

VTE AWARD – GENERAL

Excellent Quality Improvement programme that advanced practice in thrombosis prevention or management

ASHFORD AND ST PETER'S HOSPITALS

Ashford and St Peter's Hospitals NHS Foundation Trust (ASPH) Multidisciplinary approach to improve prescribing rate of chemical thromboprophylaxis within 14 hours of admission

Between April 2020 and May 2023, a monthly sample population audit was conducted across all clinical areas to establish if prescribed, whether chemical thromboprophylaxis (CTP) was administered within 14 hours of admission.

While results from the audit showed consistent compliance of above the Trust target of 80%, the audit revealed there was significantly lower compliance of 63% within 14 hours of admission, when measuring if CTP was prescribed within 14 hours when indicated by VTE risk Assessment

To address this problem, a multidisciplinary team comprising of nurses, pharmacists, clinicians and members of the patient safety team was established.

The primary goals of the quality improvement project were to:

- Improve the prescribing rate within 14 hours of hospital admission of chemical VTE prophylaxis (if indicated).
- Enhance adherence to VTE Prevention guidelines.
- Streamline electronic documentation and workflow processes.

An anonymous survey of junior doctors was also carried out to identify issues which highlighted barriers caused by:

- The electronic patient record (EPR) workflow.
- VTE risk assessment not being directly linked to electronic prescribing.
- Low confidence in prophylactic dosing in extremes of body weight and renal dysfunction.
- Minimal opportunities to clarify plans with senior colleagues following risk assessment.

As a result, key interventions were put into place which included:

- The development and introduction of a visual dosing table.
- A VTE risk assessment and prescribing review at daily board rounds/safety huddles
- Education and training programmes for resident doctors.
- Audit and feedback mechanisms to meet Trust quality priority for 2024/25.

To encourage implementation of the project, the team arranged regular stakeholder engagement meetings; simplified workflows were optimised to trigger VTE risk assessment in a timely manner and support from senior clinical leadership team was secured to reinforce the initiative.

The project has been successful across all adult inpatient areas within the Trust with results showing:

1. Prophylaxis prescribing within 14 hours of admission (if indicated) has increased from 63% to 89.6%.
2. Potentially preventable HATs with delayed initiation of prophylaxis as a key factor, have been reduced from 100% in May 2024 to 0% in September and October 2024.

Evidence indicates that patients will benefit from improved safety, enhanced awareness of the clinical team and as a result, are more likely to have better outcomes and reduced risk of increased anxiety associated with VTE related complications.

The improvements also bring cost savings and efficiency and through the method of delivery are sustainable and meet regulatory compliance.

