



Singapore Healthcare
Management 2019

Improving Communication Utilizing (I.C.U.) Pause Amongst Healthcare Professionals

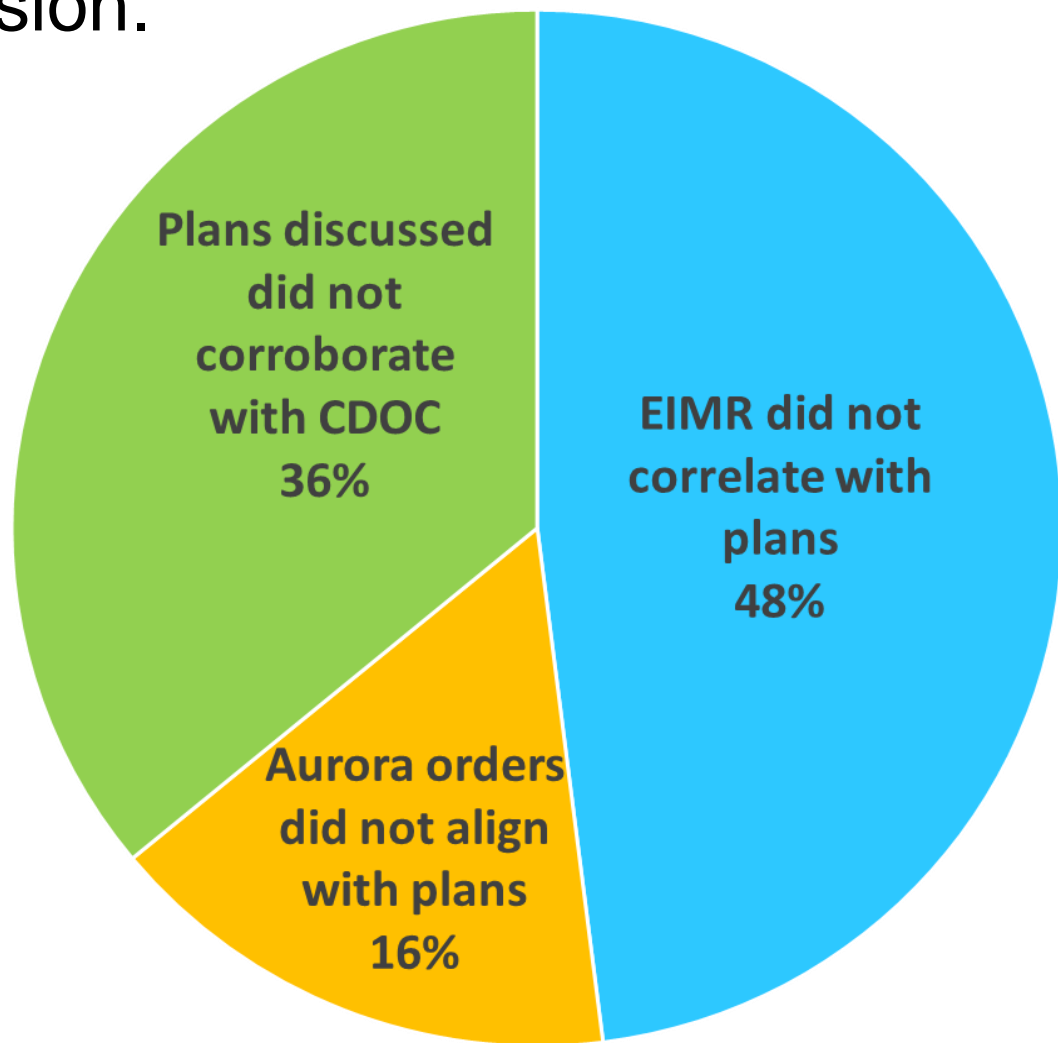
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Introduction

At National University Hospital (NUH), the integration of clinical documentation (CDOC), electronic inpatient medication record (EIMR) and treatment ordering system (Aurora) has greatly improved the efficiency and clarity for the patient's treatment. Yet, technological advancements have also changed the way healthcare professionals communicate in their daily activities. Healthcare providers adopted the use of documentation templates which allowed the doctors to copy and paste indiscriminately. Furthermore, established plans were not communicated among the team members thus resulting in discrepancies in patient's plans and confusion.

In Surgical Intensive Care Unit (SICU), 31 safety concerns were raised out of the 77 multidisciplinary huddles held every week with the consultant, nursing officers and other healthcare professionals.

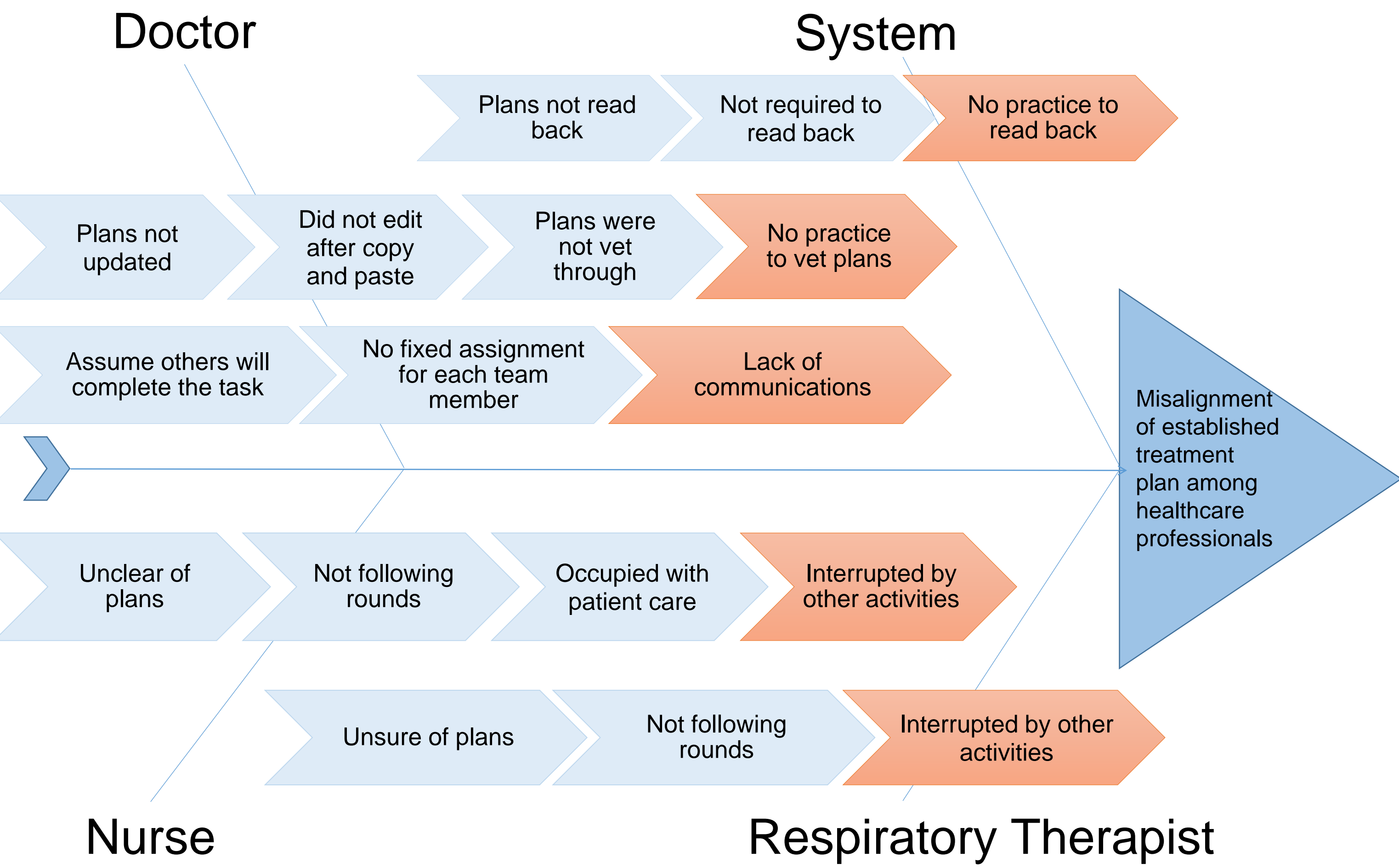


Aim

Our goal aims to enhance communication among healthcare professionals through I.C.U. Pause. At the end of each patient's round, treatment plans are read back by the ICU doctor to ensure that all are aligned with the plans. In addition, it allows a platform for team members to clarify if unclear. With accurate information being updated and effective communication will improve patient's safety and reduce errors.

Within 18 months of I.C.U. pause implementation, we target to improve overall clinical documentation of patient's established plans by 75%.

Methodology

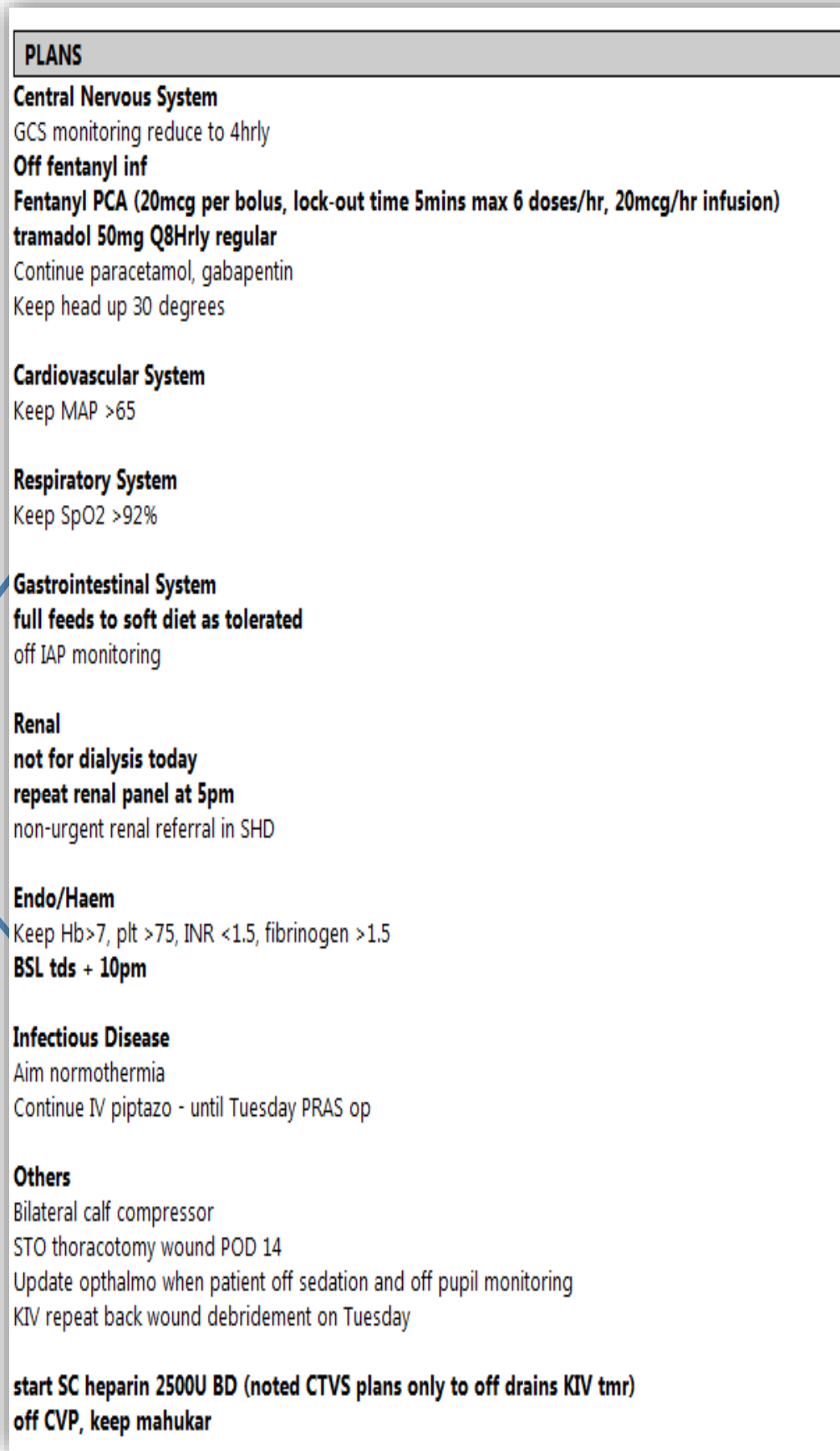


I.C.U. Pause in Action



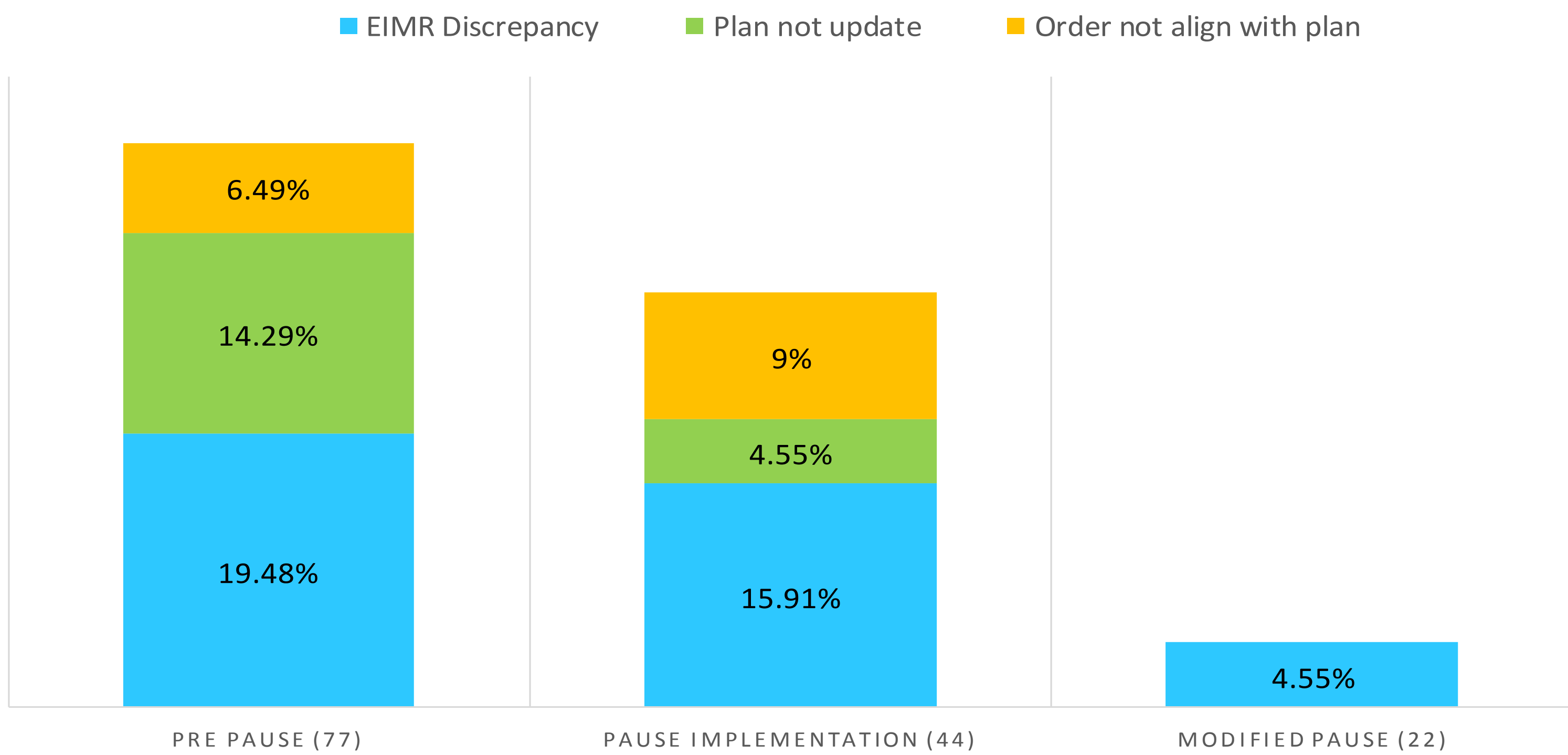
I.C.U. pause is to summarize plans and read back for each patient. Doctor should ensure that the EIMR and Aurora orders tally with CDOC during the I.C.U. pause. All team members should focus during the round.

1. **Compulsory** for all the patients
2. **All SICU team members** to be present
3. **Bold the changes** of the care plan in CDOC
4. **Delete** the care plan which is completed
5. **Read back the changes** of treatment plan
6. **Ensure the related plans** in EIMR and Aurora are ordered



Result

Safety concerns raised during weekly huddles



	Before I.C.U. Pause (n=77)	After I.C.U. Pause (n=44)	After Modified I.C.U. Pause (n=22)
No safety concerns raised	46	31	21
EIMR Discrepancy	15	7	1
Plans were not updated (copy and paste notes but not verify the entries)	11	2	0
Orders are not aligned with plan	5	4	0

Conclusion

With the implementation of I.C.U. Pause, treatments can be executed without much delay and nurses no longer need to clarify with the team. I.C.U. Pause improves overall face-to-face communication and facilitates engagement of the staff involved in patient's care. Moving on, this will be inculcated as part of the SICU culture and to encourage all new physicians and nurses to perform the I.C.U. Pause diligently. Likewise, it will also be promulgated across all ICUs to heighten communication and reduce errors.

