

# Future Hospital Program



## Annual Report

2017 -  
2018



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For more information, contact:

Future Hospital Program, Logan Hospital, Metro South Health, Cnr Loganlea Road & Armstrong Road, Meadowbrook, Queensland.  
Phone 07 3299 9551.

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**Metro South Health** | Logan and Beaudesert Hospitals

**FUTURE HOSPITAL Program**



**Queensland Government**

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## Executive Foreword

### Dr Jacinta Powell

Executive Director, Logan Bayside Health Network

The Queensland health care system faces numerous challenges and demands including population growth, high levels of chronic disease, cultural diversities and uncertainty with funding. The Future Hospital Program (FHP) is Logan and Beaudesert Hospitals commitment to addressing these challenges.

The FHP is our ten-year transformational strategy that will position us as leaders across Queensland as the first program of its kind and will be undertaken with the support and collaboration of the Clinical Excellence Division, Queensland Health. This strategy aligns with Metro South Health's 2015-2019 Strategic Plan in embracing new approaches to deliver best-practice patient care.

The Future Hospital Program Strategic Plan 2017-2027 provides our vision for the future and builds upon our existing exemplar hospital performance and continues to engage with and develop our ambitious workforce. It sets the direction for the next ten years and focuses on driving five strategic priorities:

- Safety and Reliability;
- Workforce Capability;
- Person-Centred Care;
- Research and Innovation; and
- Quality Improvement.

In line with these priorities, we aim to design and trial new clinical innovations and best practice models of care and create a culture of continuous redesign and improvement. Critical to the success of the strategy is the engagement of clinicians to drive change and explore new ways of doing business.

On behalf of the Logan and Beaudesert Executive, I would like to acknowledge our commitment to making a real difference now and well into the future for our patients, our community and our staff. I commend this strategic plan and look forward to the journey to transform not only our hospitals but the future of healthcare.



## Message from

### **Marion Tower**

Metro South Health Board Member and  
Sponsor for Future Hospital Program

I want to thank the staff from Logan and Beaudesert hospitals for affording me the privilege of being involved with the Future Hospital Program. Logan and Beaudesert hospitals face considerable challenges related to population growth, increasing rates of chronic disease and delivering services in a testing economic climate. Logan and Beaudesert hospitals have risen to meet these challenges by aiming to *Lead, Transform and Excel* in the delivery of healthcare, by re-envisioning what best-practice healthcare looks like. I have been fortunate to be on this journey with you and watch this unfold, and see firsthand the commitment and passion of staff in the work of redesigning and trialling new ways of delivering best practice care.

I have been inspired by the staff - at all levels - who have been involved in the Future Hospital Program. Their ambition to achieve the Future Hospital Program's aims of delivering safer and kinder care, becoming the beacon for clinical excellence and being nationally recognised for innovation and excellence in person-centred care, education and research is being realised.

Over the past year, on my journey with you, I have seen some of the outcomes you have achieved, that ultimately benefit patients, Logan and Beaudesert communities and inform healthcare delivery more widely. This is evident in the redesign initiatives related to patient-centred care and in sharing the outcomes of these initiatives with national and international peers.

In a healthcare world driven by systems and processes the Future Hospital Program is daring to be different in delivering its mission of growing the best, the kindest, and the safest care for all. I offer my congratulations to you all for what you have achieved in the first 12 months of the program and I look forward to continuing to work closely with you as you continue to achieve your goals.



## Message from

**Dr Brian McGowan**

Senior Clinical Lead, Future Hospital Program

Our Hospital, Our Community, Our Future.

Welcome to our first Future Hospital Program report.

In this report you will read an account of the many achievements of the last year.

As Al Jolson said in 1927 after the first talking movie - "You ain't heard nuthin yet"!

This is only the beginning of a progressive transformation of our patient care.

You will read about work done on the key themes of Person-Centred Care, Workforce Capability, Continuous Quality Improvement, Research & Innovation, and Safety & Reliability.

The success of these interdependent components of the Future Hospital are all predicated on our ambition to develop together a vibrant safety culture based on Civility, Respect, Accountability and Kindness - To patients and also, importantly to each other.

The quality and safety of care delivered by a hospital depends directly on these qualities in the staff - all staff.

Ultimately this culture comes from within us all but needs to be nurtured and modelled by seniors and allowed to flourish in all.

Logan and Beaudesert are on a journey to becoming beacon hospitals. We can only get there with vision, ambition, team work and audacious optimism!

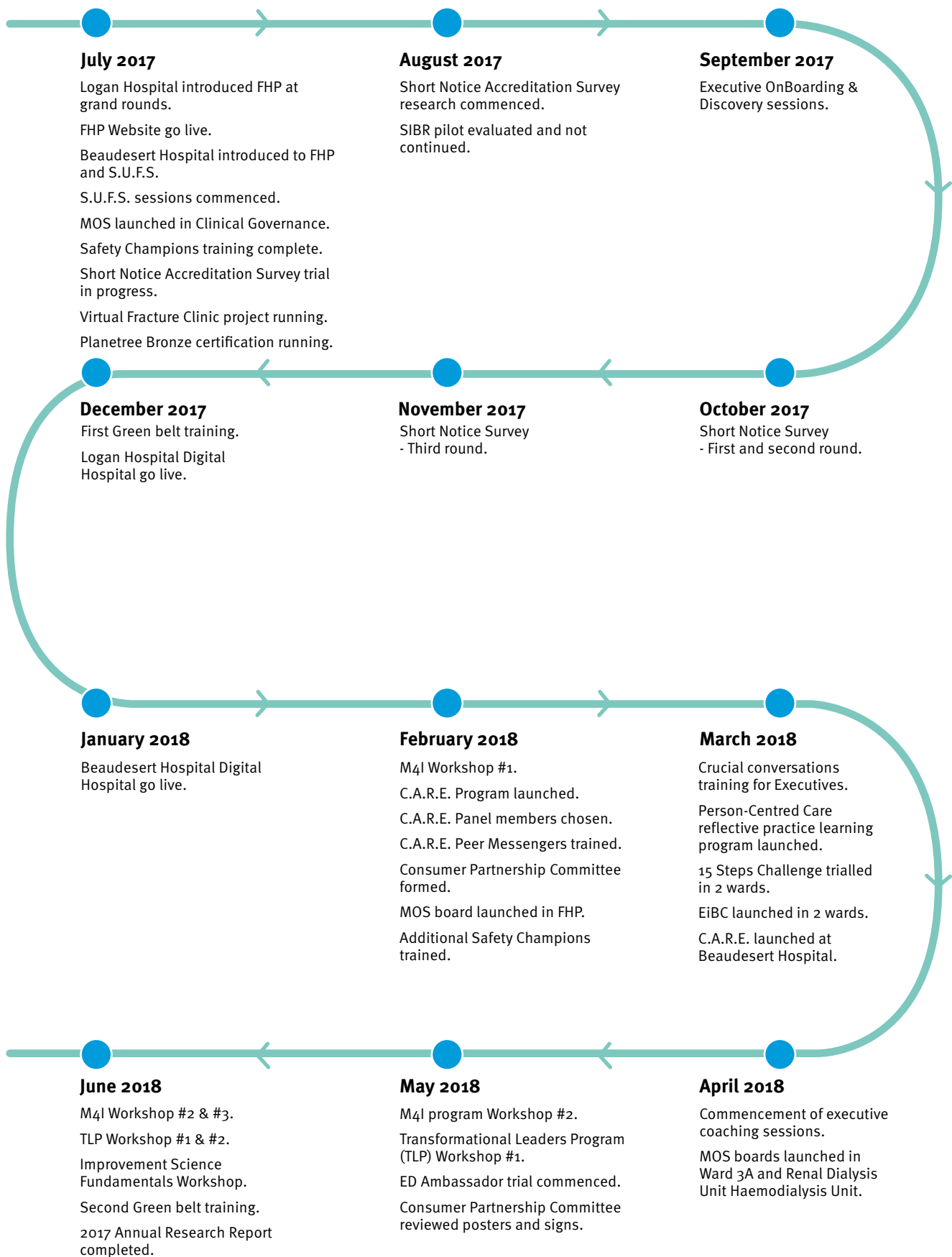
Who wants to come along?

# The Future Hospital Program 2017-2018

## Key Milestones

### Acronym definitions

C.A.R.E.	Civility And Respect in Everything
EiBC	Excellence in Bedside Care
FHP	Future Hospital Program
M4I	Management 4 Improvement
MOS	Management Operating System
S.U.F.S.	Speaking up for Safety
SIBR	Structured Interdisciplinary Bedside Rounds
TLP	Transformational Leaders Program







Logan Hospital



Beaudesert Hospital

## Background

The ability to deliver high reliability and high quality care within a constrained budget is confronting for healthcare in the 21st century. Despite an ever increasing proportion of GDP being spent on healthcare there has been little impact on unacceptable levels of preventable patient harm. This fact alone demands a systems level revision of our models of care.

In 2014, the Australian Bureau of Statistics estimated that the Logan and Beaudesert region will experience a population growth rate of 3.9% per year until 2026/27. In contrast, the population growth rate for Queensland is estimated at 1.9% annually over the same period. Metro South Health (MSH) and particularly Logan and Beaudesert Hospitals (LBH), is cognisant of the need for capital works to meet the demands of the local community and to remain able to deliver high quality care to our population.

After comprehensive exploration of other healthcare organisations (including site visits to Auckland District Health Board, Canterbury District Health Board, NSW Clinical Excellence Commission and Melbourne Health), a review of the literature on best practice health innovation, and a stocktake of existing projects/initiatives in progress within

our organisation, the Future Hospital Program (FHP) concept was designed and developed. The FHP aims to transform Logan and Beaudesert Hospitals into national leaders in innovative healthcare provision through five strategic priority areas:

- Safety and Reliability;
- Workforce Capability;
- Person-Centred Care;
- Research and Innovation; and
- Quality Improvement.

The Logan and Beaudesert Hospital Executive and Metro South Health Chief Executive endorsed the initial concept and work commenced on further developing the strategy. It was acknowledged early on that the program of work could not be achieved alone and for this reason, a proposal was put forward to Queensland Health Clinical Excellence Division (CED) to partner with LBH to execute the FHP vision. CED has made a commitment to the partnership through financial and in kind support.

LBH is in the early stages of its journey with significant efforts put on developing a vibrant culture of safety, positivity and staff capability in the application of improvement science.



# The Future Hospital Program Team



The FHP Team will support and enable the hospital transformation by:

- Developing the supporting frameworks, systems and processes that will support and enable clinicians to turn their improvements ideas into action;
- Facilitating, coordinating and supporting the clinicians to successfully implement sustainable change initiatives;
- Providing expertise and training on quality improvement to build capacity and capability within our workforce.

**Dr Brian McGowan**  
Senior Clinical Lead

**Branko Vidakovic**  
Operational Lead

**Debashish Biswas**  
Improvement Specialist

**Michelle Reardon**  
Principal Improvement Officer

**Kellie Sosnowski**  
Research and Innovation Associate

**Vladimir Matus**  
Business Performance Manager

The use of industry experts in clinical redesign and improvement science will assist with creating a critical mass of knowledge and expertise and will ensure that sustainable change is achieved.

A key component of the FHP transformation and one that we believe is critical to the success of the program is the empowerment of our clinicians to drive the change. It is important that clinicians are supported to engage in quality improvement initiatives that will drive clinical redesign, improved service delivery and models of care in line with evidence-based best practice.

**Cheryl Wardrope**  
Planetree Coordinator

**Vesna Hunter**  
Program Manager, Culture and Capability Advisor

**Hailie Uren**  
Senior Project Officer

**Lisa Provan**  
Program Support Officer

**Renee Dickens**  
Principal Communications & Media Manager

# Vision & Mission

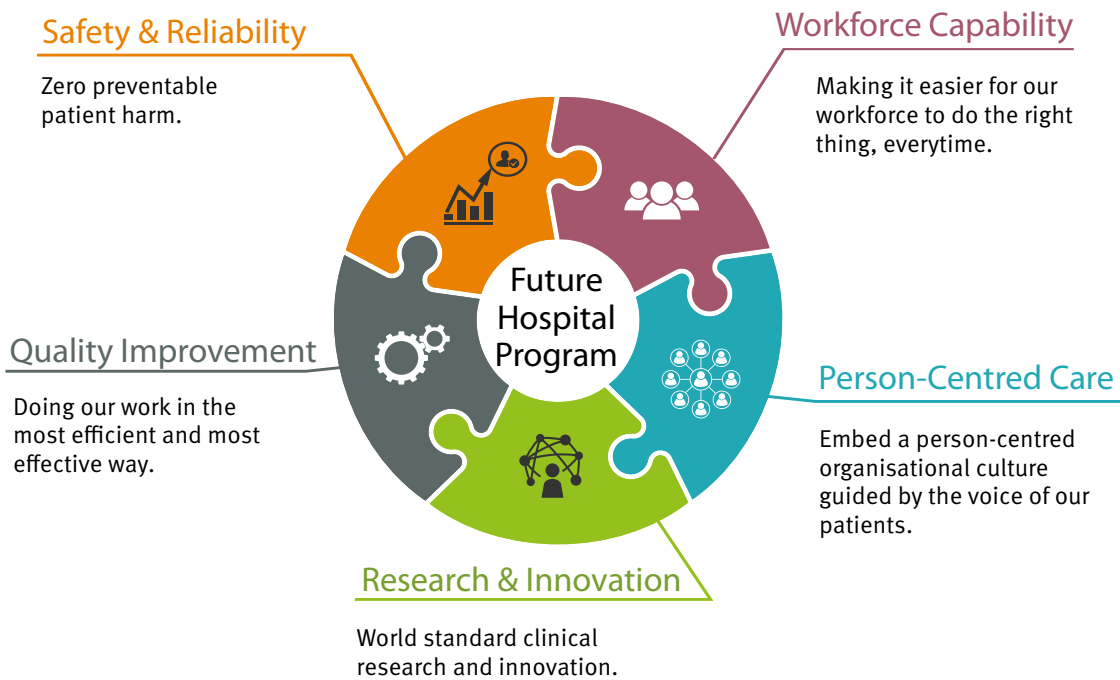
Through the Future Hospital Program, we aim to *Lead, Transform and Excel* in the delivery of healthcare with the mission to:

- deliver safer and kinder care,
- become the beacon for clinical excellence, and
- be nationally recognised for innovation and excellence in person-centred care, education and research.

Our vision aligns with the Department of Health Strategic Plan 2016-2020 and its vision 'Healthier Queenslanders', the Metro South Health Strategic Plan 2015-2019 and the Metro South Health Clinical Governance Strategic Plan 2015-2020.

The FHP has adopted a strategic approach to ensure all decisions are aligned with the strategic plan and the investments made to maximise return. This includes clearly defined strategic and tactical

processes as well as a roadmap, outlining how the different strategies would be executed in the short, medium and long term with the required resources.





**The aim is to develop Logan  
and Beaudesert Hospitals  
into Beacon Hospitals.**



# Safety & Reliability Strategic Priority

This strategic priority will provide the platform for delivering safer and more reliable care. The ultimate goal within this area is to achieve no preventable patient harm by adopting a safety culture and through the utilisation of Digital Hospital technology to access real-time patient information and data.

## Goal

To achieve no preventable patient harm and be recognised as a High Reliability Organisation.

## Objectives

Create a robust and mature safety environment underpinned by the five characteristics of a High Reliability Organisation.

## Indicators of success

- Zero preventable patient harm.
- All 'mission critical' safety factors consistently achieve a reliability score of  $10^{-2}$ .
- Optimising Digital benefits.



# Safety & Reliability Initiatives

## Digital Hospital Implementation

Digital Hospital is one of the largest investments made by Queensland Health in improving the quality of healthcare for our patients.

Digital Hospital is the first initiative designed as the foundation to support improvement in reliability, and was implemented collaboratively between the eHealth Queensland, Metro South Clinical Informatics Digital Hospital teams and frontline clinicians.

From November to mid December 2017, Logan and Beaudesert Hospitals introduced:

- The integrated electronic Medical Record (ieMR) system which changed the way clinicians access patient information, replacing a predominantly paper-based system with a secure electronic record.
- MARS (Medication, Anaesthetics, Research and Support) module of the ieMR.

Digital Hospital is focused on improving patient safety and quality of care by providing the right information, at the right place, at the right time.

The introduction of Digital Hospitals has laid the foundation to implement further safety initiatives and support Logan and Beaudesert Hospital on its journey to becoming a high reliability organisation.

Examples of these initiatives included the introduction of high risk medication dashboards and the management of deteriorating patients dashboard that will support the teams in improvement of reliability of care in these areas.

The Metro South Health Healthcare innovation and transformation Excellence Collaboration (HITEC) in collaboration with Logan and Beaudesert Hospital teams are in the process of developing further 'live' dashboards that will continue to support improvement in reliability and safety of patient care.



Board Chair's Awards, Special Mention - Logan Hospital Pharmacy Department



# Safety & Reliability Initiatives

## Civility and Respect in Everything (C.A.R.E.) Program

LBH have partnered with the Cognitive Institute to improve our safety and reliability in our delivery of healthcare. The C.A.R.E. Program works hand in hand with the "Speaking Up For Safety" message. It provides a platform for people to give feedback to their colleagues who have championed or undermined a culture of civility, respect, professionalism and safety. The C.A.R.E. Program is based on the Vanderbilt Accountability model.

We are trying to achieve:

- an overall civil and respectful environment for our staff and patients alike.

- improved self-regulation through vigilance of professionalism and safety.
- an established and reputable safety culture in the organisation.
- a reduction in preventable patient harm through increased staff adherence to organisational safety protocols.
- increased reliability in various targeted safety metrics.

The program was launched in February 2018.

## OUTCOMES

17 

Panel & Peer Messengers identified & trained

 48

C.A.R.E. Feedback submissions

24 

Peer messenger feedback conversations

6  Leaders trained

57  In-services performed





# Safety & Reliability Initiatives

## Speaking up for Safety (S.U.F.S.) Program

In partnering with Cognitive Institute, Logan and Beaudesert hospitals have introduced Safety Champions to support teams in safety and reliability. Our goal is zero preventable patient harm in our hospitals.

Trained Safety Champions are providing training to all staff of Logan and Beaudesert hospitals. Speaking up is an expectation from all staff where potential compromises to patient safety are identified.

### OUTCOMES



**20%**  
of workforce trained in  
**SPEAKING UP FOR SAFETY**

**17**

**SAFETY CHAMPIONS**  
identified & trained

## Logan Hospital's Safety Champions

**Introducing Logan and Beaudesert Hospital Safety Champions**  
By 2022 we're aiming to have NO preventable patient harm in our hospitals, so we're making a start with new initiatives NOW to help us get there.  
Over the last 5 months, you may have had the opportunity to sit in and see the "Speaking Up for Safety" presentations delivered by you or by all our Safety Champions.  
This initiative has been developed by our partner the "Cognitive Institute" for Champions.  
• Advance culture change within healthcare organizations by increasing the ease and evolution for our every one of our staff to "speak up for safety".  
• Develop insights and skills to respectfully raise issues when they are concerned about a patient's safety.  
If you're not 1 of the 2022 staff members already trained, never fear, you won't miss out! Our future Champions are interested in becoming a Safety Champion.

**DR ANNA HALLETT**  
STAFF ANAESTHETIST  
Why being a Safety Champion is important to you? What impact would you like to have?  
I believe that we are all part of a single team working together to provide the highest standard of care for our patients. This is why I want to be a Safety Champion, spreading the message that working together, with mutual respect for the different qualities that are indispensable for the best care, is the key to our success. As a result...

**DR MAHESH SAINANI**  
EMERGENCY MEDICINE  
What impact would you like to have as a Safety Champion?  
I have a great belief in the power of teamwork. Our patients and staff are our focus and we work together to ensure the best outcomes for our patients. I believe that our staff are the key to our success. As a result...

**DR PRASAD CHALLA**  
DIRECTOR OF CARDIOLOGY  
Why is being a Safety Champion important to you? What impact would you like to have?  
I had a personal experience with a near miss which impacted my decision to become a Safety Champion. The near miss that I have been exposed to are easily avoidable if the proper safety and quality checks have been followed.  
Since becoming a Safety Champion, I have had the opportunity to help colleagues practice safety and create a culture where issues of patient safety can be respectfully raised. Achieving a culture where safety and quality is part of everyone's job is important to ensuring the safe care for our patient's.

**Meet more Safety Champions**  
Logan and Beaudesert hospitals have introduced Safety Champions to support teams in safety and reliability.  
By 2022 we're aiming to have NO preventable patient harm in our hospitals, so we're making a start with new initiatives NOW to help us get there.  
Trained Safety Champions will be presenting to EVERY SINGLE staff member of Logan and Beaudesert hospitals by the end of 2022 so we...

**DR ANNA HALLETT**  
STAFF ANAESTHETIST  
Our main focus remains the safety of our patients.  
Why is being a Safety Champion important to you? What impact would you like to have?  
I believe that we are all part of a single team working together to provide the highest standard of care for our patients. This is why I want to be a Safety Champion, spreading the message that working together, with mutual respect for the different qualities that are indispensable for the best care, is the key to our success. As a result...

**MEET MORE SAFETY CHAMPIONS**  
Logan and Beaudesert hospitals are introducing their new Safety Champions to support teams in safety and reliability.  
By 2022 we're aiming to have NO preventable patient harm in our hospitals, so we're making a start with new initiatives NOW to help us get there.  
Safety Champions, with the "Cognitive Institute" have held sessions addressing how to achieve culture change within healthcare organizations by increasing the ease and evolution for our every one of our staff to "speak up for safety" and developing insights...

**SALLY PORTER**  
DIRECTOR OF PHARMACY  
Why being a Safety Champion is important to you? What impact would you like to have?  
Patient safety is at the heart of everything we do in health care and I believe that we are all part of a single team working together to provide the highest standard of care for our patients. This is why I want to be a Safety Champion, spreading the message that working together, with mutual respect for the different qualities that are indispensable for the best care, is the key to our success. As a result...

**Who are our Safety Champions?**  
Safety Champions are leaders of safety and reliability in the organization. The team brings experience and personal perspective on safety and quality improvement issues and have abundant willingness to coach and support teams and individuals in safety and reliability improvement.



# Safety & Reliability Initiatives

## Speaking up for Safety (S.U.F.S.) Program

*Dr Anna Haffett*

- Staff Anaesthetist

“I believe that we are all part of a single team working together to provide an excellent standard of care for our patients. This is why I was keen to be a Safety Champion, spreading the message that working together, with mutual respect for the different qualities that we individually bring to patient care, is the key to our success.”

*Darren Clark*

- Nursing Director Medicine

“Patient safety is a long-term passion for me and my career goal is to work in an organisation where no avoidable harm occurs.

In a culture of safety, everyone benefits, most importantly our patients but also all our staff.

I believe Logan has all the right ingredients to be world-leading in this area.”

*Darren Hassen*

- Nurse Unit Manager,  
Children’s Inpatient Unit

“I believe as members of the health care professions we come into people’s lives for a short time when they themselves, a family member or someone close to them are vulnerable due to ill health. These people depend on us to ensure that they are cared for safely, with skill and then returned to their lives.”

*Dr Nick Shortt*

- Staff Specialist Orthopaedics

“I want to make people realise we are all responsible for patient care and safety. We work in the ultimate team environment and the culture of hierarchy needs to be dismantled. All our goals are the same, we bring different levels of experience and expertise to the care of our patients. That all needs to be considered and respected.”

*Dr Prasad Chaffa*

- Director of Cardiology

“Since becoming a Safety Champion I have had the opportunity to help colleagues practice safety and create a culture where issues of patient safety can be respectfully raised. Achieving a culture where safety and quality is part of everyone’s job is important to ensuring the safe care for our patient’s.”

*Sally Porter*

- Director of Pharmacy

“Patient Safety is at the heart of everything we do in health care and central to my training as a pharmacist. Working in an organisation where there is a culture of ‘having each other’s back’ and staff are comfortable and supported to ‘speak up’ is the kind of place I want to work and where I would recommend people come to receive care.”



# Safety & Reliability Initiatives

## Reliability Science Training

In partnership with Cognitive Institute, Logan and Beaudesert Hospitals are increasing the reliability and safety of healthcare delivery by maximising the chances of optimum patient outcomes and reducing the risks to clinicians and healthcare organisations of complaints, claims, adverse publicity and accreditation or regulatory body censure.

Reliability science is used to design systems that compensate for the limits of human ability and can improve safety and the rate at which a system consistently produces desired outcomes.

The workshops held by Cognitive Institute empowers healthcare leaders to examine and enhance the modes of healthcare delivery utilised within their team or unit by applying the science of reliability, with the aim to improve systems to perform at a  $10^{-2}$  level of reliability and beyond.

### OUTCOME



# 148

RELIABILITY SCIENCE  
PARTICIPANTS  
Training in progress



Reliability Science participants



# Workforce Capability Strategic Priority

This strategic priority is underpinned by organisational culture. We aim to create a positive culture that empowers and enables our staff to deliver their very best work. The focus will be on creating capacity and building capability of staff through education and training that supports our future vision and equips staff with the required tools and resources to do their job within a rapidly changing work environment.

## Goals

To develop and enhance our workforce skills and abilities to meet future hospital needs.

## Objectives

Create capacity and build capability of staff through three key areas and enablers of successful performance – leadership, strategy and delivery.

## Indicators of success

- Improved workforce satisfaction - “I love working here”
- Staff provided with the appropriate skills to remain agile and responsive.

# Workforce Capability Initiatives

## Manage 4 Improvement

The Manage 4 Improvement (M4I) program is aimed at Clinician Managers and Supervisory roles.

M4I focuses on the integration of leadership, management and improvement science to support successful implementation of organisational change and system improvements.

M4I sessions provide training on:

- Understanding the broader healthcare environment and funding arrangements
- Leading and managing change
- Quality and service improvement
- Improving and evaluating health service delivery
- Finance and budget management
- Effective stakeholder engagement
- Conflict management
- Strategic influencing
- Political astuteness
- Leading, motivating and inspiring staff.

## OUTCOMES



**24** STAFF COMPLETED  
M4I TRAINING  
PROGRAM

### Improvement Projects commenced

- Benchmarking Medical Imaging Nurses
- Refined Onboarding process for commencing Nursing staff at Logan Emergency Department.
- Improving time to transfer of admitted ED patients to inpatient wards post ward bed allocation.
- Increasing patient activity levels on the Rehabilitation ward.
- Patient perspectives on pre-operative information (PPPI)

### Participant Feedback

**96%**

rated the program as excellent or good

**74%**

said their leadership and management skills were enhanced

**78%**

believe their current role and career have benefited

- Practically very relevant to my current job and when acting for my boss. Gave us lots to think about and a few things to act upon on our return to work.
- This workshop was fantastic and very relevant to my role.



Manage 4 Improvement participants

- This will improve time to meaningful treatment and length of stay in the department. We also anticipate an improvement in patient and staff satisfaction.
- Improved resilience, retention and engagement of nursing staff in the workplace.



# Workforce Capability Initiatives

## Transformational Leaders Program

The Transformational Leaders Program is aimed at Clinical Directors and Nurse Unit Managers (NUMS).

Transformational Leaders Program focuses on building transformational leadership capabilities to create and drive sustainable positive change.

The program aims to enhance staff morale and motivation and inspire change driven by a strong purpose to create a culture of trust and innovation within LBH.

### OUTCOMES

 **32** STAFF COMPLETED TRANSFORMATIONAL LEADERS PROGRAM

#### Participant Feedback

**92%**

rated the program as excellent or good

**42%**

said their leadership and management skills were enhanced

**50%**

believe their current role and career have benefited

- Thoroughly enjoyed. Always seeking ways to improve myself and my skills to assist staff to fulfil their potential.
- I have already found myself utilising the evaluation part of the framework to assess different situations. I would endorse this training being utilised wider, especially at the middle management level where these skills would greatly benefit those most confronted with these types discussions. Thank you for enabling this training.



“The workshop was a great chance to meet colleagues that I have never met before and interact with them towards common skill development. Overall, it was a very helpful, hands-on workshop.”

- Dr Prasad Challa, Director of Cardiology

“

What a fantastic, hands-on experience. No time to 'zone out' thanks to the engaging facilitators and relevant content. I learnt about my own personal leadership style and the importance of being part of a high performing team.

- Kim Dean, Senior Administration Officer Medical



“This workshop exceeds previous workshops I have attended thanks to the mixed multi-disciplined attendees. I enjoyed the days thanks to a good mix of theory and practical teachings.”

- Marjoree Sehu, Infectious Diseases Physician and Clinical Microbiologist



Transformational Leaders Program participants

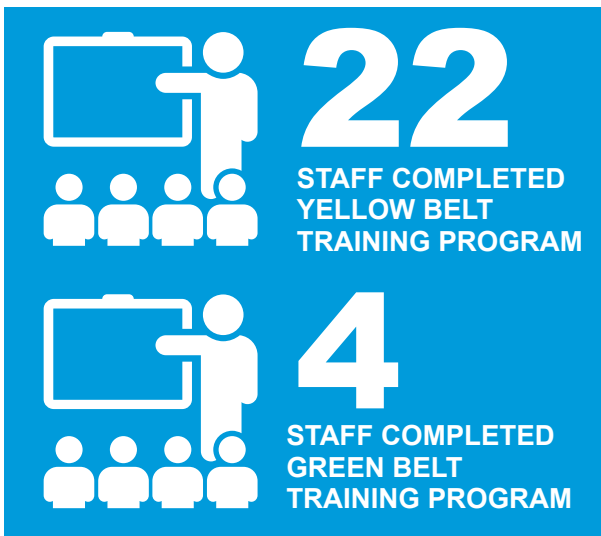
# Workforce Capability Initiatives

## Improvement Science Training

The Improvement Science Training aims to build a foundation of knowledge at multiple levels of the workforce. A tiered approach applies to differing

levels of knowledge and expertise with the aim to integrate concepts of improvement science at all levels.

### OUTCOMES



**Green belt training**  
A review on future provider will be required.

- This was one of the most beneficial courses I have attended with actual outcomes I can relate to.
- It can be implemented in our department.
- I will use what I have learnt in my workplace. Great for the future direction of the hospitals.

## Human Factors

Systems Thinking Learning Lab sessions are aimed at introducing contemporary ideas in safety, quality and systems improvement to the workforce. These sessions included Systems thinking and Practical Human Factors.

System Thinking introduces concepts and principles through a range of case studies, interactive games and group work.

Practical Human Factors introduces human factors engineering and its critical role in healthcare improvement by participants exploring a range of ways in which human factors influence how we deliver healthcare. Participants are also exposed to useful tool that they can immediately utilise in their day-to-day systems improvement decisions.

### OUTCOMES



# Workforce Capability Initiatives

## Executive Onboarding

The Executive Onboarding initiative was designed to enhance our executive's leadership skills in order to set the vision of the Future Hospital Program and to positively influence our staff on the transformational journey.

This included training and coaching on the following:

- FHP strategy and vision and what is required by Executive for success of FHP.
- Why influence is one of the most powerful and important capacities a leader can possess.
- What do successful influencers do that separates them from the rest?
- Role-modelling behaviours/professional accountability.
- Strategic vs Operational Planning.

## OUTCOMES

**18** PARTICIPANTS  
ATTENDED CRUCIAL  
CONVERSATIONS  
Training

**88** PERSONAL  
COACHING SESSIONS  
for Executives

### Support for Executives

Regular individual executive coaching over a 12 month period are held to continue to develop, guide and support Executives including a group session.

### Participant Feedback

**100%** rated the program as excellent or good

**82%** said their leadership and management skills were enhanced

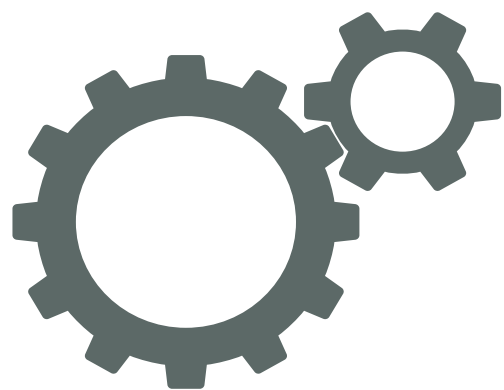
**82%** believe their current role and career have benefited

### Executive Onboarding & Discovery Session

Evaluation pending.

- Excellent workshop and I very much enjoyed discovering my leadership capabilities.
- The course was well structured with different activities and discussion opportunities. The content was relevant and well presented. There were excellent networking opportunities and the presenters were approachable and helpful. There was variety in the manner that the information was presented. Good examples were also presented. Would have no hesitation recommending this course.





# Quality Improvement Strategic Priority

This strategic priority will provide the tools and techniques to make it easier to improve care using a defined improvement methodology. This area will explore evidence-based practice models that will allow us to pilot new models of care and innovations that will define Logan and Beaudesert Hospitals as leaders in quality improvement across Australia.

## Goals

To embed a culture of continuous quality improvement through the use of best practice methodologies.

## Objectives

Implement changes that will lead to better patient outcomes, better system performance and better professional development.

## Indicators of success

- Staff trained in improvement science.
- Staff have access to improvement experts.
- Staff finding it easier to leverage Digital data to improve care.

# Quality Improvement Initiatives

## Excellence in Bedside Care (EiBC)

Future Hospital Program is aiming to achieve a systematic way of delivering safe, high quality care to patients across all clinical areas. We will be using a proven platform, in an accelerated approach to achieve this goal.

The program is known as Releasing Time to Care (RT2C) and is an advanced component of the Productive Ward Series. The philosophy behind the program is to help front-line clinicians release time to care through reduction of 'waste' and 'overwork'. By adopting the program, it has been proven that front-line staff can significantly increase the proportion of time they spend directly with patients and improve outcomes across four key areas:

1. Improve patient experience.
2. Improve efficiency of care.
3. Improve staff well-being.
4. Improve patient safety and reliability of care.

The program provides a structured framework, built on improvement science, that will assist the wards and units to deliver the changes they want to see. It provides the staff with both the permission and the skills to make improvements to the clinical workplace, whilst making it easier to do their job. The program will be supported by the Future Hospital Team and a suite of tools that will be an ongoing resource for continuous improvement.

### Excellence in Bedside Care

An integrated package of Productive Ward and MOS. World First trialling on digital platform.

**TARGET: 60%** DIRECT CARE TIME IN NURSING

### LAUNCHED IN 2 PILOT WARDS

Ward 3A and Renal Dialysis Unit (haemodialysis)



I have been part of the EiBC steering committee in my role as Divisional Director for Medicine and Emergency. I have been hugely impressed as to how the whole project has been run. On a more operational level I have been delighted with the positive changes made in Ward 3A and the Renal Dialysis Unit, that have embraced the project with great enthusiasm and passion. This has led to obvious improvements that will positively impact on patient care.

- **Dr Brian Wood, Director Medicine & Emergency Services**

The highlights of EiBC Leadership Rounding is getting to know the executive team and feeling like they are aware of the issues we face and also receiving feedback from them on our issues.

- **Staff survey feedback**

EiBC Leadership Rounding is great for putting a face to the name - not being as daunted by the person when I see they're actually interested in my ward area.

- **Staff survey feedback**



# Quality Improvement Initiatives

## Management Operating System (MOS)

MOS is a systemic approach that incorporates the use of visual management boards, daily/weekly huddles and various lean management tools and methods to help deliver the best outcomes for our patients and staff by solving problems that are encountered at the frontline and in all areas of the organisation.

It is one of the key initiatives that we are deploying as we work towards embedding a culture of continuous improvement in our organisation; by moving problem solving away from the desk of the manager or team leader and empowering our staff to lead and undertake continuous improvement.

### OUTCOMES



**6** MOS Boards Implemented  
(RDU x 2, Ward 3A, FHP, CGU & Division of Surgery)

DD KEY



**127** HOURS SAVED Per Year  
~17 Working Days



The introduction of the new intercom **SAVES WARD 3A STAFF 4732km PER YEAR (946 HOURS PER YEAR)**



RENAL DIALYSIS UNIT patient flu vaccination rate **30% → 70%**



**9** Additional areas have requested MOS Boards

Daily management and performance monitoring.

Enabler of quick win improvements.



Renal Dialysis Unit's MOS Board



Renal Dialysis Unit's MOS Board session

Sharing our positive outcomes is great. Identifying concerns in the unit, bringing it to the attention of most staff concerned and coming up with strategies to resolve these concerns. MOS has also been a great communication tool for our unit.  
- Staff survey feedback

MOS is a great communication tool and I love that it has opened up communication between us and the hospital's executive.  
- Staff survey feedback

# Quality Improvement Initiatives

## Hospital Acquired Pressure Injuries

This project is aimed at reducing the number of late stage pressure injuries occurring at Logan and Beaudesert hospitals year over year. It supplements the work that has been started in mid-2017, looks at addressing the root causes of the late stage pressure injuries, and implement changes and interventions that are sustainable. The project has been facilitated by the Future Hospital Program with involvement in data analysis, root cause analysis and solutions identification by the frontline staff. Some of the solutions that have come out of the project team have been a redesigned equipment

hire process and pressure injury monitoring form, use of NUM/MUM dashboards to monitor timely skin assessments, training of frontline staff on pressure injury staging and clinical incident reviews.

Through the work that has been put in and increased visibility of the importance and management of pressure injuries, Logan and Beaudesert Hospitals have already seen a 59% decrease in pressure injuries in 2017-18 compared with 2016-17.

## OUTCOMES

**2016/2017**      57 Coded HAPI → \$1.29M in penalties  
                          43 True HAPI

**2017/2018**      19 HAPI → \$570K in penalties

**59% reduction in true HAPI      = \$720K SAVINGS in penalties**

- Team learning LEAN improvement methodology.



# Quality Improvement Initiatives

## Short Notice Survey (SNAAP)

LBH are undertaking a pilot in a short notice survey accreditation process, with the new accreditation cycle commencing 1 August 2017. This pilot is run in partnership with the Australian Commission on Safety and Quality in Healthcare (ACSQH – the Commission), the Australian Council on Healthcare Standards (ACHS – the Accreditation Agency), Queensland Health and Wide Bay HHS.

This change in accreditation process has been proposed to move the organisation to a state

of continual readiness for accreditation and continual quality improvement. The Short Notice Survey process aims to ensure quality standards are embedded in to the day-to-day operational responsibility of every employee.

This initiative will contribute to improving safety and reliability across the hospital.

## OUTCOMES

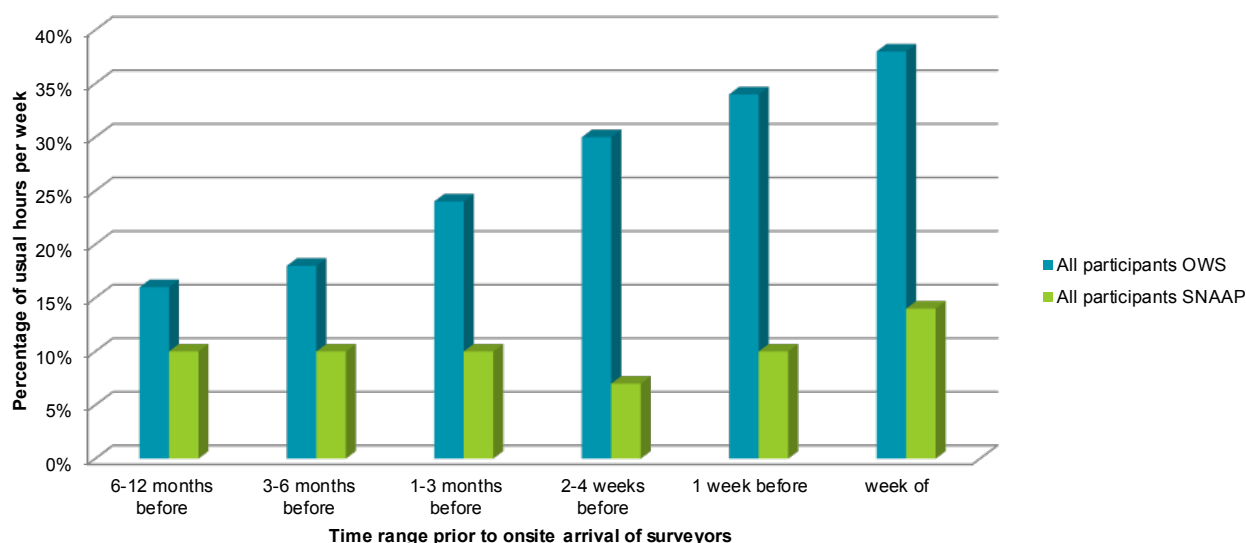
Quality Care Everyday philosophy - an Australian first pilot.

**94% OF PARTICIPANTS SAY SNS IS BETTER**

**50% REDUCTION IN FTE REQUIREMENT**

Short Notice Survey will be available nationally from 2019

Percentage of day spent preparing for accreditation





# Quality Improvement Initiatives

## Short Notice Accreditation Survey (SNAAP)

**Logan Beaudesert pilots Short Notice Survey accreditation process**

Logan and Beaudesert hospitals will pilot a "Short Notice Survey" accreditation process, with the new accreditation cycle commencing on the August 1.

The pilot, in partnership with the Australian Commission on Safety and Quality in Health Care (ACSQHC) – the Quality in Health Care (ACSQHC) – the on Health Care Standards (ACHS) – the Health and Well-being (HWS), was proposed to move the organisations to a state of continual readiness for accreditation, rather than the current accreditation process which was reflective of an event management approach.

Director Clinical Governance Branko Vidakovic said the Short Notice Survey process aimed to ensure quality standards were embedded into the day-to-day operational responsibility of every employee, rather than a select few charged with getting the organisation ready for accreditation.

**The four year accreditation cycle under the "Short Notice Survey" process would consist of the following:**

- Two ACHS assessments a year, with selected standards will be assessed each time;
- National Standards 1, 2 and 3 and the mandatory criteria for EQIP standards 11-15 will be assessed twice in the 4 year accreditation cycle.

Other standards will be assessed once in a four year cycle.

The organisation will be contacted 48 hours prior to the accreditation body arriving onsite. The list of standards to be assessed during this survey will also be given at this time.

Under the pilot process, the hospital has up to 30 days following the survey to provide additional information to the survey team in response to the queries made during the process. This supports the philosophy of continuous improvement and moving away from pass/fail approach to accreditation.

The process for serious clinical risk identified during the survey will not change under the pilot. The accreditation agency has the obligation for additional visits or escalation of issue if serious concerns are identified.

Click here to visit the Logan and Beaudesert Hospital's National Safety and Quality Health Service Standards QHSPS page for resources to help you be continually ready for accreditation.

Contact: LBNClinicalGovernance@health.qld.gov.au or Branko Vidakovic on 3299 8697.

**Short Notice Survey. Are you ready?**

**Kellie's tips to get survey ready**

We have been ready for survey since the last survey with no lapse in the way we maintain quality in the unit.

- We hold a multidisciplinary ICU quality meeting every 4 months.
- Each Clinical Nurse and a group of Registered Nurses hold a portfolio aligned to a Standard within the NSQHS Framework.
- Audits are continually performed within the standards by the Clinical nurses, deficiencies are identified and a "Plan Do Check Act" approach is taken to rectify issues.
- Every 3 months, the Clinical Nurses provide an audit related to their standard which is displayed on the performance board.
- A Clinical Nurse holds the "Performance Board" portfolio. The Performance Board is updated by the Clinical Nurse Lead, the NUM and the ICU Nurse Educator every 3 months.
- All staff (including multi-disciplinary staff) are familiar with the board.
- We aim for the formal audits performed by CSCT every 6 months to be perfect.

Quality is a regular part of our daily practice in the unit.

Click here to visit the Logan and Beaudesert Hospital's National Safety and Quality Health Service Standards QHSPS page for resources to help you be continually ready for accreditation.

**2G MAPU/Palliative Care Unit surveyor ready**

**CS**

We are able to display the audit results in our limited environment.

She said the team appreciated the positive feedback from the patients and their families regarding the high standard of the accommodation in the new location.

"The staff are managing in the new unit and with the evolving changes that we are experiencing with Digital Hospital implementation and education.

"There is excitement, fear and high anticipation of the implementation of Digital Hospital, Planeteve and Future Hospital.

"Returning to our much loved 2G is something we are all looking forward to at the end of October."

**What do staff in MAPU/Palliative Care plan to do when Short Notice Surveyors arrive?**

Welcome them, explain why we are in the current location. It is business as usual and the MAPU and Palliative Care Multidisciplinary team continues to provide safe patient centric care.

NUM Marg Fisher said despite not having their performance boards on display, the team continued to review the audits and devise plans to improve patient outcomes.

"We are able to display the audit results in our limited environment."

**Short Notice Survey Accreditation pilot research**

As you're all aware, Logan and Beaudesert Hospitals are piloting the Short Notice Survey Accreditation Process.

As one of only two HHS in Australia to have this opportunity, Australia-first research will be conducted to evaluate whether the new process is better or Staff who have participated in accreditation preparation previously would have received an email on October 4, inviting you to complete an online questionnaire to share your views and experiences of accreditation processes in the HHS.

Your responses will then be compared to other data gathered during the pilot. To help evaluate the pilot, it is very important staff have their say on your experiences of accreditation. So, if you have not yet completed your questionnaire, please do so. The questionnaire will close 5:00 on Wednesday, 16 February 2018.

If you have not received an email, or may have deleted it, please email Hailey Uren Inyter from the Future Hospital Program (Hailey.uren@health.qld.gov.au) to receive the questionnaire.

Your level of involvement in accreditation processes may have been high or low, we encourage your perspective is valuable!

We encourage you to complete as much of the questionnaire as you can. Thank you for everyone's efforts in making this exciting pilot a reality, we look forward to seeing the outcomes from this research!

**Logan-Beaudesert passes Short Notice Survey with flying colours**

Logan-Beaudesert has passed the Short Notice Survey with flying colours after the last week as the first to pilot a program that gives 48 hours notice of accreditation.

ALBNH Executive Director Lorraine Stevenson said every two years Logan-Beaudesert open their doors to the external assessment process of accreditation against the 10 National Safety and Quality Health Service Standards and the EQIP National Standards.

Ms Stevenson said Logan-Beaudesert's last survey in 2015 saw both facilities assessed as performing extremely highly with no recommendations made and no accreditation continued for the next 4 years, with a periodic Review in 2 years.

She said as part of the Future Hospital Program, Logan-Beaudesert, in collaboration with the Clinical Excellence Division, Australian Commission on Safety and Quality in Health Care and the Australian Council on Health Care Standards (ACHS) has led the way in Australia by being part of a pilot program with accreditation occurring with 48 hours notice.

"This is only possible because of the commitment of staff to Logan Beaudesert's sound systems and processes that underpin the facilities' excellence in care delivery and outcomes."

"We had our first survey and passed with flying colours and then the survey was returned for a second short notice survey of different standards and again, no recommendations, and again, no recommendations, and again, no recommendations, and again, no recommendations."

"What an amazing result. Well done and thank you everyone."

For more information, please visit the Logan and Beaudesert Hospital's National Safety and Quality Health Service Standards QHSPS page for resources to help you be continually ready for accreditation.

Contact: LBNClinicalGovernance@health.qld.gov.au or call Branko Vidakovic on 3299 8697.

**Short Notice Survey Exclusion Period is Ending!**

To ensure the successful implementation and coordination of Digital Hospital, Logan and Beaudesert Hospital requested an exclusion period for the Short Notice Survey. This exclusion period meant that our facilities were not available for Short Notice Survey Assessment between Monday 6 November 2017 to Friday 16 February 2018.

After 16 February, the Short Notice Survey Pilot will be reinstated. The organisation will be contacted 48 hours prior to the accreditation body, The Australian Council on Health Care Standards arriving onsite, and the list of standards to be assessed during this survey will also be given at that time.

Simon Fraser (Standard 2), Aby Foster (Standard 3), Fiona Fuller (Standard 7), and Sally Porter (Standard 4) were the first of our standard leads to participate in the pilot, and have provided some insight on what the 48-hour notice meant for them in Issue 2, 2018 of The Pulse. These recaps should reassure those of you who will be receiving your own 48-hour notice in 2018.

For more information, please visit the Logan and Beaudesert Hospital's National Safety and Quality Health Service Standards QHSPS page for resources to help you be continually ready for accreditation.

Contact: LBNClinicalGovernance@health.qld.gov.au or call Branko Vidakovic on 3299 8697.

# Quality Improvement Initiatives

## Virtual Fracture Clinic

The introduction of a multidisciplinary Virtual Fracture Clinic at Logan Hospital is seeing real time savings for patients and the orthopaedic outpatient department for minor bone injuries of the hand, wrist, foot and ankle. The model has been developed to reduce the amount of time patients need to spend coming to clinic, reduce the

administration around clinic bookings, and provide a more effective treatment option for patients with direct referrals to Allied Health Rehabilitation for their particular injury.

This initiative contributes to our quality improvement goal of always aiming to improve.

## OUTCOMES

New patient-centred model of care resulting in significant saving and better patient care.

Approx.

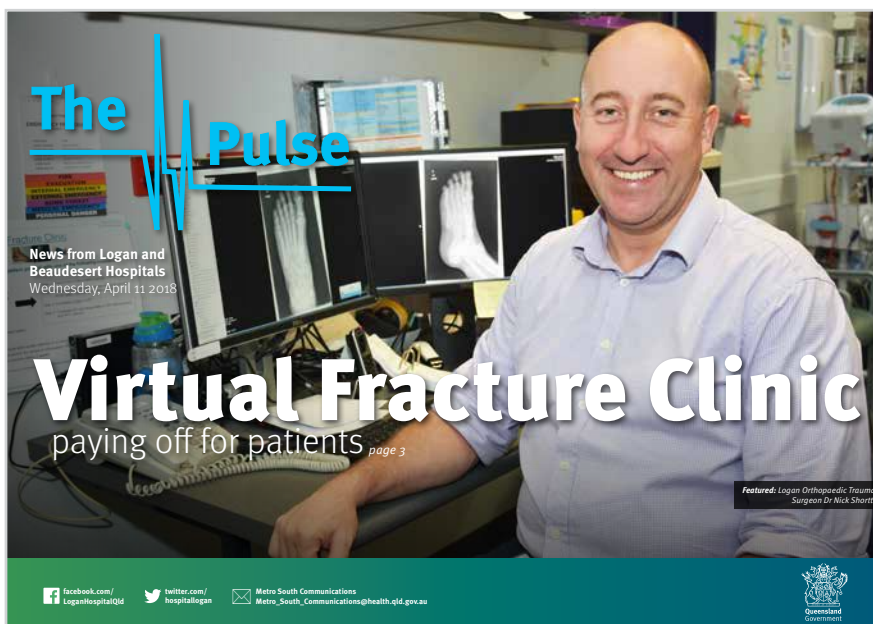
**\$57,000 SAVINGS**  
on admin costs per month

**634** Patients “seen” in  
Virtual Fracture Clinic

**44%** DISCHARGED  
to Allied Health

**43%** DISCHARGED  
to GP

**13%** REFERRED TO  
Fracture Clinic







# Person-Centred Care Strategic Priority

This strategic priority focuses on designing a healthcare service that is responsive to individual and community needs. Through initiatives such as Planetree and Kindest systems and Standard 2: Partnering with Consumers, we will create a person-centred culture.

## Goals

Embed a person-centred organisational culture guided by the voice of our patients.

## Objectives

Embed a universally useable framework for implementing person-centred care practices.

## Indicators of success

- Improved patient satisfaction.
- External validation and recognition in person-centred care.

# Person-Centred Care Initiatives

## Experiential Workshop and eLearning Module

The Person-Centred Care Experiential Workshop and eLearning modules are designed for all staff throughout LBH and Redland Hospital to experience care from our patient’s perspective.

During the workshop, staff take a closer look at person-centred care—what it means for our patients AND what it means for their own wellbeing—with our new experiential learning program.



### OUTCOMES

#### LOGAN HOSPITAL



**11%**

Staff completed PCC REFLECTIVE PRACTICE WORKSHOP



**32%**

Staff completed PCC eLEARNING MODULE

#### BEAUDESERT HOSPITAL



**22%**

Staff completed PCC REFLECTIVE PRACTICE WORKSHOP



**58%**

Staff completed PCC eLEARNING MODULE

## Consumer Advisors

Logan and Beaudesert Hospitals work with Consumer Advisors who are former or current patients of our service or carers of someone who has been a patient. Our Consumer Advisors share

their patient/carer experience and participate on Governance Committees and working groups. Feedback from consumers had led to direct improvement in services.

### OUTCOMES

#### LOGAN HOSPITAL

**6**  CONSUMER ADVISORS

# Person-Centred Care Initiatives

## Person-Centred Care Champions

Logan Hospital now has 28 Person-Centred Care Champions. Our champions and members of our Consumer Partnership Committee will assist in cultivating a culture of person-centred care by being positive change agents and role models for Logan Hospital. This initiative is part of our

Planetree journey to excellence in person-centred care. All champions and members of the Consumer Partnership Committee have met and it was a great opportunity for our champions to meet each other and start sharing their experience in person-centred care.

### OUTCOME

**28**  **PERSON-CENTRED CARE CHAMPIONS**

## 15 Steps Challenge

The 15 Steps Challenge is a way to understand what good quality care looks and feels like from the patient's perspective and is an initiative of Excellence in Bedside Care. The challenge involves participants engaging their senses to listen, smell, look and feel in order to understand the first impressions of a patient resting or a family member visiting their loved ones.

The activity is all about continuously improving the patient experience. The 15 steps challenge has been held at Logan Hospital in Ward 3A and Renal Dialysis Unit during March 2018 for the first time with our Consumer Partnership Committee, to provide some key steps that the areas can take to improve the patient experience.

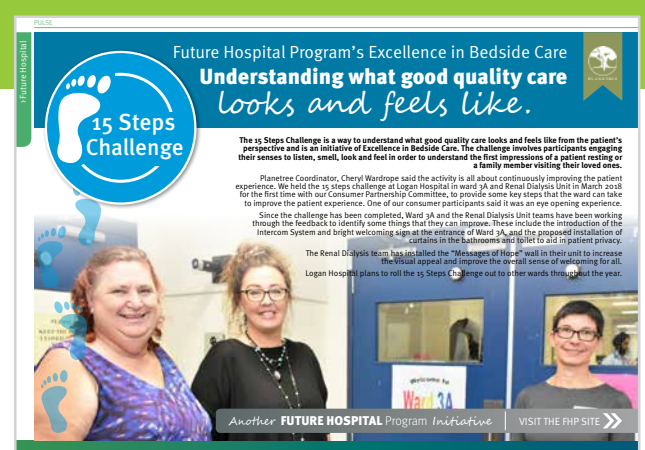
Since the challenge has been completed, Ward 3A and the Renal Dialysis Unit teams have been working through the feedback to identify some things that they can improve. These include the introduction of the Intercom System and bright welcoming sign at the entrance of Ward 3A, and the proposed installation of curtains in the bathrooms and toilet to aid in patient privacy.

The Renal Dialysis team has installed the "Messages of Hope" wall in their unit to increase the visual appeal and improve the overall sense of welcoming for all.

Logan Hospital plans to roll the 15 Steps Challenge out to other wards throughout 2018.

### OUTCOME

**Piloted in 2 wards - also part of Excellence in Bedside Care (EiBC) Program**



# Person-Centred Care Initiatives

## Virtual Reality Goggles Research - Palliative Care / Rehab / Griffith University

Logan Hospital's Palliative Care and Rehabilitation Units are embarking on a unique opportunity to improve patient experience.

Virtual Reality (VR) is a fascinating way for patients to travel using nothing more than the power of technology. With a headset and motion tracking, VR lets them look around a virtual space with captivating video and immersive audio as if they're actually there.

Logan Hospital has commenced a research study with Griffith University into VR patient experiences.

Research is lacking in exploring the potential benefits of virtual/augmented reality technology in patient care where there are many potential benefits such as:

- Improved patient experience.
- Reduced opioid usage.
- Improved quality of life.

Funding for the VR research study was provided by the Future Hospital Program.



Gillian Myles (CNC) with the VR Goggles



Pictured (L to R): Dr Brian McGowan (FHP), Marion Tower (MSH Board Member), Dr Leslie Gan (Rehabilitation Specialist), Dr Michael Lau, Branko Vidakovic (FHP), Cassandra Wells (CNC) and Gillian Myles (CNC).

## Planetree Bronze Certification

Metro South Health will submit the application for Planetree Bronze Certification for excellence in person-centred care in September 2018.



# Person-Centred Care Initiatives

## Logan Hospital - Consumer Partnership Committee

The Logan Hospital Consumer Partnership Committee was established in February 2018. The Consumer Partnership Committee has three Consumer Advisors and an interdepartmental staff membership who work in partnership to shape our person-centred care priorities.

The Committee oversees and assists the implementation and maintenance of person-centred care principles to align with the MSH commitment to excellence in person-centred care.

The Committee has provided feedback on MSH Policies including the MS Health Literacy Policy and MSH Family Presence and Care Partner Policy, participated in the Social Impact Assessment as part of the Logan Hospital Expansion project, trialled the 15 Steps Challenge, undertook a review of the posters and signs and have contributed to a number of initiatives to improve health literacy.



Logan Hospital's Consumer Partnership Committee

Pictured (L to R): Siobhan Holland (DSO Allied Health), Karen Green (Manager Consumer Liaison), Albert Winterton (Quality Assurance Radiographer), Cheryl Wardrope (Planetree Coordinator), Anne Coccetti (Director Allied Health and Chair), Paula MacDermott (Senior Dietitian), Tanya Ormsby (Consumer Advisor), Sylvia Penhaligon (Brisbane South PHN), Michelle Allen (Consumer Advisor).

Absent: Diane Higgins (Consumer Advisor), Becci Brown (A/ Paediatric CNC), Helen Maney (Nurse Educator), Angel Bogicevic (Multicultural Resource Development and Training Officer), Aneta Bilal (Multicultural Liaison Officer), Pam McErlean (CNC Quality).

## Logan Hospital - Review of posters and signs

On 15th May 2018, the Logan Hospital Consumer Partnership Committee undertook a review of the posters and signs. The areas that were reviewed were:

- Area 1: High traffic public areas – including Hospital Entrance, foyer and reception area, Hospital Street and the pharmacy and pathology waiting area.
- Area 2: Specialist Outpatient Department – Antenatal, Paediatrics and Fracture Clinic
- Area 3: Emergency Department – Adult, Children and Foyer.

From this review, it was evident that there is an abundance of posters that create clutter on our walls which makes it difficult for our patients and visitors to know what information is important. Some posters were not written in a way that was friendly and welcoming or were difficult to read/understand, some posters are torn and many were repeated/duplicated. This review has resulted in a large number of unnecessary posters being removed.



# Person-Centred Care Initiatives

## Logan Hospital - Social Impact Assessment of the Logan Hospital Expansion

The Logan Hospital Expansion Project is a Queensland Government commitment to cater for and meet the growing demand of healthcare services of the local Logan city population. The social impact assessment was led by the MSH Consumer and Community Engagement Team to identify the social and economic impacts expanding Logan Hospital would have on the community and on patients. A series of focus groups including people from culturally and linguistically diverse communities, people with a disability, Aboriginal and Torres Strait Islander people, visitors to the hospital, local community members and local business and education representatives were held over a period of two weeks. Key issues identified

included potential issues with parking, wayfinding, noise, the need for welcoming environments, a refresh of the prayer room and a need to ensure the community was kept abreast of developments were identified. Participants also agreed that the inclusion of services not currently offered at Logan Hospital such as chemotherapy would ensure family members and patients do not have to travel to other locations for care.

All of the opportunities above have been addressed in the final proposal which is currently with the Department of Health for approval. More details on the expansion project are attached.

## Beauesert Hospital - Consumer Advisory Committee

The Beauesert Hospital Consumer Advisory Committee continues to forge ahead with their person-centred care initiatives. The Committee has focused on the development and implementation of the Patient Directed Visitation and Care Partner Procedure, provided feedback on MSH Policies

including the MS Health Literacy Policy and MSH Family Presence and Care Partner Policy, developed a partnership with a local high school to provide artwork for the Paediatric Bay and the planning for a mural in the Maternity Unit.

## OUTCOMES

### BEAUDESERT HOSPITAL



## Beauesert Hospital - Patient Directed Visitation and Care Partner Procedure

Beauesert Hospital implemented their Patient Directed Visitation and Care Partner Procedure

in August 2017. This is a key initiative towards achieving excellence in person-centred care.

# Person-Centred Care Initiatives

## ED Ambassador Trial

Logan Hospital's Emergency Department trialled an ED Ambassador role over 6 weeks. The Ambassador started on 14 May 2018 and it has proved a positive addition to the ED team.

The Ambassador's role is to attempt to meet and greet all patients/visitors that enter the waiting room. This sets a tone, and allows the ambassador to assess any stress/anxiety issues and recognise any re-presenting mental health patients.

The Ambassador is also available to assist clinical staff de-escalate situations if required but mostly to engage with patients and their families, get a sense of how they were feeling and assist them where he can. Setting a great first impression and humanising the ED experience gives the patients

and visitors a positive feeling about the treatment they will receive at the Logan Hospital.

The Ambassador role could be considered a side adjunct to the Planetree initiative, the work the ambassador does aligns with many of the 10 Planetree components.

The Ambassador has assisted in relieving pressure off the triage and reception desks, by assisting patients with basic enquiries and improving the flow of patients/visitors through the waiting room.

The initial statistics reported were very encouraging and based on these and feedback from the ED, the trial will be extended for another 12 months.

## OUTCOMES

### Ambassador's tasks during trial period

Task	Occasions of service over trial period
Way Finding	477
De-escalation	55
Children's Activity packs	227
Waiting room information giving	292
Escalation of concerns	104



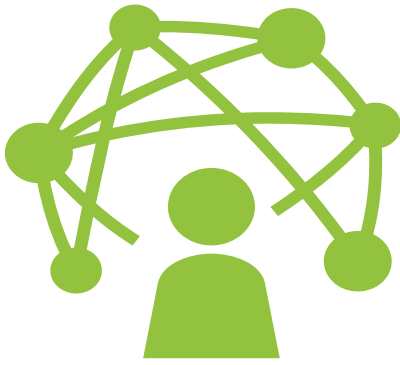
### Call outs for physical presence of Security Officers to Triage/waiting room incidents

Six Week Period	Calls to Waiting Room/Triage
<b>Pre</b> - 01/04/18– 14/05/18	26
<b>Post</b> - 14/05/18 – 30/06/18	9

# >65%

**Reduction of call outs for Security Officers to the ED triage/waiting room since the introduction of the ED Ambassador**





# Research & Innovation Strategic Priority

This strategic priority details the overall goals for research and innovation in Logan and Beaudesert Hospitals. There are three clear elements within the priority – Culture, Collaboration, and Infrastructure.

This is to ensure that we support our staff in the conduct of research and innovation activities and we promote opportunities to integrate evidence into practice improvement.

Our ultimate goal is to become a Centre of Research and Innovation Excellence.

## Goals

To be recognised as an organisation that supports and produces world standard clinical research and innovation.

## Objectives

Contribute to the well-being of the community by providing our patients with excellence in healthcare through collaboration, culture and infrastructure.

## Indicators of success

- Innovation maturity.
- Research and Innovation Centre of Excellence.
- Increased publications.

# Research & Innovation Initiatives

## Logan Hospital Research Report 2017

The inaugural Logan Hospital Research Report provides an excellent display of the evolution of research within Logan and Beaudesert Hospitals; its completion is a key milestone. The Report acknowledges the achievements of researchers across our hospitals from the intrepid and novice researcher to the most advanced. It provides an

opportunity for internal and external stakeholders, University partners and researchers collectively to overview the body of research activity conducted every day within our hospital walls. Our hope is that the report provides inspiration for all researchers and celebrates our achievements during 2017.



**73**  
Publications

**61**  
Presentations & Conferences

**62**  
Clinical Research Projects

**27**  
Post graduate Research Students

**\$433,866**  
Grant Funding

# Research & Innovation Initiatives

## Logan Research Advisory Service

The performance of research is frequently delayed by management and governance systems and procedures. Obtaining ethics and governance approval has become increasingly complex and often burdensome and disproportionate to the conceivable risks to research participants.

The Logan Hospital Advisory Service provides mentorship, advice and hands on support with regards to protocol development, ethics and governance applications; and other items required to conduct research. The service provides support to all disciplines within our hospitals.

## Logan & Beaudesert Hospitals' Research & Innovation Symposium

Preparation for the Logan and Beaudesert Hospitals' Research and Innovation Symposium 2019 is well underway. As well as marketing and showcasing research and innovation activities, the symposium will increase the profile of research and innovation activities both within our hospitals and externally to the wider Logan and Beaudesert communities.



