In Safe Hands Project

DASHBOARD

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Northern Sydney Local Health District

Background

- The implementation of the Whole of Hospital Program and the In Safe Hands Program across the LHD.

- Meetings driven by clinicians identified the need to establish a monitoring tool to measure the effectiveness of such programs.

- The Clinical Excellence Commission's 6 minimum data set criteria for the In Safe Hands program.

1. Length of Stay (LoS)
2. Ward Traffic (This is a measure of throughput; admits, transfers in & out, discharges and deaths)
3. Mortality count (crude)
4. VTE Diagnosis
5. Unplanned re-admits to the hospital within 28 days
6. Unplanned ICU/HDU transfers

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Dashboard Data Set

1. Length of Stay (LoS)
2. Ward Traffic (This is a measure of throughput; admits, transfers in & out, discharges and deaths)
3. % discharges before 10 am (days of the week)
4. % discharges on weekends
5. Medication Errors Rate per 1000 bed days
6. Falls per 1000 bed days
7. Hospital acquired pressure injuries (PI) per 1000 bed days
8. Hospital acquired infection events
9. Mortality count (crude)
10. VTE Diagnosis
11. Unplanned re-admits to the hospital within 28 days
12. Unplanned ICU/HDU transfers

There is set data criteria for Wards, with specific datasets for the ED, ICU/HDU & Maternity to make the information more relevant to Teams

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Dynamic and Interactive

- The Dashboard is both dynamic and interactive and displays data via a Graphical User Interface which enables clinicians to view the most relevant data at a glance, without reading masses of text.

- In addition, the dashboard has been designed by the Clinical Redesign team to be user friendly.

- Ward data can be easily evaluated and month to month comparisons made to track performance criteria simply by using a few easy to operate buttons and controls on the dashboard. User instructions are on the dashboard.

How to Access the Dashboard

- Simply go to the Mona Vale Hospital homepage on the NSLHD Intranet and click on the In Safe Hands logo.

- If you wish to save the link to your desktop (recommended) simply right mouse click on the link and choose the 'Save Target As' option, then save it to your desktop.

Making A Difference

- **Decreasing IDC Infections** in ARU through review of data & safety checklist, clinician lead removal

- **Decreasing Length of Stay** on the Level 3 Medical Ward – Telemetry Patient

- **In Safe Hands** – Home Based Team Review of Risks during SIBR – Falls, DVT Prophylaxis, Discharge plans

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Clinician's

- Obtaining data in a timely manner to help the facilitation of quality and redesign projects along with programs such as; In Safe Hands, Whole of Hospital and Essential of Care.

- Identifies and increase in clinical risk and areas of performance that need to be addressed – through the trending of dashboard results

- Ward specific and meaningful to teams – displayed in wards

- Decreased confusion and common language about data sets and definitions of data collection

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Managers

- Available, accurate, timely data

- Been able to discuss at ward meetings/clinical leaders forum results/trends

- Ward performance and strength of teams

- Meaningful

Consumer

- Focused on improving health outcomes by identification of clinical risk within the unit and with a focus on decreasing length of stay.

- Acknowledgement of Quality Projects and Results displayed in ward areas.

- Knowledge and recognition of organisation commitment to improvement

- We care about you and we are committed to improving the service we provide.

The Future

- Review of effectiveness and use of the dashboard by clinicians

- Consumer Feedback

- Colour Codes for Trends

- Complaints