



Service Priorities and Programmes Electronic Presentations

Convention ID: 230

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Using a Plan-Do-Study-Act approach to implement Patient Safety Assembly (PSA) for better communication

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Keywords:

Patient Safety Assembly

Communication

Information Guide Sheet

Introduction

Currently, email and meeting are the most common way to disseminate messages from one to another one. However, it would be a question that whether the receivers really understand the meaning of the message transmitted from others.

Objectives

To improve the communication amongst senior nursing managers and frontline nurses when some clinical information disseminated from top management.

Methodology

Plan

A proposal of Patient Safety Assembly (PSA) adapted from Mount Sinai Hospital was introduced. The objectives of PSA are to (1) capture and convey key messages from nursing standards, guideline, practice; (2) ensure frontline nurses know the key messages; (3) explore the difficulties when they need to follow the practices / guideline. A one-hour PSA session was initially held monthly to meet ward managers or advanced practice nurse (In-charge). Besides, an information guide sheet was developed to facilitate message dissemination by ward managers. It highlights important points and includes several questions with answers so as to verify whether frontline nurses really understand the messages conveyed.

Do

The PSA was piloted in January 2016 and then launched in March 2016 after discussed and approved by senior management and an introduction was given in the ward manager meeting. Different guidelines / manual issued by HAHO and UCH were shared monthly. However, different opinions from frontline nurses and supervisors appeared throughout the implementation phase. Therefore, an online survey was conducted between 20 June and 13 July 2017.

Result

Study

Of 30 respondents, 86.7% of ward managers / supervisors attended the PSA. All

agreed that it can achieve the first objective whereas 96% and 80.8% agreed the rest objectives. 88.5% reported the 'highlight of the sharing at PSA' can facilitate them to disseminate messages to frontline nurses who cannot join PSA. 76% reported the guide sheet is worth to keep for this purpose. Only 64% agreed it is worth to attend PSA in the future. Over 60% suggested that PSA should be organized for Duty In-charge, advanced practice nurses apart from ward manager. 76.9% suggested PSA should be held at the Nursing Consultative Committee (NCC) meeting that is organized every two month instead of a separate session.

Act

In response to the survey's findings, the PSA is now held in the NCC meeting as needed. The information guide sheet is continuously prepared for supervisors who do not need to facsimile to NSD. In short, the PSA and guide sheet is a good platform and tool for mutual communication among nursing colleagues but the operational issues should also be concerned when implemented.