

Aim

To devise an SOP including defined data sources to support the data entry process for the RCSI Hospital Group Patient Safety Metrics.

Context

“Measurement of quality to drive improvement is one of the hallmarks of a high performing healthcare system”¹

In 2016, the RCSI Hospital Group established a set of metrics which could be used to understand risk, patient safety, outcomes and drive improvements in patient safety. The information collated from the metrics form a benchmark to drive improvement.

What are we trying to accomplish?

To generate an SOP for the RCSI hospital group to provide a standardised approach to Patient Quality and Safety metrics data collection, with an intent to improve validity of the data and thus reduce variability.

Figure 1: Variability of data sources for pilot sites



20% variance in collection of data

Goals;

Engage with key stakeholders to identify and refine the data sources to generate a site specific representation of the submission process by May 2017

Develop an SOP to support data entry for the monthly Hospital Patient Safety Metrics within pilot sites (CHB & OLOL) by May 2017

Acknowledgements

- Margaret Boland CEO, CHB
- Catriona Crowley CEO, OLOL
- RCSI Institute of Leadership
- RCSI Quality & Safety Directorate
- Risk Managers & staff, RCSI Hospitals
- Ian Carter CEO RCSI Hospital Group

What We Did

1) IDENTIFY & CONSULT PILOT SITE CEO

- Project Team to engaged with CHB CEO & OLOL CEO



2) Draft 1 – SOP

- Stakeholder Analysis completed
- Devise Draft 1 of the SOP to share with key stakeholders



3) Group Risk Managers

- Pitch project to Group Risk Managers
- Obtain Buy-in from Group hospitals
- Incorporate their feedback & devise SOP Draft 2



4) Stakeholder Engagement

- “World Café” SOP Draft 2 for all key stakeholders in pilot site
- Discuss data source variation and recommendations



5) Finalise Draft SOP & Key Recommendations

- Devise SOP Draft 3 with stakeholder feedback
- Key Recommendations identified
- Bespoke Process map for pilot site is defined



6) Pilot of SOP

- SOP Draft 3 used by unfamiliar user to complete metrics
- Provide feedback to the team. SOP finalised



7) GM / RCSI Sign Off

- SOP is signed off by GM's on both pilot sites and RCSI Quality and Safety Directorate
- SOP is shared with all Risk Managers

Recommendations



- Engage with GM's at CHB & OLOL to progress implementation of the SOP
- Ensure this is a live support document
- Feedback to the RCSI Group Quality and Safety Directorate regarding the project findings
- Consult with the wider RCSI Group Hospital to support the roll out of the document in all sites
- **Implement the National Incident Management System reporting suite created by State Claims Agency within all RCSI Hospitals**

Key Learning

- Importance of engagement with key stakeholders from varying disciplines and organisations
- The value of collecting data allowing focused quality improvement initiatives



- Awareness and exposure to the systems and structures within the RCSI Hospital Group
- How to work as a cohesive team across different sites
- Development of project management skills
- Importance of having a clearly defined goal and agreeing the scope of a project from the outset

What We Achieved

1. Successful engagement with key stakeholders at all levels to support the SOP.
2. A finalised SOP for the pathway of data collection to populate the Hospital Patient Safety Metrics for CHB & OLOL.

Team



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References

1. The King's Fund. Getting the measure of quality; Opportunities and challenges. London: The King's Fund. 2010. Available from: www.kingsfund.org.uk