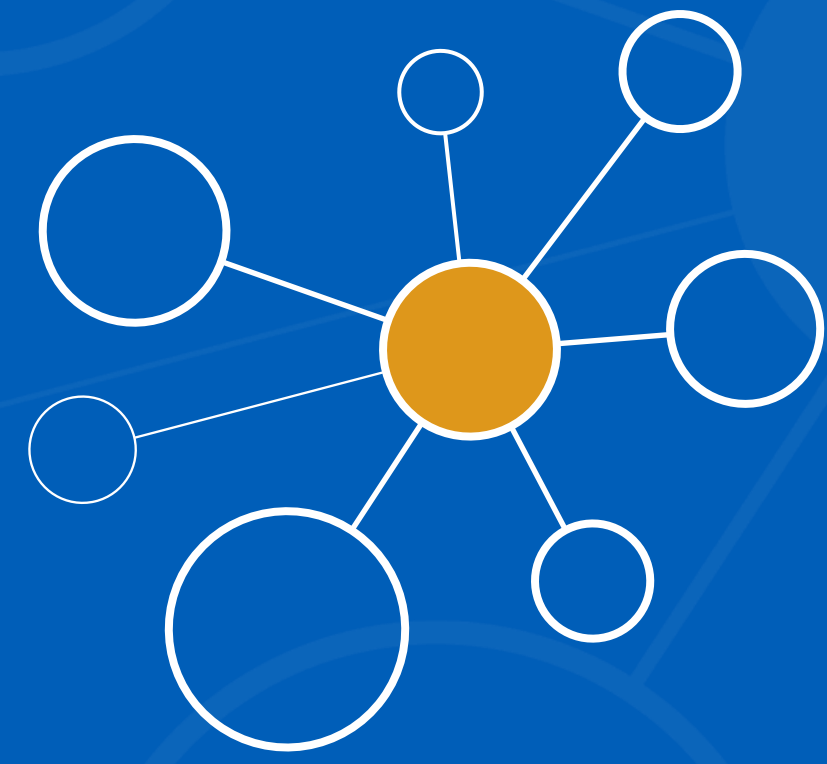




Gloucestershire Safety and Quality Improvement Academy 2026

Improving Oxygen Prescription on the Respiratory Ward

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THE PROBLEM / SAFETY CONCERN

- Oxygen prescription is important for patients with underlying respiratory pathology, who are at risk of hypercapnic respiratory failure. ¹
- Over oxygenation of patients in this cohort can have detrimental consequences.
- Impacts on healthcare professionals i.e. nurses who will need to administer the oxygen and score patients correctly on the NEWS chart.

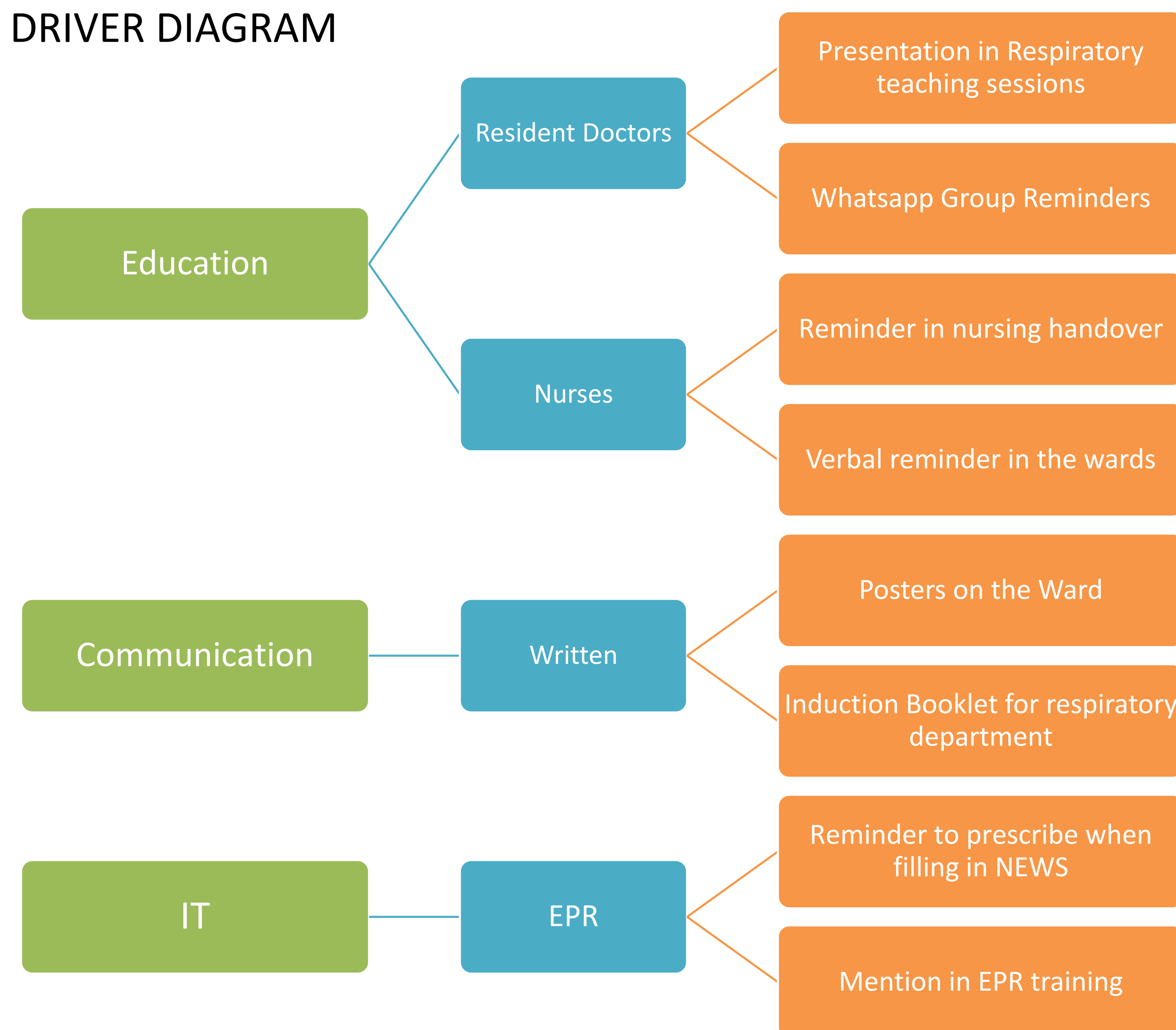
AIM

Increase oxygen prescription by 20% in all patients admitted to the respiratory wards in 3 months.

MEASURES

- **Outcome Measure:**
 - Percentage of patients admitted to the respiratory wards who have had oxygen prescribed
- **Process Measure:**
 - Time of admission
 - Time of oxygen prescription
- **Balancing Measures:**
 - Increased average time to complete ward round
 - Incorrect or inappropriate oxygen prescription

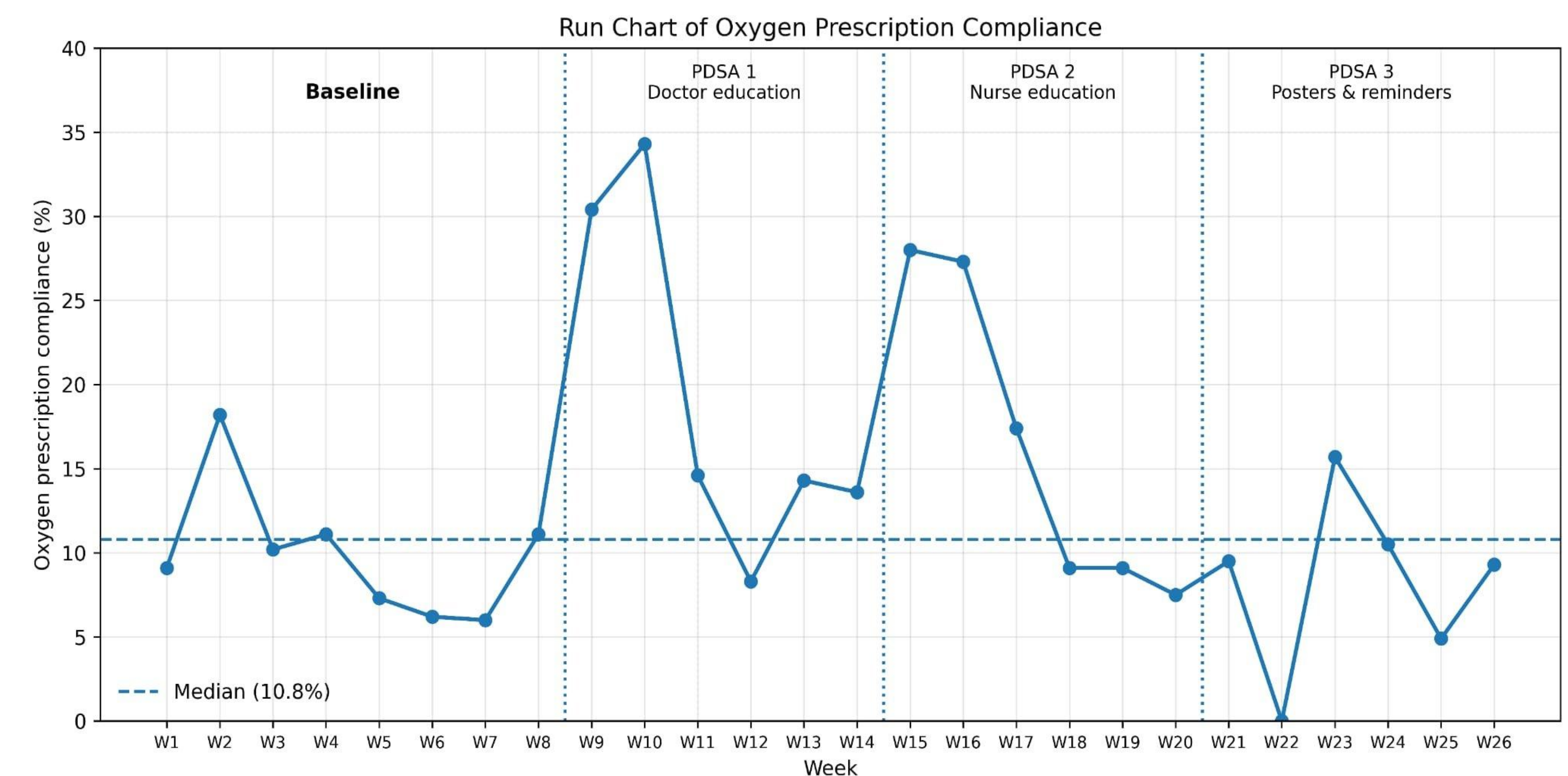
DRIVER DIAGRAM



PDSA CYCLES

- **Cycle 1 -** Presentation in respiratory ward teaching sessions + Whatsapp group reminders
- **Cycle 2 -** Reminder in nursing handovers for 2 weeks
- **Cycle 3 -** Posters on the wards 8a and 8b

DATA / RESULTS



RESULTS AND NEXT STEPS

- Good compliance is seen shortly after each cycle of education that declines with time
- Education alone will not increase compliance of oxygen prescription
- Handover to the next cohort of resident doctors to re-audit in a couple of months
- Looking at specifics (i.e. improving oxygen prescription in first 24hours/ensuring correct oxygen is administered as per prescription etc.)
- Expand to IT e.g. mention in EPR training, reminder to prescribe when completing NEWS

REFERENCES

1. BTS guidelines 2017. <https://www.brit-thoracic.org.uk/document-library/guidelines/emergency-oxygen/bts-guideline-for-oxygen-use-in-adults-in-healthcare-and-emergency-settings>