Using IT systems to improve the frequency of family and next of kin updates

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Introduction

Keeping families and next of kin (NOK) updated is a challenge in elderly care

This quality improvement project (QIP) aimed to assess how often the Multidisciplinary Team (MDT) updates NOK on the complex care wards in North Bristol Trust (NBT).

Previous attempts to use ward round prompt sheets to prompt doctors to update NOK were found ineffective in improving the frequency of NOK update.

This cycle implemented the use of the IT Application "Careflow" to document when NOK updates occurred. This was used as a prompt for discussion at the twice daily MDT Board Round on Gate 28b (a complex care ward in NBT). Careflow can be accessed and edited by the whole MDT on both computers and personal handheld devices.

Materials and Methods

The agreed standards were that for patients unable to update families themselves, their family member/NOK should be updated at least twice in any 7 day period when the patient is not yet medically fit for discharge, and once in any 7 day period when they are medically stable. Where a patient had not been admitted for 7 days or more they were deemed to have met the standard if the family had been updated once within a 4 day period.

The whole MDT was encouraged to document who and when they updated, and which member of the MDT updated the NOK. This was documented in the "situation" section of the Careflow handover sheet as "FAMILY LAST UPDATED BY AND WHEN:".

On 2nd August 2021, a month after the intervention was implemented, a spot audit was performed.

The data collected included which days patients' next of kin were updated. A documented discussion (either over phone or in person) between any healthcare professional and patient's family member or NOK was accepted as an update.

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The use of **IT Systems** that can be easily accessed by the whole multidisciplinary team **improves the frequency of family and next of kin updates** on complex care wards.

Results and Discussion

28 patient notes were audited in total. Of which, 11 patients' families/NOK were updated at least twice in a 7 day period (39.3%) (meeting the agreed standards). 6 had been updated at least once (21.42%) during their admission and 11 had never been updated during their admission (39.3%).

When comparing pre- and post-intervention data on 28b there was an improved rate of twice weekly updates (pre-intervention 26.3%, post-intervention 39.3%). There was also a reduction in "never" updated (pre-intervention 52.6%, post-intervention 39.3%) (*Figure 1*).
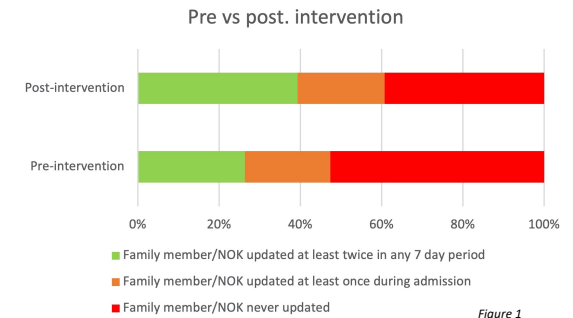

Pre vs post. intervention

- Family member/NOK updated at least twice in any 7 day period
- Family member/NOK updated at least once during admission
- Family member/NOK never updated

Figure 1

Conclusion

This project suggests a positive association between using IT systems (such as Careflow) and increased frequency of family updates.

Whilst the introduction of Careflow and MDT prompts were shown to be the most effective intervention implemented so far during this project (*Figure 2*), the ward team only met the standards of this project 39.3% of the time. Further investigation is needed to improve frequency of NOK updates.
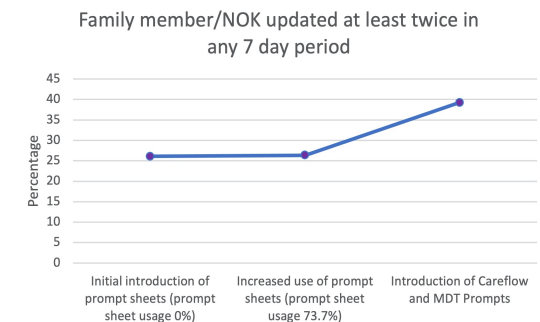

Family member/NOK updated at least twice in any 7 day period

Figure 2