

Creating Safety: Addressing Seclusion Practices Project

A partnership project of the Victorian Quality Council and Chief Psychiatrist's Quality Assurance Committee

The aim of the Creating Safety: Addressing Seclusion Practices project is to strengthen and support safety in adult acute mental health inpatient units and to minimise wherever possible, the frequency and duration of the use of seclusion and restraint.

The project's features are:

- 1) The project has been designed along two concurrent streams.
 - The first stream is the development and implementation of a training and education curriculum to promote clinical best practice. The training and education component will be developed collaboratively with specialist public mental health services with the assistance of external expert facilitators. This component will be informed by a comprehensive review of literature on seclusion and restraint practices and a revised Chief Psychiatrist's clinical guideline on seclusion practice.
 - The second component of the project will be the selection of four to six adult acute mental health inpatient units through an expression of interest (EOI) process. The project will provide external expert facilitators and some direct and indirect financial assistance to the selected multidisciplinary inpatient teams to identify enablers and barriers to reducing seclusion and restraint use. These teams will develop, implement and evaluate strategies to minimise, wherever possible, the use of seclusion and restraint.

- 2) A communication and consultation plan has been developed to ensure all relevant stakeholders including consumers and carers have input into the development of a training and education curriculum that promotes best practice and to provide input to the project. A project reference group has been established to facilitate this.
- 3) An evaluation methodology will be established to evaluate the project. A project report will be published to enable mental health services to share learning from the project.

Current project status

The project is premised on establishing a framework for best practice that mental health services can continue to address within their own services.

- Training and education curriculum – development with external expert facilitation to commence in April/May 2007. Implementation from July 2007
- EOI and the selection of four to six inpatient units to participate – expected to commence in May 2007 and to be completed by June 2008
- An EOI information kit will be distributed by April 2007 to all specialist public mental health services
- A literature review has been completed
- A draft Chief Psychiatrist's clinical guideline has been developed for consultation
- Implementation of a consultation plan with identified key stakeholders has commenced
- Draft conceptual framework for evaluation developed for consultation
- A web page is currently under development at:
www.health.vic.gov.au/creatingsafety

Message from the Chair



At the most recent VQC Full Council meeting on 19 February, Council members supported a number of initiatives. These

include a significant sponsorship program for health service staff to attend the Safety & Quality conference in Brisbane in August this year and further funding for Victorian health services involved in the NICS VTE project hospitals. Further information is provided in this newsletter.

Also discussed at the meeting was the progress of the VQC external evaluation. In the last newsletter I advised that the Minister for Health had approved an evaluation of the VQC to determine whether it had met its objectives and to consider a range of potential models to promote statewide quality and safety activities into the future. The Department of Human Services advertised a request for tender, which closed on 15 March 2007. It is anticipated that the evaluation will commence in May.

A Steering Committee comprising of representatives from VQC, DHS, a metropolitan health service, a regional/rural health service and a consumer representative is being set up to provide overall governance and ensure key milestones are met throughout the process. A final report is expected in November 2007. Recommendations will be provided to the Minister for her consideration.

Due to the timelines for the VQC external evaluation, current members have had an extension to their appointments from October 2007 until June 2008. This extension will also align members with the financial year timeframe and allow for the strategic plan objectives to be met in the 2005-08 period.

**Associate Professor Christine Kilpatrick
Chair, VQC**

Associate Professor Marcus Kennedy

Director of Emergency Services at the Royal Melbourne Hospital.



- Trained in Medicine at St. Vincent's Hospital, Melbourne, graduating in 1981
- Broad general experience prior to a 5 year period in General Practice gaining FRACGP
- Subsequent further training in Emergency Medicine, obtaining FACEM in 1993.
- Other qualifications in Anaesthesia (DAUK) and in prehospital care (Dip IMC RCSEd)
- Areas of clinical experience and expertise: pre hospital care and retrieval, disaster medicine ICU and airway management, application of anaesthetic techniques to emergency medicine, clinical informatics and information systems.
- Has been closely involved in Australasian College for Emergency Medicine activities, being a national councillor for ACEM 2000-2005.
- Has had a long-standing interest in organisational development, quality management and systems improvement, and has recently completed an 18 month part-time secondment with the Victorian DHS to work on system patient flow improvements.
- Current role: fully administrative, academic and leadership role at RMH. This is the busiest hospital in Australia, and is a major adult referral site and trauma service. It is a major training site for many specialties including emergency medicine.

Kerry Bradley

Manager of the Policy, Standards and Communication Program at the Nurses Board of Victoria.

Kerry is a division 1 registered nurse with extensive aged care and quality management experience. In her current role, Kerry oversees the nurse practitioner program and accreditation of courses that lead to registration in Victoria. Prior to working at the Board, Kerry has worked within the Acute Hospital and Aged Care sectors and continues to work as an Aged Care Assessor and Quality Management Auditor. Her qualifications include Masters

of Business Administration, Bachelor of Business in Health Administration, Registered Nurse (Div 1), Certificate Critical Care and Certificate IV in Workplace Training and Assessment. Post nominals include RN (div1), BBus-HAdmin, MBA, Aged Care Assessor, Quality Management Auditor, Cert-CritCare, Cert IV – Workplace Assessment & Training. Kerry was appointed to the Victorian Quality Council in 2001 and reappointed in 2004.



VQC Health Service Staff Sponsorship for 5th Australasian Conference on Safety and Quality in Health Care

The Victorian Quality Council (VQC) will be seeking nominations for conference sponsorship to attend the 5th Australasian Conference on Safety and Quality in Health Care. The conference is being held in Brisbane at the Brisbane Convention Centre from 6-8 August 2007.

The VQC is extending its sponsorship program to include community health centres and mental health services' staff. The targeted sponsorship health services' staff include

medical staff at all levels of the organisation, clinical and executive staff who have not previously been awarded conference sponsorship and quality and safety staff.

This is an exciting opportunity to participate in an important safety and quality conference, which will have input from industry, leading international and local speakers addressing practical themes around corporate and clinical topics in health care.

The five themes for the conference are:

1. Measuring performance to improve patient care
2. Education, training and skills development
3. Systems change and leadership
4. Human resources for health: challenges and opportunities
5. Patient safety and quality

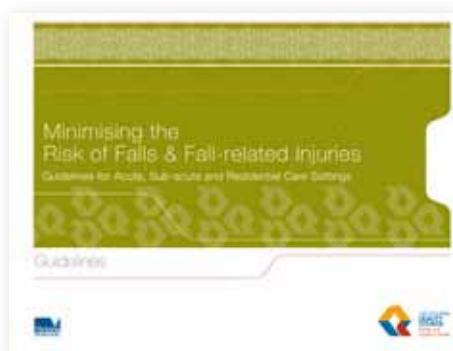
Further information regarding conditions for funding will be available shortly at the VQC website:

www.health.vic.gov.au/qualitycouncil.

Safety and Quality Education Program

The pilot project

The pilot of the VQC safety and quality education program has commenced with the appointment of the education provider, The Australian Institute of Primary Care (AIPC), La Trobe University. AIPC bring extensive experience in program development, education delivery, and evaluation to the project and have sourced key quality and safety experts to facilitate the program.



Following an independent evaluation of health service expressions of interest, three health services from metropolitan, regional and rural Victoria have been selected to pilot the project.

The successful health services are:

- Western Health
- Wimmera Health Care Group
- Colac Area Health

Each site will receive funding to support participant backfill and the appointment of a pilot site coordinator and clinical champion. Four teams across the three sites will complete all five modules over a period of five months.

Pilot sites will finish the program in early September 2007, and a final report with recommendations for the future of the program will follow.

An external provider will conduct an evaluation of the program's effectiveness and appropriateness for the target audience as part of the pilot. This will include:

- pre and post program surveys to determine the impact of the program on participant knowledge and understanding of safety and quality in healthcare
- post module surveys to determine participant perception of the module
- a consultation to assess the appropriateness and effectiveness of the education model involving participants, pilot site support staff and the education provider.

Updates on the progress of the pilot project will be available on the VQC website: www.health.vic.gov.au/qualitycouncil/activities/safetiedu.htm

The program – a brief summary

The program, aimed at hospital based medical registrars and clinical middle managers, combines interdisciplinary teamwork and online knowledge preparation to deliver a practical and comprehensive overview of safety and quality in the acute sector.

Teams of 6-8 participants work through a five module program based on an education model that combines:

- Self directed online learning
- A face to face introductory workshop
- Hospital based small group activities supported by online safety and quality experts

Further information on the program can be found on the VQC website: www.health.vic.gov.au/qualitycouncil/activities/safetiedu.htm

Implementing the VQC Guidelines for Minimising the Risk of Falls & Fall-related Injuries

Since attending the VQC workshop in 2004, Peter MacCallum Cancer Centre (Peter Mac) has developed a strong focus on preventing falls and minimising injury related to falling whilst in hospital. The resources made available through the workshop have provided a best practice framework that we have embedded in the Peter Mac culture, to optimise patient safety. We have adopted a multi-strategy approach that included developing a policy and procedure to inform and standardise practice. Of most significance has been the implementation of a falls screening tool that identifies patients who are at a higher risk of falling. The tool was initially piloted, then modified in response to staff feedback. A unique aspect of the tool is a section where patients or carers can sign the form as evidence of receiving appropriate and specific education and helping to engage patients, during admission, on preventing falls. Patients are screened daily and additional safety measures are implemented for high risk patients including: arm band identification, signage above the bed and usage of hi-low beds. Complementing this strategy has been the

development, in conjunction with the community advisory group, of a patient information brochure that outlines practical information and tips on preventing falls whilst in hospital. Improving the environment has also been at the forefront of the reducing falls strategies which have included, removing the lips on bathroom entrances, increasing the slip resistance on vinyl floors and investing in new IV poles.

To ensure continued support and sustainability of these initiatives, a multidisciplinary Falls & PUPPS working group has been established and meet monthly. Falls "reps" from clinical areas attend the meetings where data on falls is presented by the Clinical Risk Manager, and discussed as an avenue to highlight where we are doing well and areas that require further emphases. This working group has been very successful and recently the group held an inaugural "Falls Expo" to raise falls awareness for both patients/relatives and staff. The program included an organisational wide poster competition, a display of equipment, falls quiz, and a presentation on "identifying disease specific factors that potentially contribute to

cancer patients falling whilst in hospital". These findings were the result of a 12 month audit on all patient falls at Peter Mac, in an attempt to understand the relationship between cancer patients and falling in hospital. The results of the audit have been invaluable and consequently the current screening tool will be modified to incorporate the findings and reflect cancer terminology, so the tool will be more meaningful for staff. For example, 69% of patients who fell during the audit were described as palliative, so consequently, these patients can be classified as high risk.

The work thus far has been very successful, and the K.P.I. established demonstrates a 6% reduction in the number of falls and a 50% reduction in the level of injury sustained from a fall. Moving forward, we plan to conduct a trial of falls alert mats, roll-out the prevention strategies across the ambulatory care settings and involve the Peter Mac volunteers as a resource for high risk patients. Peter Mac would like to thank the VQC and all health services who contributed to the guidelines.

Acute Pain Management Measurement Toolkit



The VQC Acute Pain Management Measurement Toolkit has been developed to assist health services to measure the effectiveness of acute pain management at an individual patient and wider system level.

It is expected that the implementation of the Toolkit in health services will lead to a more standardised measurement of acute pain at all levels from bedside to administration. A consistent approach to pain assessment

will result in improved implementation of timely and effective treatment for patients as well as in a reduction in adverse events, thus improving quality of care and clinical outcomes.

The Acute Pain Management Measurement Toolkit will be circulated to all Victorian health services in March 2007.

Planning is underway for the hosting of seven regional sessions to provide health services with orientation and training on the application of the Toolkit in a health service setting.

The sessions will be held in each of the five rural regions and two metropolitan regions. It is proposed that these sessions will be conducted in May 2007. An invitation to

nominate health service staff to attend the Toolkit application sessions will be circulated with the Toolkit.

The VQC will be funding 20 demonstration projects to use the Toolkit over a three-month period. The program logic and evaluation methodology for the demonstration projects has been finalised. More information on the demonstration projects will be circulated to health services in early April 2007.

Information and electronic copies of the Toolkit are also available on the VQC website at www.health.gov.au/qualitycouncil.

Mary De Gori

Senior Project Officer



Mary is on secondment to the Victorian Quality Council (VQC) Management Group to undertake work on the Acute Pain Management Measurement Toolkit project.

Mary has been involved in health care since 1996 working as a Physiotherapist and in a number of project management and management roles. Mary has worked as the Quality and Safety Manager at the Broadmeadows Health Service, Northern Health for the last 2 years.

She is currently completing her final year of a Masters of Business Leadership.

To contact Mary please email her at mary.degori@dhs.vic.gov.au or phone **03 9096 0472**.

Consumer Leadership



The VQC identified consumer, carer and community collaboration as a key tenet of effective health care improvement. A research project was commissioned to provide advice on developing consumer leadership

uptake and capacity in healthcare quality and safety improvement.

The project, contracted to Nova Public Policy, comprised a literature review and consultation with individuals and representatives of:

- Community and consumer organizations
- Government departments
- Academic institutions
- Health services.

Its purpose was to identify research, evidence and opinion on leadership, consumer leadership and health consumer participation.

The final project report presents the key findings of the literature review and

consultation including:

- The emergence and forms of consumer leadership
- The characteristics and skills of consumer health leadership
- Models and programs to develop consumer leadership and build health service capacity

The report was launched at the Participate in Health conference in February. Copies of the report are currently being distributed and will be available on our website shortly.

The Victorian Quality Council

Safer, better care throughout Victorian health care services

www.health.vic.gov.au/qualitycouncil