

Critical Care Key Document Page Monitoring Tool

MONITORING AND COMPLIANCE

This section should identify how the Trusts plan to monitor compliance with and the effectiveness of this Treatment pathway. It should include auditable standards and/or key performance indicators (KPIs) and details on the methods for monitoring compliance

What	How	Who	Where	When
<i>These are the 'key' parts of the process that we are relying on to manage risk.</i>	<i>What are we going to do to make sure the key parts of the process we have identified are being followed?</i>	<i>Who is responsible for the check?</i>	<i>Who will receive the monitoring results?</i>	<i>Set achievable frequencies.</i>
Two consultant decision to use ECCO ₂ R	Audit	Dr Bhardwaj	ICU Forum	Annually
All ECCO ₂ R patients included in ELSO registry	Audit	Dr Bhardwaj	ICU Forum	Annually
Each patient should have complete sets of observations and a NEWS score calculated	Compliance with NEWS will be monitored by audit of patient observation charts	Ward Managers	Director of Nursing, Matrons	Weekly
Transfers from critical care should avoided between 22:00 and 07:00	Compliance with avoidance of out of hours transfers will be monitored via ICNARC data	ICNARC clerk	Consultant Clinical Lead ICU	Monthly
Patients transferred from critical areas should have a formal documented structured handover of care	Compliance with transfer documentation will be monitored by audit of patients notes	Outreach Team/FY1	Matron for ICU Clinical Director	Once Yearly
Critical Care Nutrition guidelines	Observation and chart reviews	Sr Julie Share, Nutrition Link Nurse Critical Care ALX, Sr Andrea Carn, Nutrition Link Nurse, WRH		Six monthly intervals
Management of patients with tracheostomy tubes	Audit	Critical Care outreach teams and physiotherapists at Alex and WRH		All tracheostomy patients