I/V Fluid given (type and amount in ml/litres) •Blood given (Cross-match type and time)	
Red case no.	Name of the patient-	Total score in Percentage -



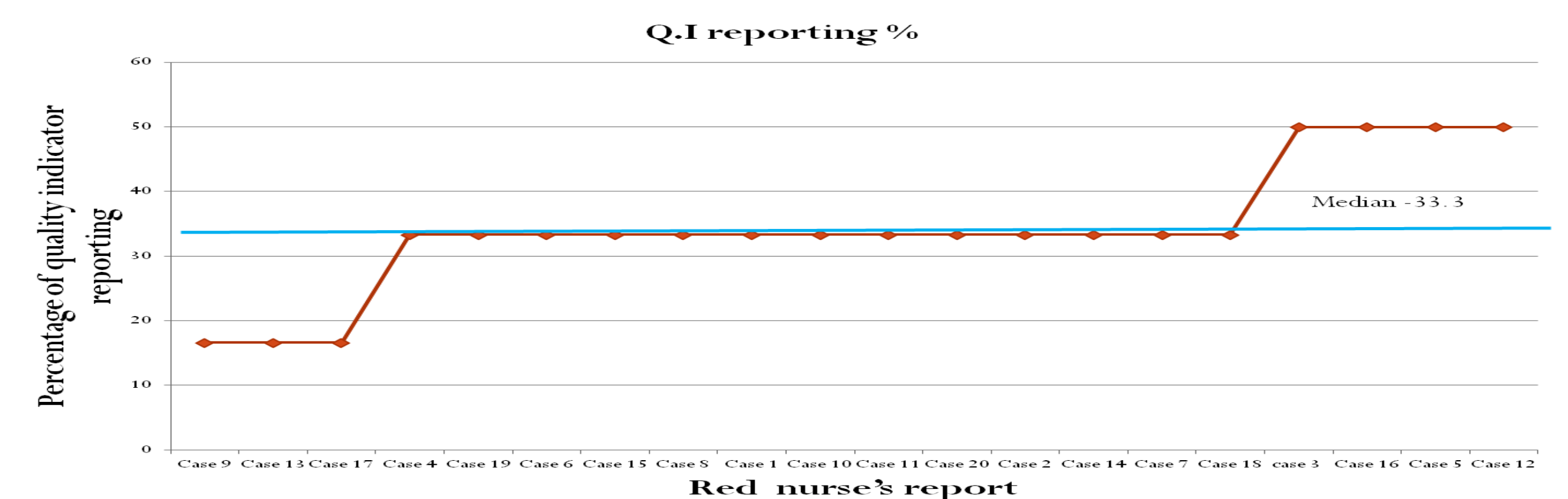
Quality improvement team

Members	Name	Roles
Team leader	Dr. Sanjeev Bhoi	Mentoring
Team member	ENARS	Developing module and analyzing records.
Team member	Vidhu	Data recording
Team member	Omana Vijayan	Implementation
Team member	Red area nurses	Documentation in report

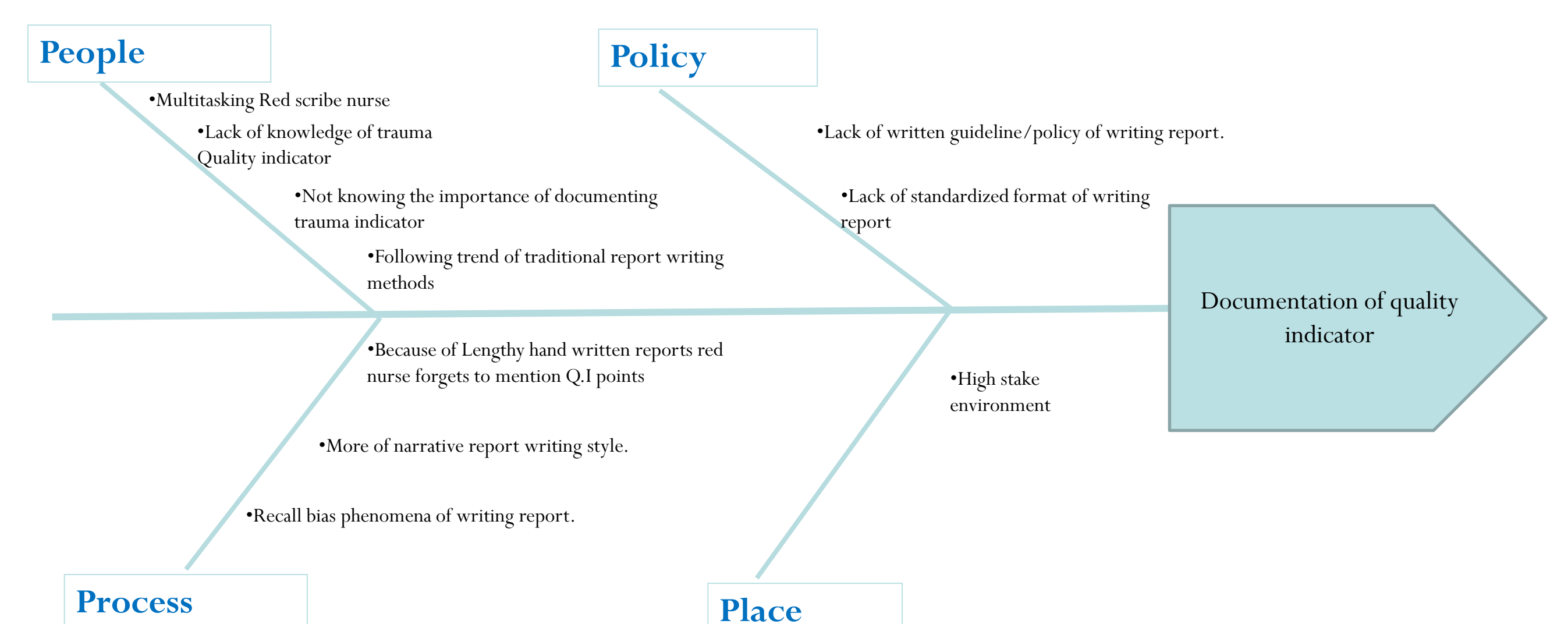
Process mapping



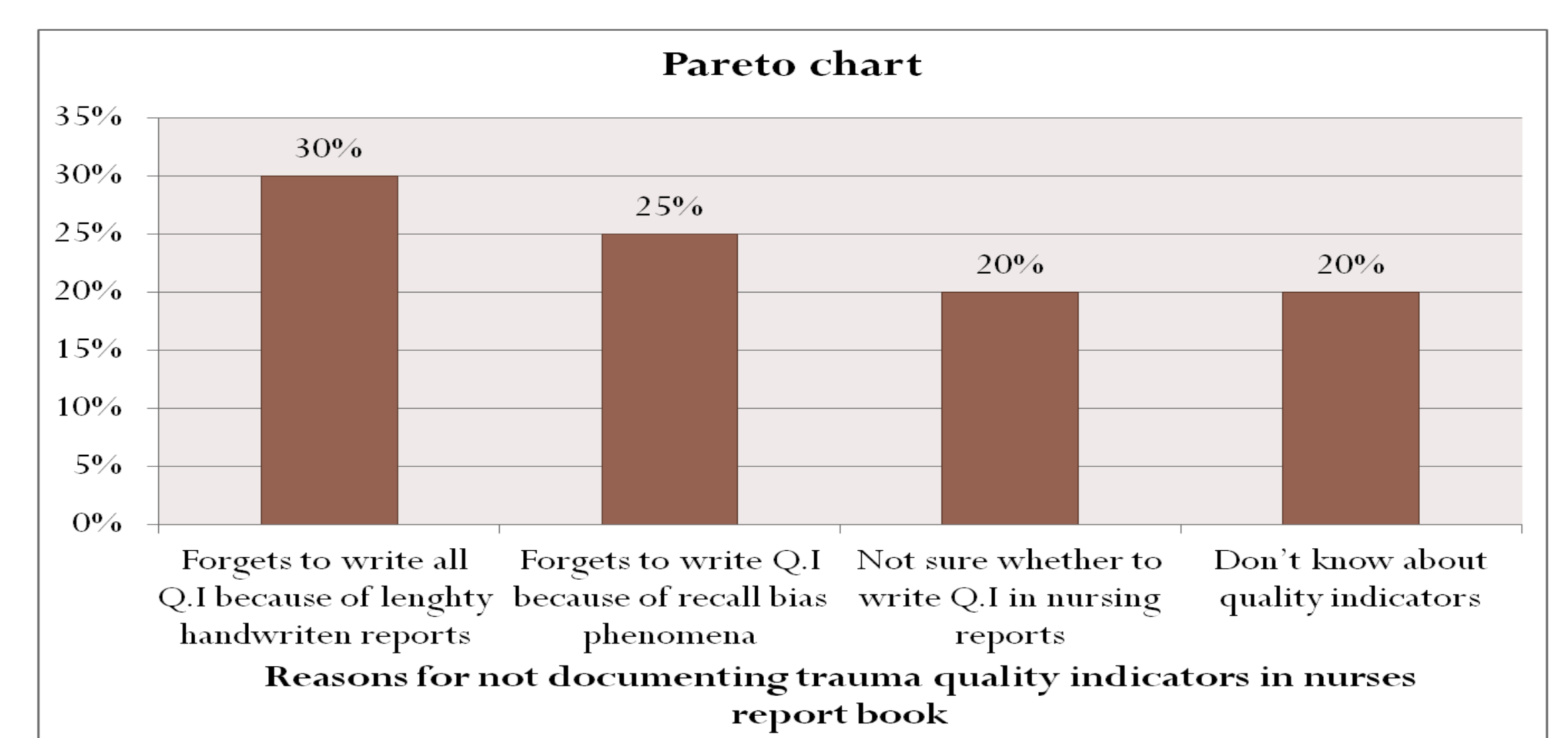
T.Q.I Baseline data



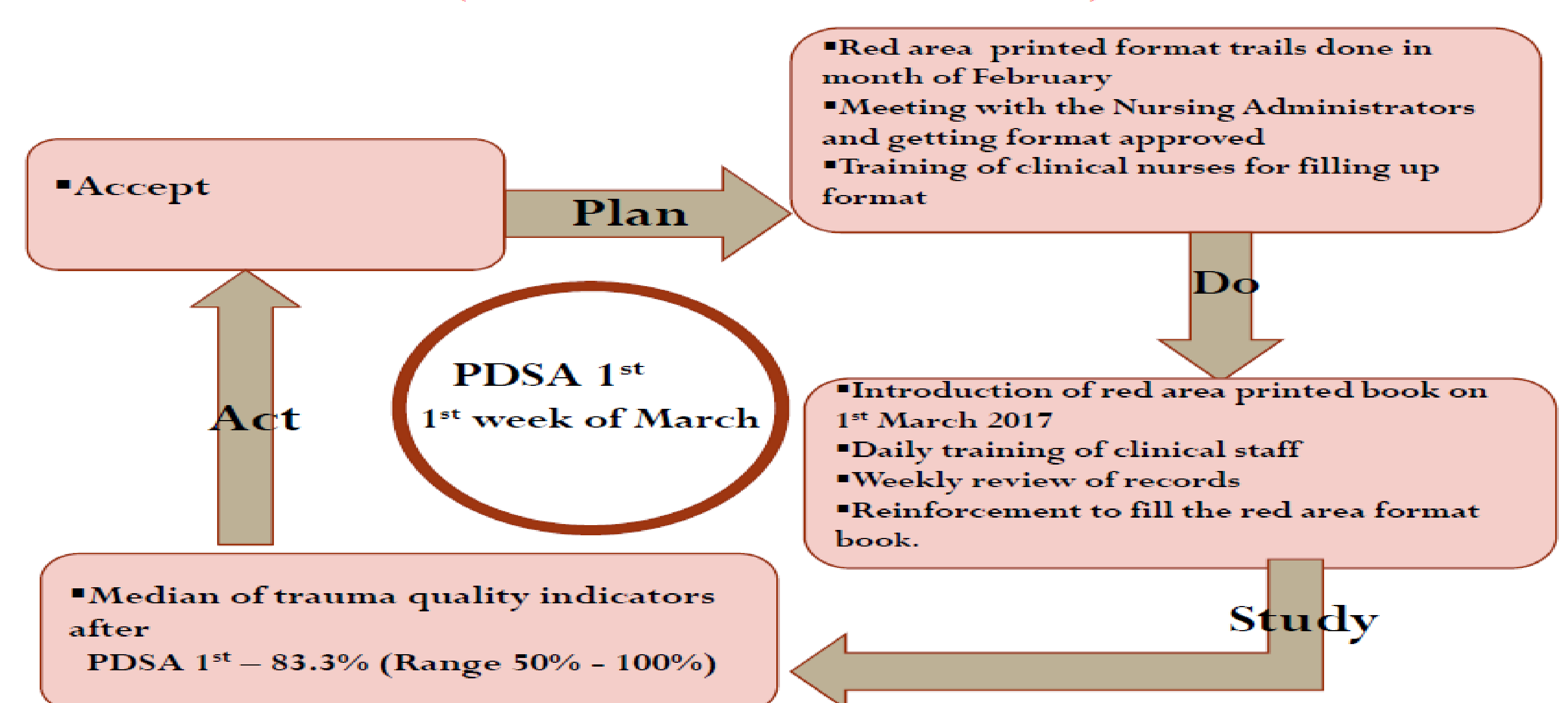
Fish Bone Analysis



Pareto analysis



PDSA (1st week of March 2017)



Quality Improvement Result



Conclusion

- Trauma quality indicators are important to document in nurses records for continuing quality improvement, training, education and research.