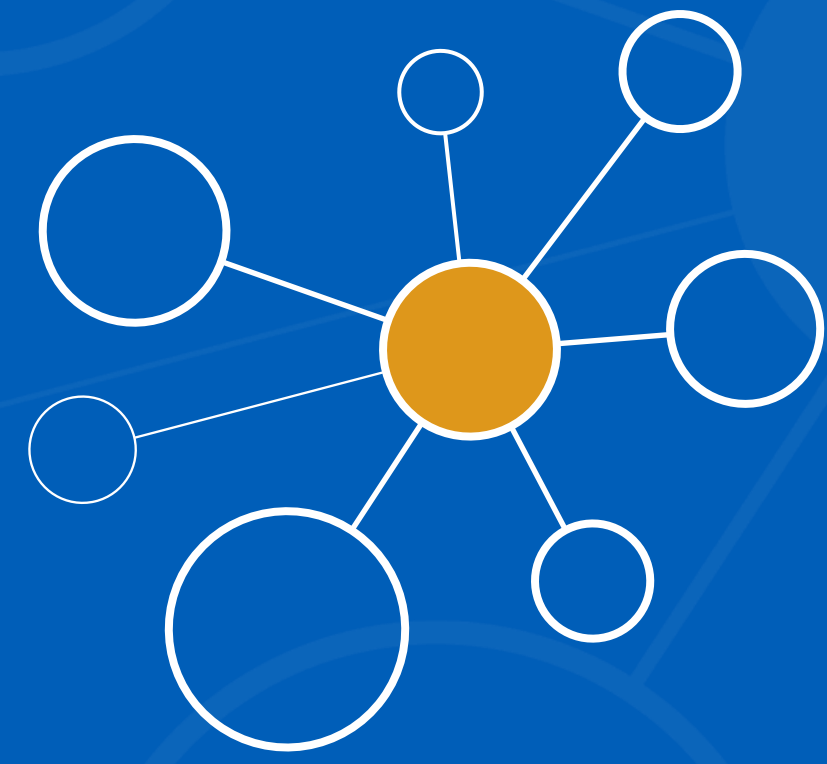




Gloucestershire Safety and Quality Improvement Academy 2026

Enhancing Martha's Rule Documentation

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The Aim

To improve the completeness and quality of documentation related to Martha's Rule on Ward 7A by 10% within 3 months.

Background

Following the implementation of Martha's Rule across Gloucestershire Hospitals NHS Foundation Trust in 2024/25, findings from the NEWS audit identified that some staff lacked confidence and understanding in using the tool effectively, particularly when engaging with patients and families. The audit also highlighted variations in the quality and completeness of Martha's Rule documentation. These findings identified an opportunity to improve staff awareness, confidence and consistent documentation of Martha's Rule, supporting effective escalation and safer patient care.

Measures

Outcome Measures

- Percentage compliance with complete Martha's Rule documentation on Ward 7A.
- 10% improvement in documentation quality score within 3 months.
- Percentage of patient records accurately reflecting current clinical condition.
- Reduction in missing or incomplete documentation entries identified during audits.

Process Measure

- Training attendance register / attendees list completed for each session.
- Pre-teaching questionnaire scores to assess baseline knowledge.
- Post-teaching questionnaire scores to measure learning improvement.
- Number of monthly audit feedback reports shared with staff.
- Number of 1:1 reminders given to staff each week.
- Percentage of daily handovers including reminder messages.

Balancing Measure

- Staff feedback on workload impact.
- Time taken to complete documentation per patient record.
- Staff confidence and satisfaction with the process.
- Delays in other patient care tasks due to documentation time.
- Duplicate or unnecessary entries in records.
- Staff stress concerns or sickness absence during the project period

Driver Diagram

Aim

To improve the completeness and quality of documentation related to Martha's Rule on Ward 7A by 10% within 3 months, ensuring records consistently reflect patients' current health conditions and align with established standards to positively influence patient outcomes, clinical decision-making, and continuity of care.

Primary Driver

- 1. Staff Knowledge and Competence**
- 2. Communication and Continuous Reinforcement**
- 3. Leadership and Team Engagement**
- 4. Monitoring and Sustainability**

Secondary Driver

- Understanding of Martha's Rule standards
- Confidence in accurate documentation
- Awareness of escalation and recording requirements
- Regular reminders to maintain compliance
- Visibility of performance data
- Ongoing leadership messaging
- Senior staff role modelling best practice
- Shared accountability for standards
- Positive team culture
- Routine measurement of progress
- Identification of gaps and trends
- Embedding improvements into daily practice

Change Idea

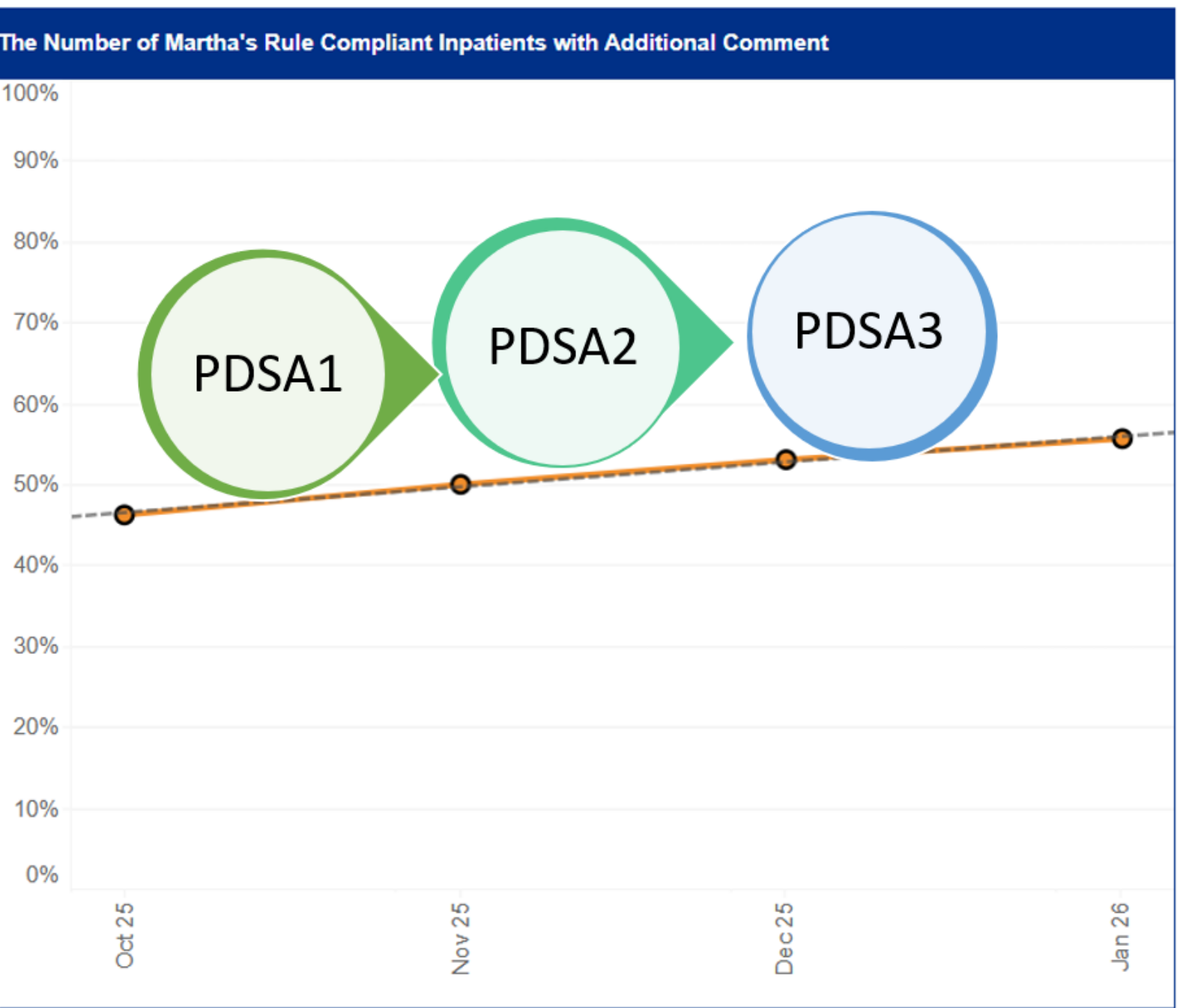
- ❖ Classroom training sessions
- ❖ Micro-teaching during shifts
- ❖ Quick reference guides / prompts
- ❖ Daily handover safety brief messages
- ❖ Monthly audit reports via email / staff groups
- ❖ Daily 1:1 reminders to staff
- ❖ Senior Registered Nurse training night staff
- ❖ Discussion in monthly ward meetings
- ❖ Recognition of staff demonstrating good documentation
- ❖ Monthly documentation audits
- ❖ Feedback from audits in meetings
- ❖ Include documentation checks in safety huddles

PDSA 1: Documentation Audit

PDSA 2 : Education and Training

PDSA 3: Leadership Support and Consistent Communication

Four months Compliance Tracking and Digital Auditing



Barriers/Challenges

- 1.Variable staff engagement and resistance to change :**
Some staff were slow to adopt new documentation expectations due to workload pressures or established habits.
- 2.Inconsistent compliance across shifts and use of temporary staff :**
Documentation standards varied between day and night teams, and bank staff were sometimes unfamiliar with Martha's Rule requirements, leading to incomplete entries.
- 3.Maintaining momentum and sustainability :**
Initial improvement risked declining without continued focus.

Solution

- Delivered regular classroom teaching, micro-teaching, 1:1 coaching, and recognised good practice to improve engagement and ownership.
- Senior staff nurse provided targeted support for night staff, with shift leaders offering quick orientation, reminders, and checklist guidance for temporary staff.
- Introduced monthly audits to each RN, shared feedback reports, discussed progress in ward meetings, and used daily handover reminders to sustain improvement.

Key Requirements

1. Ward manager / Champion – Reinforce the importance of Martha's Rule through regular team discussions.
2. Reminders on PWQ – Integrate into handover sheets, whiteboards, and digital records