

**Abstract 91 Figure 1** Percentage of home healthcare patients discharged from hospital who had a multidisciplinary team review within 3 days of hospital discharge during the pilot phase of the project

Quality Improvement project aimed to develop a pathway for the identification of HHCS patients discharged from hospital and to subsequently improve their transition to home by ensuring they have a timely multidisciplinary team (MDT) assessment in the community.

**Methods** We collated discharge data and ensured its validation. This allowed us to create a Patient Discharge Registry. We devised a process flow for MDT review of hospital discharges and measured the percentage of patients who had MDT reviews within 3 days of discharge and the percentage of patients satisfied with post-discharge follow up.

**Results** We successfully implemented the MDT review pathway with 98% compliance (figure 1).

**Conclusion** By ensuring that we are reviewing all HHCS patients who are discharged home from ED or in-patient units, we are helping ensure that our patients' transition from hospital to the home will be safer.

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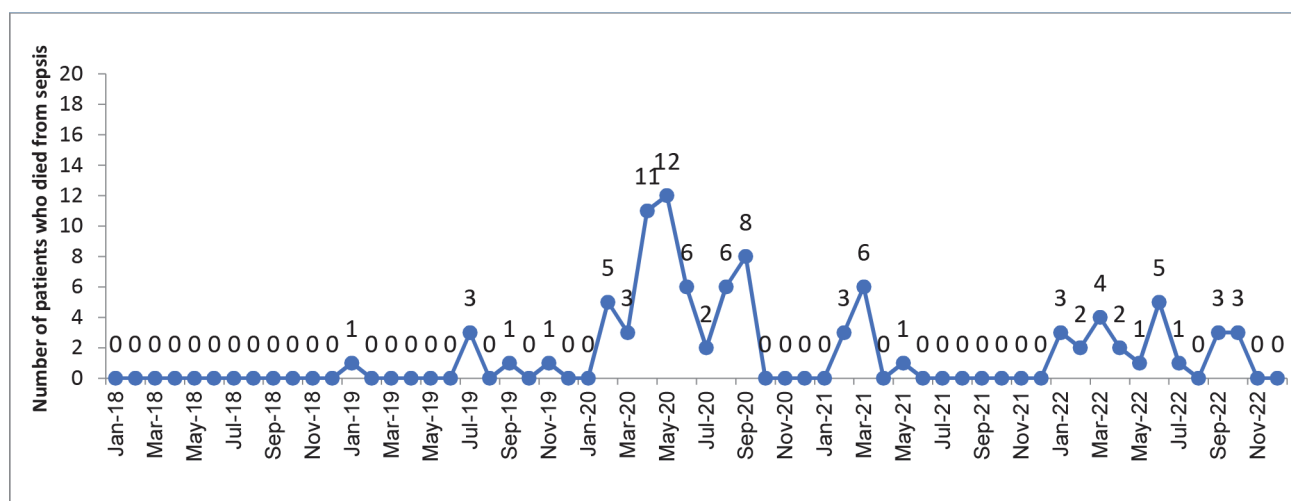
**Approval Statement** This Quality Improvement project and associated publication were approved by the leadership of Hamad Medical Corporation Home Healthcare Services, Doha, Qatar.

## 92 COULD IT BE SEPSIS?

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**Background** Sepsis, a life-threatening response to infection, poses a critical medical risk when left untreated.<sup>1</sup> Originating from infections in the lungs, urinary tract, skin, or gastrointestinal tract, sepsis triggers a systemic chain reaction in the body, leading swiftly to tissue damage, organ failure, and



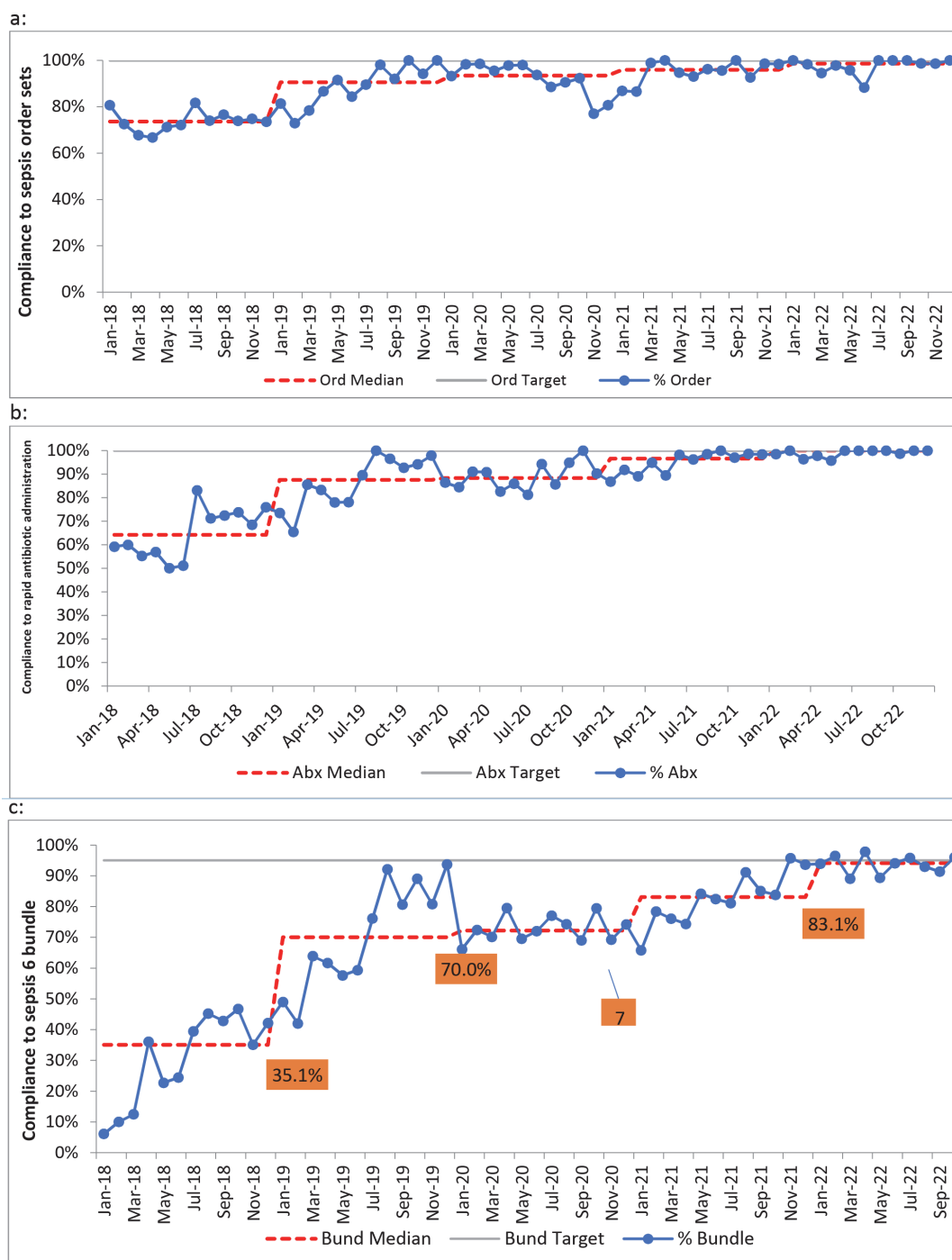
**Abstract 92 Figure 1** Number of deaths due to sepsis in Al Wakra hospital between 2018 and 2022

potentially death. In January 2018, our facility identified 98 sepsis cases with no associated deaths.

**Methods** Enhancing sepsis management involves multifaceted strategies. Chief among these is staff training to heighten awareness and comprehension. Implementing a standardized sepsis order set aims to improve adherence to protocols. Timely intravenous antibiotic administration within a one-hour window is prioritized. Monthly monitoring ensures compliance with all bundle elements to maintain quality standards.

**Results** From January 2018 to December 2022, Al Wakra Hospital witnessed notable trends in sepsis management and

compliance metrics. figure 1 illustrates the fluctuation in the number of deaths attributed to sepsis during this period, showcasing the impact of our interventions. Meanwhile, figure 2 provides insights into the hospital's staff adherence to the sepsis order set, highlighting our efforts to standardize protocols for optimized care delivery. Additionally, figure 2 also demonstrates the hospital's performance in administering intravenous antibiotics within the crucial one-hour window, a vital aspect of sepsis treatment. In addition, it presents the percentage compliance with the comprehensive Sepsis Six Bundle Components, reflecting our commitment to maintaining



**Abstract 92 Figure 2** Outcome measures from Al Wakra hospital from January 2018 to December 2022 in relation to: a- compliance to sepsis order sets; b- compliance to antibiotic administration within 1 hour; c- compliance to sepsis 6 bundle implementation

quality standards in sepsis management. By 2022, the number of sepsis cases decreased to 39, with no sepsis-related deaths.

**Conclusion** Al Wakra Hospital's success in sepsis management can be attributed to the unwavering commitment and collaboration of hospital leaders and the multidisciplinary team. Despite challenges, such as staff shortages during the COVID-19 pandemic, our dedication to patient care remained steadfast. The impact of COVID-19 on compliance is evident, underscoring the importance of adaptability in maintaining high standards of care.<sup>2 3</sup>

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**Ethical Approval/IRB Statement** This project was authorized by the Al Wakra Sepsis Committee at Al Wakra Hospital, Hamad Medical Corporation, Qatar.

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(physicians, nurses, and allied health professionals) who were involved in the success of the initiative and ensured that patient safety remains the top priority.

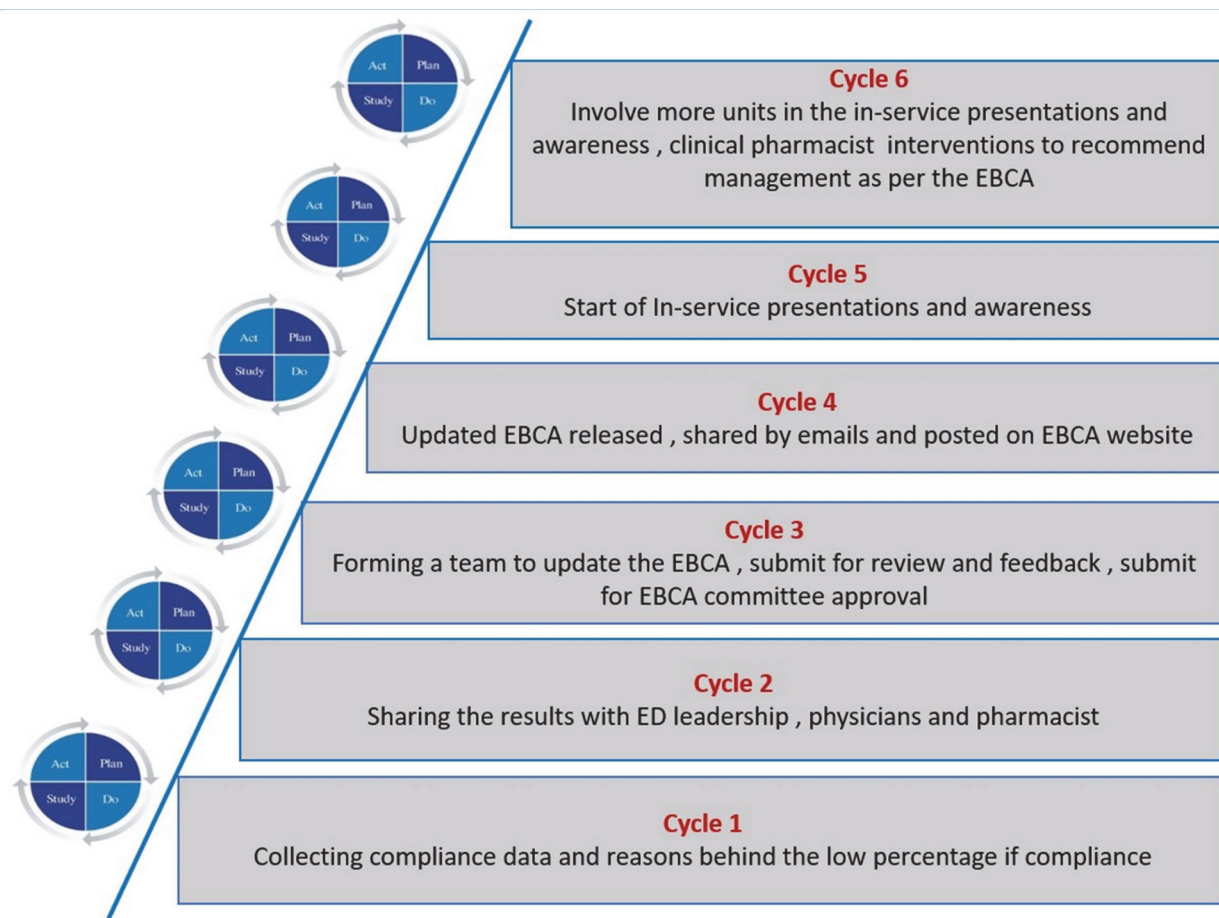
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## IMPROVING COMPLIANCE WITH EMERGENCY DEPARTMENT PAIN MANAGEMENT: EVIDENCE-BASED CLINICAL ALGORITHMS

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**Background** Pain is one of the main reasons for emergency department visits and pain management is one of the most important components of patient care.<sup>1</sup> The emergency department (ED) is a hyperactive area where a lot of factors may play a role in pain recognition and treatment within an acceptable timeframe. Alleviation of pain should be a priority when treating patients. The use of a standard pain assessment tool and a standard pain management guideline are the key components in achieving timely and appropriate pain management for each patient.<sup>2</sup> Our hospital ED uses evidence-based clinical algorithms (EBCA) pain management guidelines which



**Abstract 93 Figure 1** Plan/Do/Study/Act (PDSA) ramp implemented during this Quality Improvement project to improve pain management in the Hamad general hospital emergency department, Doha, Qatar