

2 years into *Global Trigger Tool* where from here?



Hospital Name: Lakes District Health Board

Presenter: Ulrike Buehner

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Meet the team

Wendy Bunker – Programme Manager

- Cindy Carpenter – Surgical Staff Nurse
- Celia Ronayne – Acute Pain Specialist Nurse
- Ulrike Buehner – Lead Physician/Anaesthetist
- Sheila Stopher – Clinical Nurse Coordinator (Theatre/PACU)
- Manisha Unka – Clinical Pharmacist
- Erin Williams – Clinical Nurse Educator (ICU/CCU)



Progress to date

- **Plan**, choose & train reviewer team in methodology...March 2012
- **Commenced** file reviews...June 2012
- **Reviews** undertaken...Cycle 40 (April 2014)
- **Analysis...**

‘hot spots’ for patient harm to occur:

medication errors & surgical site infections



Challenges so far ...

- Committing time to share findings & lessons learnt
- Understanding how the database collates data and produces charts to ensure correct data interpretation
- Discerning ways forward to prevent healthcare associated patient harm



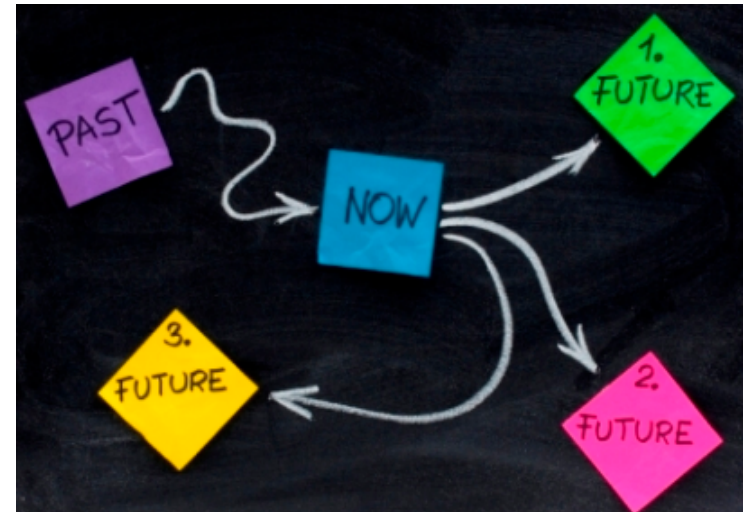
Initial lessons learnt

Importance of being **consistent**
in **decision making**

Patience with identifying trends
too early

Also important lessons from
harm due to omissions

- Frequent re-admissions
- Prolonged hospital LOS
on 2nd/3rd admission
- Protracted disease
process



Findings



- Number of cases reviewed: 370
(October 2013)
- Total events: 136
- Events/100 admissions: 37
- Events/1000 bed days: 85
- Severity of events:

E 69 F 65 G 1 H 0 I 1

Themes so far

- *Medication related harm*

- Constipation
- Over-sedation
- Hypotension
- Medication error



- *Surgery & procedure related harm*

- Post-op ileus
- Surgical site infection (readmission)

Where from here?



Safer Medicines Project

Primary Drivers:

- Obtain accurate medication list
- Prescribe, monitor & administer high risk medications safely
- Increase knowledge of high risk prescribing b/o patient age, co-existing disease or co-prescription

Secondary Drivers:

- Medication reconciliation
- Accurate communication
(patient, GP, community pharmacist)
- Develop systems for reliable prescribing & monitoring
(warfarin, methotrexate, azathioprine, insulin)
- Clinical Pharmacist
- Electronic decision support tools



Challenges ahead

- Shortage of clinical pharmacists
- No clear process for medication reconciliation
- No access to electronic GP/pharmacy records
- Lack of communication at transition points of care

Challenges are what
make life interesting.

Overcoming them is
what makes it
meaningful.

Ways forward

- Medication reconciliation everyone's business
- Make electronic record sharing possible
- Green medication bag



- Focused education
for nurses, medical students & doctors

QI projects under construction ...

- Reducing harm from post-op ileus (Fast track surgery, ERAS)
- Reducing surgical site infections (hand hygiene project, prophylactic antibiotics, chlorhexidine & alcohol skin prep...)
- Educational focus on risks of opioids & alternatives
- Reducing harm from omissions of care (e.g. re-admissions by providing acute surgery on index admission; social & community discharge support)



For success

- Whole of hospital approach to QI
- Quality framework → coordinated quality work plans with
 - clear focus/aim statement
 - time lines
 - reporting structure
 - visibility of work & outcomes



Dream It, Plan It, Do It

“The world as we have created it is a process of our thinking. It cannot be changed without changing our thinking.” Albert Einstein

Ideas for sharing

- Webcasts
- National GTT meetings

