

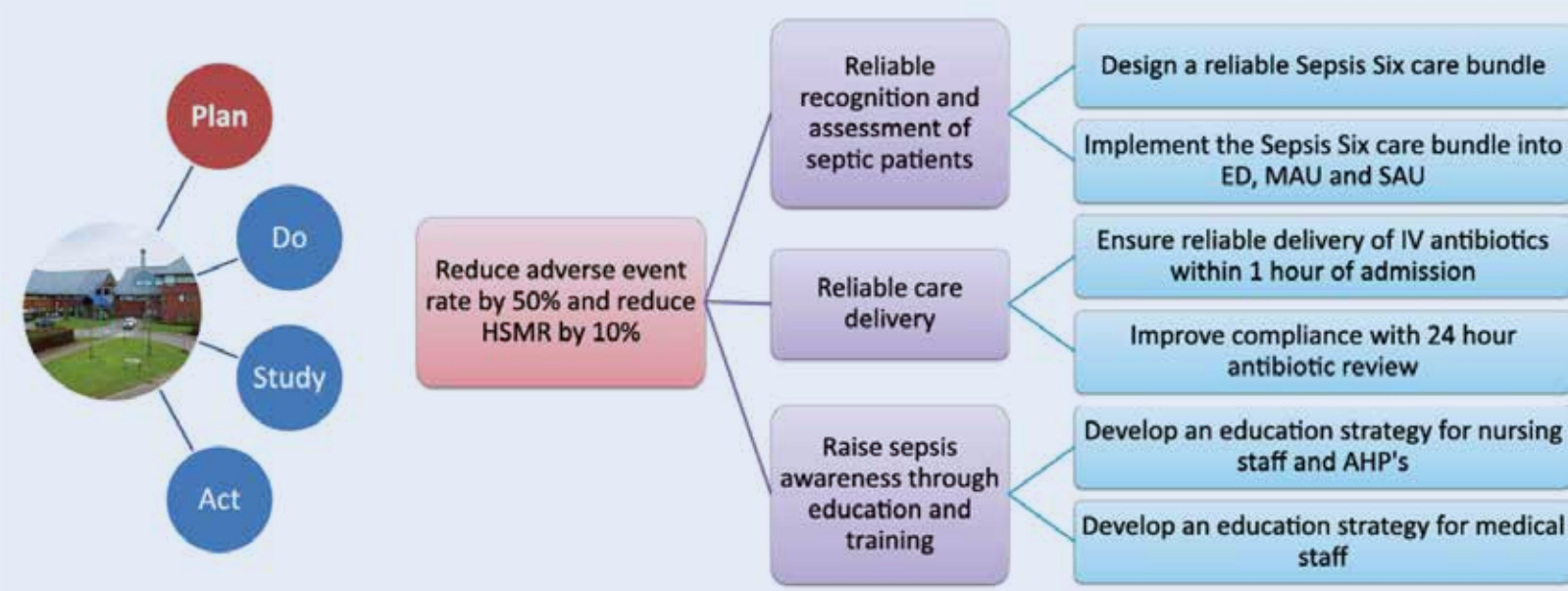
# Using a Breakthrough Collaborative Series (BTS) to improve outcomes for patients experiencing physical deterioration

(Wessex Patient Safety Collaborative 2016-17)

## (2) Direct the rider

Find the Bright Spots, Script the Critical Moves, Point to the Destination

QI teams from Wessex organisations used the Model for Improvement to identify their local critical moves and direction of travel (aims, drivers, change ideas and PDSAs) within the overall topic of Physical Deterioration.



QI teams engaged in the BTS identified plans to change their practice relating to:

- National Early Warning Score (NEWS)
- Recognition / Early Assessment of Deterioration
- Response and Effective Escalation inc. Situation, Background, Assessment, Recommendation (SBAR)
- Fluid Balance Monitoring / Reduction of Acute Kidney Injury
- Improving time to IV antibiotics
- Electronic Patient Monitoring Systems
- Saving Babies Lives by reducing smoking
- Safe and reliable Paediatric Transfers



## (3) Motivate the elephant

Find the Feeling, Shrink the Change, Grow your people

Teams involved in the BTS reported growth in capability evidenced by increased skills, knowledge and confidence amongst participants; Participants also reported a positive and enjoyable learning experience.



160+ "away team" delegates...	representing many others in "home teams"...	formed 20 teams from 15 organisations...	at 4 Learning Events from Sept 2016 to May 2017
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## Measurement for Improvement

14 teams adopted the new AHSN LIFE QI Platform to help them measure and assess the effects of their small tests of change in order to improve their outcomes. During the time of the BTS they jointly recorded:



## Impact of the BTS Collaborative

Improvements in staff capabilities and patient care were identified via evaluation and qualitative feedback and included:

- Teams achieving and maintaining 100% for action implemented when indicated by NEWS score.
- Patient involvement greatly improved with suggestions around using NEWS as a self management tool.
- Multidisciplinary team working, from ward clerks to doctors. Sepsis tool and education well received.
- New clerking document for orthopaedic patients that incorporates the sepsis tool.
- Introduction of the deteriorating patient sticker leading to increased awareness of staff regarding deteriorating patients in the acute medical unit.
- Work commenced with the Collaborative to continue as the "Deteriorating Patient" topic is one of the Trust's top three QI projects for the year.
- Staff more comfortable with taking small realistic steps to achieve goals rather than focussing on the 'PDSA tasks' required.
- The experience of working together has proved very valuable and enabled the team to work towards increasing staff awareness and skills in the care of the deteriorating patient. There is an enthusiasm to learn new skills and knowledge from the services and the team look forward to the next stage.
- Innovative work in identifying soft signs of deterioration and integrating these into the organisations e-reporting systems to promote effective escalation and prompt and appropriate treatment.
- CO testing at outpatient and ward level now embedded in practice in Antenatal day assessment area. Staff confidence has grown around the risks and emotive issues of addressing smoking in pregnancy.

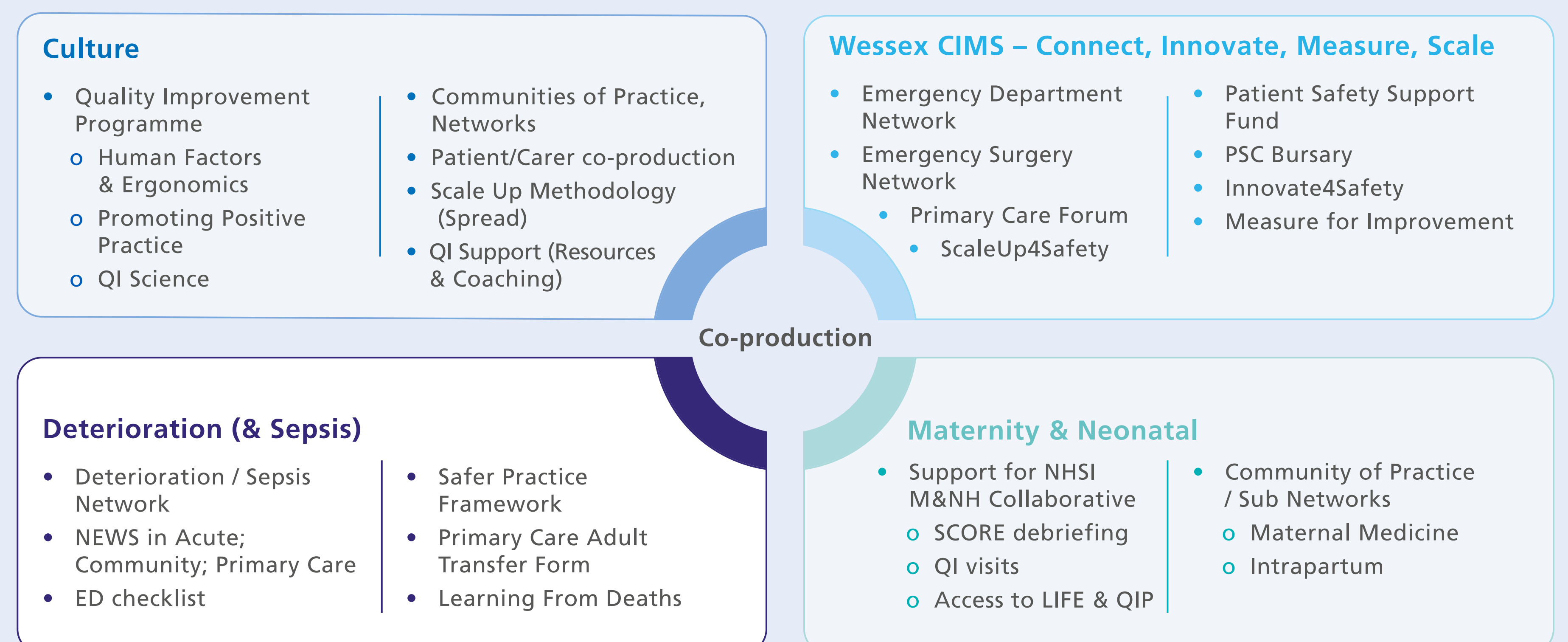
## (1) If you want to change behaviour you should consider how best to: Direct the rider, Motivate the elephant, Shape the path

Switch. How to change things when change is hard. Chip & Dan Heath 2010

## (4) Shape the path

Tweak the Environment, Build Habits, Rally the Herd, Keep the Switch Going

Wessex PSC used the BTS methodology to develop QI capability across the Wessex landscape and intends to "hold the gains" and "keep the switch going" post BTS by supporting individuals and organisations involved in QI projects that align with the PSC national Deterioration workstream.



Wessex PSC Workplan 2017/18 with Deterioration Projects highlighted