

Earlier recognition and management of the unwell mother or baby

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Project title and aims statement

To ensure that 90% of maternity and neonatal records show evidence of a MEWS or NEWTT chart demonstrating number of triggers and charts with appropriate review by June 2020.



Background

Based on an incident of Sepsis being missed we identified some delays in recognising and escalating abnormal observations. MEWS charts were in use although not in all areas and not always being used appropriately. Likewise the NEWTT charts were not being used consistently across the Directorate.

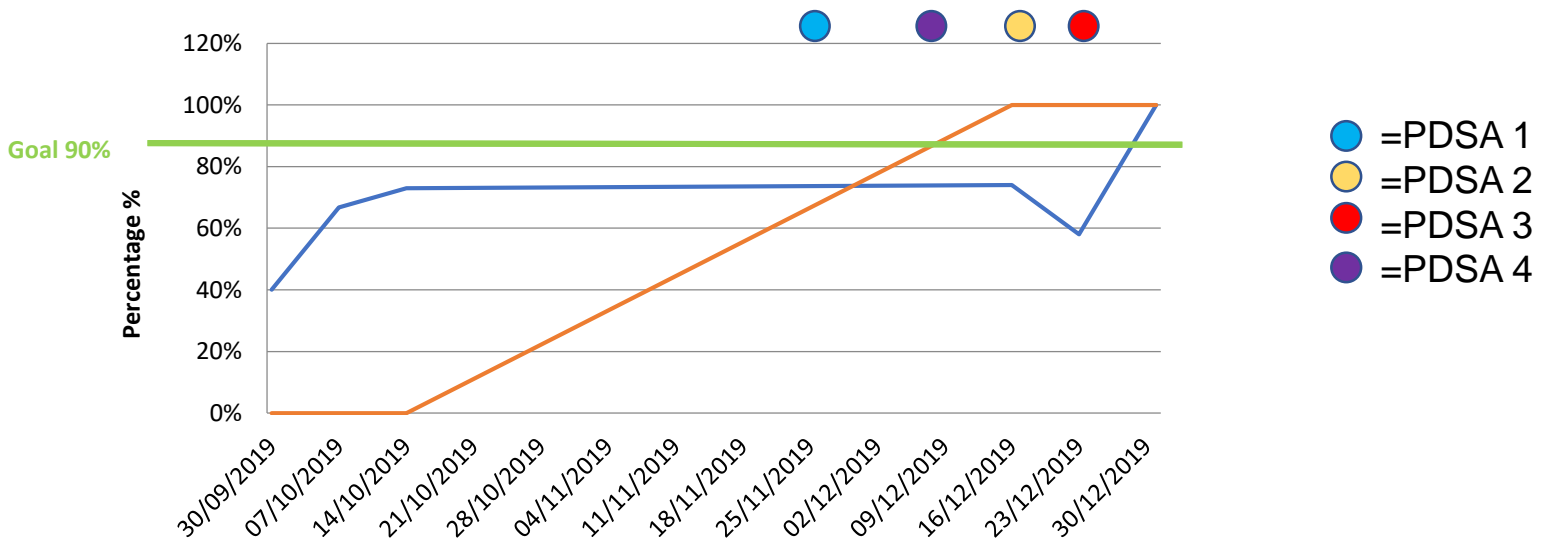
Approach taken

- Initial process mapping to review key areas where change was required
- Engagement of all staff in all areas
- PDSA cycles with short timescales
- Fortnightly meetings with home team
- Data collection weekly from all areas

Change ideas

- PDSA 1: Implementation of an amended MEWS chart (in-patients).
- PDSA 2: Introduction of the MEWS chart to other areas (outpatients).
- PDSA 3: Home team to become leaders of change and promote efficient escalation
- PDSA 4: MEWS charts placed at patient bedside so observations recorded contemporaneously and acted upon.

Progress of MEWS Chart Implementation 2019



	30/09/2019	07/10/2019	14/10/2019	16/12/2019	23/12/2019	31/12/2019
Inpatient- Number of triggers and charts with appropriate review	40%	66.70%	73%	74%	58%	100%
Outpatient-% of Number of triggers and charts with appropriate review	0%	0%	0%	100%	100%	100%

Learning

- Improved understanding of QI methodology and terminology
- Importance of early support from the home team
- Using small PDSA cycles to drive changes in practice
- Embrace challenges using a team approach
- Culture and communication play an important role
- Need detected time and admin support



Outcome and impact

There was a significant delay in starting to implement the PDSA cycles due to problems in amending the MEWS.

The team refocused and considered other appropriate PDSA cycles to work towards the project aim.

The data has already demonstrated improvements in practice however we are still very early in the implementation of all PDSA cycles.