

CAREFLOW CONNECT: OUR IMPROVEMENT JOURNEY

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OUR SERVICE

- 2 district general hospitals
- 1100 beds
- 3 nurses
- 800 referrals each month.
- Covering the poorest borough in London and oldest borough in London.



WHERE WE STARTED

- All incidents raised regarding skin integrity acted as referrals to Tissue Viability plus emails as separate process.
- 7 step process
 - Print email
 - Look up on Safeguard (IR1)
 - Look up on Medway
 - Write details on printed email.
 - Add to spread sheet
 - To nurse for triage
 - Repeat daily!

Between 6 and 8 minutes to process each referral



WHERE WE STARTED

Triage

- Logged referrals reviewed by clinician
- Spread sheet updated
- Urgent referrals separated out
- Paper copies filed
- Work for day planned
- Nurse leaves office with paper details of pt. to be seen.
- Urgent referral seen within 2 working days
- Non urgent seen within 4 working days
- Community acquired wounds often not seen



WHERE WE STARTED

Clinical work

- Arrive on ward and find board to check where pt. is
- Find nurse caring for patient
- Find nursing folder
- Find patient notes
- Check pt hx
- **See patient**
- Document in pt. notes
- Document in nursing notes
- Back to office
- Wait to access each spread sheet when colleagues are not using it. (3 SEPARATE DATABASES)
- Document on TVN databases

Average time to provide advice for management of a patient's wound 2826 minutes



WHAT WE DID FIRST

- Amalgamated spread sheets
- Created quick access MS Teams Spread Sheet (everyone can access at the same time)
- Created a pro forma for TVN advice

Issues that still existed

- Lag between referral received and advice given
- Difficulty in accurate triage
- Risk of paper records going missing
- Poor communication to medical and nursing colleagues on wards (lost paper plans)



WHAT WE DO NOW

- Referrals raised electronically by wards & Photographs uploaded to a secure system for review
- Admin check for photos and accept referrals
- Admin to add info to database
- Task raised to TVN to triage
- TVN adds tags to pt. record to prioritise workload
- TVN triages using pt hx on Careflow Connect to support decisions
 - Face to face review
 - All patients receive immediate management plan via Careflow Connect handover
 - Simple wound management pathway via Careflow Connect handover
- Task allocated to TVN team based on skill set



WHAT WE DO NOW

Clinical work

- Arrive on ward and use ipad to find patient bed number
- Find nurse caring for patient
- **See patient**
- Update Careflow Connect Specialist Nurse handover
- Document on TVN pro forma and add to nursing folder
- Back to office
- Document outcome on single MS teams Spreadsheet
- Plan reviews using Task Function.

Average time to provide advice for management of a patient's wound 4.7 minutes



Incident report referrals vs Careflow Connect Referrals: Time to accept and Time to advise

