

## Gloucestershire Safety and Quality Improvement Academy 2026 Onward Care Team Documentation Vicky Fyfe

### Background

Inconsistent, incomplete, or unclear documentation by the Onward Care Team creates a risk of miscommunication between professionals, which may lead to delays in discharge, inappropriate onward care arrangements, duplication or omission of actions, and potential patient harm—particularly for patients with complex needs.

### Aim

To increase the compliance of documentation entries; to a defined standard; by 10% by December 2025

### Measures

Outcome = % compliance to a defined standard.

Process = Number of people attending training,

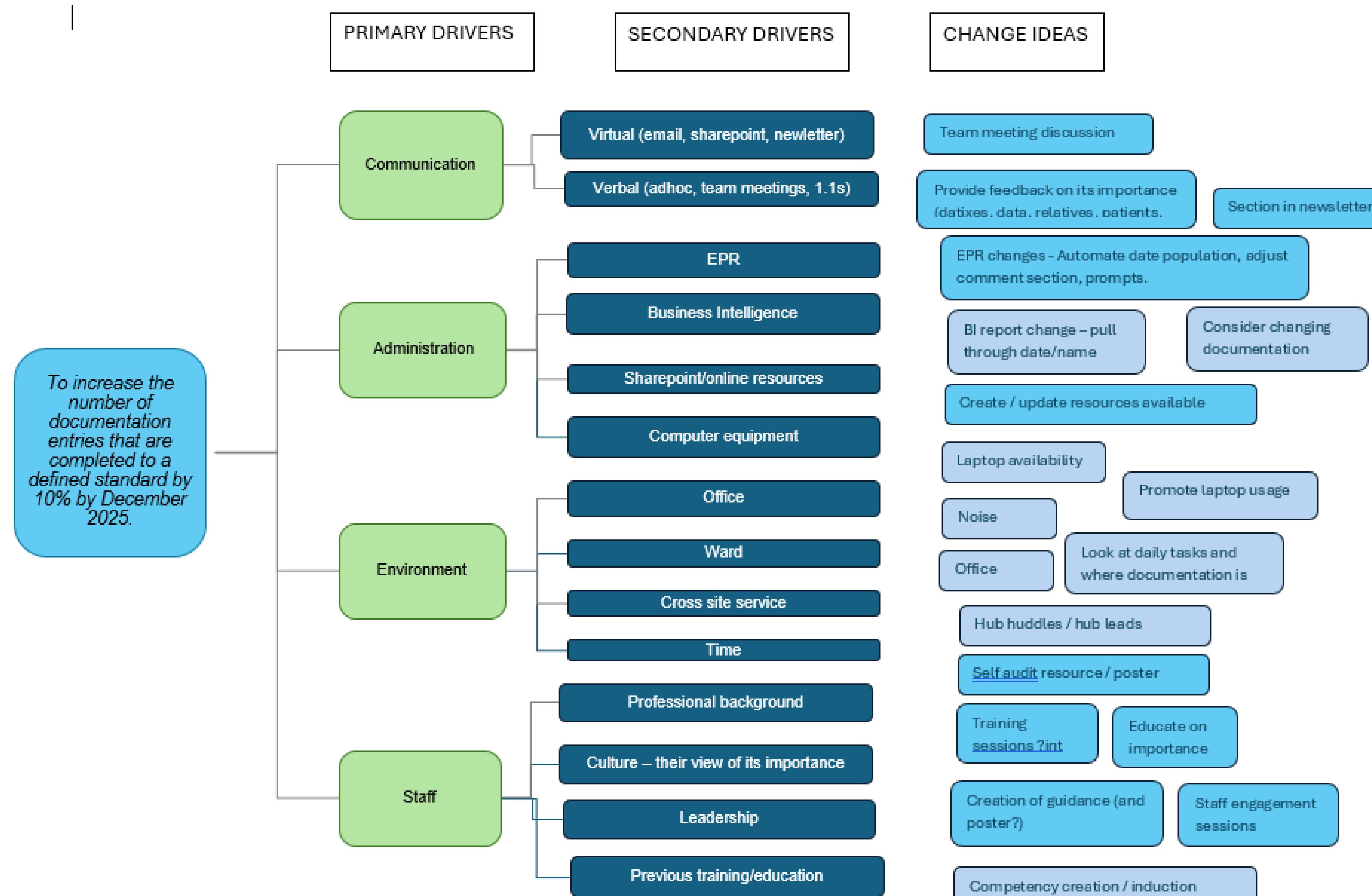
Balancing = Number of OCT discharges that go through discharge lounge, number of Datixes/complaints regarding discharge issues for OCT patients, Number of OCT patients with delayed discharges

### Key Results

Pre PDSA data has a median compliance of 86% whereas over the period of PDSA cycles (March – Nov 2025) this increases to 100%.

- Data demonstrated consistently high compliance, with a median of 93%
- Early data showed a greater variation of compliance with several very low points.
- From Mid 2025 (once PDSA cycles started) there is a shift above the median which indicates a real and sustained improvement in compliance.
- There is more stability of scores in the later period although performance seems to dip slightly in November.

## Driver Diagram

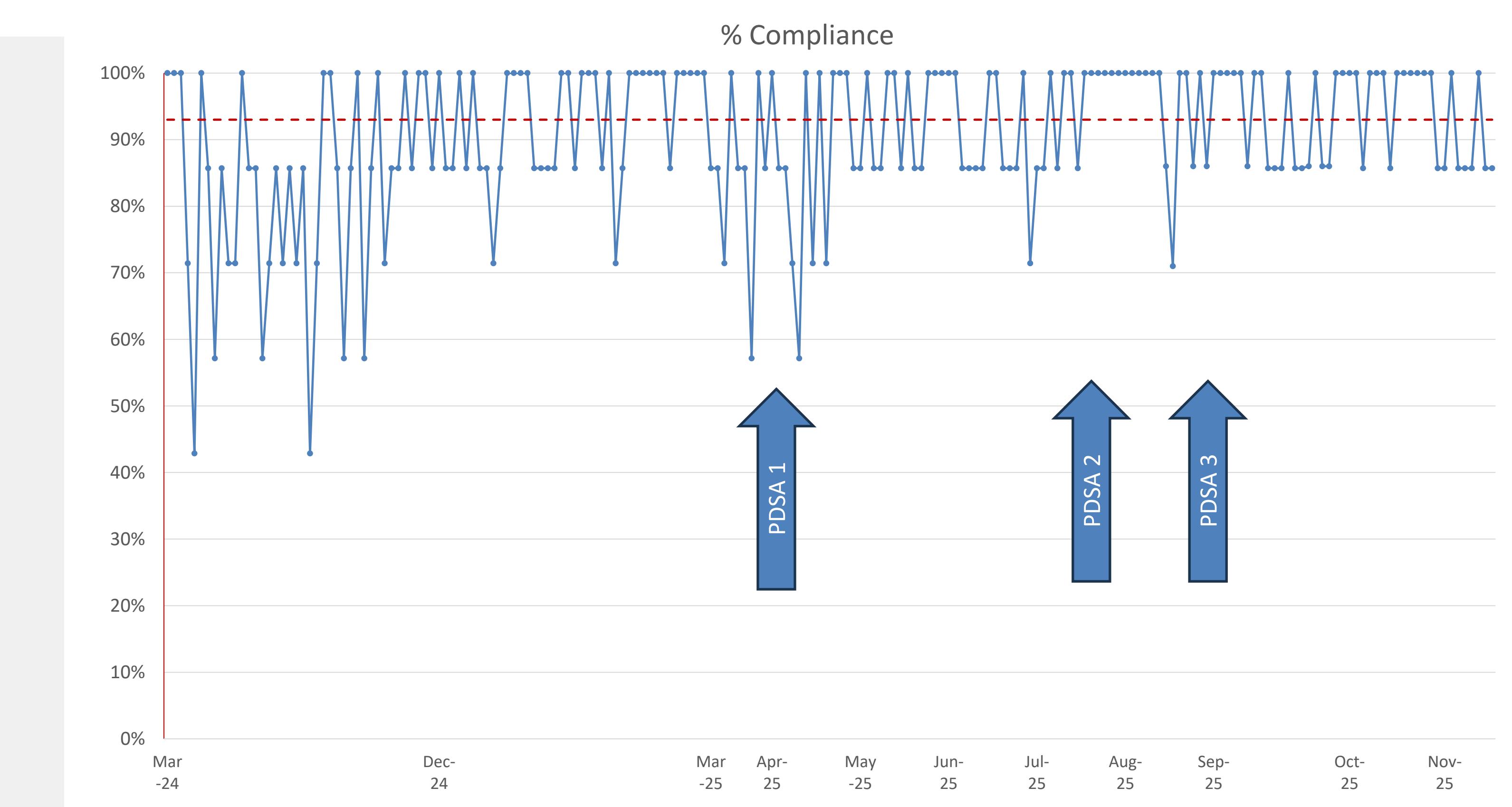


### PDSA

Cycle 1 – Creation and implementation of OCT documentation guidance.

Cycle 2 – Promote awareness of correct abbreviation use and make resources more user friendly.

Cycle 3 – EPR optimisations e.g. addition of spell check function and increasing character limit of flowsheet comments.



### Next Steps

- Several commonly used abbreviations by other professional groups are not on approved lists → discussing with manager and possibly other teams.
- Share data with team to celebrate improvements.
- Evaluate section compliance in more detail to identify further opportunity for improvement.
- Review individual staff compliance to see if opportunity for personal development.