



The (Physically) Deteriorating Patient Breakthrough Series Collaborative (2016/17)

Wessex Patient Safety Collaborative used the Institute for Healthcare Improvement's Breakthrough Series (BTS) methodology to support teams working to improve the care of physically deteriorating patients.

What did the Deteriorating Patient Collaborative look like?



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

What aspects of Deterioration did the teams look at?

- National Early Warning Score (NEWS) Dorset Healthcare (Community Care)
Isle of Wight (Acute Adult Care)
West Hampshire CCG (Primary Care/Ambulance/Care Home)
- Recognition / Early Assessment Interserve Healthcare (Complex Clinical Care at Home)
Solent NHS Trust (Adult Community Care)
Southern Health (Inpatients & Learning Disabilities)
Wessex Deanery (GP / Primary Care)
- Response and Effective Escalation inc. SBAR¹ Bournemouth & Christchurch Hospitals (Acute Medical Care)
Isle of Wight (Community Care)
Portsmouth Hospitals (Acute Care)
University Hospital Southampton (Acute Medical Care)
- Fluid Balance Monitoring / Reduction of AKI² Dorset County Hospitals (Acute Care)
Poole Hospital (Elderly Care)
Salisbury Hospital (Acute Adult Care)
Poole Hospital (Surgery & Trauma Care)
Hampshire Hospitals (Acute Medical Care)
Poole Hospital (Maternity Care)
Thames Valley & Wessex Paediatric Critical Care ODN
- Improving time to IV antibiotics
- Electronic Patient Monitoring Systems
- Saving Babies Lives by reducing smoking
- Safe and reliable Paediatric Transfers

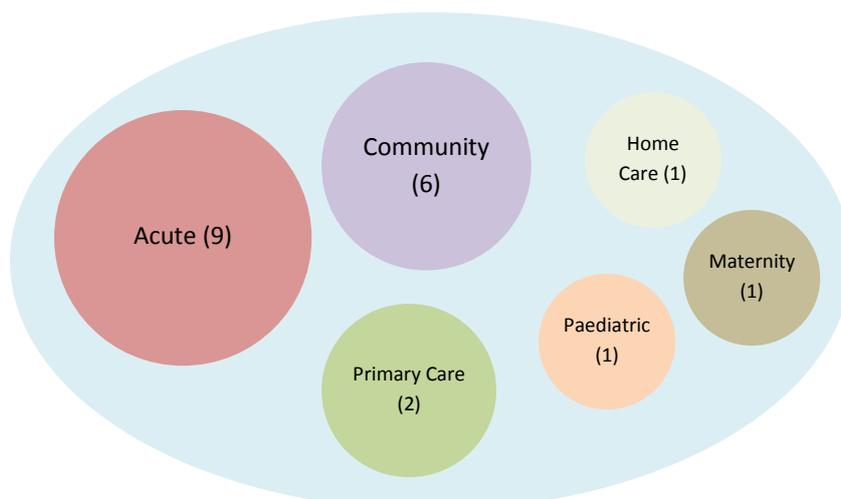
Notes: (1) SBAR: Situation, Background, Assessment, Recommendation; (2) AKI: Acute Kidney Injury.

What has been the impact of the Collaborative on participating organisations?

Our evaluation of the process indicates growth in capability evidenced by increased skills, knowledge and confidence amongst participants; teams also reported a positive and enjoyable learning experience. Operational and cultural changes were reported across the organisations taking part including examples of safer patient care, active involvement of local senior leadership and improved engagement with patient and carer representatives.



Care Sectors represented by number of BTS teams



LIFE QI System

Wessex PSC supported the improvement work by implementing a new Quality Improvement project management platform “LIFE QI”, providing access for all teams participating in the BTS. Teams were able to document change ideas, plan PDSAs, develop relevant measures and plot the impact of their changes using Run and SPC charts on a single dedicated Quality Improvement platform.

Supported by measurement experts and improvement coaches from the PSC Faculty, participating teams used a PDSA approach to “adopt, adapt and spread” the LIFE QI system in their own localities at the same time as developing expertise in the respective QI techniques. Improvement teams will retain access to the LIFE QI system after the BTS ends and by the time the BTS finished 14 teams had already recorded:



Holding the Gains

One of the overarching principles of the Patient Safety Collaborative Programme is to build system-wide capability for both staff and patients in quality and safety improvement.

In order to “hold the gains” and spread the impact after the BTS has completed, participating teams have been invited to join the Wessex Sepsis Network which will expand its role to include assessment, early identification and response to physical deterioration.

This expanded Wessex Deterioration and Sepsis Network will provide individuals and teams with ongoing expert and peer support with quarterly network learning events to help improve the outcomes for patients with sepsis and physical deterioration.

Communities of Practice

Individuals participating in the BTS have also been offered the opportunity to join the Wessex Community of Safety Improvement Practice, which grew by 21% (from 280 to 340 members) during the time of the BTS.

What the participants said about the Collaborative

- *Huge sense of pride in achieving and maintaining 100% for action implemented when indicated by NEWS score. (DHCU FT)*
- *The work we have commenced with the Collaborative will continue as one of the trust top 3 QI projects. (RBCH FT)*
- *There is an enthusiasm to learn new skills and knowledge from the services, the team look forward to the next stage.(Solent)*
- *Involvement in the collaborative has provided the CCG team with a wealth of invaluable knowledge on Quality Improvement and has already informed plans for future spread of NEWS to an increasing number of Care Homes.(WH CCG)*

