

AN ALPHANUMERIC PAGING SYSTEM: AN ONGOING QUALITY IMPROVEMENT PROJECT

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Background

Many tertiary care centers utilize alphanumeric paging systems. According to a review of the literature, the results of switching to a message based paging system have been extremely positive. The process of text-paging sends a message that includes pertinent information to allow the recipient to triage the page appropriately - subsequently improving patient care.

Objective

- To implement an alphanumeric paging system for the Royal Alexandra Hospital Labour and Delivery unit and wards
- Streamline communication between nurses and residents
- Enhance patient safety by improving resident: efficiency, response time to emergent situations, triaging abilities

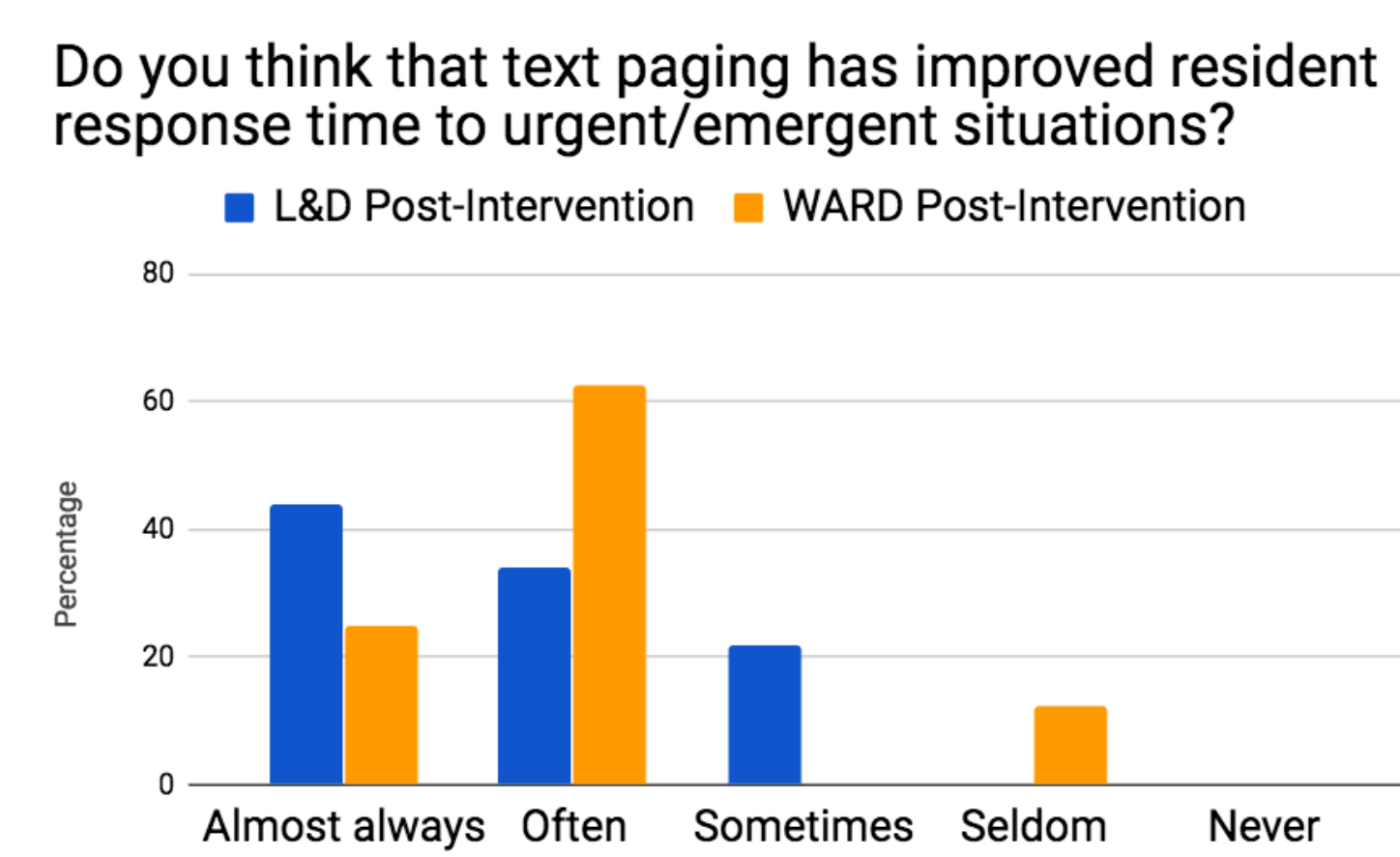
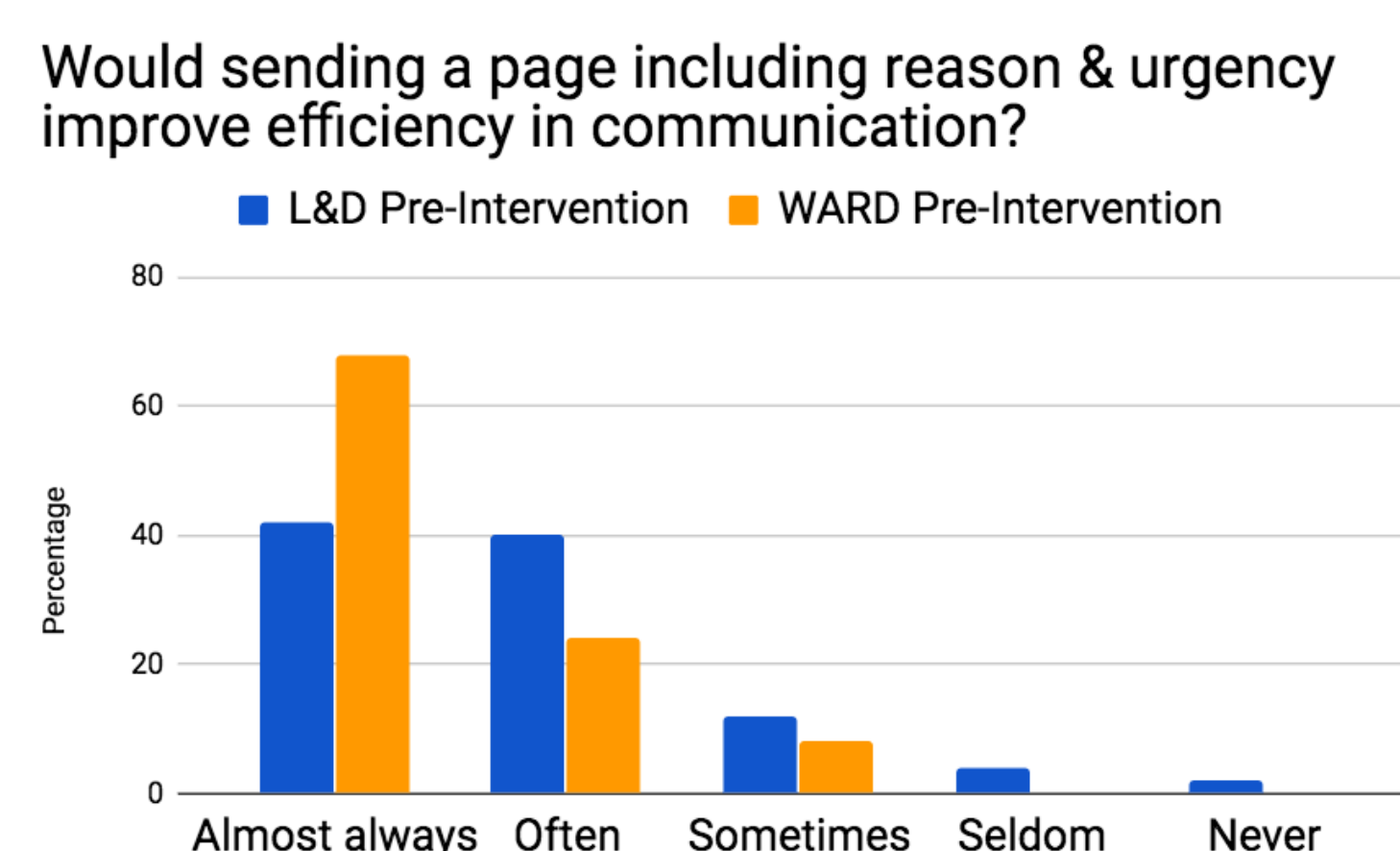
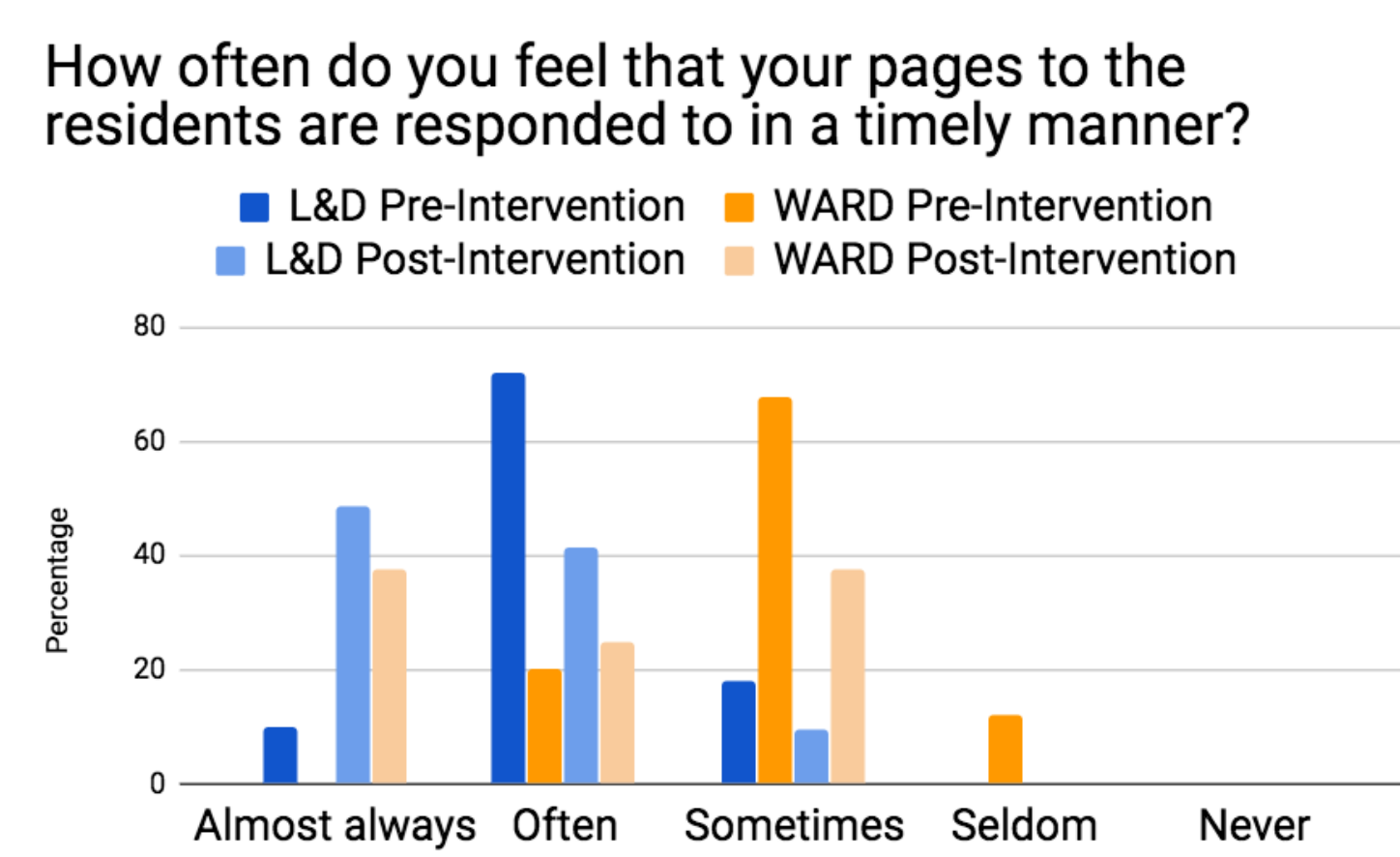
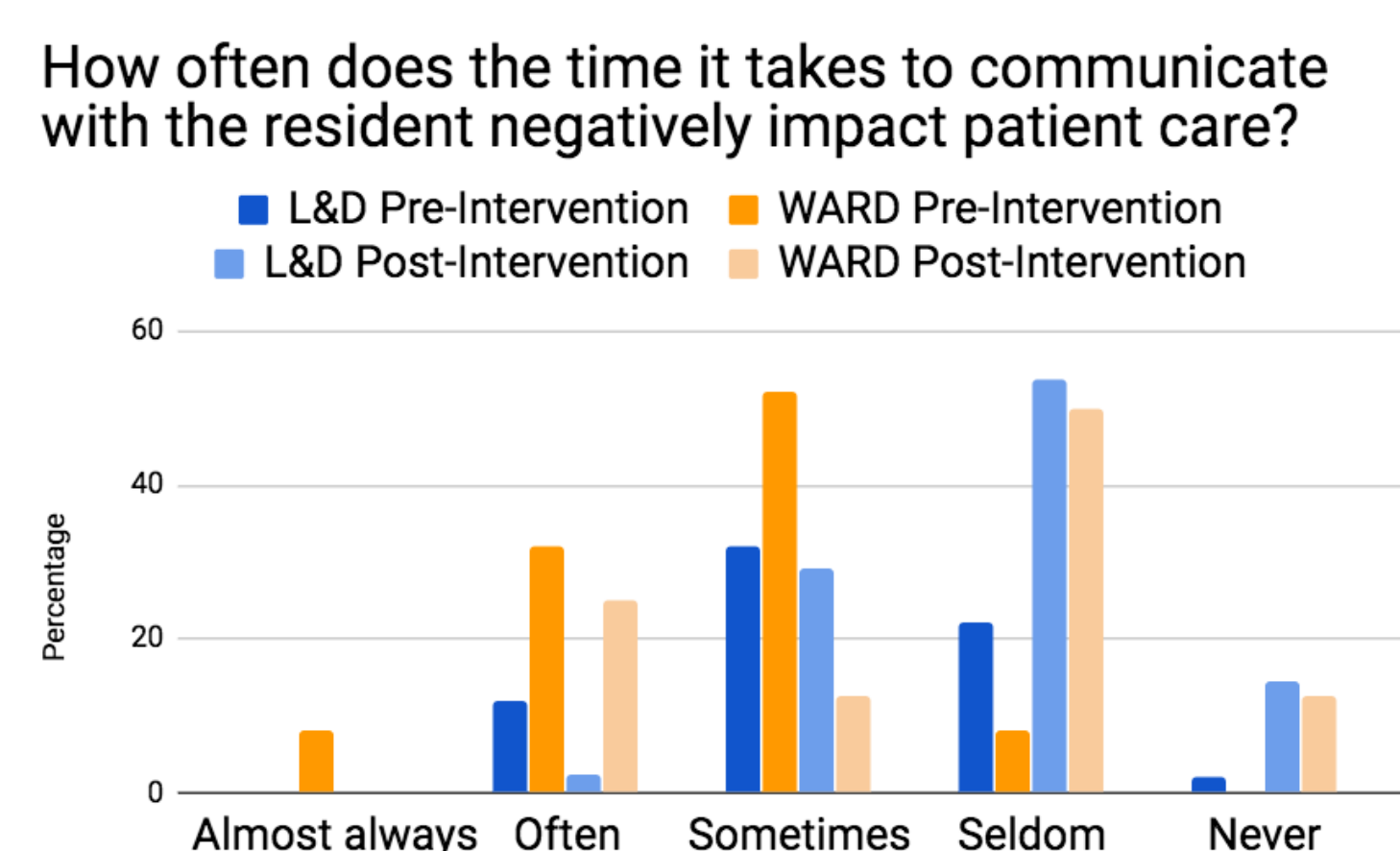
Method

- Pre and post-intervention Likert format surveys were distributed to OBGYN residents and nurses to evaluate paging practices at RAH
- Surveys assessed perceptions of efficiency, ability to triage, effectiveness of communication and patient safety
- Nursing staff were educated on paging with a specific reproducible template which included the location, urgency and context of the page.
- The data was collected/analyzed via REDcap

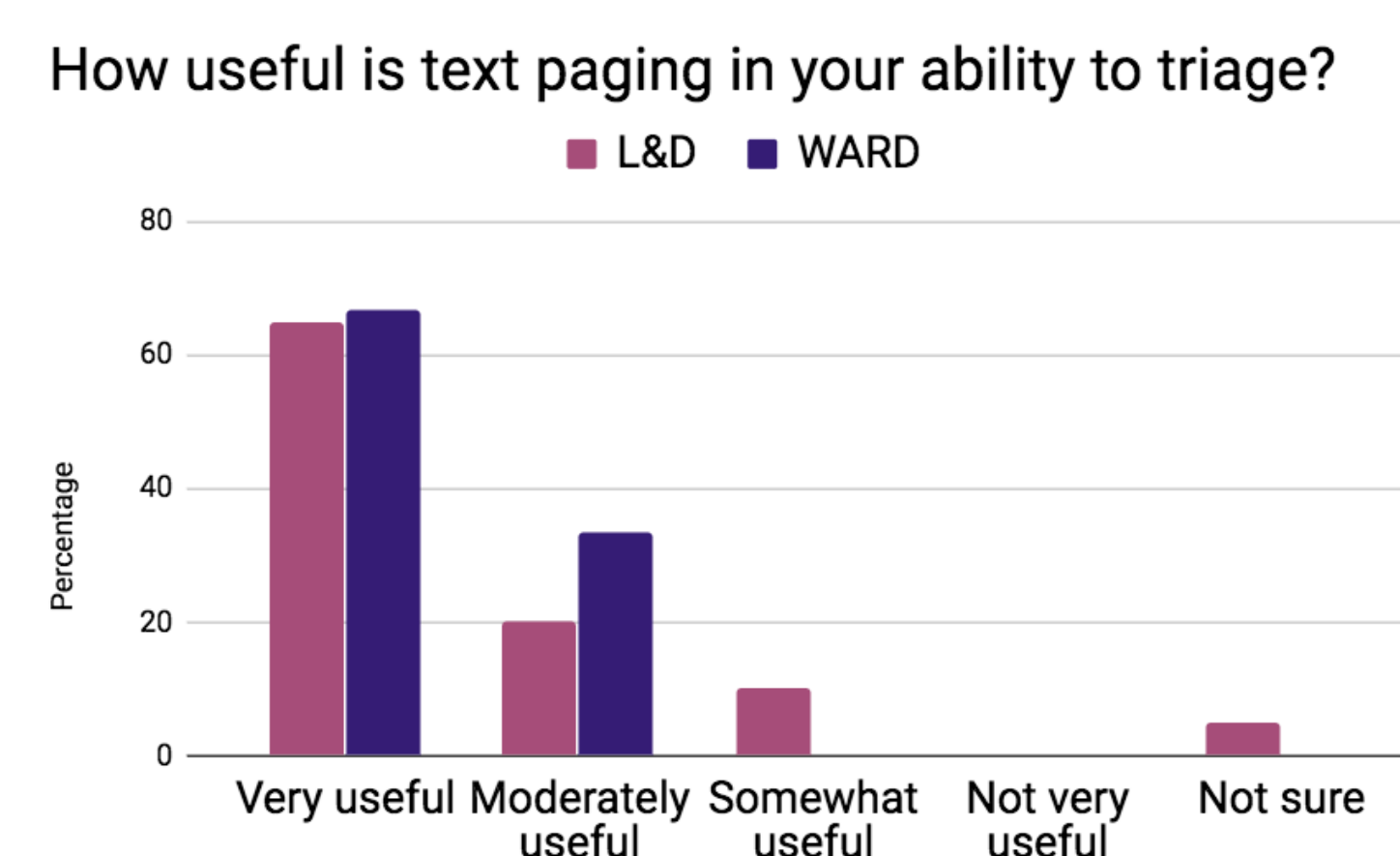
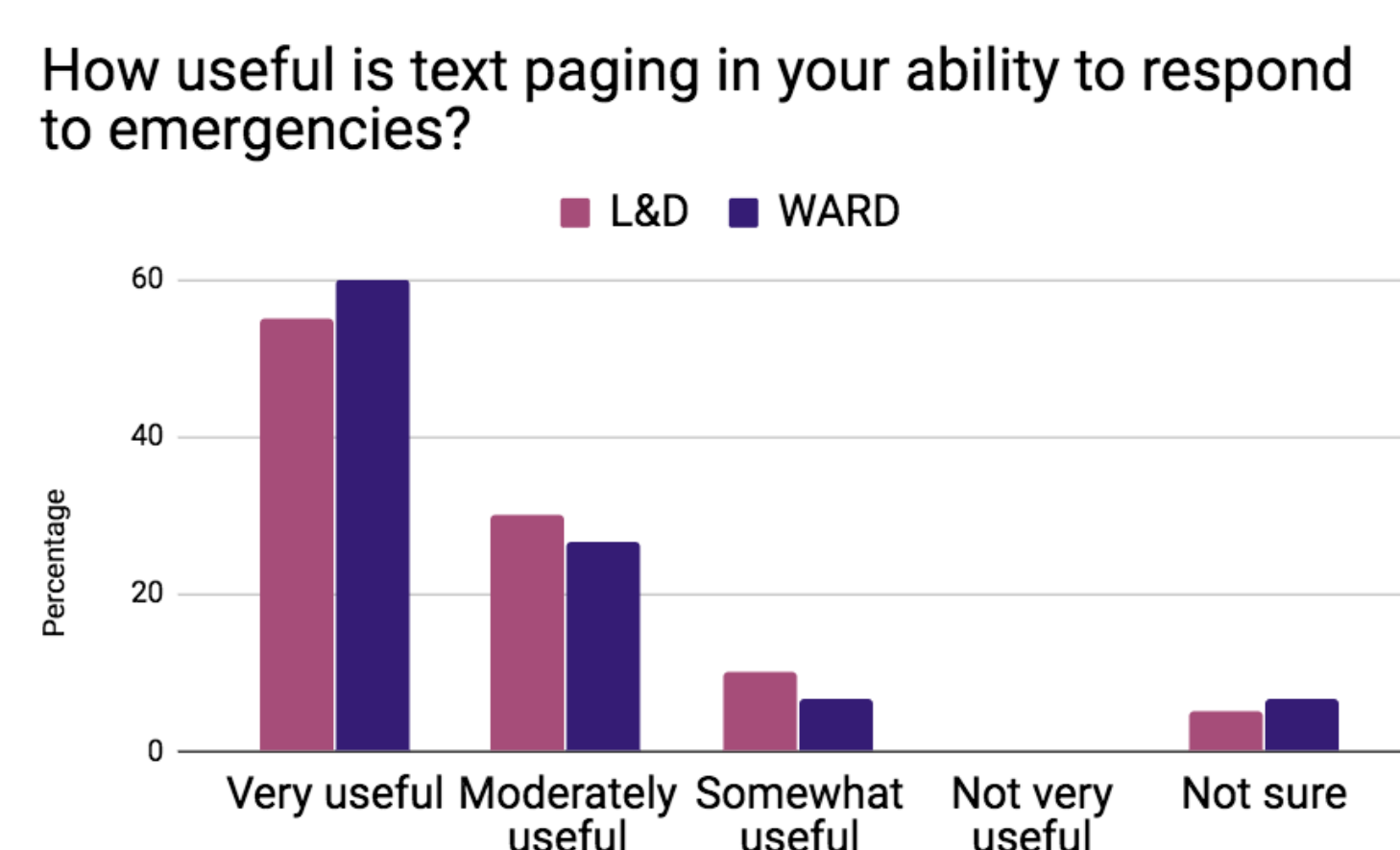
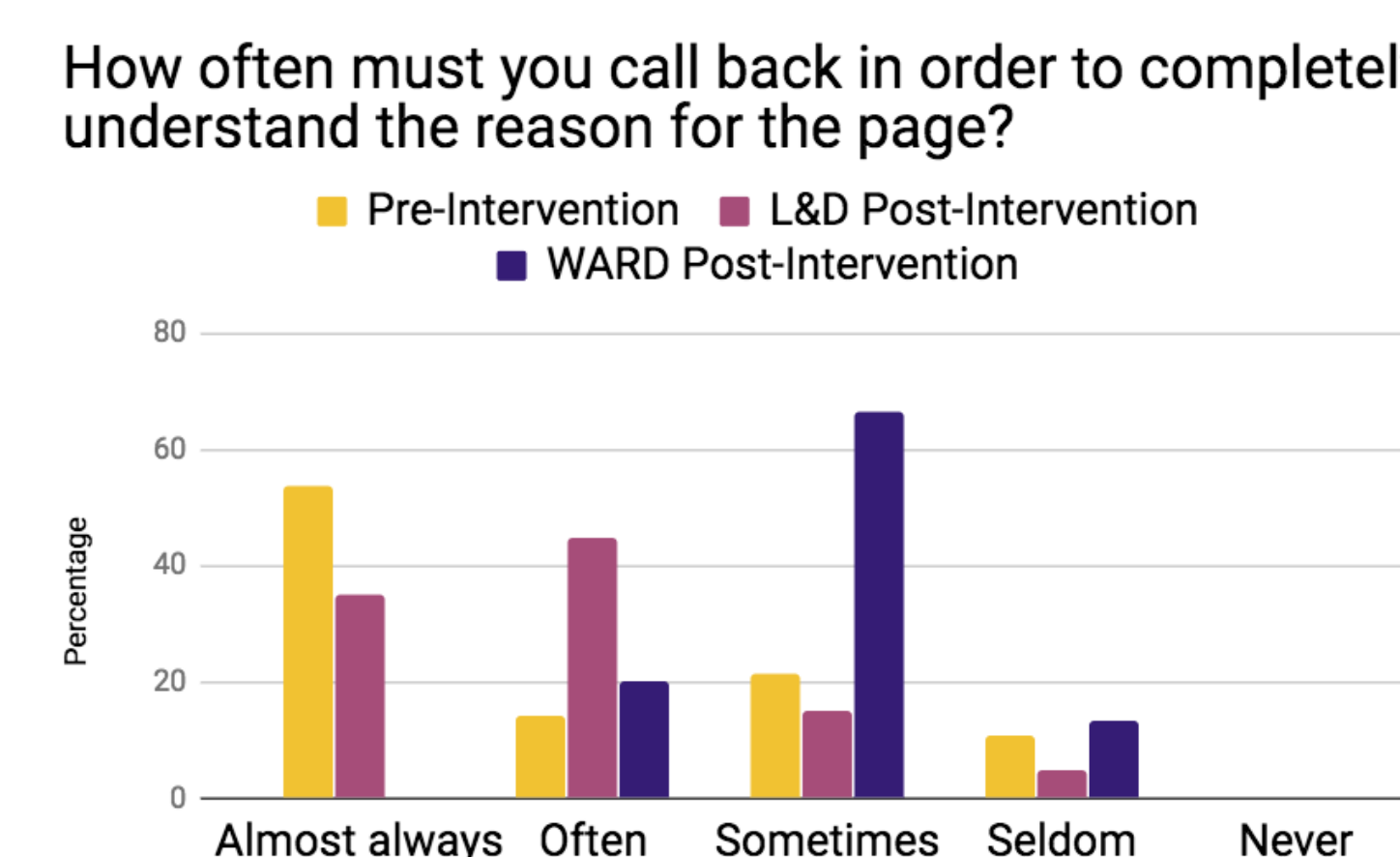
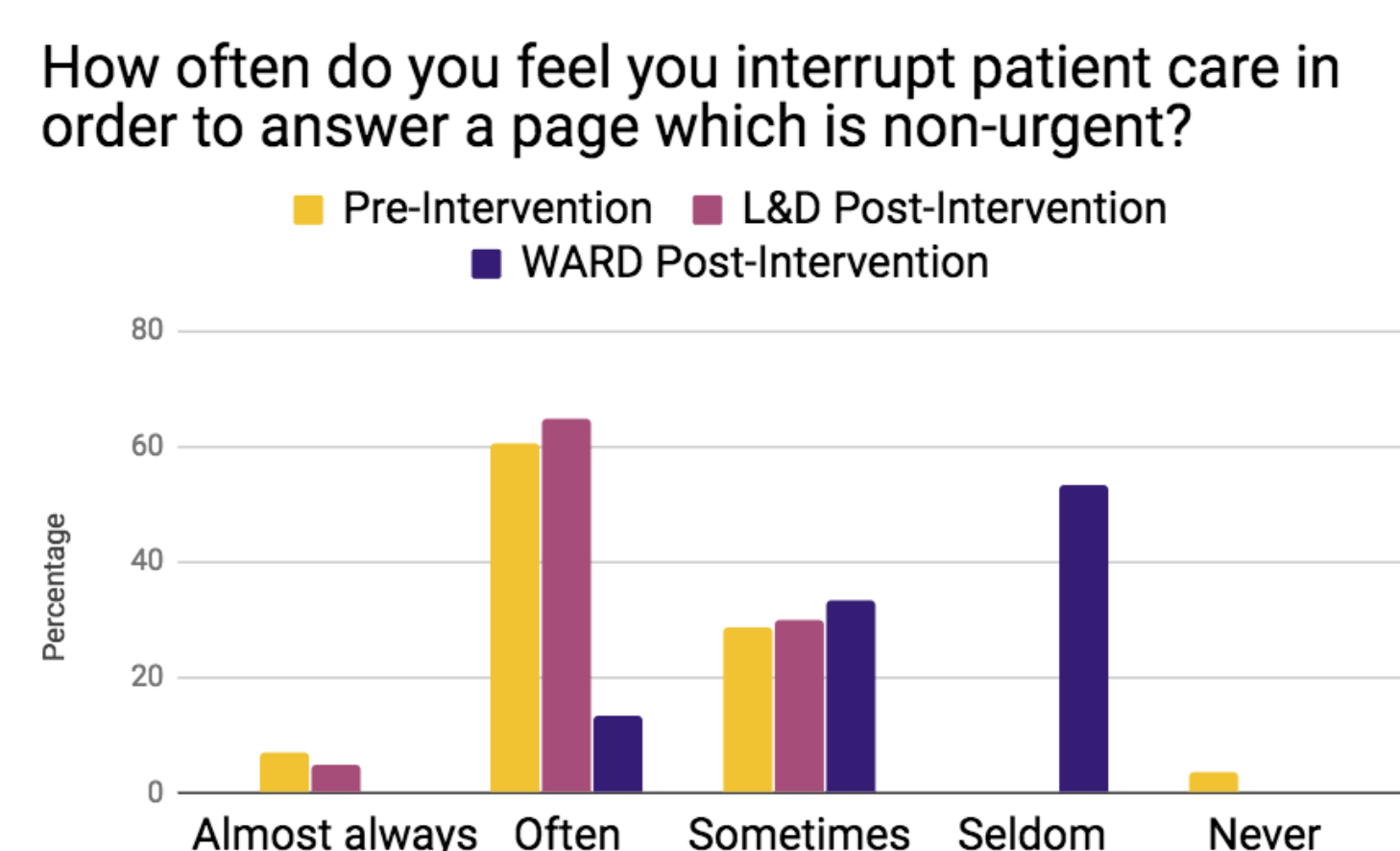
Progress and Results

- Pre and Post-intervention survey results collected from residents and nurses (L&D and wards)
- Feedback for potential improvements to paging process obtained; integrated into second QI cycle.

RN Data:



Resident Data:



Progress and Results Continued

Feedback:

- “It is a good way to quickly get orders for silly things such as tylenol. Allows residents to go directly where needed in the event of an emergency. Faster response to events where a resident is needed quickly”
- “Love it, able to update, easily get analgesic orders or inform of deliveries, etc”
- “I love it and hope it is a permanent change. I think it is helpful in communicating information appropriately and allows for better time management of the Dr's”
- “It is awesome. I think they should be short and brief, sometimes they are too long and give patient history. The shorter and more concise the better.”
- “Non-urgent issues classified as urgent or STAT”
- **Major themes noted in RN and Resident feedback of the Text Paging Intervention:**
 - Confirmation of text pages received by residents
 - Triage classifications; re-education required
 - Length of text pages; too long!
 - Overall positive change and improvement to patient care.

Conclusions

- As demonstrated by the figures and comments, the alphanumeric paging system has improved efficiency of resident-nursing communication, response to emergency situations and triaging.
- **Plans moving forward:**
 - Re-education regarding responses to non-urgent pages (ex FYI) by residents → discuss at academic day
 - Re-education of triage classifications: STAT/Urgent vs ASAP and FYI → plan for inservice
 - Expand to staff OBGYN physicians → discussed at recent business meeting