



NRAP Good Practice Repository – COPD

Addenbrooke's Hospital

Cambridge University Hospitals NHS Foundation Trust

KPI2:

Oxygen prescribed to a targeted saturation.

Addenbrooke's Hospital achieved:

100% - 2022-2023*

*% of patients submitted to the audit.

Across the trust we have achieved a process that ensures admitted patients have oxygen target saturations prescribed and all oxygen flow rates and saturations are recorded on the observation sheets.

Our processes to achieve good practice in KPI2:

- Target saturations guide printed on drug charts with 2 options of target saturations.
- When moved to electronic medical records (EMR) system an order set for recording oxygen saturations was built.
- The order set has 3 options of target saturations, 92-96%, 88-92%, Oxygen (specify parameters) if none of above options are appropriate.
- All admitted patients have an order set completed. If not completed a prompt will appear.
- Saturations and oxygen flow rate are recorded on patient's flowsheet.

Staffing

- All ward doctors and nurses are responsible for ensuring oxygen is within prescribed target saturations.
- Respiratory specialist nurses identify and review COPD patients admitted to ensure correct oxygen target saturations are ordered.
- Respiratory specialist nurses liaise with ward staff to ensure those on oxygen are within target range.
- Respiratory specialist nurses assess respiratory patients for home oxygen.

Supporting materials

- Respiratory specialist nurses provide trust-wide teaching on oxygen delivery and management to nursing staff.
- Medics receive training on oxygen delivery and management as part of trust and respiratory medicine induction.
- An online training package on oxygen delivery and management, was written by the respiratory specialist nursing team and is available to all nursing, AHP and medical staff.
- *Please see appendices at the end of this document.*

Processes

- Respiratory specialist nurses perform quarterly audits on higher oxygen usage wards e.g. respiratory medicine.
- The percentage of patients with target saturations recorded; are meeting prescribed target saturations; are on oxygen but not within target range; and those who are above or below two percent of the target range are audited.
- Audit results are fed back to ward managers and discussed at the COPD teams' quarterly business meetings.
- Incidents regarding oxygen delivery and management are discussed at the COPD business meeting.
- Critical incidents identified at the COPD business meeting are discussed at the respiratory clinical governance meeting.
- Complex oxygen patients are discussed with responsible clinician, or at weekly consultant led team meeting.
- Respiratory specialist nurses handover patient with new, or changes, to oxygen to community respiratory teams upon discharge.



Appendices

As part of the COPD inpatient assessment bundle all patients have their oxygen needs assessed and documented as below:

Oxygen History:

	Yes	No
Home oxygen If yes, indicate: LTOT <input type="checkbox"/> AOT <input type="checkbox"/> SBOT <input type="checkbox"/> Other <input type="checkbox"/> <input type="checkbox"/> ___e.g nocturnal NOT, palliative POT	<input type="checkbox"/>	<input type="checkbox"/>
Target saturations	Prescription: 88-92% <input type="checkbox"/> 92-96% <input type="checkbox"/> Other (specify) _____	
Risk of Type II Respiratory Failure?	<input type="checkbox"/>	<input type="checkbox"/>
If type II RF, *Oxygen Alert card given?	<input type="checkbox"/>	<input type="checkbox"/>
Pulmonary hypertension	<input type="checkbox"/>	<input type="checkbox"/>
Cor pulmonale	<input type="checkbox"/>	<input type="checkbox"/>
Polycythaemia	<input type="checkbox"/>	<input type="checkbox"/>

*Oxygen Alert card / patient leaflet information - instructed to show the card to the ambulance crew and emergency department staff in the event of an exacerbation.



Oxygen Bulletin



Your Respiratory Specialists Team:

Your Oxygen Link Nurses are:

N3 Audit report for the months of

% of Target Sats Order	% O2 Sats within target range for patient receiving oxygen	# of Flow sheet requires co-signing

The ward is averaging _____ patient per month that are needing oxygen.

No patients are more than or less 2% of their above or below prescribed target sats that are on oxygen.

There are six key COPD metrics that will be measured through the audit and will be used by the Care Quality Commission (CQC) as part of the National Clinical Audit Benchmarking (NCAB) project to measure trust performance.

One of best practice is **to prescribe a target range for all hospital patients at the time of admission** so that appropriate oxygen therapy can be started in the event of unexpected clinical deterioration with hypoxaemia and also to ensure that the oximetry section of the **NEWS 2** can be scored appropriately.

Oxygen is a drug hence needs prescription as there is a **danger** of adverse incidents and occasional deaths due to **underuse or overuse of oxygen**.

What do we need to do?

- To ensure target saturations are documented and ordered (on epic this is on 'Orders')
- Respiratory Specialist Team is responsible for auditing the trust with focus on respiratory ward N3
 - Spot checking in wards
 - Oxygen audit report on epic library



- To identify patients with target sats >2% above range receiving oxygen, to monitor their risk of hypercapnic respiratory failure , what FiO2 are they on and how often it occurs in the 24 hour period.
- Continuous education of staff on appropriate and timely recording of target sat, ensuring flow sheet has been co-signed by a Staff Nurse looking after the patient. Ward visit or oxygen road show to promote education. DOT learning package for health care professional (subject for approval).

TRAINING UPDATE:



95 % signed off competent in oxygen administration.

Any suggestions on what we can do to improve our oxygen management, speak to your link nurses or one of the RCNS team. Telephone: 01223 216647 or via Secure Chat ART nurses