

Appreciative inquiry and positive reporting to improve electronic endorsing of test results in Maternity

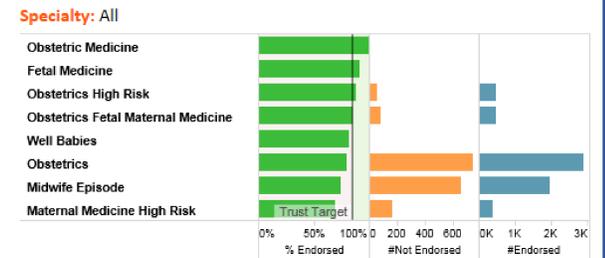


Green LJ, Manley N, Eadie K, Montalvo D, Prentice C, Reidy J, Smith A & Black RS
John Radcliffe Hospital, Oxford University Hospitals NHS Foundation Trust

Introduction

Endorsing patient results is an important task to facilitate timely review & action

- Endorsing rates remain low, despite drives to improve rates within the department
- **Trust Target 95%** of test results to be endorsed within 7 days (maternity 69%, Oct 2019)
- We have successfully implemented an excellence reporting system within Maternity and believe that allied innovations e.g. appreciative inquiry could be used to positively reinforce good practice, help to share learning and ultimately improve patient care



Project design: Oct-Nov 2019

LfE QI Study Day

Strengths: collective experience of designing, implementing and running a successful excellence reporting system in maternity.

Opportunities: previously evidenced change in morale since implementing excellence reporting. Well supported by Clinical Governance, IT and managerial teams.

Aspiration: endorsing results will be viewed as a positive action which directly improves our patients' care and experience.

Resources: we will need to promote our project as departmental teaching and study days and maintain the current IT support in place for excellence reporting.

Project implementation: Dec 2019 -

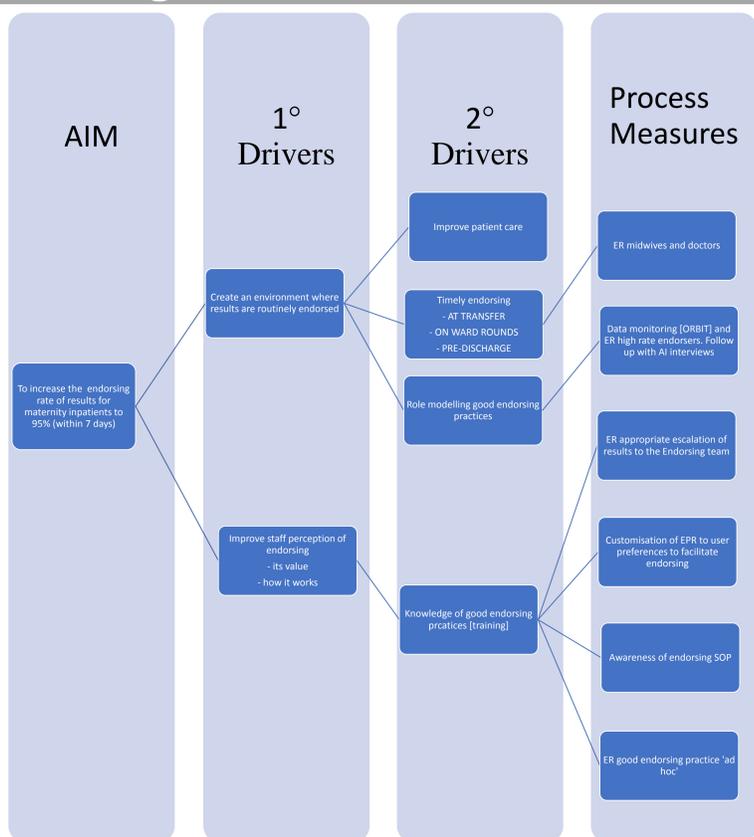
Aim/Dream

We would like to use LfE methodology to identify examples of great endorsing practice and use this to provide direct positive feedback to clinicians. We are interested in learning how appreciative inquiry (AI) can investigate this further to affirm shared learning & promote good practice.

Hypothesis:

1. Excellence reporting could be used to reinforce good endorsing practice
2. AI could be used to further explore good endorsing practice

Driver diagram



Methods/Design

We have promoted the importance of endorsing within the department at local and departmental meetings.

We have drawn on the expertise of colleagues experienced in endorsing practice (from the EPR, IT and Clinical Governance teams).

We have improved the infrastructure for supporting 'real time' endorsing using 'computer on wheels' stacks by ensuring adequate kit is made available to reduce barriers to excellent practice.

1. Excellence reports sent to team members who embrace and promote positive endorsing behaviour and practice (n = 18)
2. Appreciative inquiry interviews with key endorsers following 'definition, discovery, dream, design, destiny' format (n = 6)

"An understanding and appreciation of the value of endorsing. Part of routine care i.e. on ward round so that it does not add to people's work load (already burdened)"

"Certain individuals are able to prioritise endorsing of results in a way that their colleagues may not. Are the drivers behind this a difference in attitude or EPR technique?"

Destiny

We envisage a future where electronic endorsing of test results becomes part of routine clinical practice, where its value is recognised and it is not viewed as an 'unnecessary extra' or burdensome to the clinical team.

We plan to monitor endorsing rates (available via the Trust's reporting platform) within Maternity over the coming months to identify whether excellence reporting and appreciative inquiry might have a positive impact on endorsing behaviour.

Team Reflections on Appreciative Inquiry

- AI is not about good endorsers 'lecturing' poor endorsers.
- AI is more about noticing any good behaviours in individuals and reinforcing them.
- AI interviews have already generated some very insightful ideas for how to improve endorsing within the department: the staff at the 'coal face' will often give you solutions to the problems they face. They recognise what 'excellent practice' looks like and how it could be best achieved within the constraints of the system.

