Aim Statement: Within 6 months to reduce the requirement for nursing specials by 50% on the Medical Ward of Orange Health Service

Background to problem worth solving
An increasing number of requests for nursing specials with minimal patient assessment and concurrent organisational high falls rate warranted a review of nursing special utilisation.

Team members
- Sponsor (Guidance Team)
  - Catherine Nowlan General Manager, Orange Health Service
- Project Team
  - Leanne Casey A/Director of Nursing and Midwifery Services
  - Addimah Nazarian Aged Care CNC

Driver Diagram
The Problem: There is a high rate of Nursing Specials requested with no concurrent benefit to clinical outcomes for related DRGs

Results
Outcome measures: Baseline data

Process measures: Flow chart and form development

Results continued
Process measures: Reduction in Specials requests

Balancing measures: Falls reduction

Discussion
The heightened awareness of delirium and falls risk in the organisation may have impacted data analysis.

Electronic recording of NHPPD may have highlighted the inaccuracies of manual entries.

Lack of understanding of importance of documentation for falls risk.

Not completed correctly

Link to New South Wales Local Health District

Solution 1 - PDSA Cycle

Solution 2 - PDSA Cycle

Solution 3 - PDSA Cycle

Overall Outcome of Project:
The stretch goal was to reduce the number of nursing specials within 6 months on the Medical Ward at OHS. While this was statistically achieved, caution should be used in interpretation due to the impact of alternative quality initiatives and forced change to the data collection method.

Solution 1 - PDSA Cycle

- **Cost saving**
  Further comprehensive analysis will be required over each of the adult inpatient unit to understand the true cost savings of this project.
  A roadmap will need to be based around the reduction in nursing hours saved with no comparative increase in falls or delirium related incidents.

Solution 2 - PDSA Cycle

- **Plans to sustain change**
  The LOP will be disseminated and compliance is mandatory. Monitoring of compliance will be through the Nursing Unit Managers and Campus Nurse Managers.
  Documentation for the requesting of a nursing special will be amended in line with the LOP.
  Measurement will be expanded to the three adult inpatient areas however inaccuracies will be avoided due to the implementation of electronic NHPPD reports linked to the rostering system.
  The measurement and feedback will be used to drive process improvement.

Solution 3 - PDSA Cycle

- **Plans to spread/share change**
  This project has been submitted to the Agency for Clinical Innovation Innovation Exchange
  Future plans for project development
  - Expand data collection to Surgical Ward and Coronary Care Unit to have a true reflection of project outcomes
  - Data submission to the National Health Performance Collection (NHPC) local operating procedure.
  - Selected to the WNSWLHD quality awards 2018 if outcomes are consistent and sustained.

Further submissions will be dependent on service improvements.