

Project Title

Blood Glucose Monitoring (BGM) Chart are not Documented Clearly by Patients at A43

Project Lead and Members

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Project Members: Nurhidah Binte Mahmud, Masdiana Binte Mohamed Yusof, Angie Lee Peng Hoon, Dorcas Loh Yoke Chan, Roziah Bte Nasir, Dr Chan Soo Ling

Organisation(s) Involved

Ng Teng Fong General Hospital, Jurong Community Hospital

Healthcare Family Group(s) Involved in this Project

Nursing

Applicable Specialty or Discipline

Endocrinology

Project Period

Start date: Jan 2021

Completed date: Apr 2021

Aims

Clinic A43 intends to improve the BGM chart by April 2021 because clear documentation provide better interpretation of patient blood glucose readings.

Background

See poster appended / below

Methods

See poster appended / below

Results

See poster appended / below

Lessons Learnt

- The main key point in this project is engaging the patients in the design of this new improvised BGM chart.
- It makes documentation of the blood glucose readings meaningful to the patients, it improves care delivery to guide treatment decisions and is patient-centered
- The clarity and simplicity of the BGM charting has reduced confusion and consultation time with the Endocrine team
- This improvised BGM chart has also become an essential tool during DNE telehealth consult

Conclusion

See poster appended / below

Project Category

Care & Process Redesign, Quality Improvement, Workflow Redesign, Care
Continuum, Outpatient Care, Specialist Outpatient Clinics

Keywords

Blood Glucose Readings

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Blood Glucose Monitoring (BGM) chart are not documented clearly by patients at A43

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TEAM MEMBERS: SN NURHIDAH BINTE MAHMUD (SOC A43), SSN MASDIANA BINTE MOHAMED YUSOF (SOC A43), SSN ANGIE LEE PENG HOON (SOC A43), SSN DORCAS LOH YOKE CHAN (SOC A43), PSA ROZIAH BTE NASIR, (OPS, SOC A43), DR CHAN SOO LING (CONSULTANT, MEDICINE)

Define Problem, Set Aim

Problem/Opportunity for Improvement

Patients are unable to document the Blood Glucose Monitoring (BGM) chart clearly, resulting in confusion for the Diabetes Nurse Educator (DNEs) to interpret the blood glucose readings. Improper documentation of blood glucose readings will take a longer consultation time.

Aim

Clinic A43 intends to improve the BGM chart by April 2021 because clear documentation provide better interpretation of patient blood glucose readings.

Our goals include:

70% of patient are able to document the BG readings clearly

OLD BGM CHART

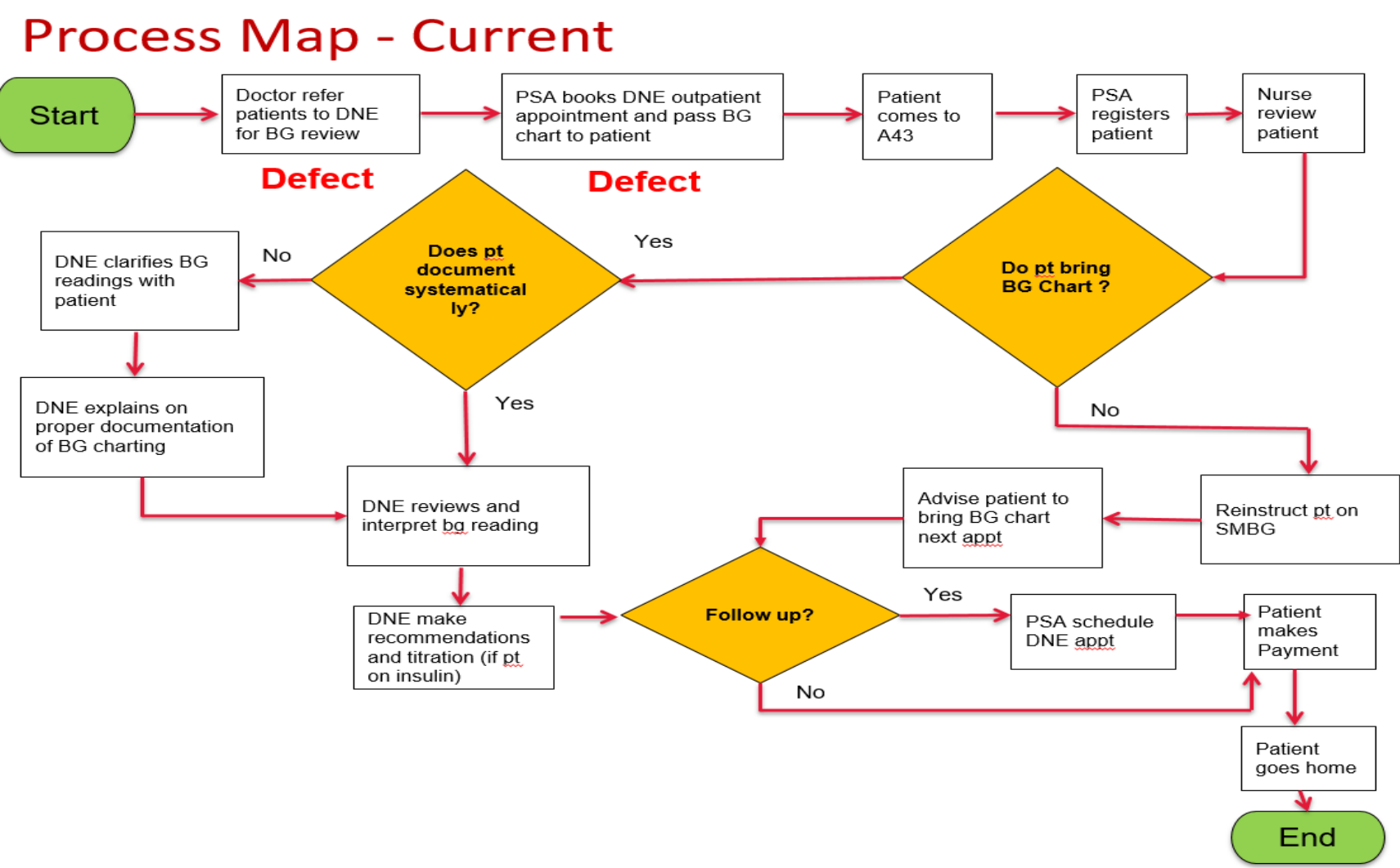
Establish Measures

What was your performance before interventions



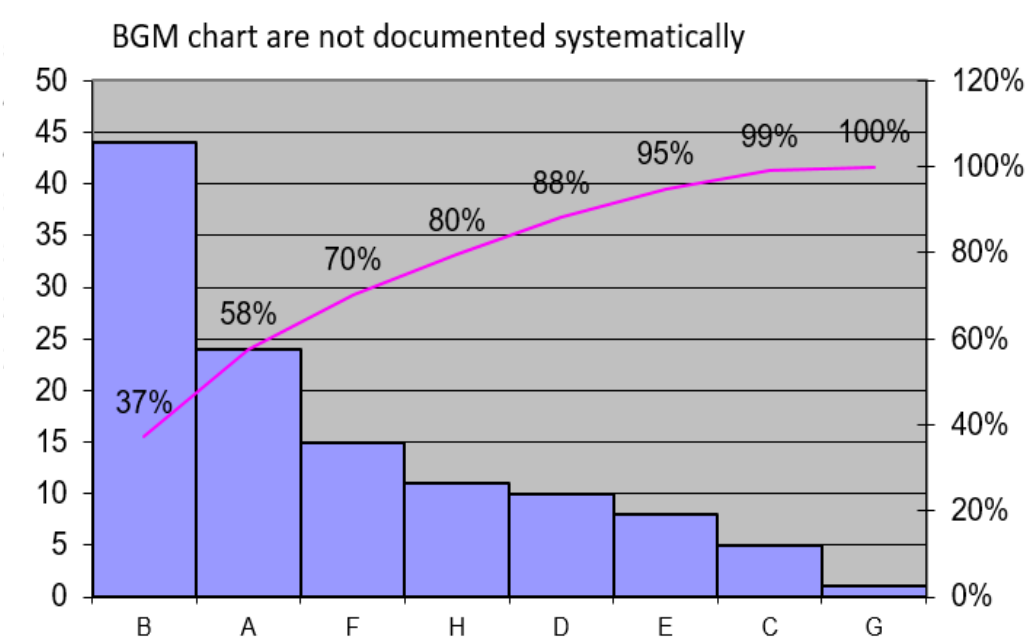
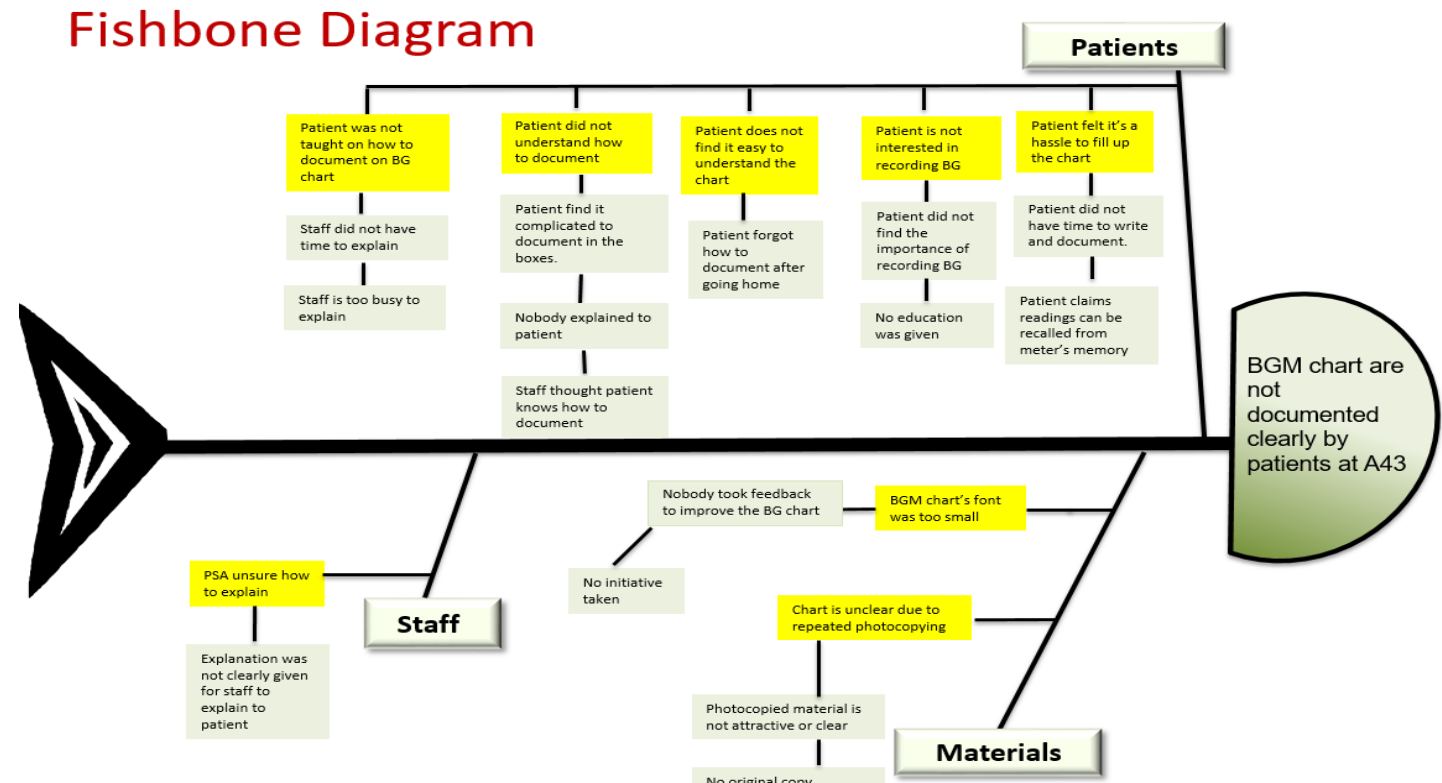
Analyse Problem

What is your process before interventions



What are the probable root causes?

Fishbone Diagram

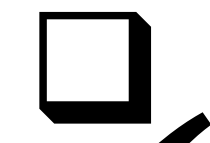


Root Causes Identified

- Patient was not taught on how to document on BGM chart
- Patient did not understand how to document
- Patient does not find it easy to understand the chart
- Patient is not interested in recording blood glucose
- Patient felt it's a hassle to fill up the chart
- PSA unsure how to explain
- BGM chart's font was too small
- Chart is unclear due to repeated photocopying



SAFETY

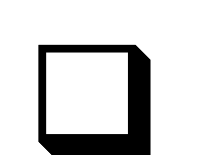


QUALITY

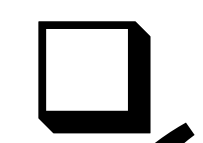


PATIENT

EXPERIENCE



PRODUCTIVITY



COST

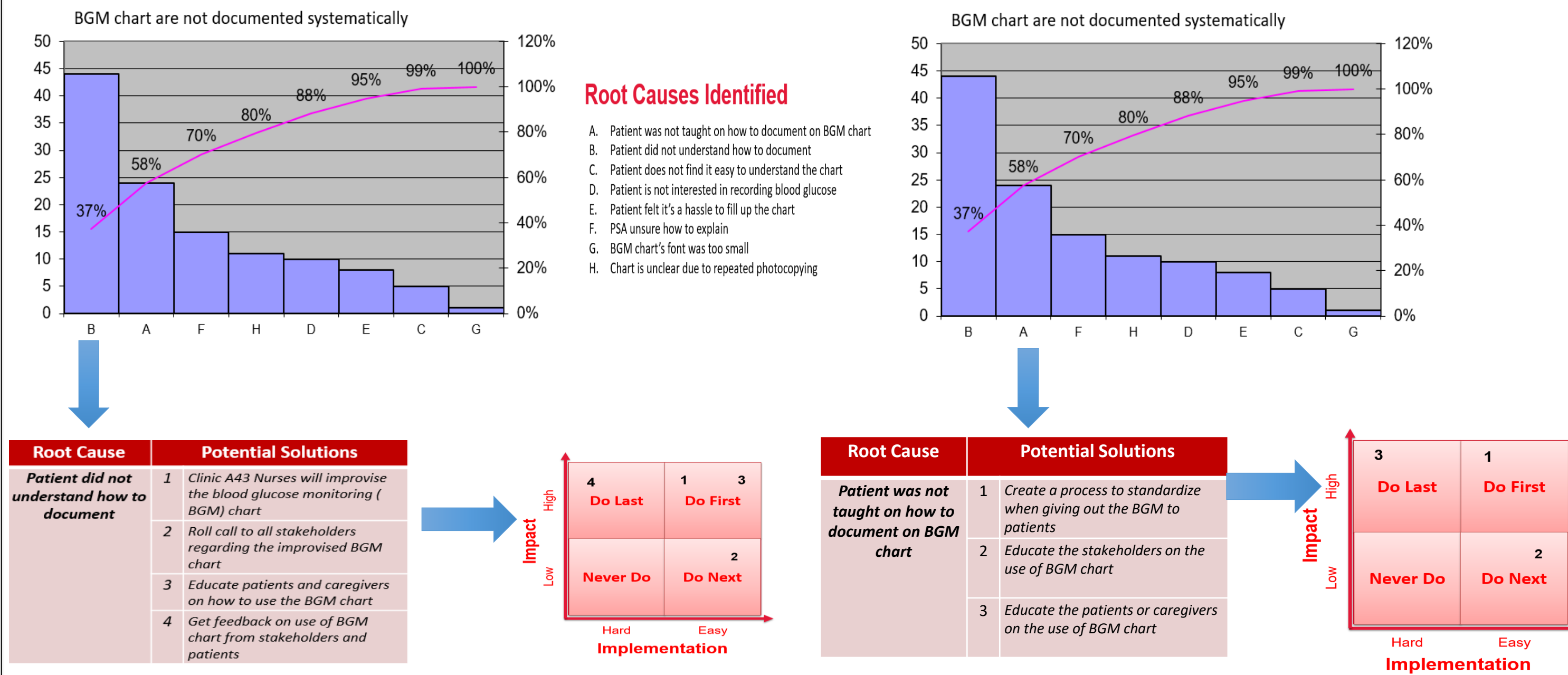


TEAMWORK



COMMUNICATION

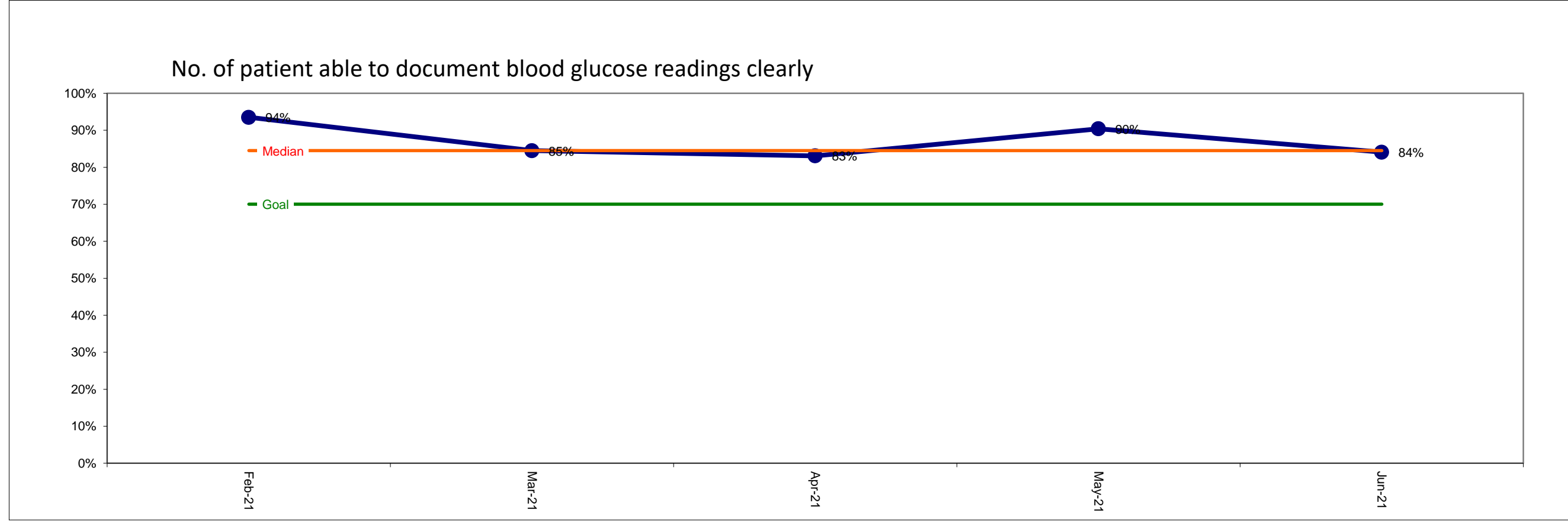
Select Changes



Test & Implement Changes

How do we pilot the changes? What are the initial results?

CYCLE	PLAN	DO	STUDY	ACT
1	<p>What is the aim of this cycle? What do you need to do before you execute the test change? (Who, What, Where, When)</p> <p>To test whether improving the BGM chart will improve patient's understanding and ability to document clearly.</p> <ul style="list-style-type: none"> The endocrine team discuss and improve the BGM chart. The endocrine team discuss on the process to standardize when giving out the BGM chart. Roll call was done to the PSA and DNE at A43 to follow the standardize process when giving out the BGM chart. Roll call was done to PSA and DNE to educate the patient when giving out the BGM chart. 	<p>Was the test change carried out as planned?</p> <p>What are the feedback & observations from participants?</p> <p>The test change was carried out in January 2021.</p> <ul style="list-style-type: none"> Patients reported improvised BGM chart is easier to understand and chart. Staffs verbalized improvement in patient's BG charting. Staffs verbalized that improvised BGM chart is easier to teach. Doctors and DNE are able to interpret the BGM readings and make better treatment decisions. 	<p>What are the results? Use run charts to illustrate.</p> <p>What did you learn from this cycle?</p> <p>From Feb to June 2021, <u>more than 70% of patients are able to document the BGM chart correctly.</u> DNE and Doctors are able to interpret BG readings and make better treatment decisions.</p>	<p>What is the conclusion from "Study"?</p> <p>What is your plan for the next cycle (adopt / adapt / abandon)?</p> <p>We will adopt this change. We would want to put this improvised BGM chart in intranet so that it is accessible to other staffs from other departments. We are also working on developing other languages for the BGM chart.</p>



Spread Changes, Learning Points

What are/were the strategies to spread change after implementation?

We have communicated to the Endocrine team (Doctors, DNEs & PSAs) in A43 to educate the patients when giving out the BGM charts. The team planned to create the BGM chart in multiple languages.

What are the key learnings from this project?

The main key point in this project is engaging the patients in the design of this new improvised BGM chart.

It makes documentation of the blood glucose readings meaningful to the patients, it improves care delivery to guide treatment decisions and is patient-centered.

The clarity and simplicity of the BGM charting has reduced confusion and consultation time with the Endocrine team.

This improvised BGM chart has also become a essential tool during DNE telehealth consult.