

# VHIMS- Victorian Health Incident Management System



# VHIMS-Background

- It was clear the absence of an integrated system to identify incidents directly impacting patient safety, made statewide analysis of mutli-severity incidents in Victoria impossible.
- Locally based incident management systems in Victoria had grown organically in response to the needs of the individual health services.
- 2005 Report on Patient Safety in Public Hospitals  
Victorian Auditor General

# VHIMS background cont

- The lack of a central repository resulted in a depth of intelligence for patient safety incidents restricted to the local health service level, with disparate data collections at the state level
- A collaborative project in conjunction with health services, The Victorian Managed Insurance Authority (VMIA) and key stakeholder groups to address these gaps
- Consideration to meet Health Services obligations for multiple state and federal incident reporting requirements from a newly developed statewide incident management system

# VHIMS –the aim

- To provide a state-wide methodology for the management and reporting of:
  - occupational health and safety incidents
  - clinical incidents
  - consumer feedback
- To enable statewide data trend analysis for multi-severity incidents
- Communication of lessons learned
- Targeted statewide quality improvement opportunities

# VHIMS- Benefits for Health Services

- Reduce reporting burdens by standardising code sets
  - data definitions
  - code sets
  - data formats
- Data from VHIMS can also be used to meet reporting requirements beyond DH

# VHIMS- Phased statewide rollout

- Lead Implementation (November 2009- February 2010)
- Wave One (February – April 2010)
- Wave Two (May – July 2010)
- Wave Three (August – October 2010)
- Wave Four (November – February 2011)

# VHIMS- Phased statewide rollout

- Six lead implementation sites commencing Nov 2009 representing:
  - Hospitals
  - Ambulance Victoria
  - Stand alone community health services
  - Royal District Nursing Service (RDNS)

# VHIMS project

- Includes all Victorian publicly funded health services (some agencies)
- Department data set provided in two formats
  - Central hosted VHIMS
  - Health service hosted VHIMS

# Central hosted - VHIMS

- Statewide license installed in a central location
- Maintenance and support by the department
- Access from a desk top at their workplace
- Security process (username & password recognition)
- Limit local requirements & configurations
- No capacity to transfer legacy data

# Health service hosted- VHIMS

- Locally hosted system
- Upgrade their incident management system to be VHIMS compliant
- Able to have own configuration in addition to VHIMS data set
- Allows for more flexibility
- Cost to the health service

# Health service registration

- How does my health service enrol?
- Correspondence sent to CEO's requesting which wave they would like to enrol.
- Participation agreement to be signed by the CEO.

# What data is sent to the department?

- Sub set of de-identified information for analysis purposes
- Mandatory fields are built in the system
- Additional information for incidents with severity rating of 1 and 2
- Streamlining reporting to the department for
  - Sentinel event
  - Radiation
  - Aged care
  - Blood transfusion
  - Pressure ulcers

# How is the data sent to the department?

- De-identified monthly data submitted to the department
- Data will be sent to the department via an electronic secure data exchange process

# What is sent to a third party?

- Incidents are owned and managed by the health service
- Incidents and consumer feedback can be extracted and provided to a third party by the health service
  - The Office of the Health Services Commissioner
  - VMIA
- The department will not take an active role in this process

# What will happen to the data?

- Statewide data will be analysed and comparative report provided
- Local level used to inform organisational quality improvement initiatives
- The department will use it to inform the establishment and/or modification of statewide quality improvement initiatives

# VHIMS- Support from the department

- VHIMS Transition Coordinator & Education Coordinator. Link from the department to the health service.
- Health Service Project Officers for 12 weeks (backfilled). Coordinate the education & training
- Generic education toolkit (train the trainer framework) e -Learning currently in development

# Health service preparedness

## **Non RiskMan.NET organisations**

- Decision on health service hosted or VHIMS central
- Ensure incident management policy is current
- Discuss with IT requirements for system upgrade or deployment of new applications, including lead in time
- Consider training requirements specific to your organisation

## **RiskMan.NET organisations**

- Review user registrations, details, permissions
- Review templates, identify areas of duplication
- Review health service (or agency) specific code sets i.e. ward/program/departments
- Review alerts and notification to identify what changes will be required
- Review incident management workflows to ensure they are reflective of current practice

# Demonstration

The screenshot shows a web browser window displaying the Victorian Health Incident Management System (VHIMS) training site. The browser's address bar shows the URL: <http://vhims.riskman.net.au/VHIMSTraining/Default.aspx?Logout=Yes>. The page header includes "State Government of Victoria, Australia, Department of Human Services" and "Victorian Government Health Information". The main content area is titled "Victorian Health Incident Management System" and features a "TRAINING SITE" banner. On the left, there is a "USER LOGIN" form with fields for "Username" and "Password", a "Submit" button, and a "Forgotten Password?" link. The main content is divided into several sections: "VHIMS News & Events" with a "Work in progress" update from 19/10/2009; "Anonymous Reporting" with instructions on how to report incidents and a warning that reports cannot be re-accessed; and "User Resources" including "Frequently Asked Questions (FAQ)", "Policies and Procedures", and "Contacts". A section titled "Effective Risk Management" provides a list of steps for incident response, such as assessing the situation, providing first aid, and documenting incidents. At the bottom, there is a table with three columns: "What is ...?", "Staff responsibility", and "What happens next?". The table defines an incident, lists staff responsibilities, and explains the next steps in the process.

State Government of Victoria, Australia, Department of Human Services  
Victorian Government Health Information

Help | Log Out

**USER LOGIN**

Username:

Password:

Submit

Forgotten Password?

## Victorian Health Incident Management System

**VHIMS News & Events**

**Work in progress** (Updated: 19/10/2009)

- COMPLETE: Project Advisory Group Review Workshop, 16th Oct 2009
- COMPLETE: User Acceptance Testing, 20-23 Oct 2009
- UNDERWAY: Lead Implementations commence November 2009

**Anonymous Reporting**

If you would like to make an anonymous notification of an incident or complaint, you may do so by logging in with the **User ID: Anonymous** and **Password: anonymous**.

However, we wish to encourage all staff to provide notifications complete with your contact details whenever possible, as this will allow assist us to undertake a full follow-up of your notification. By providing your contact details, we will also be able to provide you with feedback with regard to your notification.

**Please note that anonymous reports cannot be re-accessed by you in order to add further information, once the notification has been submitted, and you will not receive any personal feedback regarding an anonymous report.**

What is ... ?	Staff responsibility	What happens next?
<b>An Incident is:</b>  ...an event or circumstance which could have resulted, or did result in unintended or unnecessary harm to a consumer,	Promptly respond to any Incidents which come to their attention.  Promptly report all Incidents and Hazards to the person in charge and	(DHS can customise information here... or anywhere else on this page)

**User Resources**

- > Frequently Asked Questions (FAQ)
- > Policies and Procedures
- > Contacts

**Effective Risk Management**

Effective risk management begins with timely incident management. When an incident occurs, you should review and follow these steps:

- Assess the situation
- Immediately provide first aid or call for further medical assistance
- Make the area safe and provide support to stakeholders involved
- Notify the incident factually via RiskMan or verbally to management for further advice and assistance. Incidents should be documented within 24 hours of the incident occurring.
- Contact Significant Others to advise that the incident has occurred
- Confidentiality of incident details must be maintained by ensuring that only factual information that does not attribute blame is documented on RiskMan
- An investigation should be conducted to establish the facts, for major or extreme outcomes. This may be facilitated via your OH&S Advisor
- Risk Treatments and Controls should be identified and monitored regularly
- Evaluation of the implemented Risk Controls will be undertaken, and

RiskMan Version: 3.871

Start | Logout Screen | F:\Q & S Branch\... | F:\Q & S Branch\... | Victorian Healt... | VHIMS Innovatio... | E:\ | Internet | Power Outage.do... | 1:46 PM

# Mrs Smith cont

- An X-ray of her L) elbow was ordered
- Mrs Smith's daughter (Liz) arrived at midday and was informed of the incident
- Liz commented to the nursing staff as she was leaving at 1500hr, that her mother appeared a little confused
- 1530 the orderly arrived to take her for an X-ray of her arm
- Whilst in the waiting area Mrs Smith was found unresponsive
- A code blue was called.
- An urgent CT scan was performed
- Mrs Smith had an intracranial bleed

# Mrs Smith incident

- How would this impact the ISR?
- As the Risk Manager what would I need to complete?