‘Getting the Basics Right’
The Adult Intelligent Fluid Management Bundle

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“Safety Express has impacted very positively on NHS East of England. We had some initial hurdles, like getting hosts started and understand the concept, but once it we explained the drivers and shared the driver diagrams, it was really good. Safety Express has enabled us raise patient safety on the agenda regionally, and helped us drive through the regional directive of the elimination of grade 3 & 4 pressure ulcers. Executive teams and medical/nursing directors are all signed up and helped us drive it through. It’s been really positive.”

Leadership and Teamwork

We approached this with a multi-disciplinary team, bringing health professionals from across the board. It hasn’t always been simple, aligning different priorities and contributions, but we recognised the need and importance of engaging with them all.

We were guided by excellent project management to keep us on track. As well as ensuring all the right members were around the table, we had to be careful around timeframes, particularly in the development stages.

Creating and Integrating a Plan

Following a regional best practice workshop around the Darzi workstreams, we identified two additional programme boards we wanted to set up: patient safety and patient experience. We thought that with all the work around patient safety and quality, these two went across all the Darzi workstreams so this became part of our pledge going forward.

The patient safety clinical programme board had a sub group called ‘Getting the Basics Right’. They appraised various fundamentals of care practices and we held a workshop to evaluate the learning from this. One of the key points that came out of this was fluid management. Not just dehydration, but an issue also identified by the National Patient Safety Agency (NPSA) around over hydration too. So it wasn’t that patients weren’t getting enough, but sometimes getting too much. So we decided to look at fluid management across the region.

SMART Aim

S – Getting the basics right - hydration
M – Evaluation of impact and effectiveness
A – Looking at one core element of care
R – To patient safety, health and wellbeing
T – To coincide with the Safety Express pilot
We convened a steering group to action the key points. The group was made up of multi-disciplinary clinicians and medics from across the East of England, and we invited the Directors of Nursing, as they’re providing the leadership for the nurses at the front line.

We shared the bundle with our host organisations and asked them to test it out for us.

**Planning – Key themes to Consider**
- Medical and clinical perspectives
- Current policies and practice across the region
- Existing education available and for whom
- Present assessment criteria and audit regimes
- Scoping of good practice across the country
- Depth and breadth of knowledge required – getting the detail right

Our host organisations then piloted the bundle. Some of the feedback we had initially cited the package as being ‘too acute focused’, and we knew this at the time, but it was difficult to develop a package to work across the whole health economy. We also knew it would need tweaking for mental health care organisations and elderly care homes. The feedback from acute settings was positive, although some of them hadn’t taken the whole package, only components of it.

We sent out evaluation forms to all organisations including hosts, and we’re keen to get feedback from nursing homes and learning disabilities as well, so we’ve covered the whole health economy.

**Implementing the Plan**

The steering group drafted the bundle, which was then sent out to consultation. Feedback and comments were discussed and the bundle was pulled together into the final draft. Following this we chose a launch date and by this time we had become part of Safety Express.

**How healthy is your pee?**

We wanted patients to take on more responsibility and teach them to self-manage, so we developed an example patient information leaflet, which most organisations didn’t seem to have.

**Implementing – Assessment and Diagnosis**
- Why is it so hard to manage fluid balance?
- Can we implement a process to oversee handover of patient hydration status?
- What knowledge and skills do the staff have?
- What further training do staff need?

**Implementing – Planning**
- How can we encourage patients to help themselves?
- How can we raise the profile of hydration?
  - Fluid management weeks
  - Local CQUIN
- How can we incorporate hydration into existing care processes?
- Which teams will we involve in testing the bundle?
- How will we know if the bundle is making a difference?
- When will we review the bundle?
Measurement and Results

Overall we need to evaluate properly, and after this we will probably need to tweak the package again. We need to decide if to have a package which is totally acute focussed alongside another which would be much more community focussed or if we have a core component with add-ons. Some think it’s too long at 38 pages and in response to that, we could take the history out. Mostly people seem to be using the audit tool and the patient information leaflets, as well as the urgent fluid management part to re-affirm to people what they should be doing. We’ve also noticed that the reference chart on page six of the bundle has been printed out laminated it and as helpful pocket resource. We’ve also discussed maybe publishing the nine key principles onto something the size of a credit card that can be kept in the pocket.

I think the evaluation will demonstrate further the evidence of how staff have used the bundle and the extent of its impact. I think it definitely has raised the awareness of hydration as an important component of quality care. If we don't have fluid management in place, we aren't going to improve things like pressure ulcers and falls as that were a core part of training years ago. The intentional rounding has helped also, as most of our organisations have put a prompt in around fluid management. So if I go into a performance meeting or an organisational visit, when you get into how nursing care is being delivered, discussion always includes fluid management now, much more than before.

Spreading the message

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There is still development to be done, but it producing the bundle has raised the agenda of fluid management, as we’ve had all the Directors of Nursing involved across the region. For us, it has been a key component of Safety Express, linking in current high priority areas with work already underway. Some organisations have put it in as a CQUIN, so this has raised its profile further.

Safety Express has helped us to help organisations to look at harm free care in a collective manner, moving them away from working within silos. If we can get the fundamentals of fluid management right, we can positively impact on patients receiving harm free care.

This work had definitely got a long life ahead of it. We can build on what we’ve been doing now the awareness is raised. I certainly would want to continue with this work.”