

THE PROBLEM

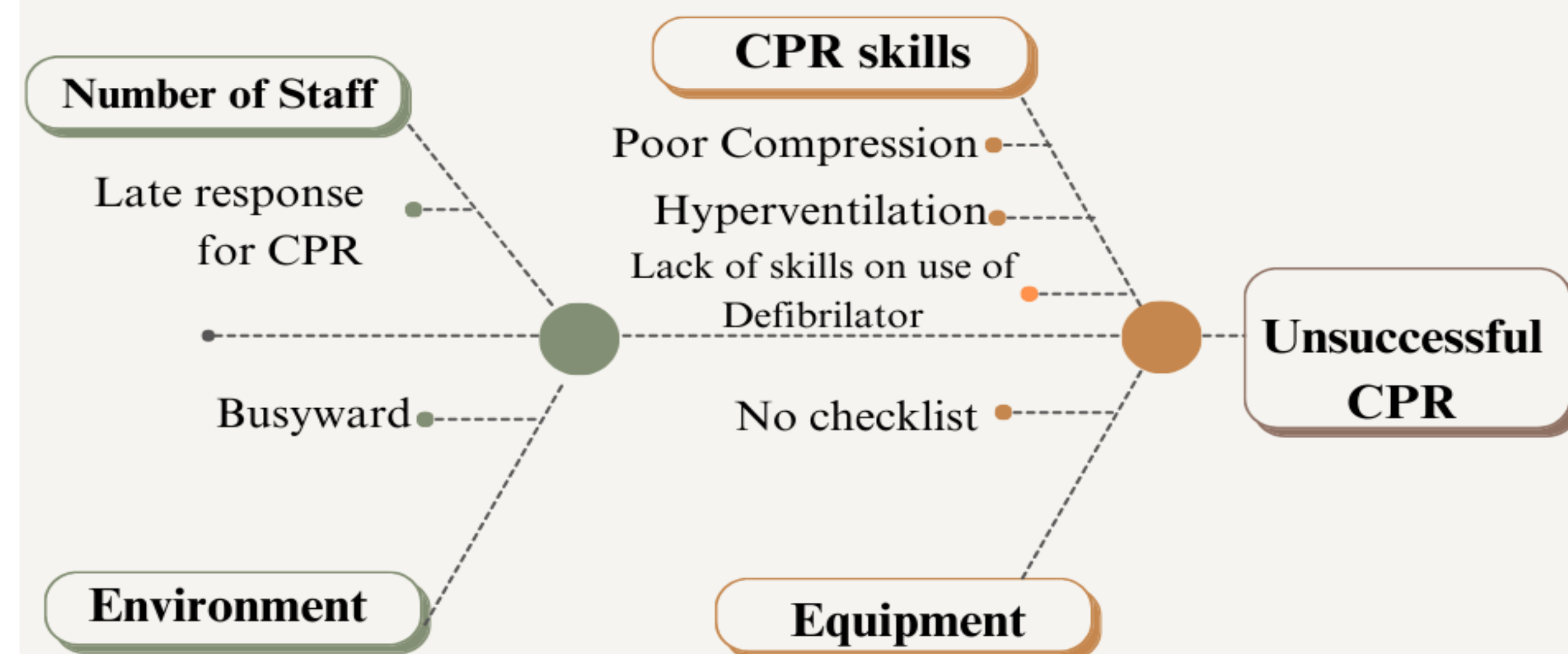
Reduced success rate of CPRs in the ICU, as observed from January to March of 2023. Through data examination, the ICU supervisor and the ICU clinical audit team were able to identify the challenge. Merely 18% of CPRs were successful, as per the baseline survey. This finding encouraged the Quality Improvement (QI) team to carry out a QI study with the aim of improving shortfalls thereby increasing the frequency of successful CPRs during both day and night shifts.

AIM

By August, 2023, we want to increase the percentage of ICU CPRs that are successful from 18% to 60%.

ROOT CAUSE ANALYSIS (Fishbone diagram)

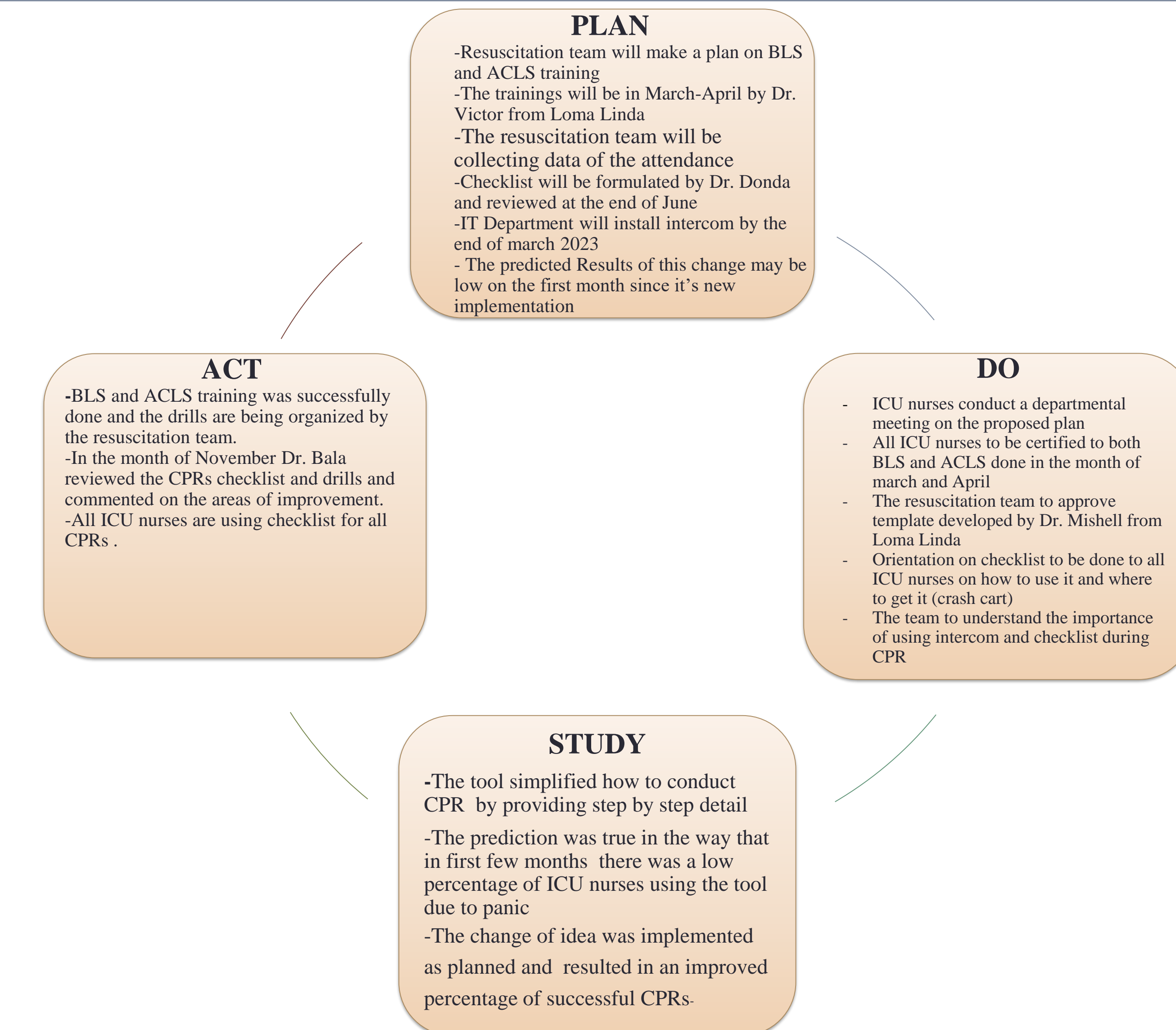
Fishbone Diagram



Prioritization Matrix

No.	List of possible problems/root causes	Important to Patient Outcome/ Staff Safety (1-5)	Affordable in Term of Cost / Resources (1-5)	Easy to Measure (1-5)	Under Control of Team Members (1-5)	Total (4-20)
1	Lack of skills	5	5	5	5	20
2	Number of staff	5	1	2	4	12
3	No checklist	5	1	3	4	13

PLAN DO ACT STUDY CYCLE

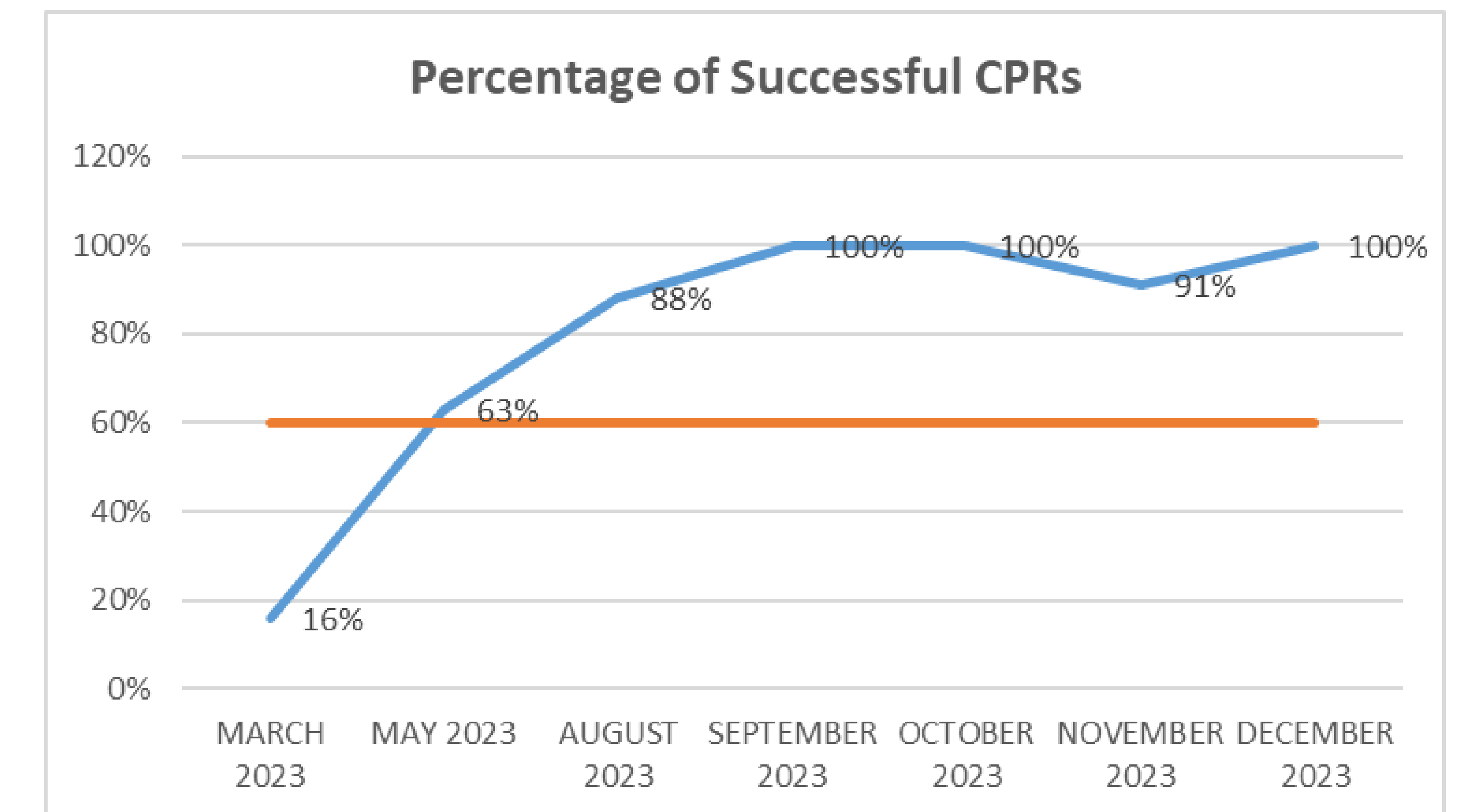


Changed Ideas

What will help to solve the problem?	How will this change improve care?
BLS and ACLS training	To improve skills among ICU nurses
<ul style="list-style-type: none"> • Electrical phone (intercom) call for help and proper allocation of responsibilities • Develop colour coding and orientation • Involve resuscitation team 	To ensure high quality CPR
Develop a CPR checklist to guide during CPR and a time keeper communicate to the entire team.	<ul style="list-style-type: none"> • Leader • It will provide guidance, consistency accountability efficiency and clarity during CPR • It will improve nurses efficiency for additional patient evaluation and promotes essential for good clinical communication

DATA

PERCENTAGE OF SUCCESSFUL CPR



RESULTS

- There is increased percentage of successful CPR starting from the second quarter.
- Looking at the progress of our project there is a significant improvement of successful CPR since all the nurses are certified by both BLS and ACLS.

SUMMARY

- There was good coordination on CPR roles
- Good timely response from other team members was observed
- The BLS and ACLS helps the team to get knowledge and skill on how to use resuscitation equipment and identify reversible causes i.e. shockable rhythms
- Resuscitation equipment is now ready and easy to reach
- Effectiveness of CPR has greatly improved

FUTURE STEPS/ WHAT'S NEXT?

- Quick response to Resuscitation to be maintained
- Coordinated team for Resuscitation to have frequent review meetings
- To have certified ACLS and BLS trained team of doctors and nurses
- To decrease mortality rate, morbidity and improve survival outcomes in cardiac arrest patients
- To continue monitoring CPR using the tool for consistency
- Implementation of debriefing in every department after CPR to identify gaps and ways to improve
- To have CPR Drills
- To have more resuscitation equipment and medication like AED pads