

# Cohort - SIFS FLASH REPORT


Name:

Melania Geymonat Ramirez

What problem is your project looking to improve?

Improve level of care for patients with brain injury in critical care.

AIM statement (remember STAN)

Outstanding level of care provided in >90% of patients presenting with severe brain injury by 

QI Tools and Change Ideas

Paper checklist / prompt  
Introductory tool for team members

Measures

- Outcome: a successful outcome is doing correctly all the measures listed in page 2.
- Process: usage of the tool, action enacted by measures out of range, checklist usage
- Balancing: SMR, median length of stay.

PDSA Cycles

PDSA 1- explore the need for an introductory tool to improve efficiency and standardisation during induction and data collection, understand the contextual factors and potential barriers to its use, and identify appropriate methods to measure if it is an improvement. Decision to adapt.  
PDSA 2 – tool presented to Consultants, to conclude cycle in July.

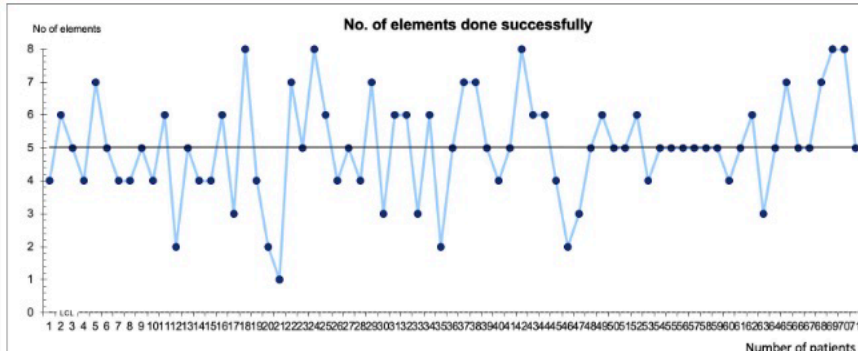
Have you experienced any Challenges?

Big project with own timeline and ambitious aim.  
Paper checklist: current low adoption rate as recent implementation and potential to increase workload.  
Introductory tool: time constraints.

What are your Next Steps?

-Continue implementing checklist. Continue doing data collection.  
-Second PDSA for introductory tool: review with Consultants, finetune tool, gather baseline data prior to full scale up.

Data



No shift, trend, astronomical data point.  
For 70 patients, 28 runs – which falls within margin expect as per Swed and Eisenhart table – therefore sequence is random.

**AIM:** Outstanding level of care provided in > 90% of patients presenting with severe brain injury by



**INTERVENTIONS:** what are your change ideas? These will relate to your process measures.

In the table below write each of your measures, indicating whether it's outcome, process or balancing. Use this space to record the frequency of the data available / reviewed for your baseline, and that you are planning to collect as part of your project.

\*outcomes measures in next page / \*\*all frequencies are 10 patients per month

Measures (remember to have a good operational definition – what specifically will you be reviewing?)	Outcome	Process	Balancing	Frequency** Baseline	Frequency** post-intervention
Each element of the outcomes* measures		x		10 patients per month	
Use of neuroprotection tool (Yes vs No for individual patient)		x			
Elements completed on tool		x			
Evidence of action taken (including vent/infusion rate changes or ACCP/doctor asked for review) when target missed		x			
Median LOS			x		
SMR			x		

## Outcomes measures

Outstanding level of care is defined by the success of each of the following elements:

1. Clear targets documented for BP\*
  2. Clear targets documented for BP PaO<sub>2</sub>\*
  3. Clear targets documented for BP PaCO<sub>2</sub>\*
  4. <x2 PaO<sub>2</sub> below target (when FiO<sub>2</sub> not 1.0)
  5. <x2 PaCO<sub>2</sub> outside target
  6. <x2 BPs >10mmHg below than target (or above the target is upper limit set) – when on one or no vasoactive drugs
  7. No unnecessary hypo-osmolar fluids used in ICU
  8. <x2 Temps > 37.5 (+ None >38)
  9. Specific action to increase [Na] if [Na] is < 140.
  10. In TBI:
    - Interventions taken to normalise coag/platelets
    - Anticonvulsants used (or specific documented decision not to use)
    - Neurosurgical advice documented in notes
- \*(During the 1<sup>st</sup> 48 hours (if no targets set then take CO<sub>2</sub> target as 4.5-5.3, O<sub>2</sub> >9 in OOHCR/ >13 in TBI or other, MAP >65 OOHCR/ >90 in TBI))