



Feidhmeannacht na Seirbhíse Sláinte
Health Service Executive

Quality Improvement Division



QI TALK TIME

Building an Irish Network of Quality Improvers

Embedding Patient and Family Engagement in a Model 3 hospital:

1pm Tues June 11th
2019

Connect

Improve

Innovate

Speakers

Catherine Donohoe -

Is the General Manager in Mayo University Hospital and has led the management team to deliver on the implementation of the Framework for Improving Quality. The main focus was to have a culture of quality improvement through all levels of the hospital and this required embedding patient and Family engagement as the key element to the success of this work. Catherine's previous experience as Director of nursing and midwifery has driven this project.

Rachel Bracken -

Is a Patient and Family Experience Advisor and has been working with Mayo University Hospital on implementation of the 'Mayo approach' since 2017. She has had a number of healthcare interventions and brings great experience to the work. Rachel has been working in Quality Assurance in the pharmaceutical and medical device industries for the past 20 years.

Fiona McGrath -

Is a chartered physiotherapist and is one of the leads on Patient and Family Engagement in Mayo University Hospital. Fiona has been the Physiotherapist Manager in the hospital since 2001 and is currently working as a Project Manager on Integrated Care for Older Persons in Mayo.

Seamus Moran -

Is Principal Social Worker in Mayo University Hospital since 2001 and has worked extensively with patients and families throughout his career. Seamus is one of the leads on Patient and Family Engagement in the hospital.



Instructions

- Interactive

- Sound:

Computer or dial in:

Telephone no: 01-5260058

Event number: 848 385 677#

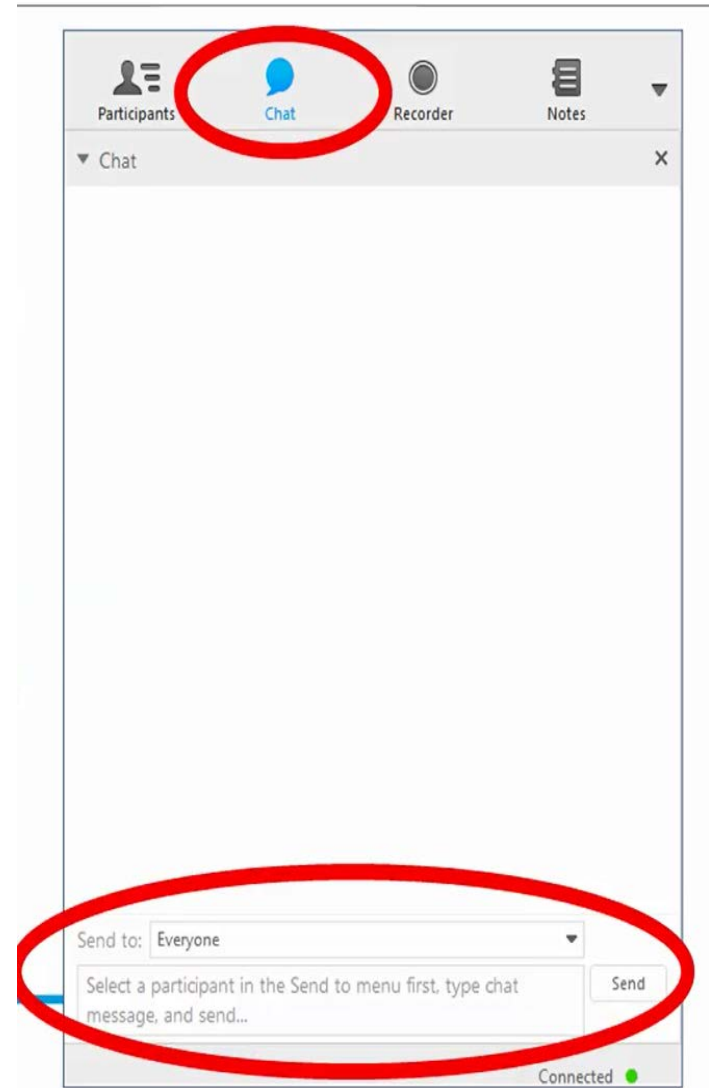
- Chat box function

- Comments/Ideas

- Questions

- Keep the questions coming

- **Twitter: @QITalktime**



Mayo University Hospital

- Model 3 - 306 bedded hospital
- One of the Saolta hospitals



Journey

Realisation of current position re organisational awareness on quality & safety . Launch National standards

2011 - 2012

2014

1st Quality and safety symposium declaration to Utilised safety huddles. MDT hospital safety meetings. Joined Saolta Group WNWHG

2016

Opportunity for large change
-new management team
-launch of the Framework on-going quality improvement.

2018

Culture shift becoming obvious...
250 Attendees Symposium
48 Projects
15 Speakers
Strong patient and Family advisors

Commitment to improving Quality and Safety in MUH

- Re-imagining health care that is truly patient centred. **Meaningful patient engagement.** Importance of valuing and engaging front line staff and providing them with opportunities to fulfill their potential in delivery safe quality patient care
- Embedding the standards for safer better health care 2012 in all our work.
- Ensuring our structure are future proofed for organisational changes



Environment was right for organizational change July 2016

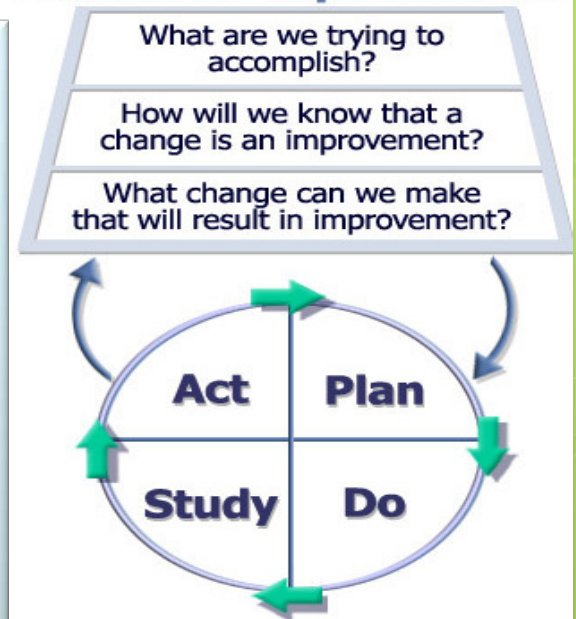


- I Took up post as GM in July 2016
- Reached out to National QI August 2016 Dr Crowley
- Partnered with accreditation Canada to promote patient and family engagement
- The Launch of the framework for quality improvement
- Review and restructure of the governance structure strengthening the directorate but totally embedding the National standards for safer better health care.

MUH agreed an aim statement

We aim to achieve excellence through securing meaningful patient engagement from the bed side to the management table; driven by engaged staff from all disciplines and grades, who are empowered by a commitment of support from Senior Management, for continuous quality improvement.

Model for Improvement



The Framework for Improving Quality



Source: Framework for Improving Quality in our Health Service Website

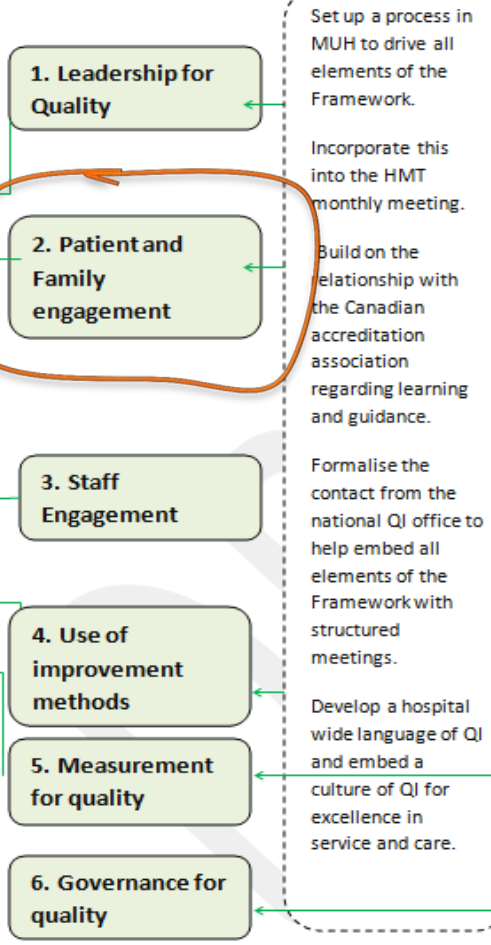
Ambition: Mayo University Hospital will achieve excellence through securing meaningful patient engagement in service delivery from the bed side to the management table; driven by engaged staff from all disciplines and grades, who are empowered by a commitment of support from senior management, for continuous quality improvement

Aim

Q1 what are we trying to achieve?

Aim: That MUH will have a structured implementation of the Framework for ongoing Quality improvement 2016 by year end 2017 with a sustainability assurance.

Areas of Focus (primary Drivers)



Set up a process in MUH to drive all elements of the Framework.
 Incorporate this into the HMT monthly meeting.
 Build on the relationship with the Canadian accreditation association regarding learning and guidance.
 Formalise the contact from the national QI office to help embed all elements of the Framework with structured meetings.
 Develop a hospital wide language of QI and embed a culture of QI for excellence in service and care.

Actions (secondary drivers)

Q3 what changes can we make that will result in improvement?

- 1.1 Develop an ethos for quality improvement with the hospital management team
- 1.2 Support training for management staff in QI IHI course
- 1.3 Quality must be clearly identified in all our terms of reference from bedside interaction to HMT decisions.
- 1.4 Start senior walk rounds
- 2.1 Set up steering group for patient engagement. Including national QI
- 2.2 Design a recruitment process and campaign for champions including selection.
- 2.3 Design an education programs for patient champions, staff and stakeholders.
- 2.4 Recruit advisors
- 3.1 Start town hall meeting
- 3.2 Set up staff engagement forum
- 3.3 Improve communication by developing communication strategy.
- 3.4 Formalise staff feedback via hospital [wifi page](#).
- 3.5 Design a recruitment process and campaign
- 3.6 Start Swartz rounds
- 4.1 Set a process in place where learning for IHI can be maximised on QI methodology
- 5.1 identify Indicatory which we want to improve on and share with staff.
- 5.2 set up process for sharing [these with](#) staff and patients.
- 5.3 set system for measurement and training
- 6.1 Develop organisational charts and make available to all staff and public
- 6.2 Develop guidance for operational and service delivery accountability
- 6.3 Identify staff operational and service delivery accountability levels

updates

Q2 how will we know that a change is an improvement?

- 1.1 This is an ongoing agenda item.
- 1.2 34 IHI licence distributed to staff including Management.
- 1.3 Completed for all committees
- 1.4 First walk rounf November 2019
- 2.1 In-place
- 2.2 completed
- 2.3 completed
- 2.4 21 advisors recruited and orientated.
- 2.5 Advisors are on a number of hospital committees
- 3.1 started
- 3.2 In place Launched in September
- 3.3 communication strategy at draft
- 3.4 [WiFi](#) for all Launched
- 3.5 Filming completed on Wi Fi and web page Swartz rounds in there 8 month
- 4.1 [This](#) is starting to spread
- 4.1.1 Clinical Audit committee started.
- 4.1.2 250 [attendees](#) 2018 symposium
- 4.1.3 48 QI posters 15 oral presentations
- 5.1 [This](#) is done
- 5.2 performance boards in place
- 5.3 12 measurement champions trained and leading the way with measurement.
- See Driver Diagram for full details on Governance

The Mayo Journey....

Patient and Family Engagement

- To establish and empower a team to lead on P&FE
- Source lead Patient Experience Advisors
- Source Staff Champions
- To plan the recruitment, induction, orientation and education of the first cohort of patient experience advisors



The Mayo Journey....

Patient and Family Engagement

- April 2017
- Terms of reference
- Developed PFE Logo
- 'Nothing about me without me'
- Patient Experience Advisor Role
- Developed Information leaflet
- Awareness raising staff and public



Recruitment

- HR Department
- Public Media Campaign
- Design Application Form
- Design screening process
- 'Ready' to engage



Induction Process

- Induction booklet developed
- Induction evening March 2018
- Tour of hospital (July 2017 , March 2018)
- 'Buddy up' system



Education

- Focus for 2018
- Patient Experience Advisors
- Support for Committees and Chairpersons
- Staff and Students



Patient Experience Advisors on:

- Medication Safety
- Older Persons Forum
- Nutrition Steering Committee
- Paediatric Decision Unit development
- End of Life Care
- Staff Engagement
- Saolta Engagement Strategy
- Patient Stories



Staff Education

- To embed the cultural change at Mayo University Hospital
- PFE logo and information leaflet
- Hospital Website
- Education Module
- 5 sessions – positive feedback
- Bring education to the clinical area



My Background

- Over the course of an 18-month period in 2015/6, I was a “frequent flyer” user of A&E and surgery in MUH.
- I have Addison’s disease which requires timely delivery of steroids to avoid hypovolemic shock/coma.
- A number of issues with recognition & management of the condition, allergies and a feeling of not being listened to, prompted me to write letters of complaint, but in doing so also identify opportunities for improvement. I expressed an interest in collaborating with the hospital to achieve this.



Why did I get involved?

- Wanted to make a difference to patient and family experiences
- Believe this will make patients safer and Staff work easier
- Worked in the Quality Assurance department of the Pharmaceutical & medical device industries for over 20 years
- A lot of experience of Corrective & Preventive action – Needs kid glove handling to get to true root cause and really make improvements!



My experience so far...

- Very positive and enthusiastic bunch!
- Learned a lot about the workings of the hospital and we have covered a lot in a short time.
- I derive great intrinsic satisfaction out of this
- Challenges – Not to attempt to “boil the ocean” or overcommit and then lose momentum and support for this initiative as a result.
- I have been involved in three induction training sessions since July 2018, NCHDs, Interns and 4th & 5th year medical students – sets the tone from their 1st day at MUH
- Opened and gave a workshop at the 2018 Quality & patient safety symposium at MUH
- We have presented at various best practice seminars in NUIG, UCD etc. & shared our patient stories on video



Patient and Family Engagement (PFE) Implementation Committee

- 12 members
- Inaugural meeting 24th April 2017
- Met Monthly
- Set up 3 Subcommittees
 - Recruitment
 - Induction and support
 - Education

Deliverables:

- To recruit ~20 PEAs to be voice of patient on various hospital committees
- To set up of Patient & Family Experience Advisory Council (May 2019)
- Chairperson will attend the HMT monthly board meeting

Next Steps:

- Develop frame of reference for the Patient and Family Advisory Council
- Pick top 3 items to work on from the National Patient Experience Survey feedback
- Develop a cross-linkage between the PEAs on the hospital committees and the council to ensure two-way communication between PEAs and HMT
- Education of existing MUH staff and increasing on-going interaction between PEAs and staff to embed in the culture and affect real change

Conversations should be between experts



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Take-away message:

- **R**egard your patients with respect
- **E**ngage and listen
- **S**taff have medical knowledge but...
- **P**atients and their families know themselves
- **E**xplain things as simply as possible
- **C**larify that the patient understands you and that you understand the patient's needs
- **T**each yourself from your mistakes and apologise as appropriate



So what

Our patients perception of our performance.

Stage of care	MUH 2018 %	National average %	MUH 2017 %	National average %
Overall rating	8.4	8.2	8.3	8.2
Admission	8.3	7.9	8.0	7.9
Care on ward	8.6	8.3	8.4	8.3
Examination	8.2	8.2	7.8	8.1
Discharge/transfer	7.1	6.9	6.5	6.8
Other	8.7	8.6	8.4	8.5

Improvement noted in all areas from 2017

A photograph of a paved road stretching into the distance under a warm, orange-hued sky at sunset or sunrise. A large white arrow is painted on the road, pointing towards the horizon. The background shows a rural landscape with fields and trees.

Thank you for allowing us to
share the highlights of this
journeys
& our commitment to go all the
way...

2019



QI TALK TIME

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Please give us Feedback - It matters to us what you think -

- Are there Topics you would like covered?
- Speakers in your local services that would like to share an improvement journey for spread elsewhere?
 - Any ideas for how we could improve?

Please complete this short survey:

<https://www.surveymonkey.com/r/8S867HW>

Follow us on Twitter  @QITalktime

Missed a webinar – Don't worry you can watch recorded webinars on
HSEQID QITalktime page

Next QI Talktime:

Know Check Ask Campaign –

Medication Safety initiative Tuesday July 2nd 1-2pm

Thank you from all the team
@QITalktime

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