Assessing Documentation of Vital Signs on the National Early Warning Score (NEWS) on Aston Ward

Stephanie Adeyemi

Foundation Year 1 Doctor, Aston Ward, Lister Hospital, United States

Abstract

Background: Research indicates that patients with mental health conditions have an increased risk of physical health problems. The National Early Warning Score (NEWS) can be utilised to improve the recognition of unwell patients.

Aims: This audit aimed to assess and improve the documentation of physical observations (HR, BP, temperature, RR, oxygen saturations, and APVU) and provide training for mental health staff in order to improve NEWS documentation.

Methods: This audit was conducted on a 15 bed adult inpatient unit and all data was recorded on an Excel spreadsheet. In November 2019, an initial audit was conducted to assess correct documentation of all vital signs through the analysis of the patients' NEWS charts. The audit standard was 100%. Following data analysis of the findings of the initial cycle the audit results were presented to the ward team. Over the span of 3 months medical education took place in the form of a training session, a powerpoint presentation, posters and the circulation of online resources. A re-audit was conducted in January 2020 and the data from this was analysed to identify if the medical education had any impact.

Findings: When comparing audit cycle results the RR documentation accuracy increased by 8.9% (26.7% in Nov to 35.6% in Jan) and AVPU documentation accuracy increased by 11.2% (44.4% in Nov to 55.6% in Jan). BP (86.7% to 77.8%) and HR (86.7% to 77.8%) documentation both decreased by 8.9%, temperature documentation accuracy decreased by 2.2% (77.8% to 75.6%), SpO2 documentation

accuracy decreased by 6.7% (84.4% to 77.8%) and calculation of the NEWS score (33.3%) remained the same.

Conclusion: None of the vital sign parameters met the audit standard (100%) even with medical education. This represents an area for improvement. The teaching was detrimental to many domains when comparing data from both cycles which suggests that medical education alone may not be useful as the only tool for improving the recording of vital signs and the calculation of the NEWS on adult mental health units.

Biography:

Dr Stephanie Adeyemi (Foundation Year 1 Doctor) at Aston Ward, Lister Hospital, United States