Your
Patient Safety Project

Health Education Wessex

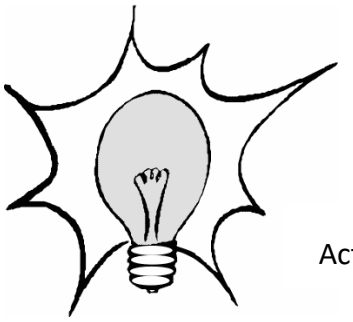
Patient Safety Training

Contents

Introduction

As a trainee you have the ability to see patient care from the frontline, often through 'fresh eyes,' allowing you to see opportunities for improvement that may not have been noticed by others.

Develop the **skills** required to introduce and test changes in your place of work

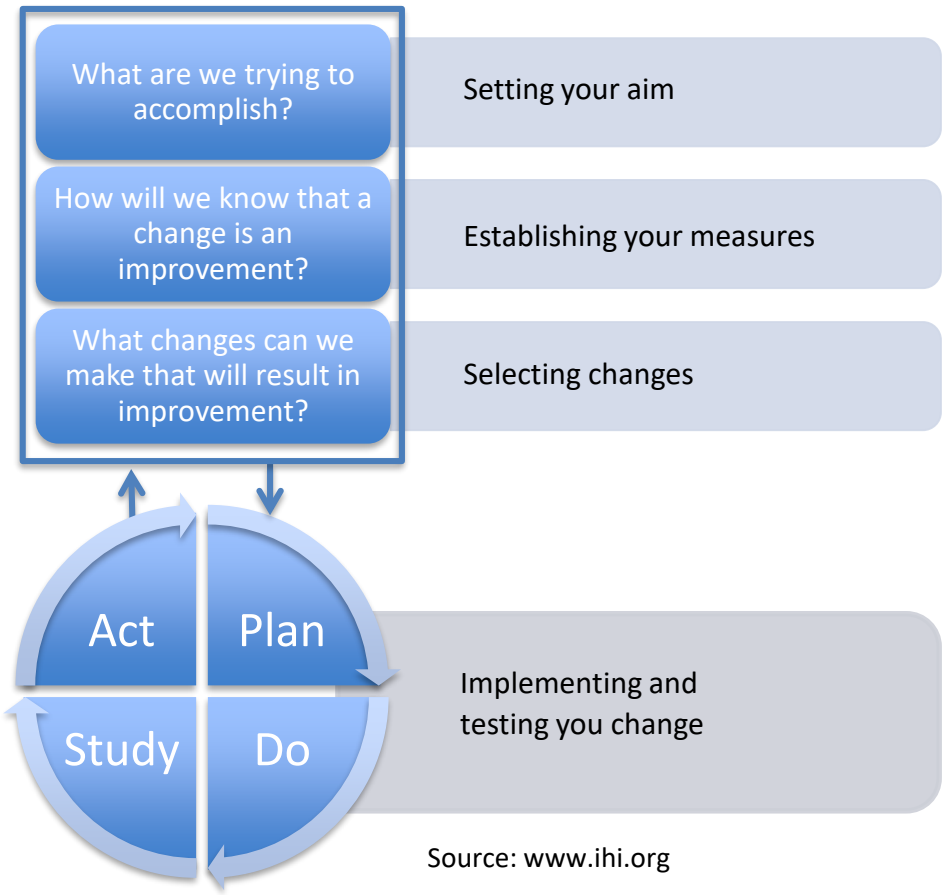


Make a **real difference** to the safety of your patients

Act on **your ideas** for change

The Model for Improvement

We recommend using 'The Model for Improvement' as a framework for completing your patient safety project. This is a tried-and-tested method for successfully testing and introducing changes in the healthcare setting. Use of this model allows changes to be tested both quickly and safely; and changes that have been tested in this way are much more likely to be successful.



Source: www.ihi.org

Forming your Team

Including the right people on an improvement team is critical to the success of the project. Your project is much more likely to be successful if you work with others and involve a variety of members from the multi-disciplinary team.

Many healthcare improvement projects also include patient representatives. Our patients can offer valuable insights and often have great ideas that will lead to safer patient care. They might also be integral to the implementation of some of your solutions.

Consider:

- Who will be affected by the change?
- Who will be involved in the implementation of the change?
- Who will be responsible for ensuring that your changes are sustained after you have left your current job?
- Who might you need for advice?

Use the table to make a list of your project team.

Name	Job	Role in project
	e.g. Staff nurse	*Assist in form design* *Will be using new form*
	e.g. Ward pharmacist	*Advice on current guidelines*

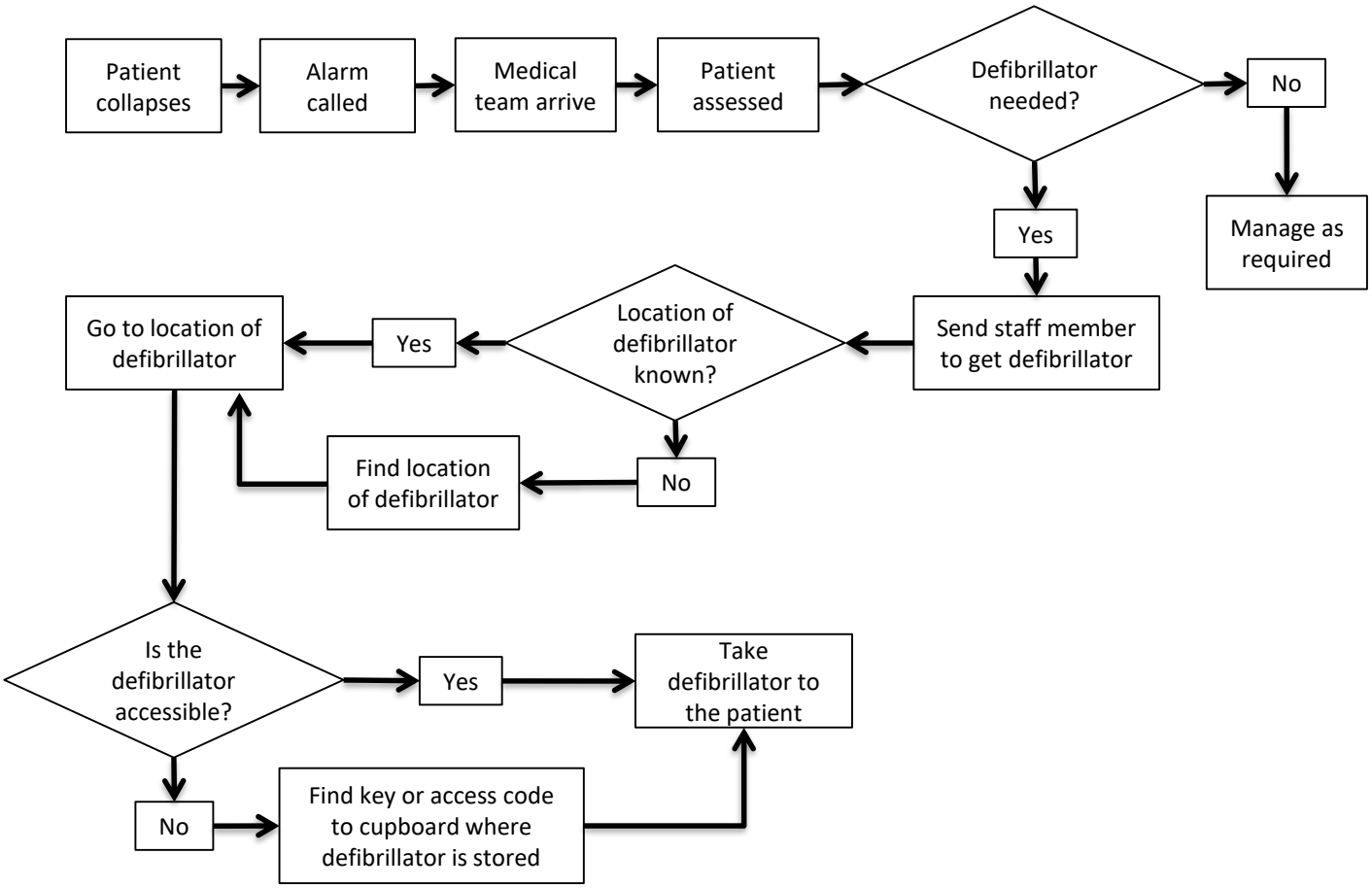
Understanding the Problem

The idea for your project may have originated from a variety of sources:

- A problem that you have observed during your clinical work;
- The results of an audit that may have been done by yourself or others;
- As a consequence of a significant event;
- Inspiration from previous patient safety projects

In order to work out the best way of tackling the problem that you have identified it is useful to understand the current process. Any deficiencies in the current system will then become much clearer and it will be easier to identify solutions that are likely to lead to an improvement.

One method of doing this is to display the current process for the problem that you are trying to improve in a 'Process Map.' For example, if I wanted to reduce the time it takes to get a defibrillator to a patient suffering a cardiac arrest in my place of work, the process map might look like this:



Setting Aims

It is difficult to make improvements if you don't know what you are trying to improve. It is therefore crucial to set an aim for your project.

"If you don't know where you are going,
you are likely to end up somewhere else!"

Yoggi Berra

Try using the S.M.A.R.T. principles when setting your aim.

Specific	•This is much easier if you have a good understanding of the problem •Which part of the patient pathway are you looking to improve?
Measurable	•What will be your indicator of progress? •How much improvement do you want to see?
Assignable	•Who is responsible for the change? •What team members are involved?
Realistic	•What can realistically be achieved?
Timely	•When do you expect to achieve your results?

For example:

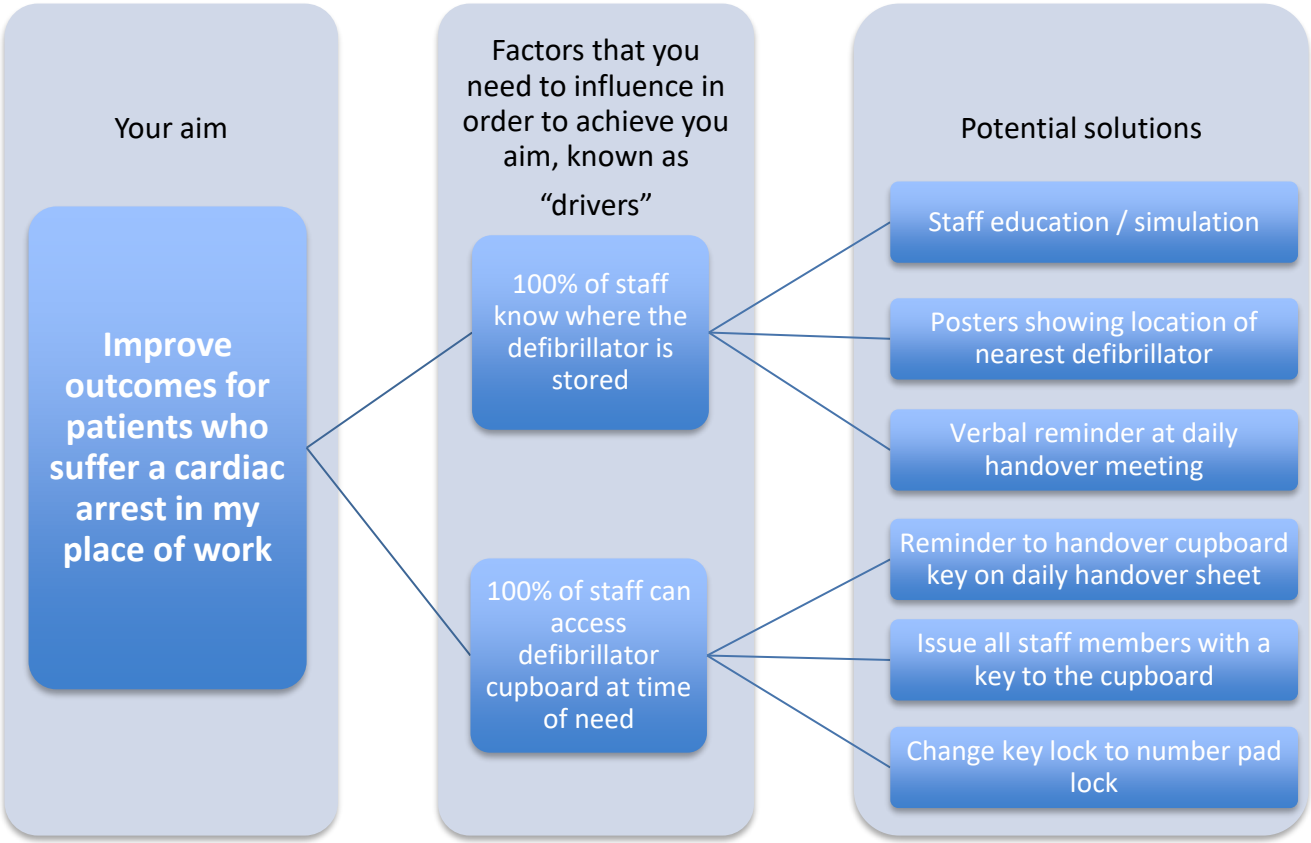
The aim of this project is to improve the outcome for patients who have suffered a cardiac arrest in my place of work by reducing the number of minutes that it takes for the staff on my ward to get the defibrillator to a patient who needs it. This will be achieved by improving access to the defibrillator over the next two months.

Selecting Changes

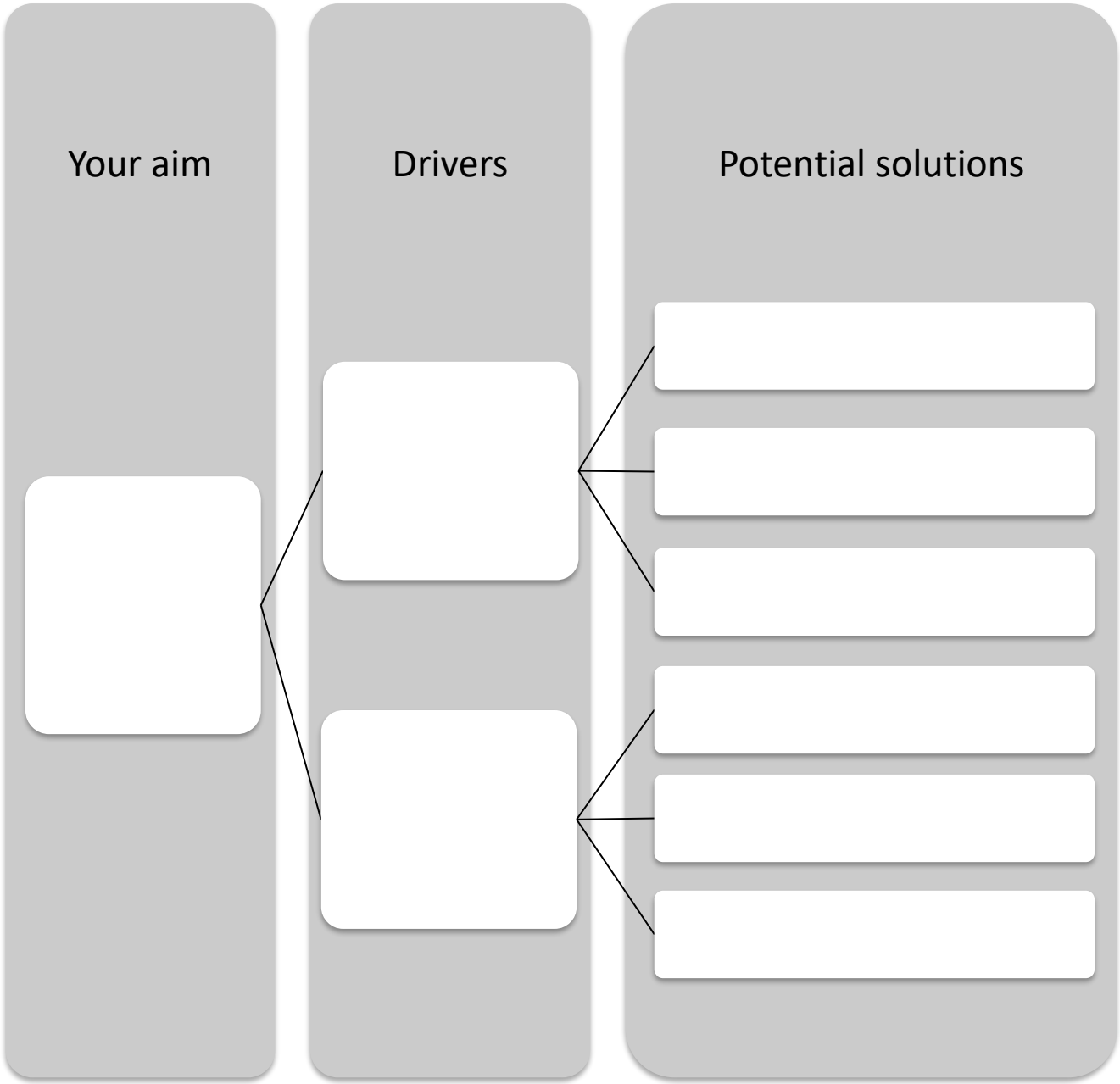
For every problem there will be a variety of potential solutions that may lead to an improvement. It is a common mistake to start a project with just one solution in mind.

A tool that can help to identify a variety of potential solutions is the 'Driver Diagram.' This task is best done with the other members of your team as everyone will have different ideas and it's also a great way to get your team on the same page as you. Don't forget that your patients may also have some very good ideas and it may be relevant to include a patient representative in this part of your project.

An example of a driver diagram is shown below.



There is a blank driver diagram on the next page for you to use on your own project. Try to think of several different potential solutions that might lead to the achievement of your aim. You can add as many drivers and solutions as you like. You can then decide which potential solution you would like to try. If that one is unsuccessful, you will be able to revisit your driver diagram and select an alternative solution to test.


Your aim
Drivers
Potential solutions

Establishing Measures

Not all change leads to improvement. Measurement is therefore a critical part of your project as this will demonstrate whether or not your changes have led to an improvement.

Two basic types of measure that you could use for your project are:

1. **Outcome measures**

   Are you achieving your overall aim?

   For some projects this might be very difficult to measure, particularly within the scope and timescale of your projects;

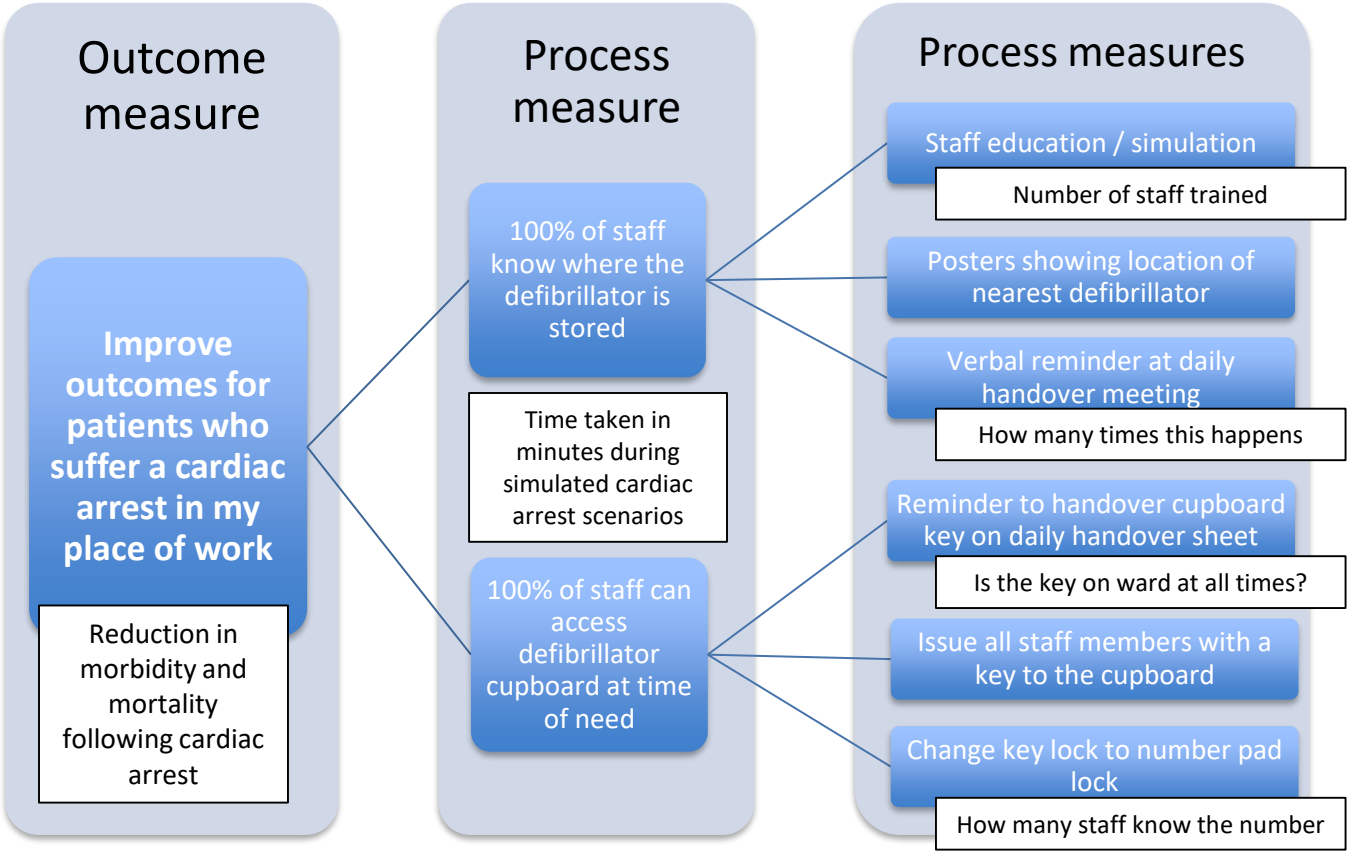
2. **Process measures**

   Is your solution performing as planned?

   This can be much easier to measure as it represents whether your intervention is working. If the change that you have introduced is not user-friendly, then people will not use it and it is unlikely to result in a sustained improvement.

   This measure has more relevance if it is strongly linked (ideally by evidence) to the outcome measure, for example, the process measure might be time to antibiotics in sepsis but we know this is strongly linked to an outcome measure of improved outcome for patients.

These two types of measure have been displayed on the driver diagram below:

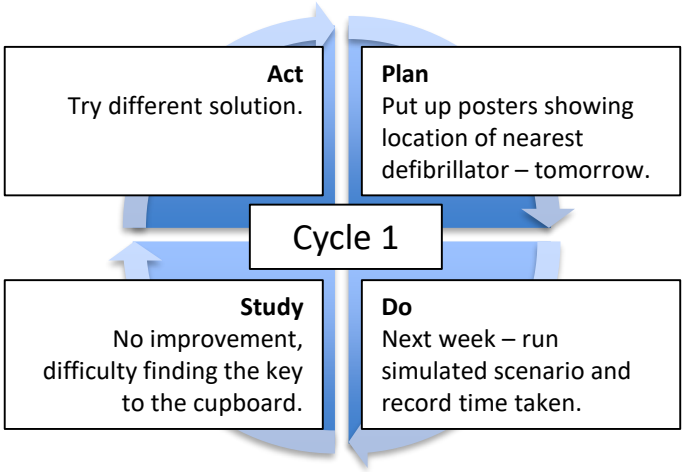


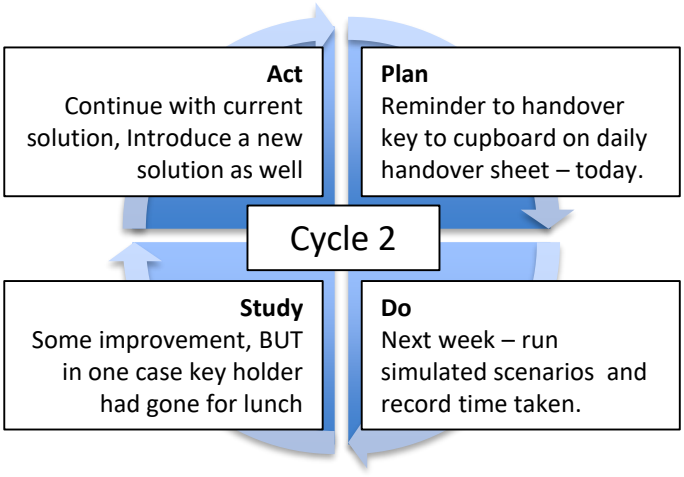
Implementing and Testing your Change

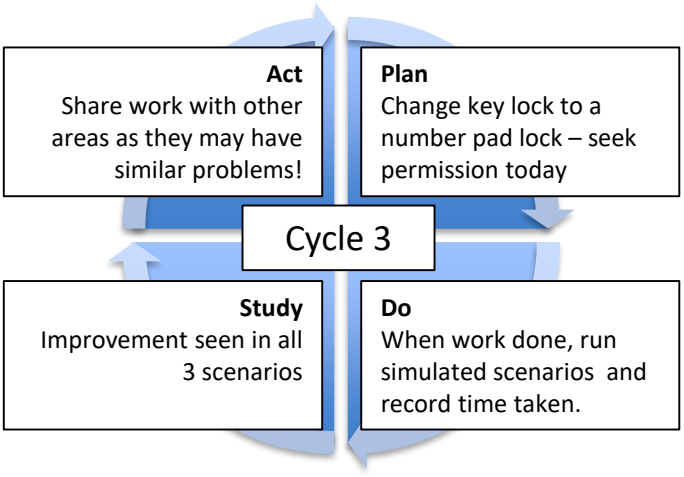
Once you and your team have set an aim, selected a change and established the measure that will show if your change is an improvement, the next step is to test your proposed change in the real work setting. The Plan-Do-Study-Act cycle is method for testing a change safely on a small scale with rapid results.

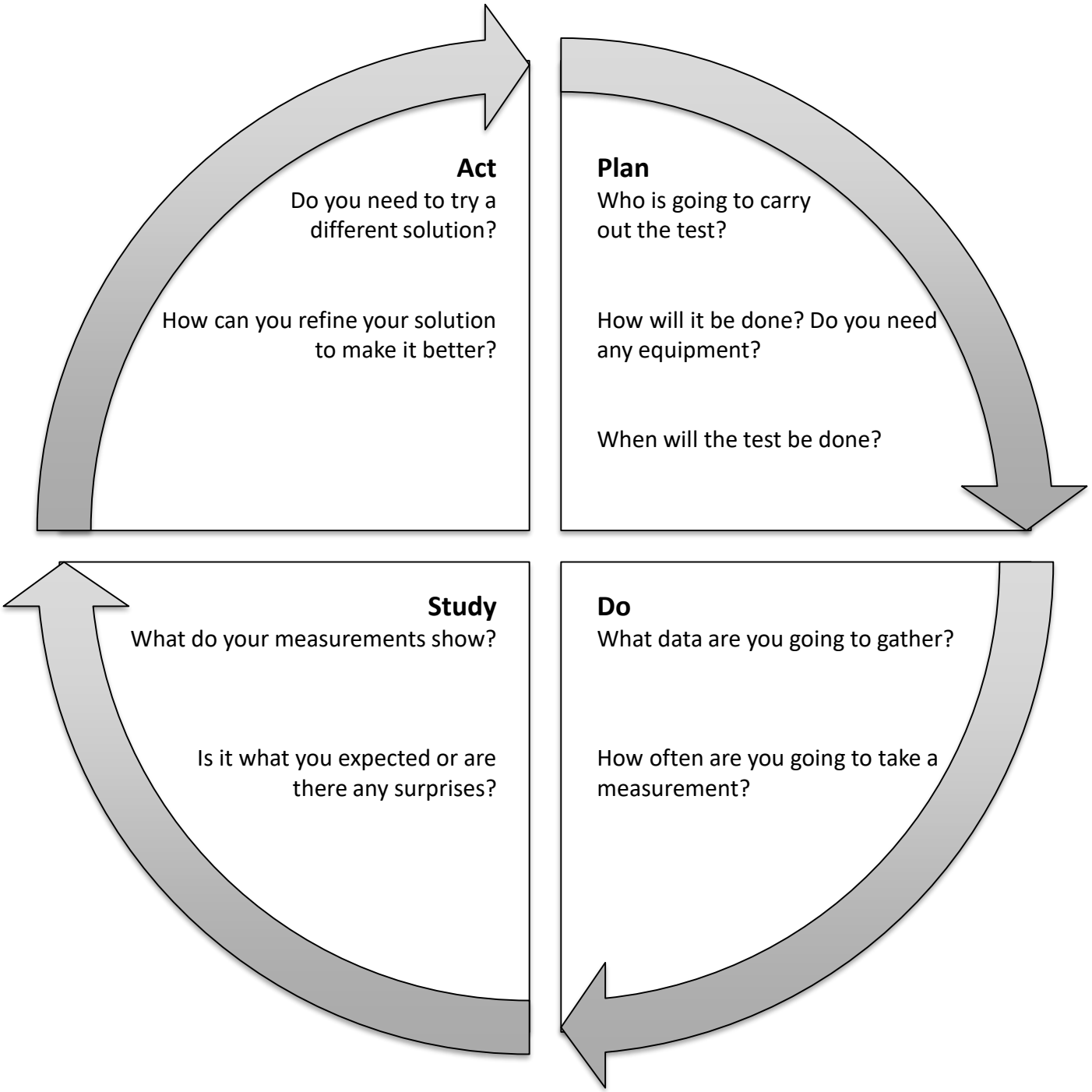
You will need to start by collecting some baseline data.

Following this, your first PDSA cycle might involve testing the change on just yourself, or one patient. If it works well, your second PDSA cycle might involve asking a colleague to try out your change, or testing the change on a couple of patients. As each PDSA cycle is completed, refinements to the change can be made so that when it is introduced on a larger scale, it is much more likely to be successful and lead to a sustained improvement in care.





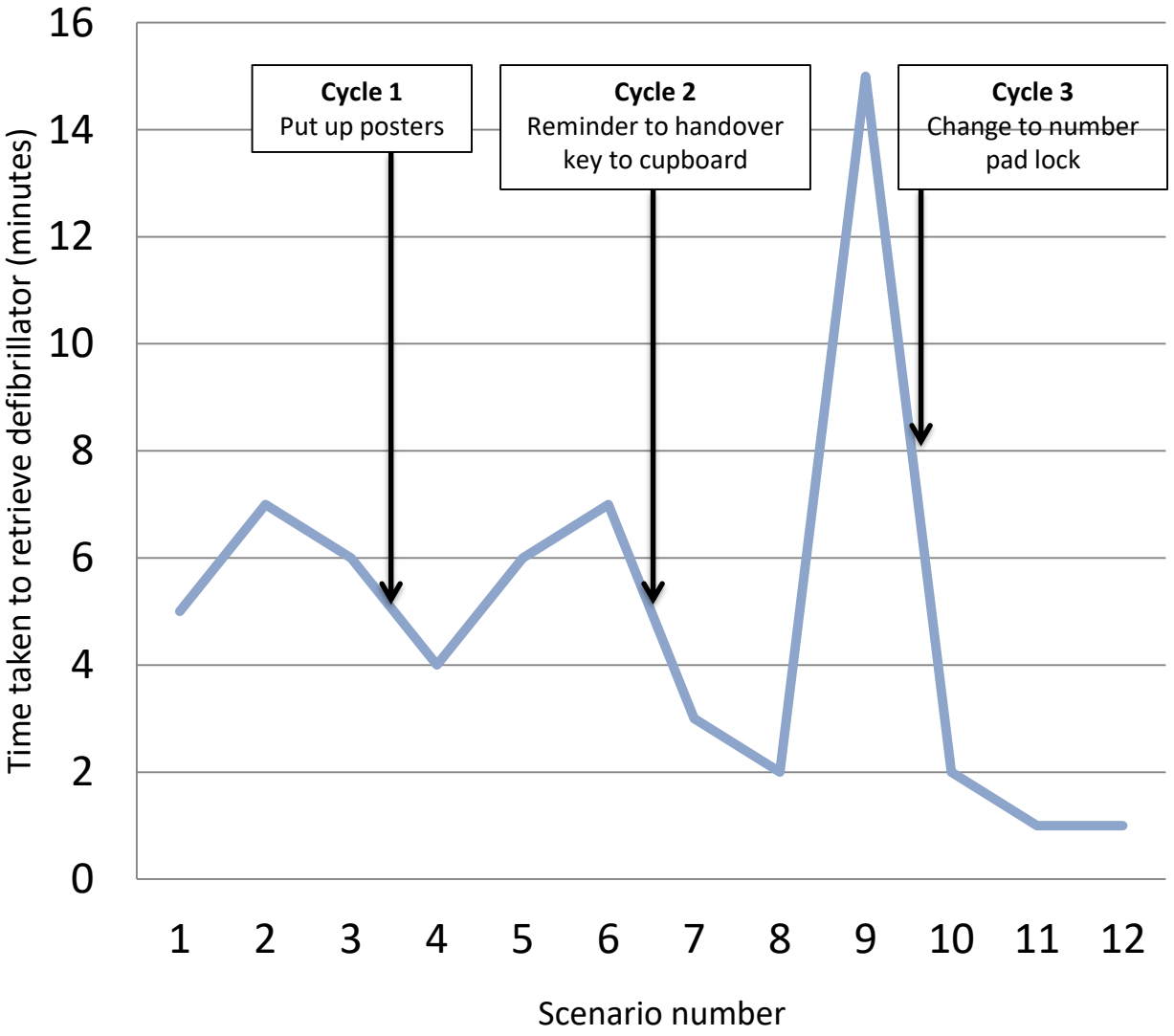



Act
Do you need to try a different solution?
How can you refine your solution to make it better?
Plan
Who is going to carry out the test?
How will it be done? Do you need any equipment?
When will the test be done?
Study
What do your measurements show?
Is it what you expected or are there any surprises?
Do
What data are you going to gather?
How often are you going to take a measurement?

Presenting your Data

The best way to display the data from a quality improvement project is to plot your measurements each time they are taken. That way, it can easily and quickly be seen whether or not a change is resulting in an improvement.

Collecting and plotting data frequently, such as daily measurements, has far greater accuracy and gives a better indication of what is really going on than collecting data once monthly or using an average over time.



Sustainability

Sadly many excellent changes and ideas are not sustained once the project leader leaves the team. It is therefore important that you consider how your project might be sustained after you have finished your current post.

> "Every system is perfectly designed to achieve the results it gets."
>
> Don Berwick

- Can your change be incorporated into a system that is already up-and-running, e.g. the electronic handover sheet, or an electronic patient record?
- Who will be responsible for ensuring your change continues once you have left?
- Have you involved them in the design and implementation of your change?
- Has your change been tried before (check out the past projects on https://www.healtheducationwessexprojects.org.uk)? If it has, why did it fail? How can you improve it?

Spread

If your project is a success then there is no reason why you can't take that idea and try it out in your next place of work. There is also no shame in taking inspiration from other projects which have worked.

> "Steal shamelessly, spread seamlessly."

Ensure that your local clinical governance team have been made aware of your project as they will most likely have opportunities for you to be able to spread your project to other departments within your place of work.

You will have an opportunity to share your work at the Patient Safety Conference in July.

Previous trainees have also utilised opportunities to present at national and international conferences. It is worth checking your specialty college conference website as they are often looking for abstracts for poster display at their annual conferences.

Projects: Getting going

Before, on and after the training day

- Sign up as a junior doctor at

www.healtheducationwessexprojects.org.uk

- Upload your project title during the afternoon session and add your session facilitator as a mentor to your project. ('Upload project' box can be found under the 'edit profile' section of your log in.) You can also browse to see if there are mentors from your trust who would also be helpful to add in order to help you embed your changes in your specific work environment.

- Upload your methods and outcomes as you go along. You can add as many method/outcome boxes (PDSA cycles) as you like. Your mentor/s will be notified when you add content so they can offer advice on how to make the most impact with your project.

- When you have entered all the information, click submit to submit your project for marking. A poster can still be added at a later date.

- Please add any other authors involved to your abstract. This can be done on your abstract by going to the 'Authors' tab and clicking 'Add Existing'. To be able to add an author they must have an account set up

What to (and not to!) include in your project

Title

This must not contain anything which identifies your workplace as the title appears on the public page. Also it must not be inflammatory – stick to the positives of what you've done eg. "Improving Oxygen delivery to bed spaces", not "Oxygen – not delivering basic care in St Rubbish Hospital" etc.

Method/Outcome

Try to stick to facts about what you did and what you found. We want to hear about problems and solutions but the site is not the outlet for any personal views which might be interpreted as defamatory. Having said that, if you have concerns which you feel exceed the scope of the site then please do contact us personally to discuss these further – we are keen to help your concerns be heard by people who can influence change. You can add multiple method/outcome boxes each time you complete a PDSA cycle.

Projects: FYI

Marking

The marking of projects is based on the below table so, if you can, do try to cover the points within your abstract.

When the faculty review the project abstracts we will also give a score for 'Transferability.' This score is not including in the overall mark for a project; it is simply there to help people who are looking for project ideas that may be transferable to their place of work.

	0	1	2
Aim	No clear aim	Good aim	Well defined aim
Intervention	No Change	A change made	Multiple cycles of change
Engagement of Stakeholders	None explicit	Ideas and advice sought	Multi-disciplinary/Organisational involvement
Outcome Measurement	No measurement	Some measurement made	Well chosen and presented measurements
Potential Sustainability	Not sustainable	Short term sustainable	Long term sustainable

How to submit your poster

Most will find it easiest to create a poster as a powerpoint slide. It should be A2 (594 x 420 mm), landscape and contain the information from your abstract plus any helpful diagrams/tables/charts. You might want to add a bit of background to your project too. Include the author's names and contact details and the workplace in which the project was carried out. Have a look at previous posters on the website for examples of past posters.

Once you have created your poster, save it as a pdf file and upload it to the web tool – there's a link to upload documents at the bottom of the page on which you edit your abstract.

How to submit your talk

If you are selected for oral presentation at the conference, your talk should be no longer than 8 minutes. Most use a powerpoint presentation. The final presentation should be e mailed to Gemma Holmes (gemma.holmes@hee.nhs.uk).

Dates for the diary

Project submission deadline

Monday 20 April

Outcome of submission emailed to you
(ie. Poster or oral presentation at the conference)

Tuesday 5 May

Submission deadline for posters and presentations

Wednesday 3 June

Conference

Friday 26 June

Useful contacts

Health Education Wessex Contacts

Name	Role	E mail
Gemma Holmes	Training Days and Conference	PDU.WX@hee.nhs.uk
Sarah Noble	Course Director	Sarah.noble@doctors.org.uk
Siobhan O'Donnell	Web tool support	Qualityimprovement.WX@hee.nhs.uk

Workplace Mentors

Name	Role	Workplace	E mail
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Useful Contacts

Specialty Mentors

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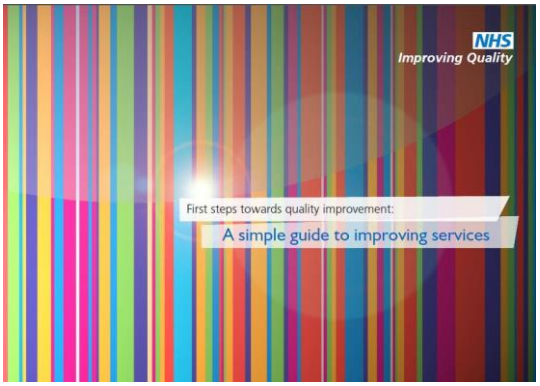
Suzie Jackson	GP	susiejackson@doctors.org.uk
Michael Partridge	Palliative Care	michael.partridge@stmichaelshospice.org.uk

Resources



NHS Improving Quality

http://www.nhsiq.nhs.uk

They also produce a free downloadable guide:

http://www.nhsiq.nhs.uk/resource-search/publications/nhs-imp-service-improvement-guide.aspx

Institute *for* Healthcare Improvement

Institute for Health Care Improvement

http://www.ihi.org

Register with the IHI to access lots of free resources

NHSScotland Quality Improvement Hub

NHS Scotland Quality Improvement Hub

http://www.qihub.scot.nhs.uk

Excellent quality resources available online