

Safer systems  
Data Collection and Reporting Teleconference

Saving lives



## Agenda

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Welcome

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The AMI & RRS toolkits and audit tools

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Question and answer

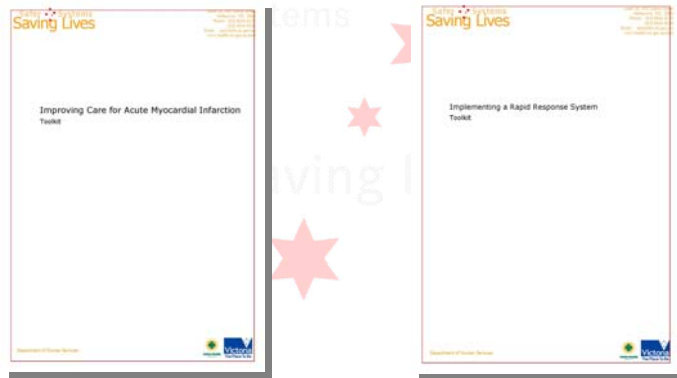
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Close

Saving lives

## Update

- SSSL Toolkits, agreement from national expert panel



### Standard research methods/ traditional clinical research

VS

### Improvement science

Aim: new healthcare knowledge

Aim: improvement in healthcare practice

- blinded tests

- observable tests to build a will to change

- collect large amounts of data

- collect 'just enough' useful data

- fixed hypothesis

- continual adaptation of the changes

- one large study

- many sequential tests

Source: *Improvement Leader's Guide to Measure for Improvement*, Modernisation Agency NHS

Improving Care for AMI

Care components	Measures	Data collection
<ul style="list-style-type: none"> <li>• <b>On admission</b> <ul style="list-style-type: none"> <li>Antiplatelet</li> <li>Beta-blocker</li> </ul> </li> <li>• <b>STEMI</b> <ul style="list-style-type: none"> <li>Reperfusion</li> </ul> </li> <li>• <b>non-STEMI</b> <ul style="list-style-type: none"> <li>Antithrombin</li> </ul> </li> <li>• <b>During hospitalisation</b> <ul style="list-style-type: none"> <li>Patient information</li> <li>Risk prevention counselling</li> </ul> </li> <li>• <b>At discharge</b> <ul style="list-style-type: none"> <li>Antiplatelet</li> <li>ACE inhibitor (ARB)</li> <li>Beta-blocker</li> <li>Statins</li> <li>Referrals</li> </ul> </li> </ul>	<p><b>Process</b></p> <p>% of patient receiving all care components</p> <p><b>Outcome</b></p> <p>Rate In-hospital mortality rate as a result of AMI.</p>	<p><b>Monthly audit</b></p> <p>Audit all patients (up to a maximum of 20 patients) with an AMI.</p>

Audit tool

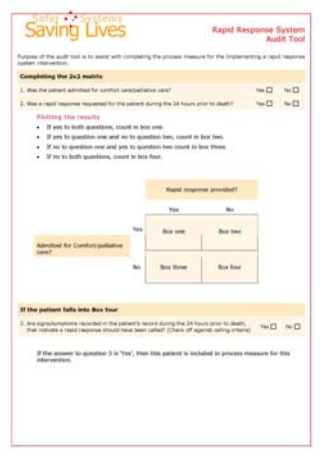
Audit summary

- Use an audit tool for each patient audit. When the sample is complete, transfer the information to the audit summary.

## Implementing a Rapid Response System

Care components	Measures	Data collection
<ul style="list-style-type: none"> <li>•Governance</li> <li>•Event detection</li> <li>•Crisis response</li> <li>•System evaluation</li> </ul>	<p><b>Process</b> Proportion of patients requiring but not receiving a RRS</p> <p><b>Outcome</b> <b>Rate</b> Unexpected deaths during reporting period</p>	<p><b>Two monthly audit</b> Audit most recent in-hospital deaths up to a maximum of 30.</p>

## Audit tool



**Rapid Response System Audit Tool**

Purpose of the audit tool is to assist with completing the process measure for the Implementing a rapid response system intervention.

**Completing the 2x2 matrix**

1. Was the patient admitted for comfort care/palliative care? Yes  No

2. Was a rapid response requested for the patient during the 24 hours prior to death? Yes  No

**Plotting the results**

- If yes to both questions, count in box one.
- If yes to question one and no to question two, count in box two.
- If no to question one and yes to question two, count in box three.
- If no to both questions, count in box four.

		Rapid response provided?	
		Yes	No
Admitted for Comfort/palliative care?	Yes	Box one	Box two
	No	Box three	Box four

**If the patient falls into Box Four**

3. Are signs/symptoms recorded in the patient's record during the 24 hours prior to death, that indicate a rapid response should have been called? (Check off against safety criteria) Yes  No

If the answer to question 3 is 'Yes', then this patient is included in process measure for this intervention.

- Use an audit tool for each patient audit. When the sample is complete, transfer the information to the audit summary.

## Monthly reporting requirement

Audit data

Audit summary

Eform  
Web based monthly data report



## What is an eform?

- Web-based report to collect the total monthly data against each intervention.
- Located on SSSL website
- Access the eform through hospital pin

## Summary

- Review the toolkits.
- Provide leadership for implementing interventions.
- Customise the audit tools to reflect your care approach.

Questions?

## Close

Date	Tasks
From today	<ul style="list-style-type: none"><li>•Review toolkits</li><li>•Where appropriate implement care componenets</li><li>•Customise audit toolkits</li><li>•First data collection period</li></ul>
Before 7 March 2006	<ul style="list-style-type: none"><li>•Enter monthly results via eform</li><li>•Submit definitions (VAC)</li></ul>
By 17 March	Review run charts – PDSA approach