

Impact of leadership on Safety and Quality: CEC Clinical Leadership Program

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Who are we?

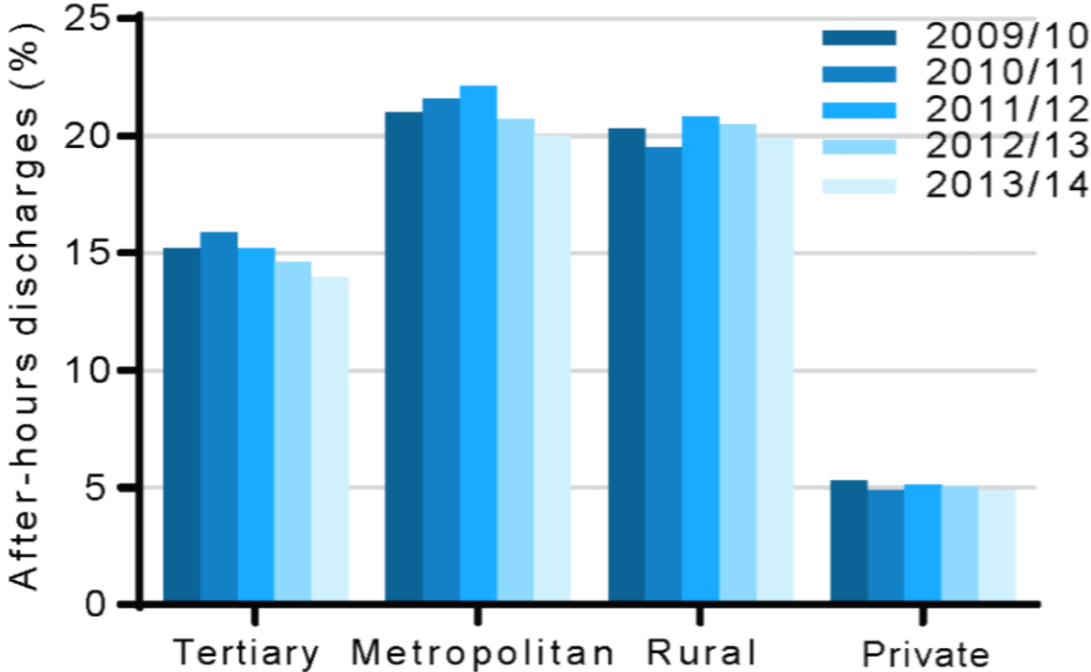
- Concord Repatriation General Hospital
 - 13 Bed, Level 6 Intensive Care Service
 - Mixed medical/surgical unit
 - NSW SBIS
-
- Clinical Excellence Commission – Executive Clinical Leadership Program Cohort 14, 2015

The background

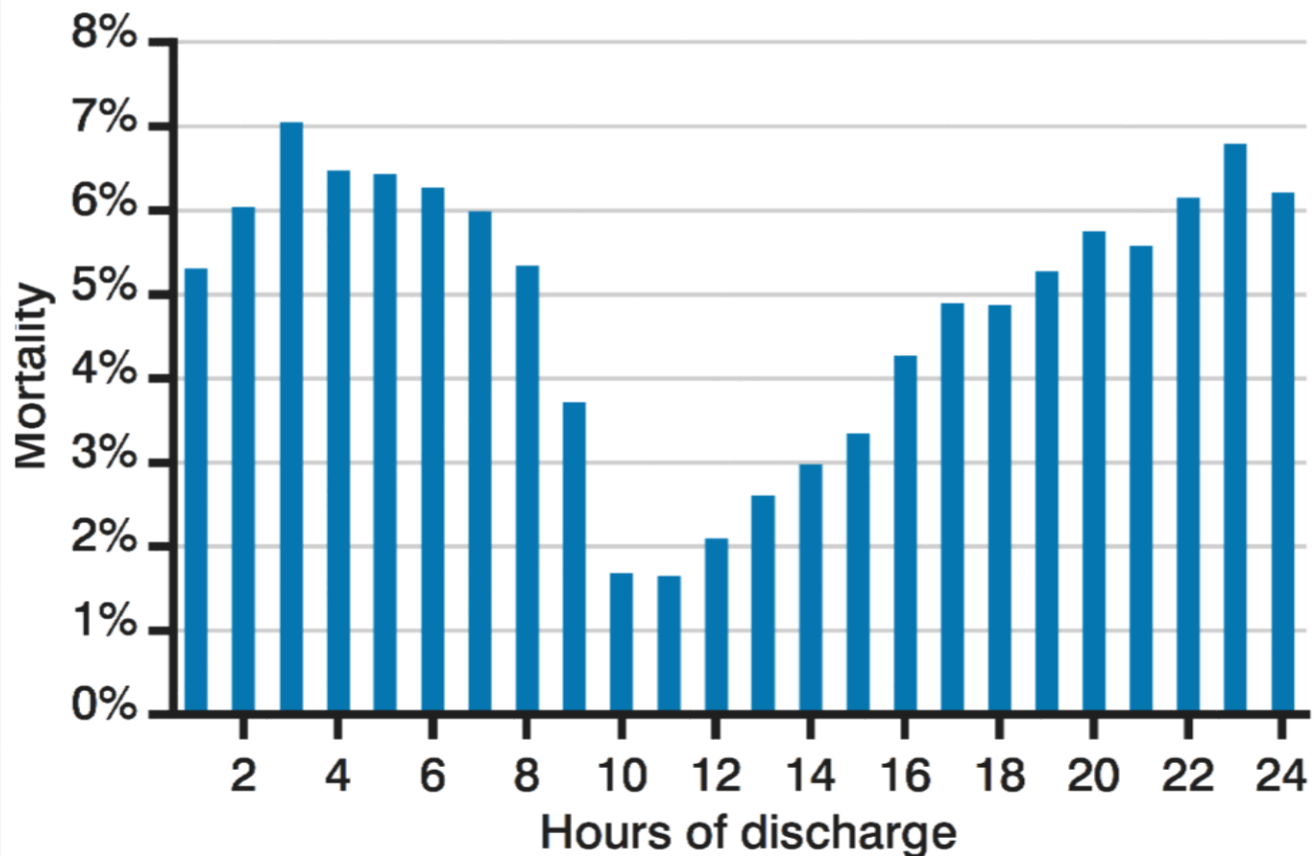
- Out of hours discharge from ICU
- Ubiquitous to NSW ICU's, wide range of individual site performance
- Association with risk of hospital mortality
- Association with ICU readmission
- ACHS Statewide reportable process indicator

ANZICS CORE APD

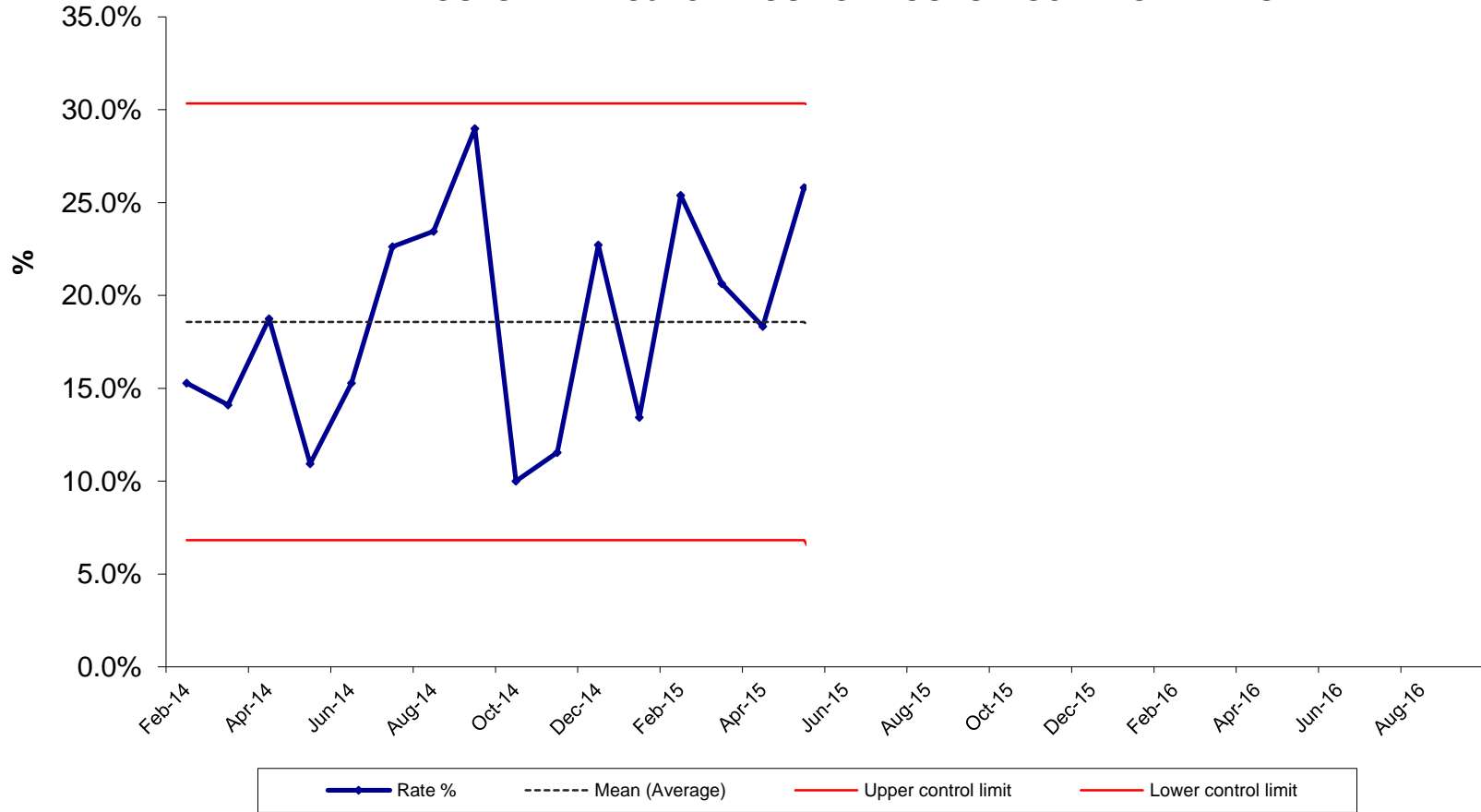
Figure 15: Patients discharged between 6pm and 6am



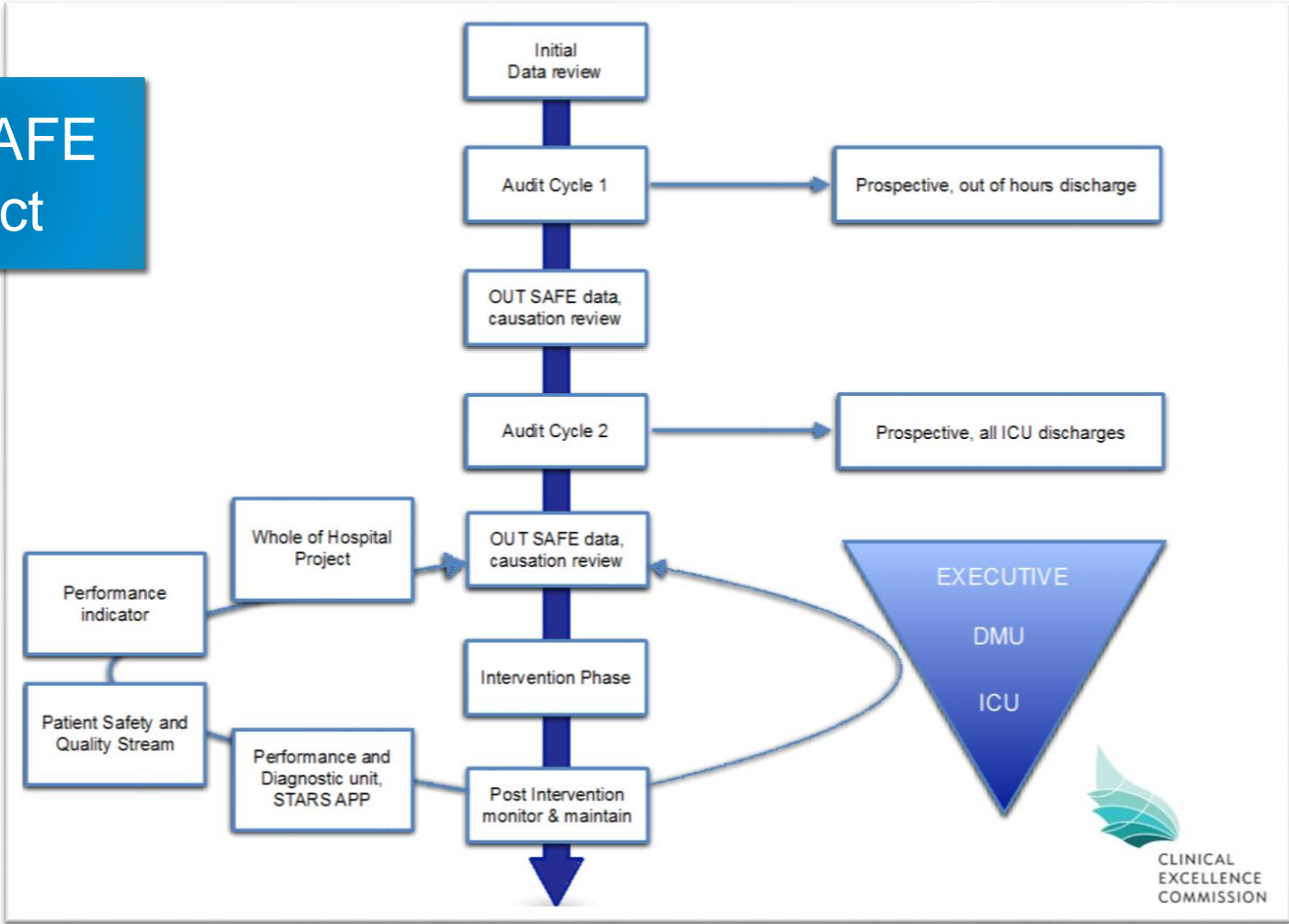
Background - ANZICS CORE APD 2012



OUTSAFE PROJECT: OUT OF HOURS DISCHARGE RATES



OUT SAFE Project



Executive Tier Intervention

- ☑ Support ICU and DMU level interventions
- ☑ Promulgate awareness of impact of OOHDC
- ☑ Evaluation of impact of portage resources & impact on patient flow
- ☑ Incorporate OUTSAFE project into whole of hospital program
- ☑ Support development of ICU out of hours discharge rate as novel hospital key performance indicator via safety and quality stream

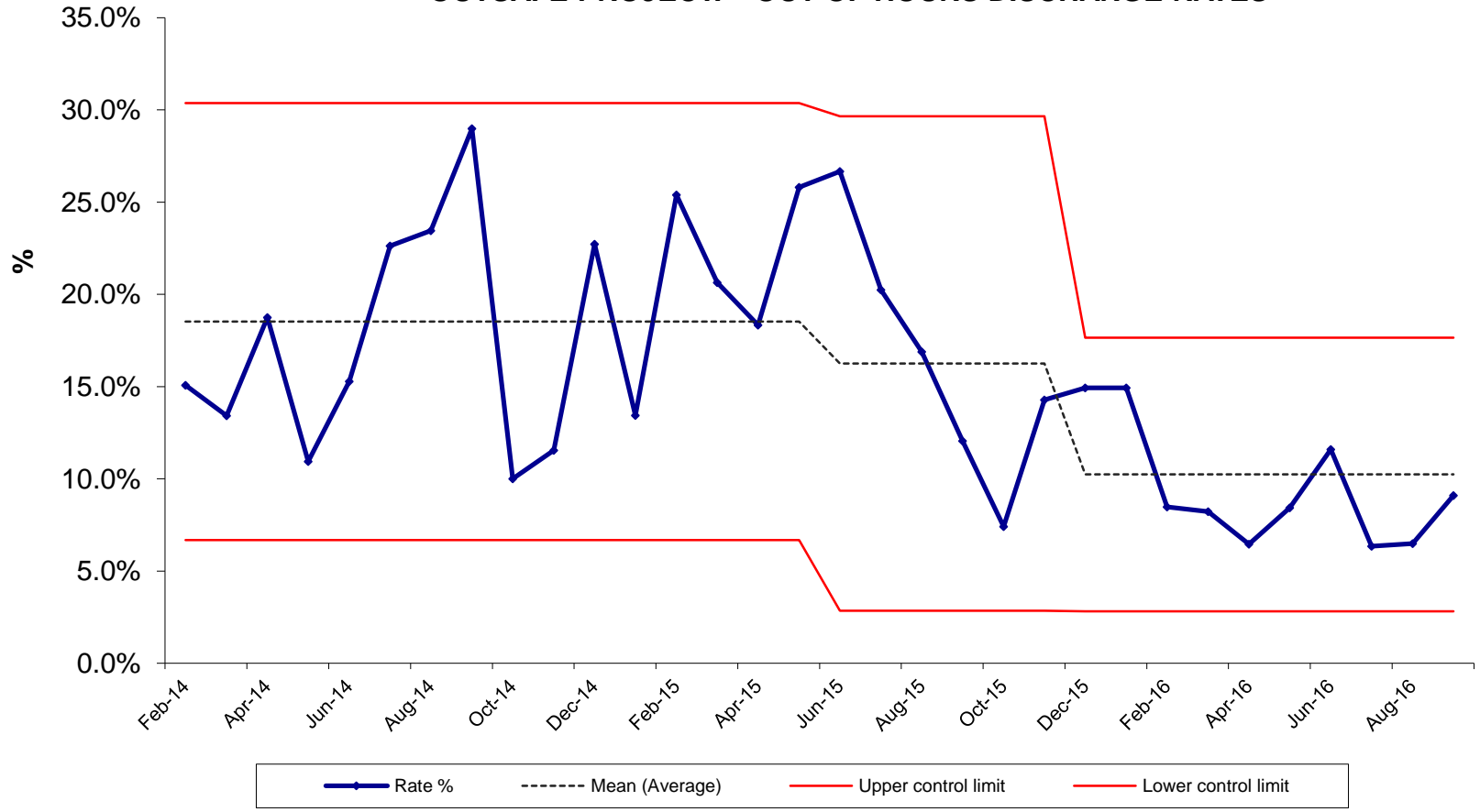
ICU Tier Intervention

- ☑ Promulgate awareness of impact of OOHDC
- ☑ Expedited line removal process
- ☑ Accelerated nursing discharge target to achieve readiness < 90mins
- ☑ Pre-emptive discharge paperwork
- ☑ Electronic discharge document upgrade
- ☑ Trial patient flow portal & EDD
- ☑ Link to existing eMEDS project
- ☑ Stretch goal: Link to new SIBR project 2016

DMU Tier Intervention

- ☑ Promulgate awareness of impact of OOHDC
- ☑ Introduction of Discharge time “Gate” for escalation of ICU discharges via TL’s
- ☑ Utilisation of over-census beds on receiving wards to facilitate flow
- ☑ Role as intermediary and escalation pathway for patients breaching discharge gate

OUTSAFE PROJECT: OUT OF HOURS DISCHARGE RATES





Clinical
Leadership
Program

“Provide skills and tools to be more effective advocates for the safety and quality initiatives.”

“Advocate for patient safety and integrate system improvements into clinical care.”

“Enhance the effectiveness of their clinical team”

“Leadership is an intense journey into yourself. You can use your own style to get anything done. It's about being self-aware. Every morning, I look in the mirror and say, “I could have done three things better yesterday”

Jeffrey Immelt, CEO GE

Quality and safety projects

- OUT-SAFE
 - Refusals followup and outcome project
 - Communication: Handover, e-Discharge document
 - STARS App project with ACI PWG
- In house Safety & Quality stream meetings, ERM risk
 - eMeds workflow, hardware and medication safety
- Safety working groups: CVAD, transport, NIV group
 - Enfranchising ICU in hospital quality and safety stream
- Culture of quality assessment: NIV interfaces, Delirium, FASTHUGS, VL & Transport upgrades
- Patient centred care initiatives: FS 34 short form
- Research focus on quality and safety - Novel CVAD credentialing project, simulation program, CRM
- Resource utilisation: Pathology rationalisation 2016
- Team performance & Effective communication: SIBR 2016, Handover
- NSW Health OTDS - Donate Life Collaborative

