

### 989 Improving the Completion of Hospital Anticipatory Care Plans in Orthopaedic Trauma Wards During The COVID-19 Pandemic

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**Background:** The COVID-19 pandemic has highlighted the importance of the Hospital Anticipatory Care Plan (HACP). New guidance recommends all patients admitted acutely to hospital should have a HACP completed within 24 hours. We aimed to assess how many orthopaedic trauma patients admitted to the study centre had HACP completed within 24 hours of admission.

**Method:** Departmental Quality Improvement Project (QIP) permission was granted, and standard audit protocol was utilised. Data were collected in a retrospective manner using our trauma database and online patient record system. Educational interventions including staff teaching sessions and dissemination of infographic posters were implemented. Cycle two was repeated in similar fashion.

**Results:** Cycle one (50 patients): 37/50(74%) had HACPs completed. Of those with HACPs, 18/37(49%) were completed within 24 hours. Median time to completion was 45.3 hours (range 0.4-275.1 hours). Cycle two (58 patients): HACP completion significantly improved (56/58, 97%;  $p < 0.01$ ), with more completed within 24 hours (50/56, 89%;  $p < 0.01$ ). The median time to completion was decreased to 4.92 hours (range 0.27-60.6;  $p < 0.01$ ).

**Conclusions:** Unit compliance was initially poor however significantly improved with educational measures. Failing to identify ceilings of care early can result in difficult decisions having to be made in critical situations, risking suboptimal patient care.