



To Improve Compliance with PEWS Guidelines and Evaluate Deterioration in the Patient:

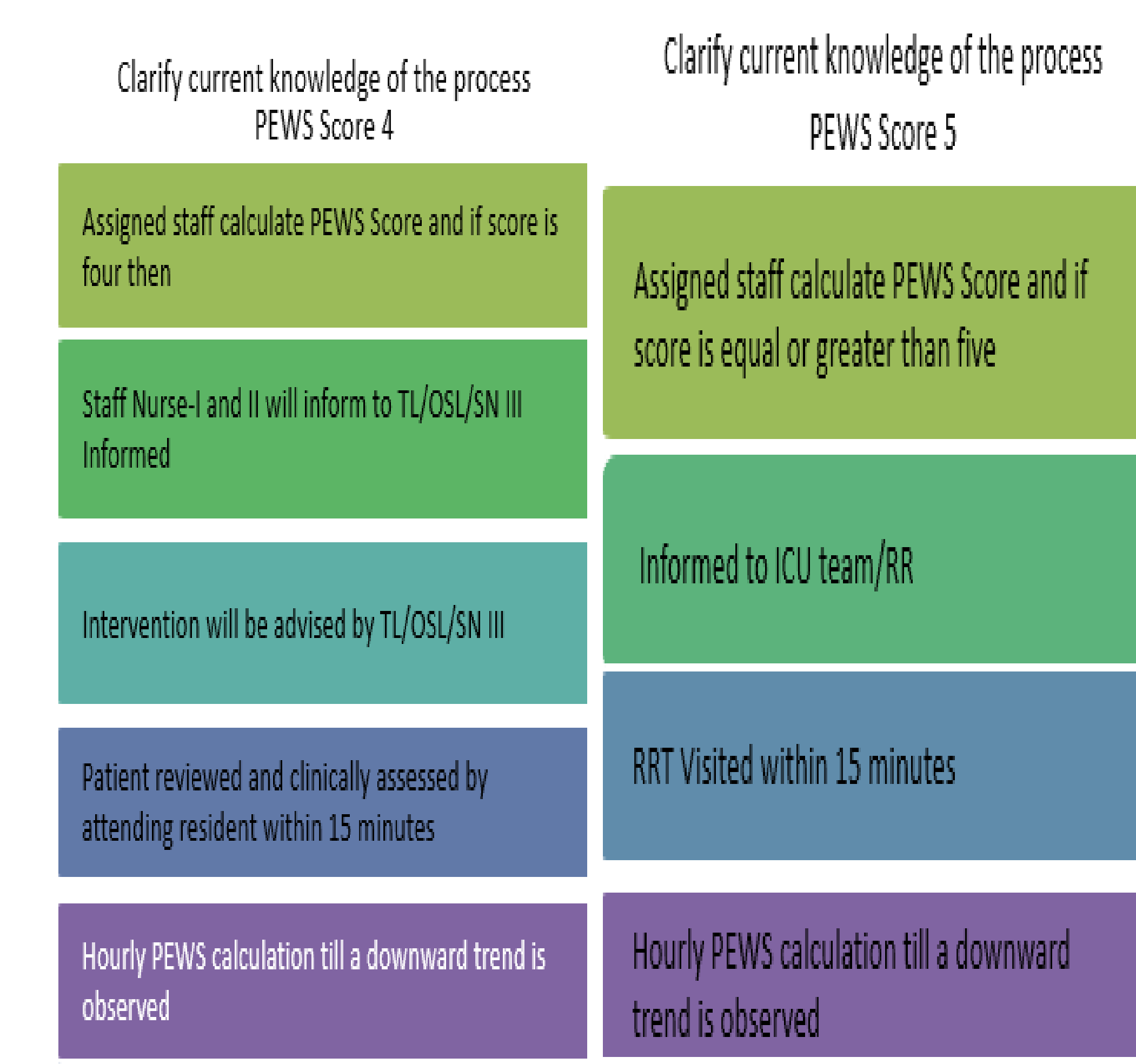
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INTRODUCTION

In 2024, a recurring issue was identified regarding the lack of compliance with Pediatric Early Warning Score (PEWS) guidelines. This non-compliance poses a risk to early recognition of patient deterioration and timely interventions. To address this challenge and enhance both documentation and clinical monitoring practices, a Plan-Do-Check-Act (PDCA) quality improvement cycle was initiated. The primary goal of this project is to implement and improve adherence to PEWS guidelines, ensuring early identification of clinically deteriorating patients.

PROCESS FLOW



RESULTS

During the initial phase of implementation, compliance rates were suboptimal due to the involvement of multiple stakeholders, leading to inconsistencies in practice. However, targeted interventions and monitoring resulted in a marked improvement in compliance rates:

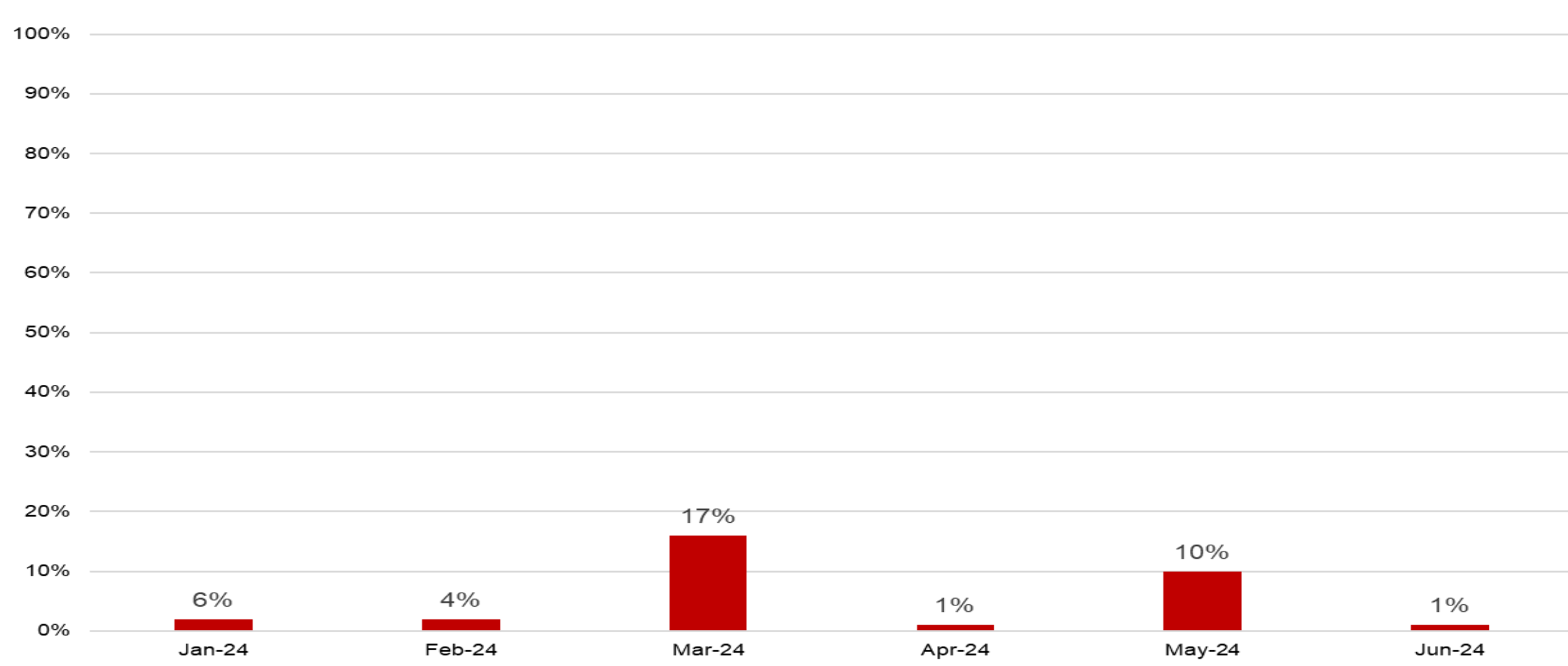
- **PEWS 5 and above:** Target achieved by **March 2025**
- **PEWS 4:** Target achieved by **April 2025**

The results demonstrate that improved adherence to PEWS monitoring protocols, strengthened interdepartmental coordination, and better utilization of hospital resources significantly enhanced the effectiveness of the PEWS initiative. The project underscores the importance of ongoing education and cross-functional collaboration in sustaining quality improvements in patient safety and early intervention

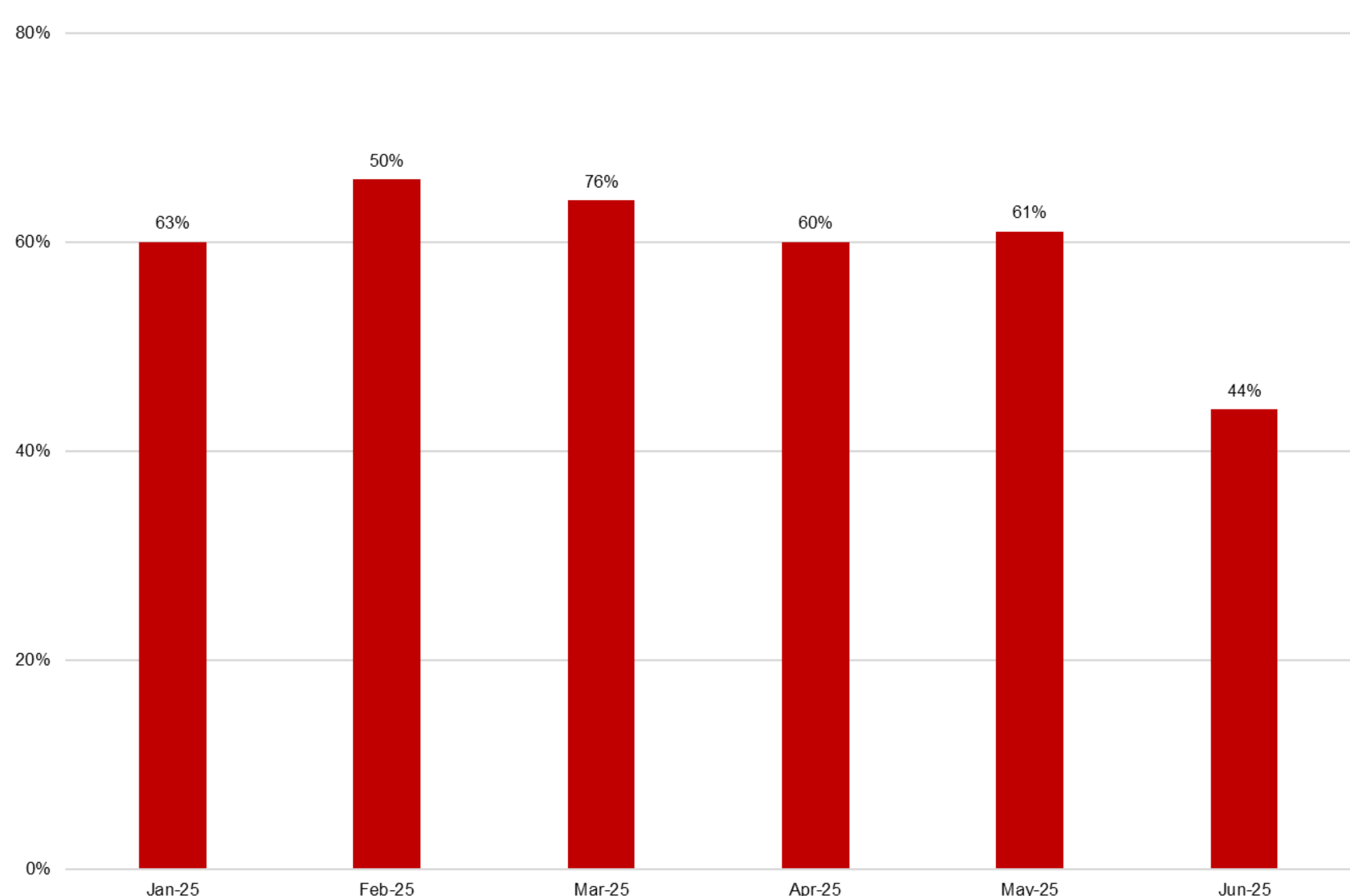
BASELINE DATA

Baseline data was collected from January to June 2024 following the identification of a problem. The data indicated that staff were not compliant with the high PEWS (Pediatric Early Warning Score) guidelines.

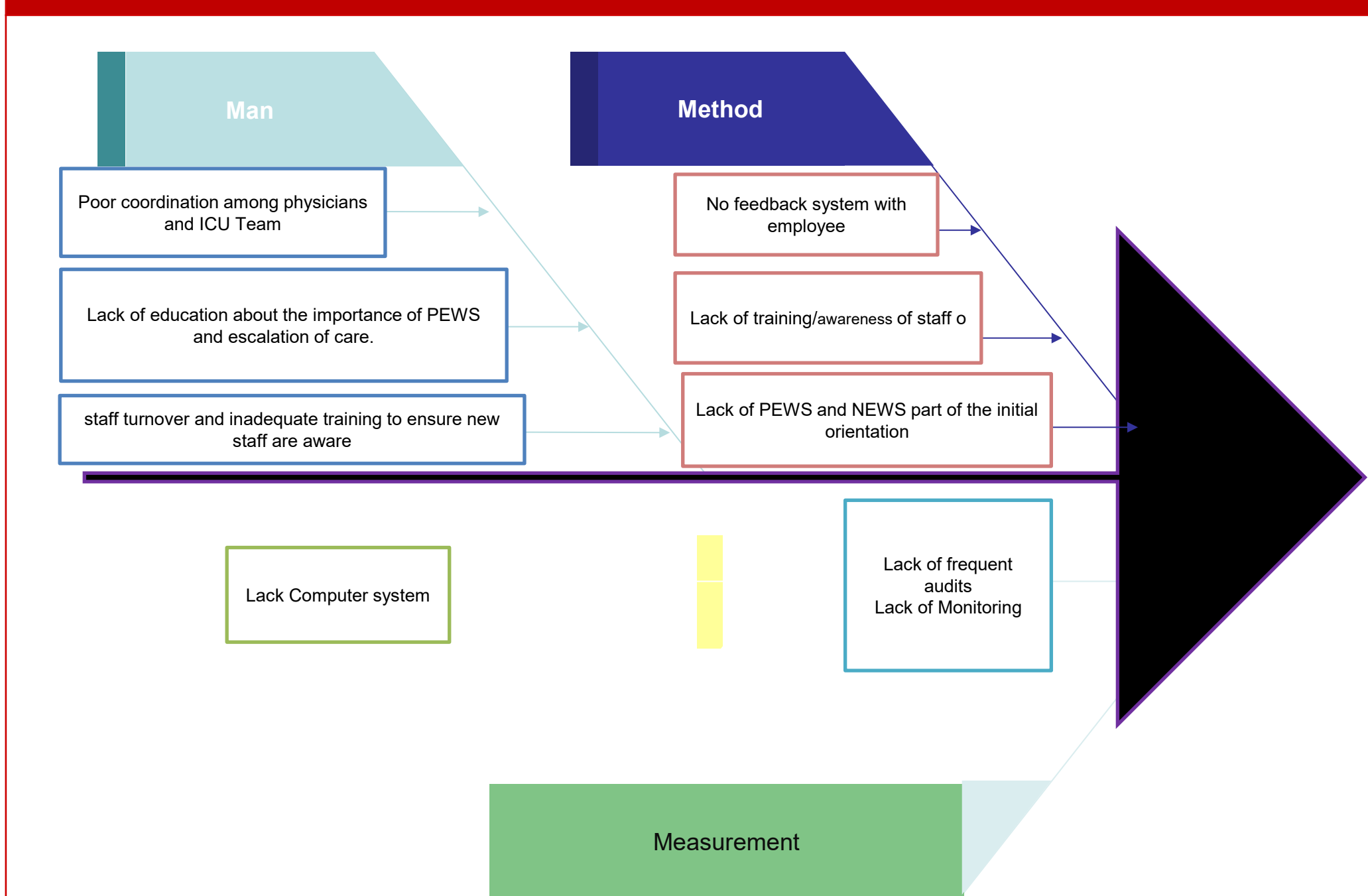
Baseline data of PEWS 4 from January 2024 to June 2024



Baseline data of PEWS 5 and Above from January 2024 to June 2024



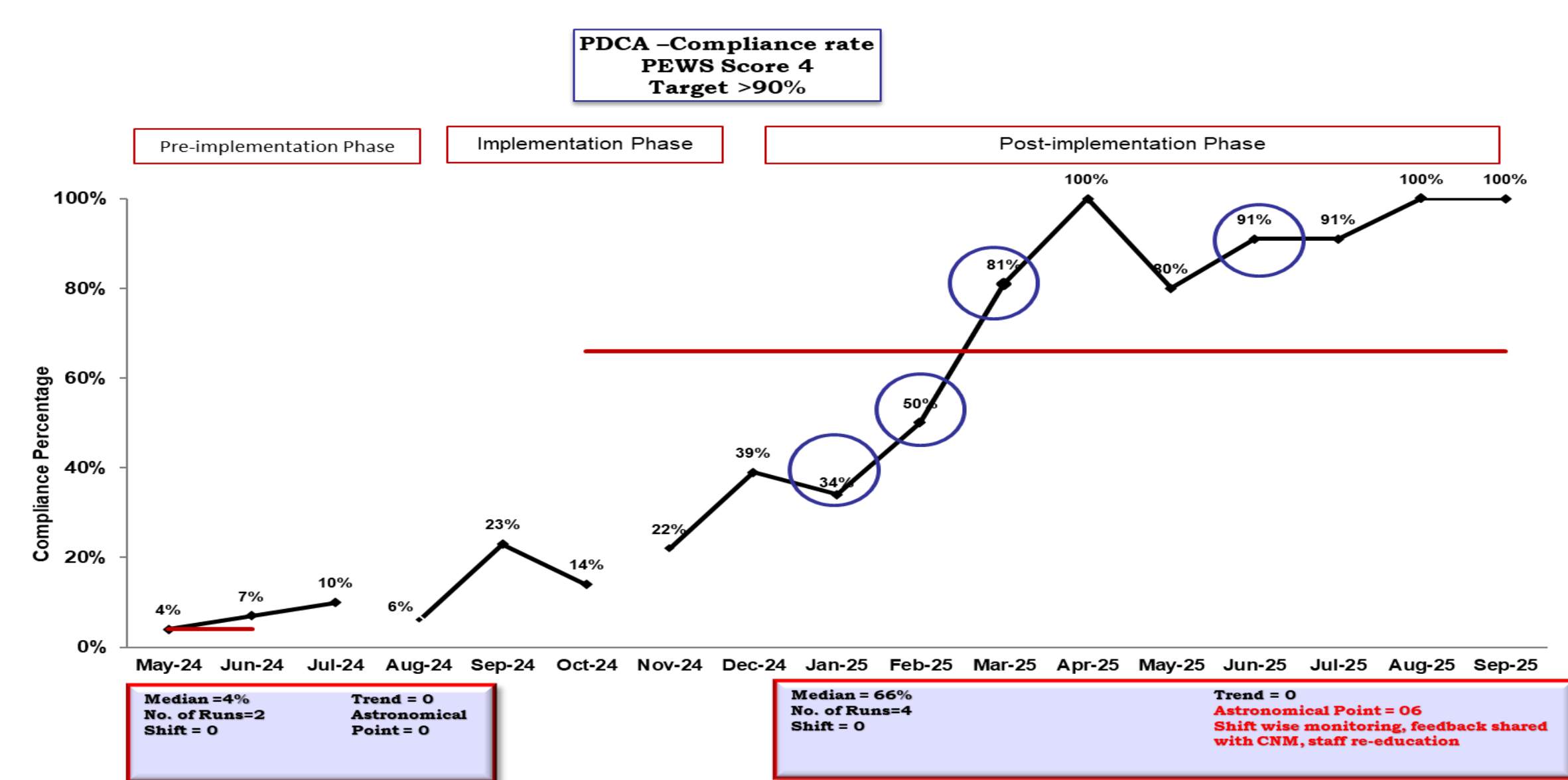
CAUSES OF VARIATIONS



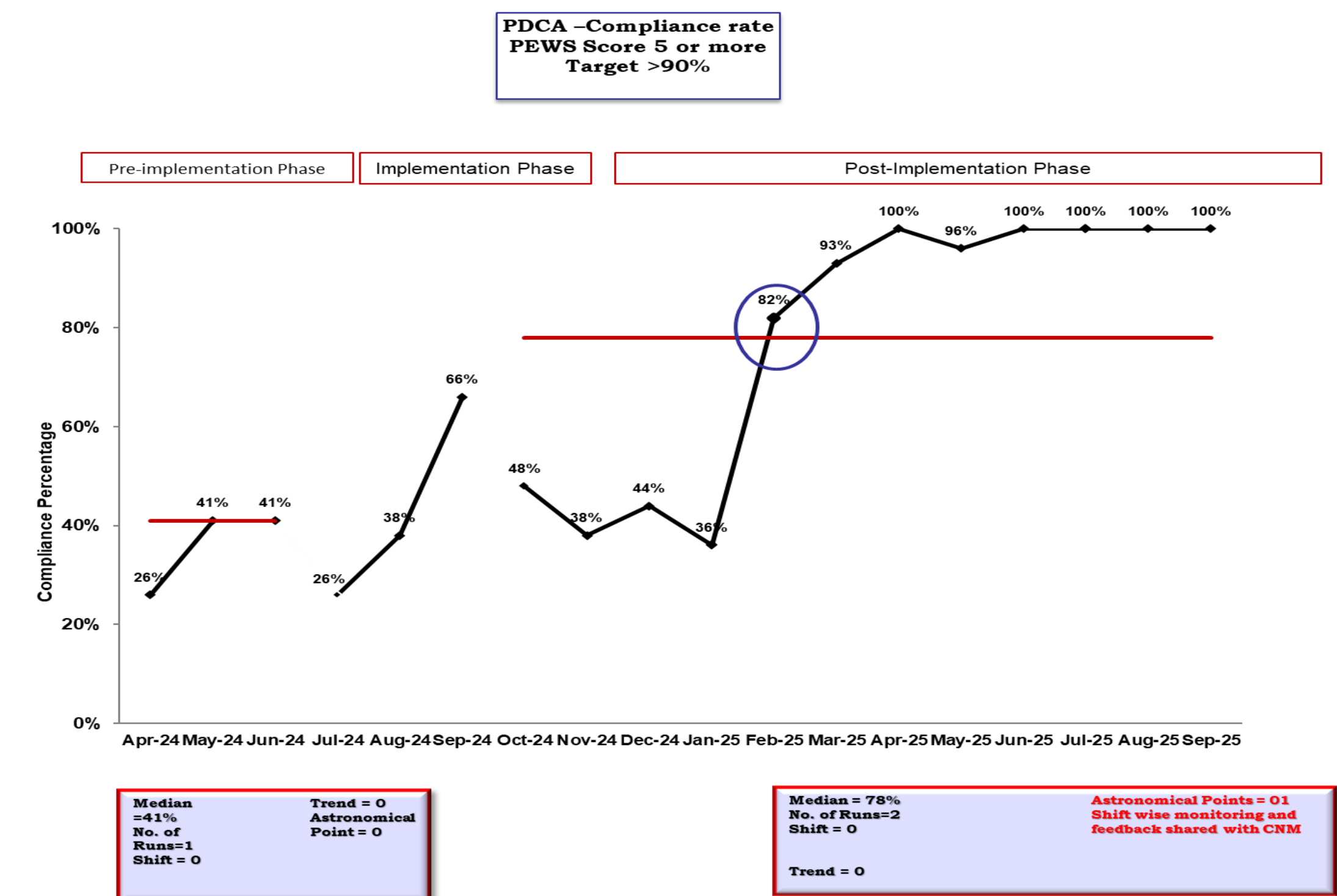
IMPROVEMENT STRATEGIES

- Clear designation of tasks for PEWS (Pediatric Early Warning Score) monitoring
- Communication training to ensure timely escalation of concerns
- Auditing and monitoring:
- Regular audits to ensure adherence to policy
- Strict enforcement of PEWS-related protocols
- Staff feedback:
- Feedback provided by the Clinical Nurse Manager
- Coordination and review:
 - Regular stakeholder meetings and protocol reviews
 - Staff training and awareness sessions
 - Monthly monitoring and auditing of PEWS data
 - Daily enforcement of PEWS monitoring
- Strategies implemented in inpatient areas at Shaukat Khanum Memorial Cancer Hospital and Research Centre to address process variations:
- Training on PEWS assessment and related guidelines

GRAPH OF PEWS 4



GRAPH OF PEWS 5



CONCLUSION

The project remains in progress, and the graph demonstrates consistent achievement of the target over the past four months, beginning in April 2025. During this period, results have consistently surpassed the established benchmarks. To maintain this positive trend, ongoing monitoring and reinforcement measures are being actively implemented to ensure sustainability and continued success.

REFERENCES

Health Service Executive. (2021). National paediatric early warning system (PEWS) observation and escalation charts.

