## Abstract

**Background and Purpose:** In the hospital setting, there are a multitude of medications that are managed by nurses using specific evidence-based protocols. Nurse-managed unfractionated heparin (UFH) infusions are a high-risk medication frequently utilized in hospitals because of its rapid onset of action and reversibility. Nursing staff face many barriers to UFH protocol adherence, including lack of a consistent unit-based audit system that highlights necessary improvements. The purpose of this quality improvement project was to improve nurses' protocol compliance and self-efficacy with managing UFH infusions.

**Methods:** This project was a pre-/post- test intervention design. The intervention site was a 32bed adult Cardiac Unit (CU) in an urban inpatient academic medical center in the northeast and focused on 52 CU bedside nursing staff. It was a one-group, two-cycle unit-based collaborative audit and feedback (A&F) process using the Plan-Do-Study-Act model to effectively translate the A&F intervention into practice. Chart audits were also completed pre- and post- intervention and were structured similarly to the current hospital auditing method. Self-efficacy in nursing staff was measured using the Generalized Self-Efficacy (GSE) scale.

**Results:** A total of 4 charts were included in the pre- intervention audit and 5 charts in the postintervention audit. A total of 17 GSE survey results were able to be paired. There was no significant improvement in protocol compliance or nursing self-efficacy.

**Conclusions:** Findings suggest that a frequent unit-focused audit-and-feedback intervention does not have a significant impact on improving compliance with managing UFH infusions. An intervention to significantly improve UFH protocol compliance should be further developed.

**Implications:** This project is one of few projects to focus on nurse-managed UFH protocol compliance using chart audits. It has highlighted the fact that frequent two-way communication between nurses and leadership has a positive impact on staff while managing complex protocols in the inpatient setting.

*Keywords:* unfractionated heparin, nurse-managed unfractionated heparin infusions, audit-and-feedback method, plan-do-study-act model, protocol compliance