Standardise our treatment rooms! A quality improvement project

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Aims

To minimise the time taken to locate equipment for procedures, and make the ward more efficient and productive.

Methods

I distributed questionnaires to doctors across the floor, in order to seek thoughts regarding standardisation of treatment rooms. A timed challenge was also undertaken to see how long it took participants to gather items needed for venous cannulation.

Results

A total 22 questionnaires were distributed, out of which 90.9% (n=20) 'strongly agreed' that we need to standardise our treatment rooms. A timed challenge was taken to determine how long it took to gather equipment for venous cannulation on the ward's treatment room. Eleven participants took part, and the range for gathering equipment was 0.58 seconds to 4.31 minutes (average 2.27 minutes). The first Plan-Do-Study-Act cycle (PDSA) involved using red labels to mark drawers in their original position, and the timed challenge taken again, 7 participants, range 0.37 s to 1.23 min (average 1.11 min). The second PDSA involved another six participants and we rearranged items within drawers; the range for this cycle was 10.2 min to 1.38 min (average 1.18 min). Successfully presented project to the respiratory clinical governance and it was agreed to use colour-coded labels across all the wards of the respiratory department.

Conclusion

Project successfully reached its objective. Identifying equipment needed in a disorganised treatment room decreased the time spent locating equipment. Colour-coded labels represent a possible interim solution until we can standardise treatment room.

Conflict of interest statement

No conflict of interest.

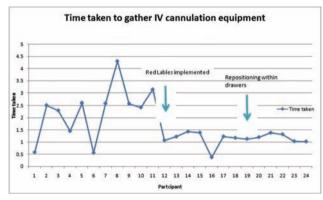


Fig 1. Time taken to gather IV cannulation equipment. IV = intravenous.