

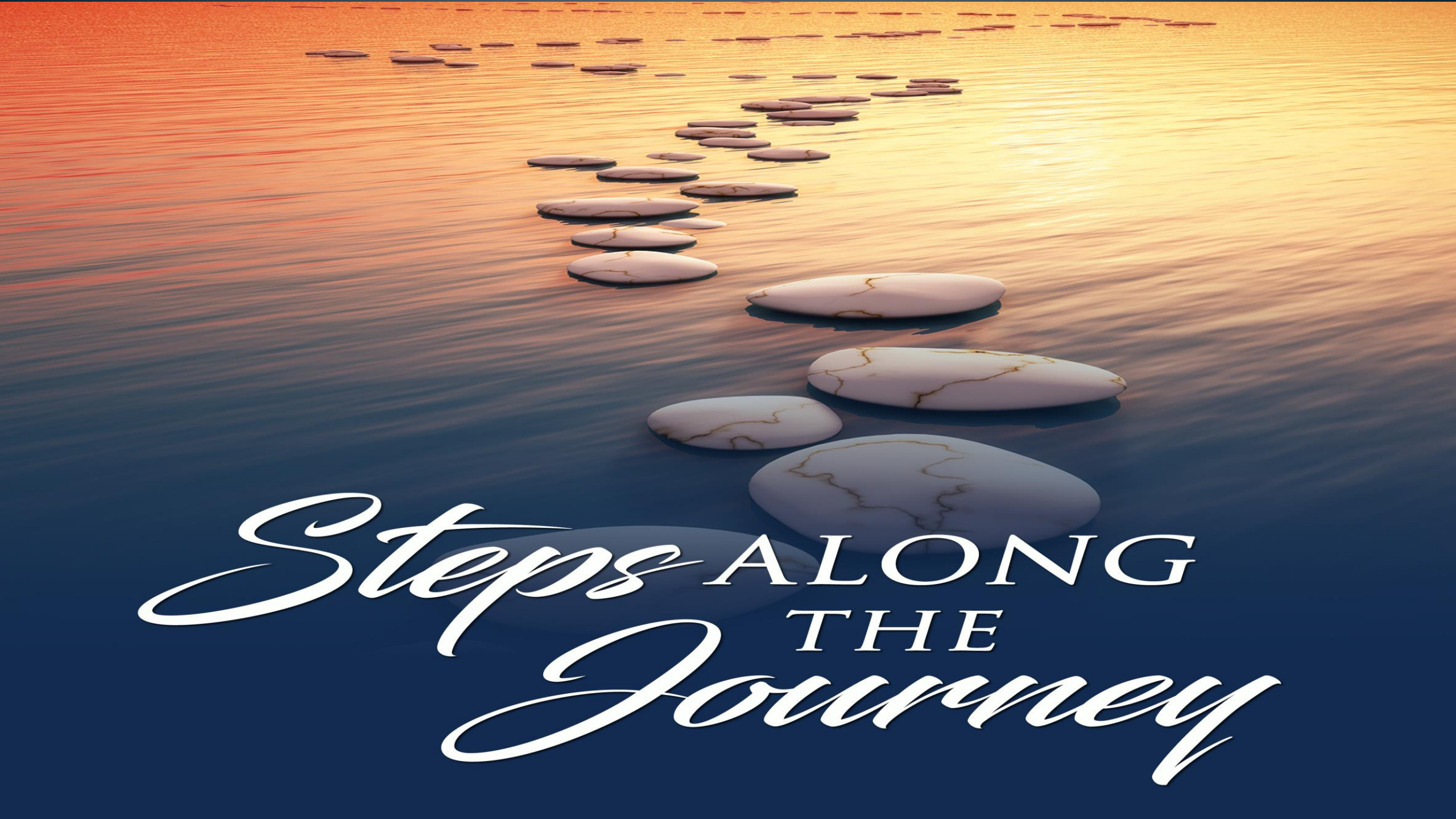
Lived Experience of Resilient Healthcare in Quality and Safety

Catherine Hocking,
Quality Coordinator, Critical Care Complex

Background and Role

- Registered Nurse with critical care background
- JCAHO
- ISO 9001 trained
- Quality Coordinator
Critical Care Complex,
Middlemore Hospital
since 2008





Steps ALONG
THE
Journey

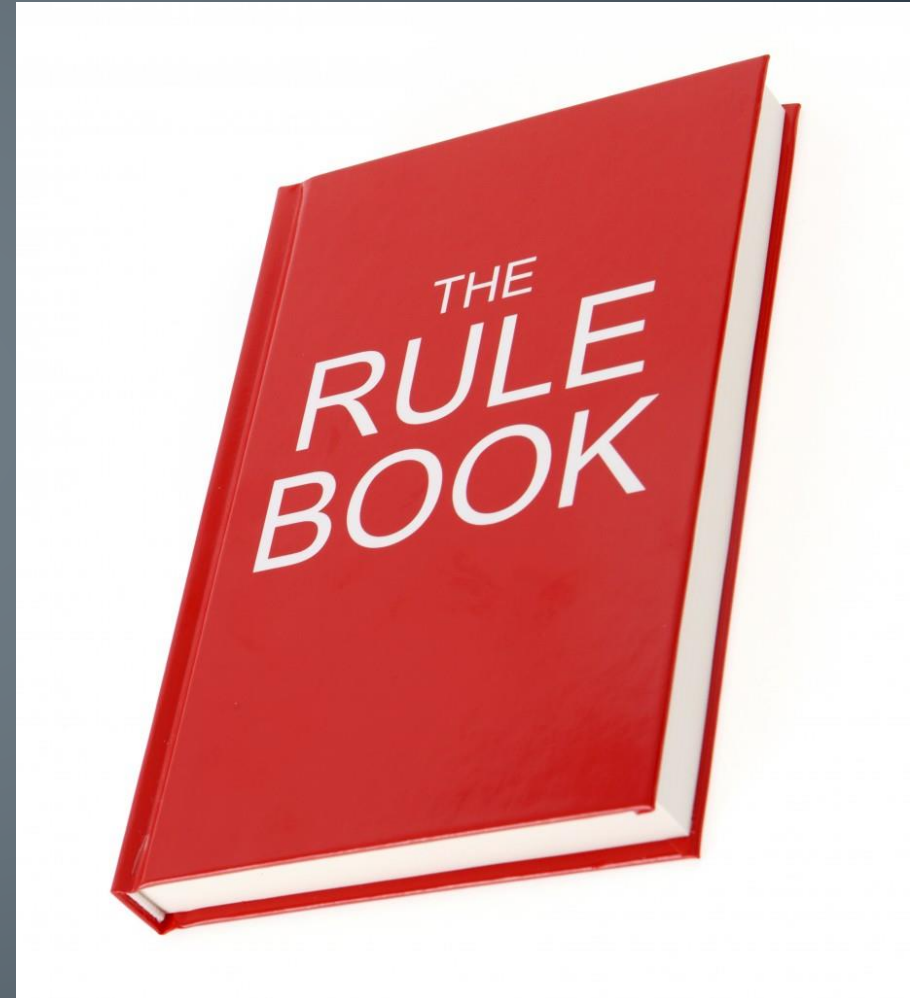
Incident Investigation

What you did

vs

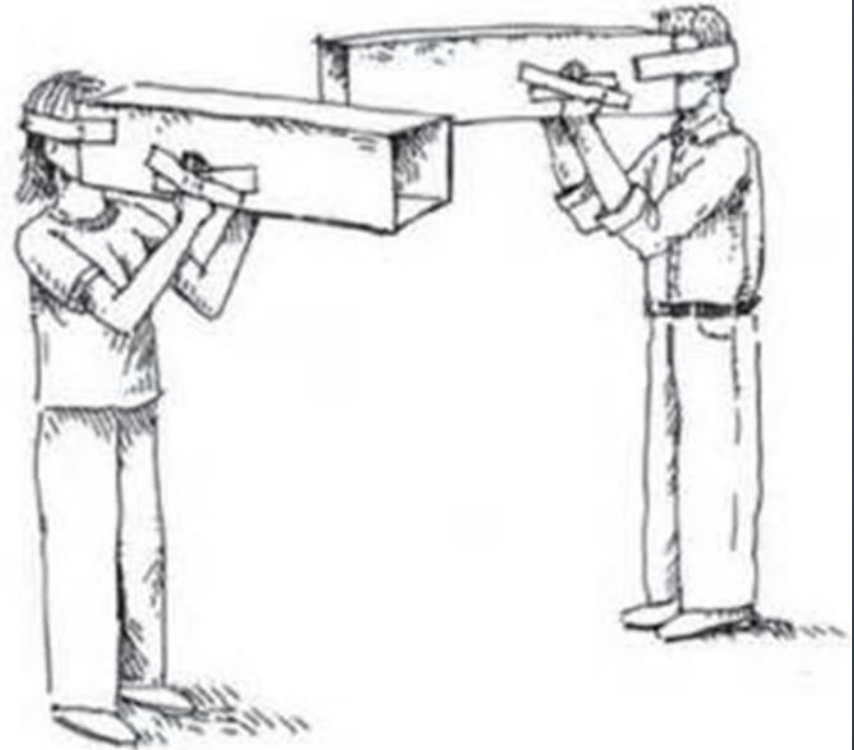
What you should have done

If you didn't document it,
it wasn't done



Why Did That Seem Like the Right Thing To Do

People do things that make sense to them, given their goals, understanding of the situation and focus of attention at that time.



Real life examples

- Patient admitted with multiple trauma
- Night time agitation and restlessness
- Increasing agitation despite usual therapies
- Low blood sugar event

Recommendations



"Can you be a little more specific with step two?"

Different Approach

Be curious

- Curious questions about how it normally happens
- Why it normally happens like that
- What are they trying to achieve



Get curious!

Curiosity & Questions
spark relationships.

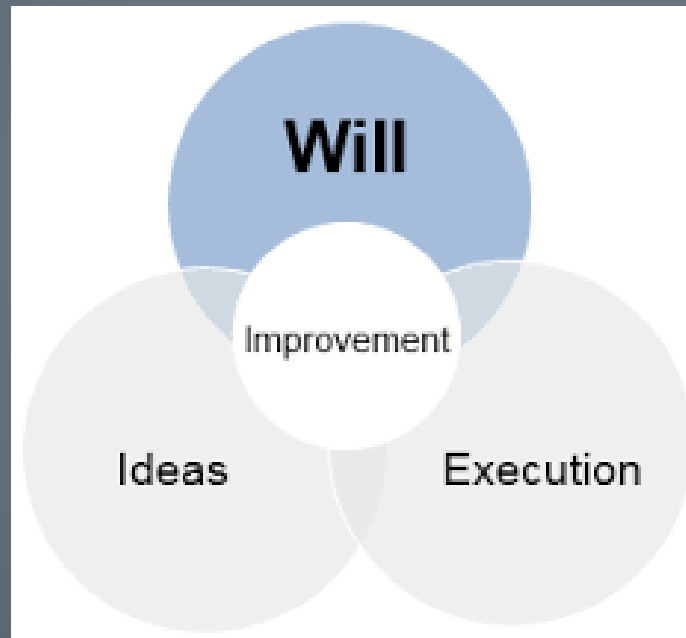
Fundamental Assumptions

People generally come to work to do a good job

We need to understand what people actually do

Quality Improvement Principles

- Aim Statement
 - Setting targets
- Measurements
 - Process and Outcomes
 - Collect Data
- Ideas to test
 - PDSA cycles



Successful initiatives

- Roll out to other areas
- Provide a burning platform
- Educate staff
- Compare areas results

Audit Results

We achieved a compliance rate of :

73%

down 9% from our last audit.

80% is considered a PASS

↳ Student Nurses 83%

↳ Phlebotomist 90%

↳ Allied health 94%

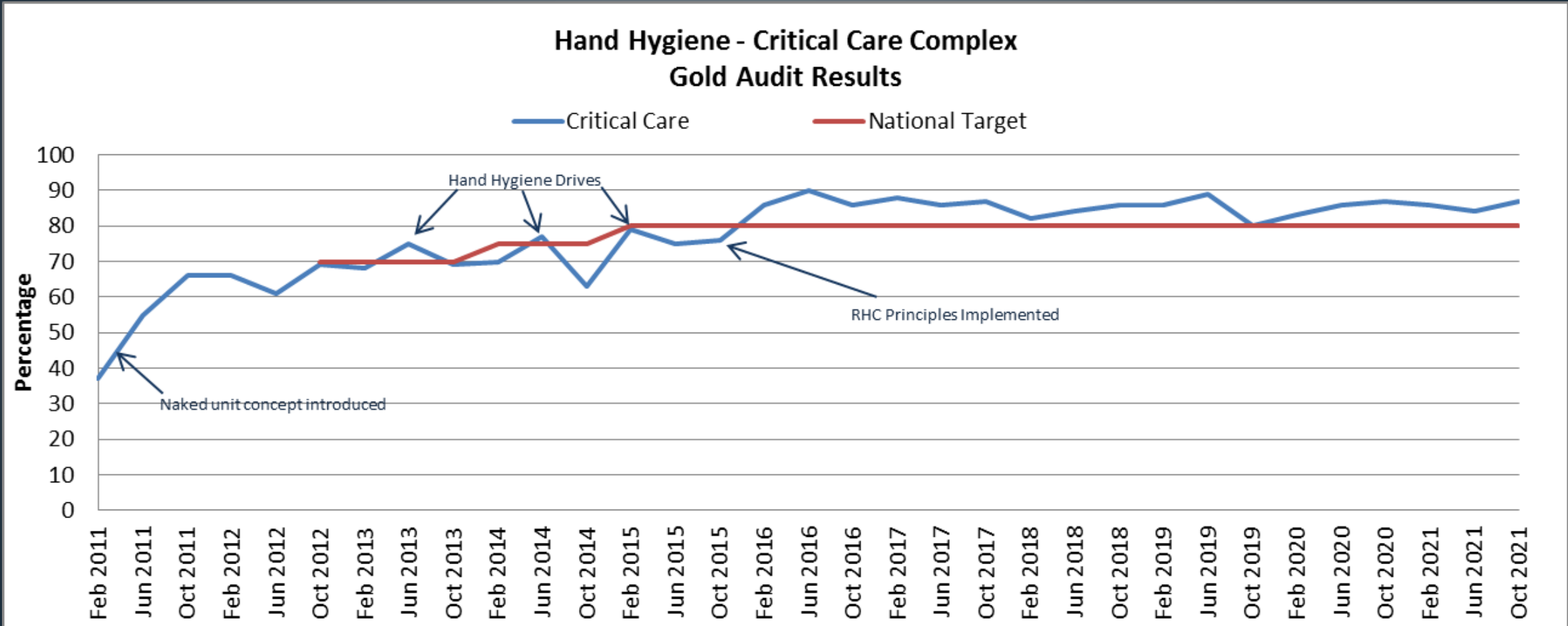
↳ Nurses 81%

So who failed?

↳ Medical Practitioners 55%

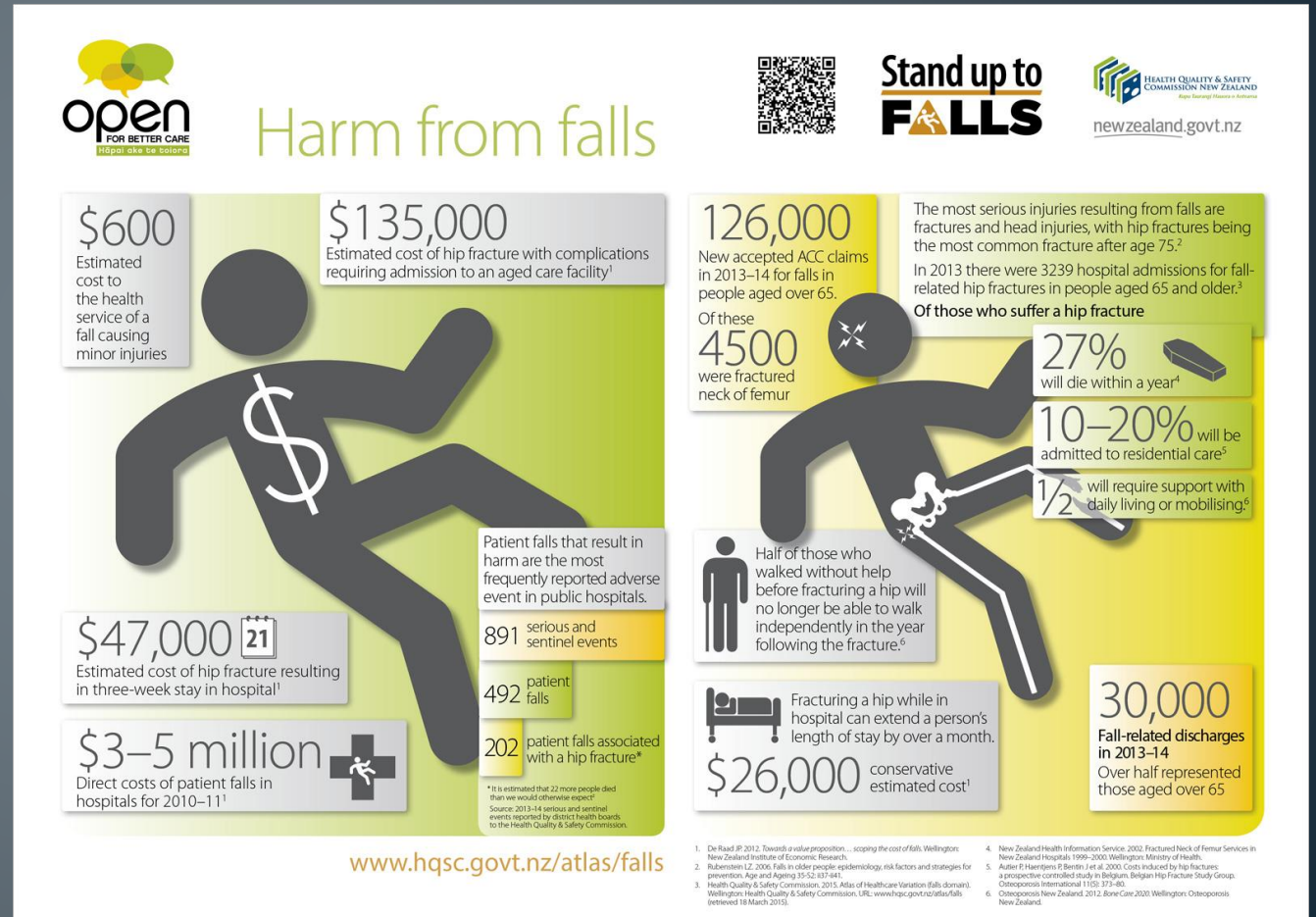
↳ Health Care Assistant 69%

Hand Hygiene Project



Falls with Harm

- Quality Improvement project
- Reportable events
- Root cause analysis investigations
- Routine findings
- Routine recommendations



Falls with harm – Resilient Approach

Observe ordinary work

Observe without judgement

Ask curious questions



Work as imagined assumptions blown out of water

- Care partner has more than 1 patient.
- Patients moved more than 3 or 4 times
- Moving to nurses station for closer
- Electronic system failure for workflows

What I've learnt

- Curiosity builds trust
- It's really hard to suspend judgement!
- It doesn't make problems easier to solve but you understand a lot more

