

QI Project: Treatment Escalation Plan in General Surgical Patients in DGRI

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INTRODUCTION

- Treatment Escalation Plan (TEP) is tool that provides guidance on how to respond to an individual when his/her condition deteriorates¹.
- TEP has been shown to significantly reduce patient harm² and complaints filed by patients/family³.
- Should be easily accessible to ensure continuity of care, especially during Covid-19 pandemic.

OBJECTIVES

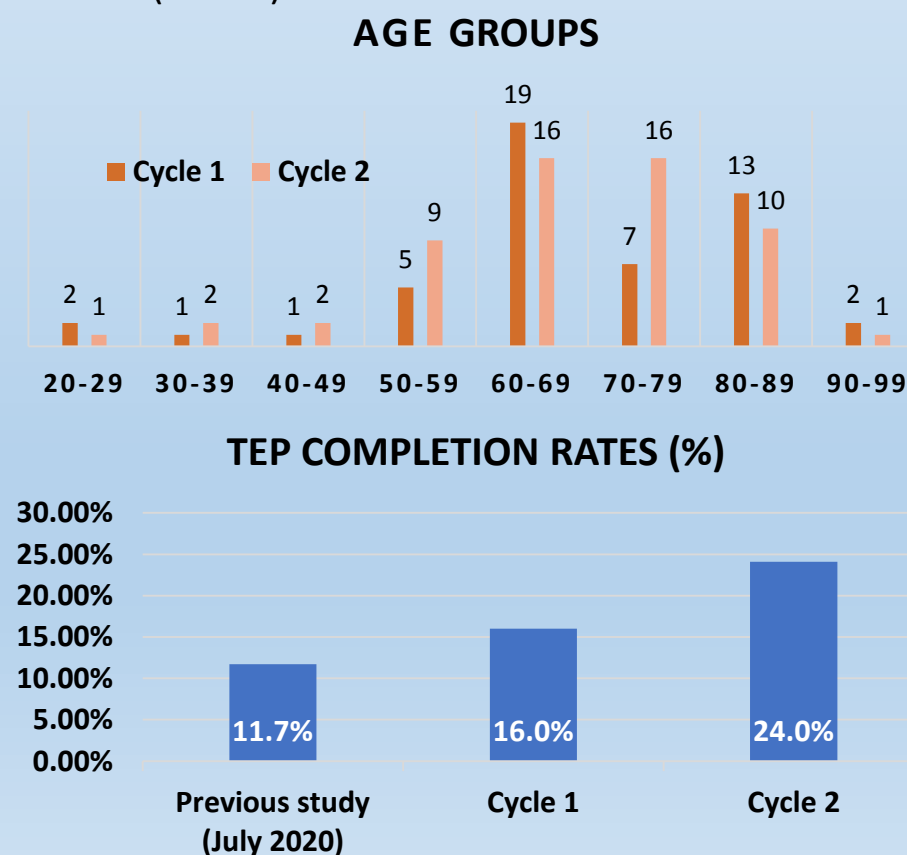
- We aim to evaluate and improve the rate TEPs are filled in general surgical patients in DGRI

METHODS

- A prospective data set was collected for a total of 5 days (25/01 - 29/01/2021) for all patients admitted under the general surgical team in Ward B3, D9 and CCU
- Data on patients' age, gender and TEP status were collected from their respective clinical notes
- Patients were followed up until the day of discharge when determining their TEP status
- Educational posters were displayed and a presentation was conducted to emphasise the importance of TEP documentation
- A second set of data collected was carried out among similar set of patients in the same wards for another 5 days (19/04 - 23/04/2021).

RESULTS

- In the first set of data, a total of 50 patients were identified with the male to female ratio of 12:13 and the youngest patient aged 21 while the oldest was 96
- 8 out of 50 (16.0%) patients had their TEP filled in during their in-patient stay in DGRI
- In the second cycle, a total of 58 patients met the criteria, male to female ratio was 33:25, youngest aged 29; oldest aged 94
- 14 out of 58 (24.1%) had TEP filled in, showing an improvement of 50.6% as compared to the first cycle, and 105.9% from a cycle conducted last July 2020 (11.7%)



CONCLUSION

- TEP is an important tool to minimise harm from over or under-treatment and enable healthcare providers to make the right call when patients deteriorate, especially out-of-hours
- Improvement in TEP completion rates have been observed with simple interventions i.e. posters and educational sessions
- A better awareness and more active prompting will be needed to ensure improvement in TEP completion rate for general surgical patients

NEXT STEPS

- Consider implementing TEP checklist in surgical ward rounds
- Further auditing to monitor TEP completion rates

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