

Weaving safety into the fabric of your organisation

Jo Wailing

@JWailing

Research Fellow

Collaborating Centres for Safe Health Care

University of Victoria Wellington

Jo.wailing@vuw.ac.nz

Organisation Development Team

Capital and Coast DHB

Mental Health Addictions & Intellectual Disability Services

Itsaboutourplace@ccdhb.org.nz



**Collaborating Centres for
Safe Health Care**



Te-Upoko-me-Te-Karu-o-Te-Ika
Mental Health, Addictions and
Intellectual Disability Service



Capital & Coast
District Health Board
ŪPOKO KI TE URU HAUORA



MA TINĪ, MA MANO, KA RAPA TE WHAI – BY JOINING TOGETHER WE WILL SUCCEED



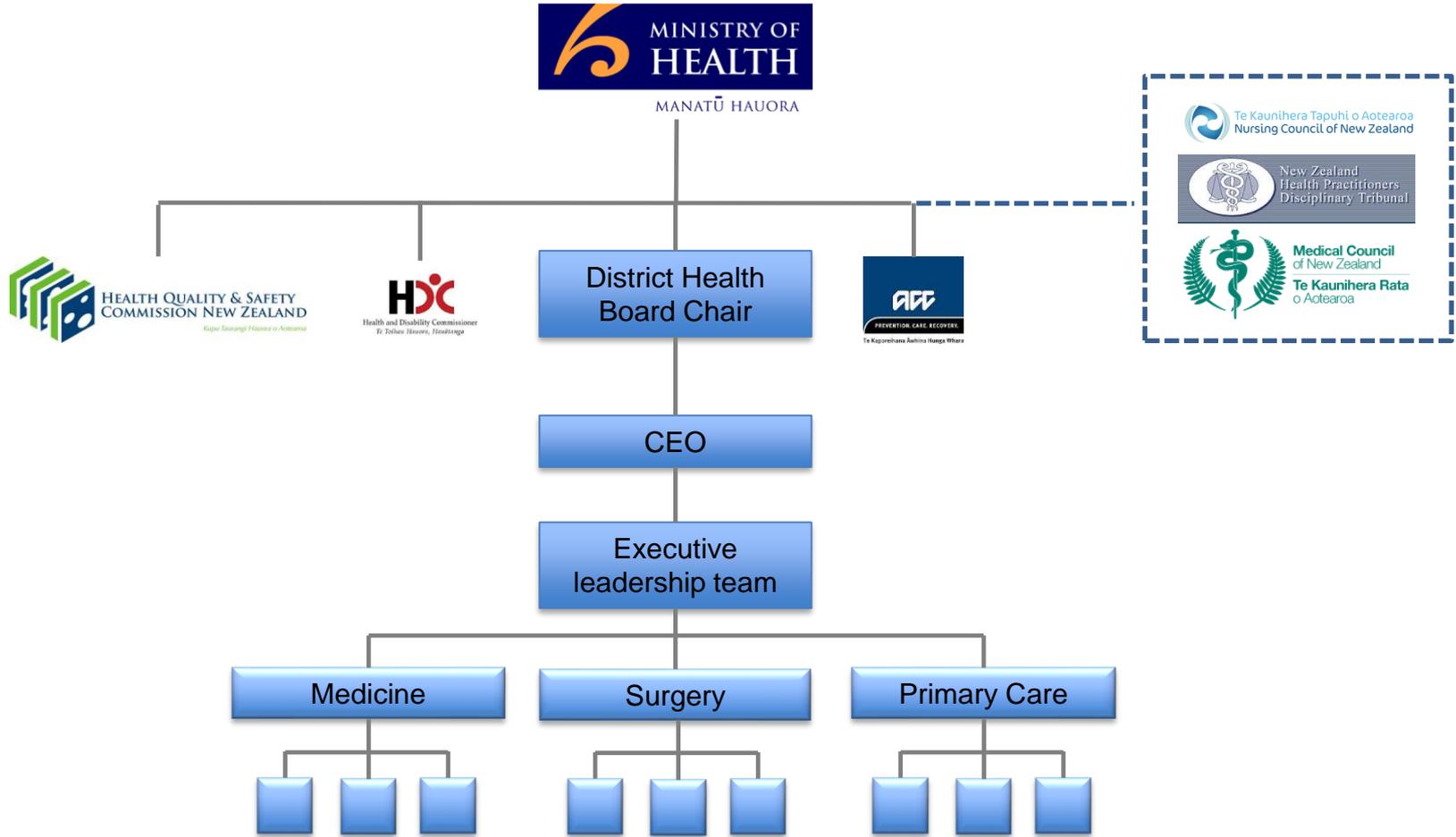
Te-Upoko-me-Te-Karu-o-Te-Ika
Mental Health, Addictions and
Intellectual Disability Service



Capital & Coast
District Health Board
ŪPOKO KI TE URU HAUORA

Blunt end

Sharp end



Collaborating Centres for
Safe Health Care







“In the margins, where we do not do well, culture often plays a part. It is seen in the failure to speak up, to raise a question, to make the connection, to listen.”

Anthony Hill, HDC

A detailed oil painting of a pond. The water is a deep, vibrant blue, reflecting the sky and the surrounding foliage. Numerous lily pads of various shades of green, from bright lime to dark forest green, float on the surface. Interspersed among the lily pads are several pink flowers, some in full bloom and others as buds. The brushwork is visible, giving the scene a textured, almost tactile quality. In the bottom right corner, the artist's signature 'R. ROSSINI' is written in a light green color.

“All the plants and animals that live in a particular area together with the complex relationship that exists between them and their environment” Collins dictionary





Cultural Complexity

“DHBs are struggling to develop an ideal safety culture”

Hardy, 2013

“The way ahead lies not in a replacement of Safety I by Safety II but in a combination of the two ways of thinking.”

Hollnagel, Wears and Braithwaite 2015



Collaborating Centres for
Safe Health Care





Collaborating Centres for
Safe Health Care



Collaborating Centres for
Safe Health Care





He Ara Oranga

Report of the Government Inquiry into
Mental Health and Addiction

In unity there is
strength

He toa takitini

So'o le fau i le fau

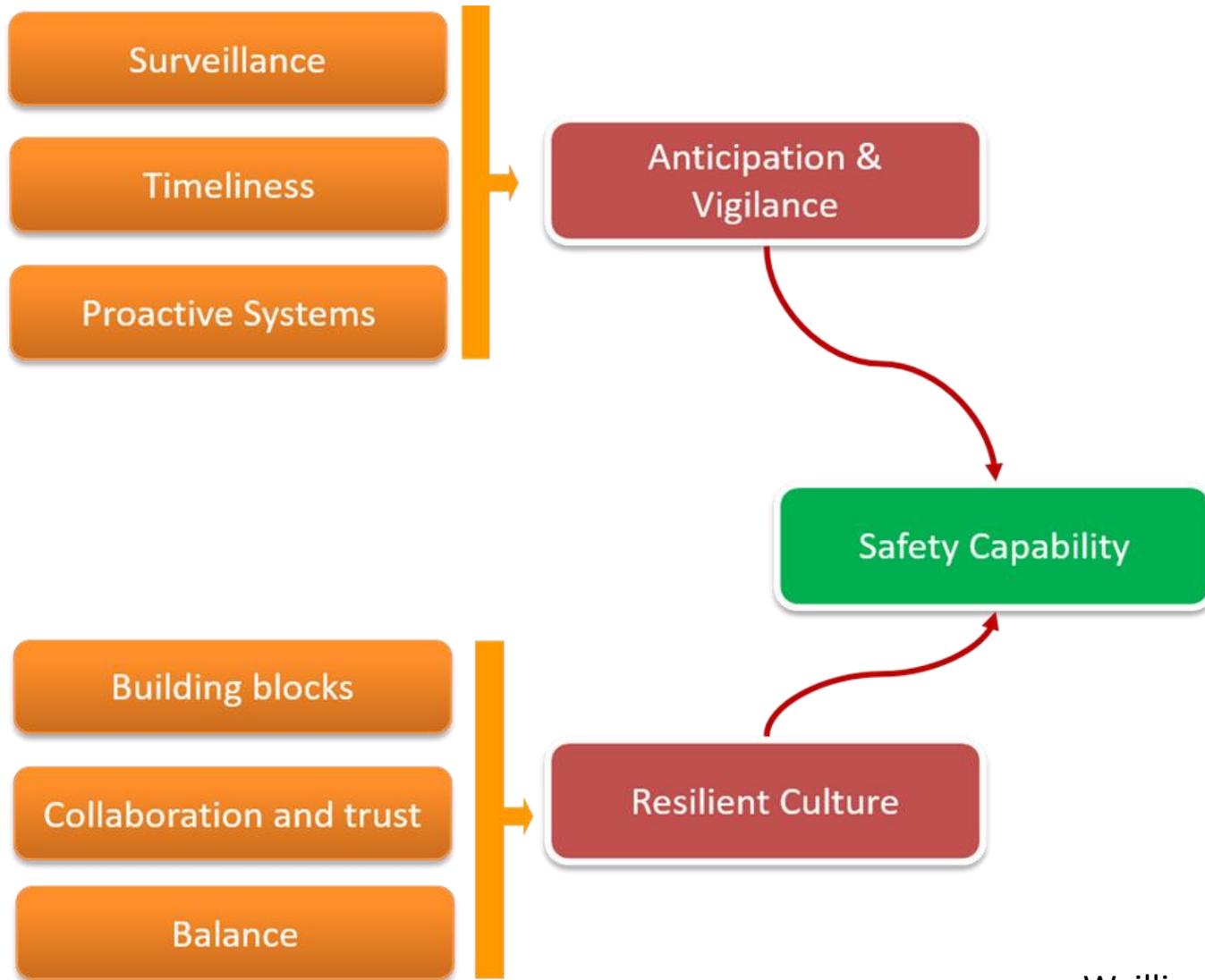
*He Ara Oranga: Report of the government
inquiry into mental health*

Trying to understand **safety** by only looking at **incidents** is like trying to understand **sharks** by only looking at **shark attacks**

Attributed to Bob Wears



Source: Adrian Plunkett
Birmingham Children's Hospital



Wailling, J (2016)



Collaborating Centres for
Safe Health Care



National Early Warning Score

ZONE	Indicator
YELLOW	Any vital sign in the yellow zone or total EWS 1-5
ORANGE	Any vital sign in the orange zone or total EWS 6-7 Acute illness or unstable chronic disease
RED	Any vital sign in the red zone or total EWS 8-9 Likely to deteriorate rapidly
BLUE	Any vital sign in the blue zone or total EWS 10 or more Immediately life threatening critical illness

Waitemata DHB adult MHS Triage

Triage Code / Description	Response type / face-to-face contact
A Emergency	IMMEDIATE REFERRAL Emergency service response
B Very high risk of imminent harm to self or others	WITHIN 4 HOURS Very urgent mental health response
C High risk of harm to self or others and/or high distress, especially in absence of capable support	WITHIN 24 HOURS Urgent mental health response
D Moderate risk of harm and/or significant distress	WITHIN 72 HOURS Semi-urgent mental health response
E Low risk of harm in short term or moderate risk with good support/ stabilising factors	WITHIN 4 WEEKS Non-urgent mental health response
F Referral not requiring face-to-face response from mental health	Referral or advice to contact alternative service provider
G Advice, consultation, information	Advice or information only OR More information needed

Proactive safety systems

“Frontline clinicians in complex adaptive systems develop and accept new ideas based on their own logic that are incredibly important innovations that are important for safety.”

Braithwaite 2018



Collaborating Centres for
Safe Health Care



Our People Strategy



Ma Tini, Ma Mano, Ka Rapa Te Whai

By Joining Together We Will Succeed

Supporting Safety Culture

**SPEAK UP
FOR SAFETY™**

**SPEAK UP
FOR
SUPPORT**

**SPEAK UP
FOR SUCCESS**

Working with Cognitive Institute to support a strong safety culture at CCDHB.



- *The Speaking Up for Safety Programme©, the Safety C.O.D.E.™ and Speaking Up for Safety™, are the property of Cognitive Institute and are used under license.*
- *For more information please contact It's about our place [CCDHB] RES-ItsAboutOurPlace@ccdhb.org.nz*

Speaking Up™ for Safety

Speaking Up
for Safety
Ask me about it now



Speaking Up™ for Safety



Use the Safety C.O.D.E and help prevent unintended patient harm

- C CHECKS** - Check for common sense and safety risks
- O OPTIONS** - Look for other ways to do the job
- D DEMANDS** - Are you overloaded? Do you have the resources to do the job?
- E ELEVATES** - Have you spoken up about the issue?

Thank you for Speaking Up for Safety at CCDHB & MHAIDS

Safety is a shared responsibility. We are all accountable for the safety of patients and each other.

Read more on the staff intranet or book now on Connect Me



Speaking Up for Safety

SPEAKING UP FOR SAFETY STARTING TO EFFECT CHANGE



IT DOESN'T JUST APPLY TO OUR STAFF

One of our staff spoke up about the behaviour of a police officer and they've changed their training to avoid it happening again.

A nurse spoke up about the behaviour of a police officer following the death of a young Pacifica man in hospital. They didn't feel the police officer's behaviour helped the family or staff deal with the trauma of the unexpected death.

The incident was formally followed up and the response from Police was positive. There was a meeting with the police officer involved to discuss the impact of his response on the family. The scenario is now part of the police values training package for all new staff.

Speaking up for Safety gave the nurse a framework to address the unprofessional behaviour with confidence and support.

ONE EMAIL STOPPED A MEDICATION ERROR

Clinical typists have spoken up about the quality of dictation and as a result of speaking up, stopped a patient taking a double dose of their medication.

When a dictation is unclear it can be misinterpreted and end up causing harm to a patient. It can be unclear for a number of reasons including loud background noise, the speaker multi-tasking during dictation or lack of clarity for complex medical terminology.

One typist mentioned that when she had a hunch a doctor, for whom she had typed many letters over the years, had prescribed double the usual dose, she emailed him to check. Her hunch turned out to be correct; the wrong dose of medication had been prescribed, and she was profusely thanked by the doctor.

She said it felt good to avert patient harm and have enough confidence to raise a concern, even if she was wrong. She felt empowered, respected and valued by the doctor.

As a result of this situation, clinical leaders and service leaders have been asked to tell medical staff about the effect of noise during dictation. Planning is underway with capability development to incorporate this feedback into orientation of new medical staff.



GRAND ROUND

WHAT IS RESTORATIVE JUSTICE AND HOW MIGHT IT HELP US BUILD A STRONG SAFETY CULTURE?



Come and find out at Grand Round, where we'll hear from Professor Chris Marshall, the inaugural Chair in Restorative Justice at the School of Government at Victoria University.

The approach is based on the concept that individuals and communities thrive in an environment of positive

- Safety is a shared responsibility - we are all accountable for the safety of patients and each other.
- Every person is part of the health team, regardless of role or position, and has an equal right and responsibility to speak up for safety.
- When anyone raises a concern, we all need to stop to listen and thank them for speaking up.
- Managers and leaders take the time to follow up and feedback about concerns raised.



Speaking Up for Support

Speaking Up for Support

**Ma Tini, Ma Mano,
Ka Rapa Te Whai
By Joining Together
We Will Succeed**

Read more on the staff Intranet

Let nature in

Strengthen your wellbeing

Activities in Masterton
Celebrating Mental Health Awareness Week

Mon 8th Oct	Tues 9th Oct	Wed 10th Oct	Thurs 11th Oct	Fri 12th Oct	Sat 13th Oct	Sun 14th Oct
Workshop: Green						
Workshop: Blue						
Workshop: Red						

Mā te taiao, kia whakapakari tōu oranga

8-14 OCTOBER MENTAL HEALTH AWARENESS WEEK
VISIT MHANZ.CO.NZ TO LEARN MORE

FIVE WAYS TO WELLBEING

Give

Your time, your words, your presence

BE ACTIVE

DO WHAT YOU CAN, ENJOY WHAT YOU DO, HAVE YOUR MOOD

KEEP LEARNING

EMBRACE NEW EXPERIENCES, SEE OPPORTUNITIES, SURPRISE YOURSELF

CONNECT

TALK & LISTEN, BE THERE, FEEL CONNECTED

TAKE NOTICE

REMEMBER THE SIMPLER THINGS THAT GIVE YOU JOY

INTRODUCE THESE SIMPLE STRATEGIES INTO YOUR LIFE AND YOU WILL FEEL THE BENEFITS.

Mental Health Foundation
MINDAHEI FEI, HIRAHIRA OPIHI



- Safety is a shared responsibility - we are all accountable for the safety of patients and each other. This is achieved by staff in organisations where they feel safe and supported.
- Every person is part of the health team, regardless of role or position, and has an equal right to feel safe and supported.
- All our people feel confident to speak up for support for themselves or others (staff, patients or visitors), are thanked when they do and have confidence that responses will be respectful and action oriented.
- Managers and leaders feel confident to support wellbeing and resilience of our people.
- Respect and kindness underpin the way we work together.

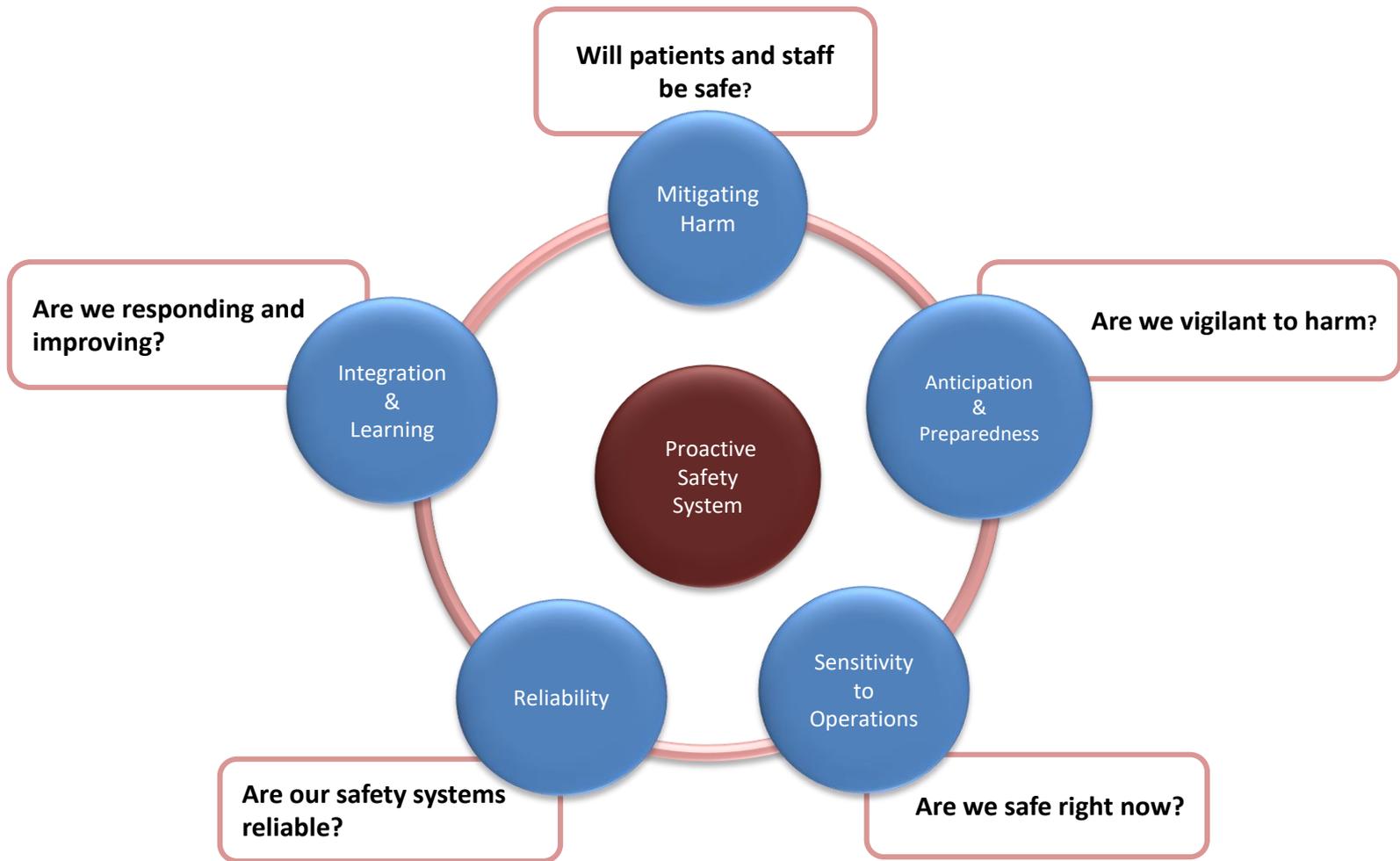
Speaking Up for Success



Key Principles of Speaking Up For Success:

- 1. We appreciate each other and the contribution we make.**
 - Every day we all come to work to provide safe, compassionate care to our community.
 - Every person is part of the health team, regardless of role or position, and contributes to our goal of improving the health and wellbeing of our community.
 - We take time to say thank you and to appreciate the time, energy, thought and care that we all put into our work.
- 2. We Learn from Excellence.**
 - We notice great work and seek to support and empower excellence.
 - We seek out excellence and share what we have learned.

We celebrate work well done and take pride in the achievements of ourselves and our colleagues.



Adapted from Vincent, C., Burnett, S. Carthey, J. (2014).



Collaborating Centres for Safe Health Care

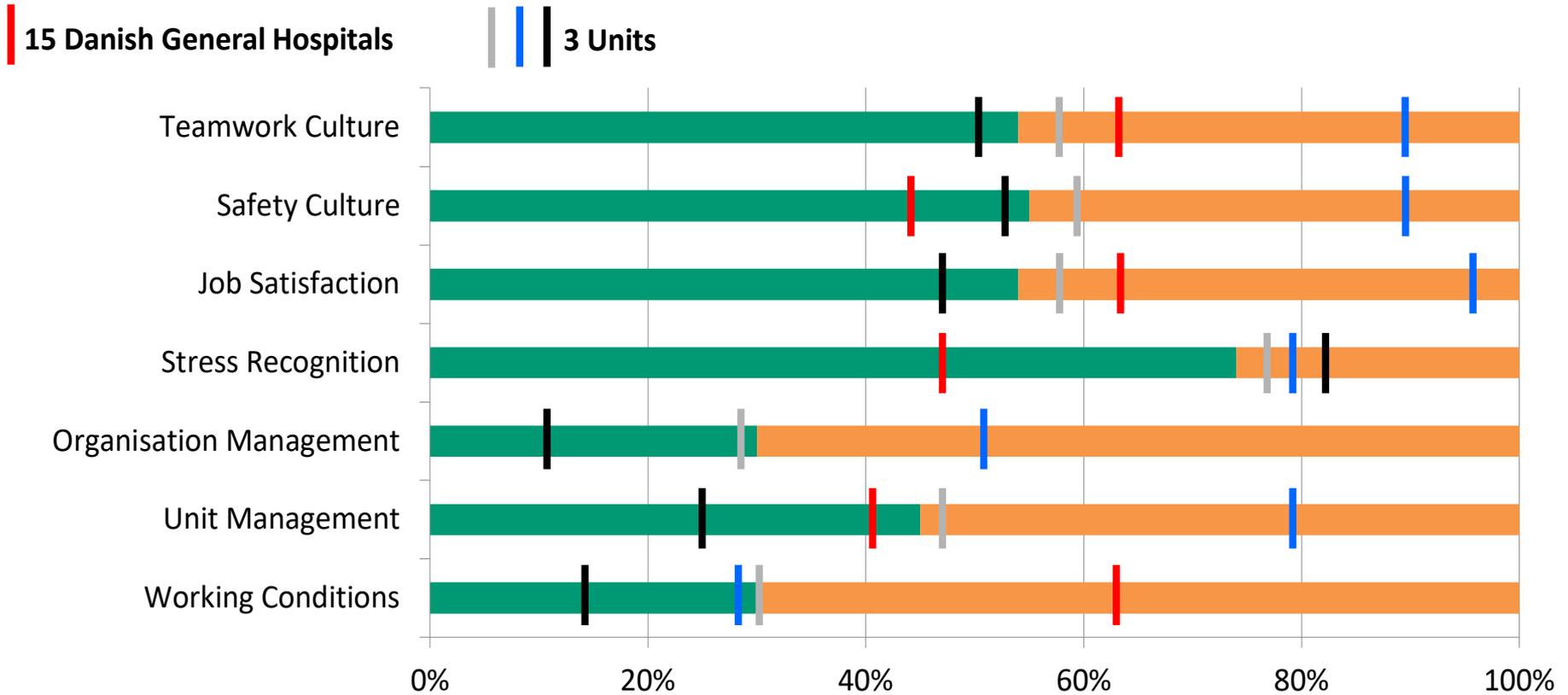


Te-Upoko-me-Te-Karu-o-Te-Ika
Mental Health, Addictions and Intellectual Disability Service



Capital & Coast
District Health Board
ŪPOKO KI TE URU HAUORA

Safety Attitudes Questionnaire





Collaborating Centres for
Safe Health Care





Declutter, simplify and nurture that which ensures our ecosystem can thrive

“If an organisation is convinced that it has achieved a safe culture, it almost certainly has not.

Safety culture, like a state of grace, is a product of continual striving. There are no final victories in the struggle for safety”

Reason 2000



Collaborating Centres for
Safe Health Care



<http://bit.ly/nzsurvey>



Social Network Analysis
Grandjean, M. (2016)



Collaborating Centres for
Safe Health Care



HEALTH QUALITY & SAFETY
COMMISSION NEW ZEALAND
Kupu Taurangi Hauora o Aotearoa



AUSTRALIAN INSTITUTE
OF HEALTH INNOVATION