

To improve continuity in fluid balance monitoring and thereby enhance patient outcomes and recovery, we aim to achieve consistent completion of hourly fluid balance assessments from 40% to 50% by October 2026
 1 linked measure

Stakeholders

Nurses, doctors, pharmacist, ward manager, matron, IT, dietitians, QI leads

Liaise with pharmacy digital team and surgical dietitian to ? hourly PN fluid balance reminder, discussed with WM re ward champions 18/11/2025

Equipment

Visual aid to trigger review, hourly PN recording on eCare, incomplete fluid balance charts

Awaiting confirmation from pharmacy and dietitians team re alerts for hourly PN reminder, visual cues/laminated guides by patient board 17/11/2025

Education

Inconsistent documentation process and communication during handovers

PN fluid balance to include during induction training, one to one teaching on the ward with PDN, complete competency form started a month ago
 1 linked PDSA ramp

Lack of awareness about fluid balance importance

Junior or bank staff unfamiliar with recording and monitoring protocols

Create powerpoint training and education pack UPDATE: Training pack created, training ongoing 14/11/2025

Process

PN to be included during safety huddles, handover

Update training boards on F5/F6 UPDATE: Complete 14/11/2025

Measurement

Lack of real time feedback from staff

Introduce daily PN review checklist on the ward, liaise with colorectal team for post-op colorectal patients enhanced recovery protocol

No regular auditing of PN though live dashboard

Conduct weekly fluid chat snapshot audits and provide feedback to the team UPDATE: audit beginning 17/10/25

Environment

Busy ward leading to missed monitoring, distractions and interruptions during assessments

Liaise with IT to develop a PN dashboard for live , looking for future plan

Staff shortage

safety huddles, handover, already in place 18/11/25