

4Qs Family Communication Project – Frailty Assessment Unit Emergency Department

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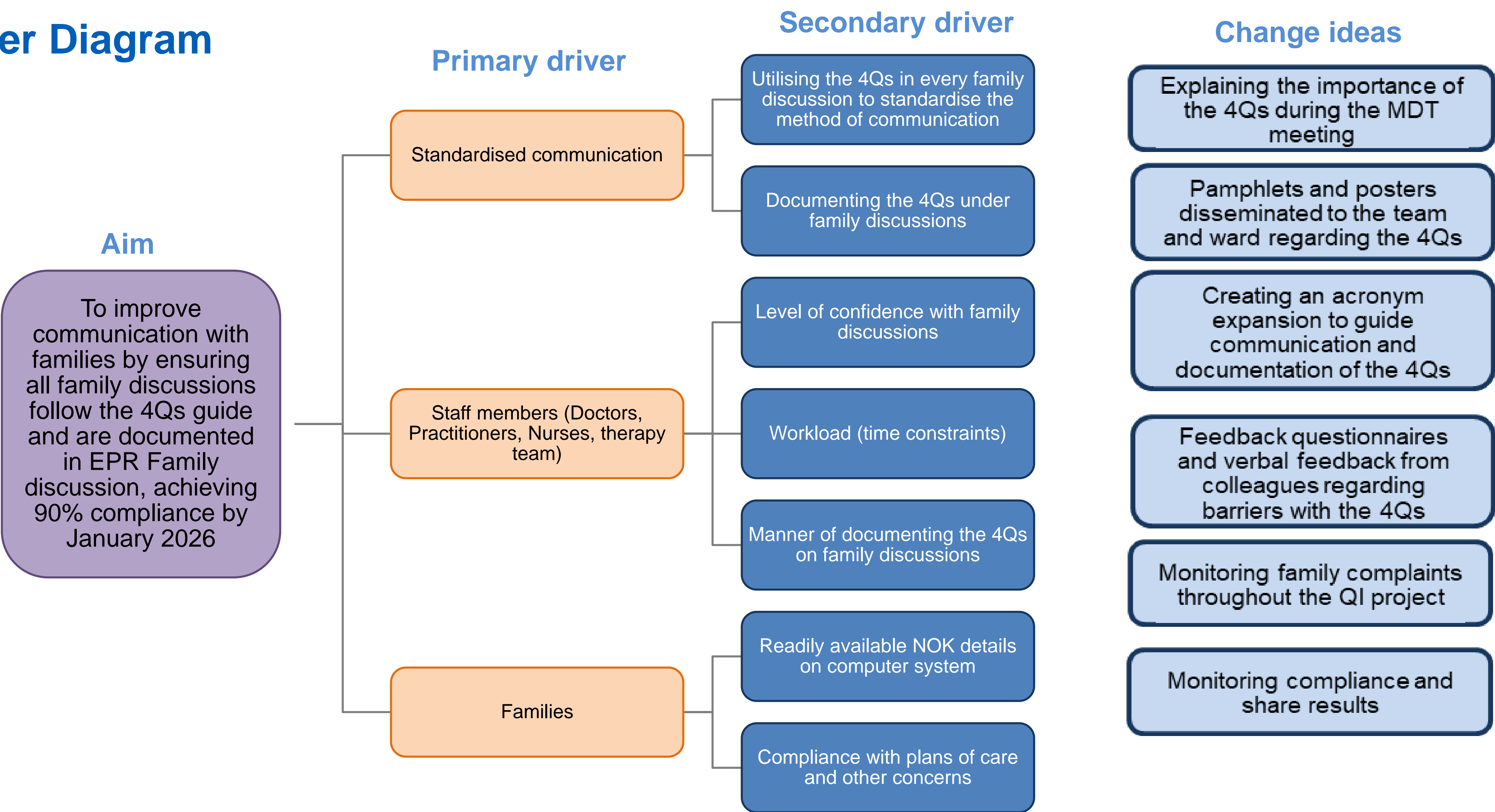
Improvement Aim

By January 2026, 90% of families would be informed of patients’ plans on admission, change in clinical condition and discharge, through standardising the 4Qs in family discussions, ultimately reducing complaints and improving patient flow in the Frailty Assessment Unit.

Interventions

Posters, acronym expansion in EPR, MDT reminders, teachings, audits and ongoing feedback

Driver Diagram



Next steps:

- 1. Continue with spot audits/checks to ensure that 4Qs are still being utilised
- 2. Introduction of 4Qs to new members of the team
- 3. Scale up to COTE wards via discussion with ward manager/care team regarding the impacts of the project with care
- 4. Simulation activities on family discussions (in progress)

What are the 4Qs

- 1. What is wrong with me?
 - 2. When am I being discharged?
 - 3. What do I need to do to be discharged
 - 4. What is the team doing to help me with my discharge
- * SHOULD BE DOCUMENTED UNDER FAMILY DISCUSSIONS

Data collected

| Date | Question 1 | Question 2 | Question 3 | Question 4 |
|-----------|------------|------------|------------|------------|
| August 29 | 16% | 33% | 0% | 33% |
| Oct 7 | 100% | 50% | 50% | 75% |
| Oct 11 | 90% | 70% | 90% | 90% |
| Oct 14 | 100% | 100% | 100% | 100% |
| Oct 17 | 77% | 66% | 66% | 66% |
| Average | 91.75% | 71.5% | 76.5% | 82.75% |

Spot audit

| Date | Question 1 | Question 2 | Question 3 | Question 4 |
|--------|------------|------------|------------|------------|
| Jan 20 | 100% | 100% | 100% | 100% |

Key summary and points:

- 1. Marked improvement with compliance with the 4Qs documentation and discussion.
- 2. Decrease in family complaints regarding communication (no complains on communication from PALS)
- 3. Nursing staff and therapy team expressed liability concerns.

Main barriers and challenges – liability and additional workload