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The journey to high reliability

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High reliability organizations have common traits including: preoccupation with failure, sensitivity to operations, reluctance to simplify, deference to expertise and commitment to resilience. Using these traits as key drivers, we aimed to develop a high reliability unit (HRU), a clinical microsystem with targeted outcomes related to patient safety, resource utilization and patient experience. A medical-surgical unit was identified for a pilot program to create an HRU clinical microsystem in November of 2015. A Medical Director, Nurse Manager and Quality Consultant led the project and a key driver diagram was developed (Image 1). Process and outcome metrics were developed for each goal including: decreased hospital acquired conditions and serious safety events, improved resource utilization and enhanced patient, family and provider experiences. Multidisciplinary daily management rounds were instituted with a focus on identifying and prioritizing discharges and timeliness of discharge orders. Unit digiboards as well as a monthly newsletter were utilized to promote transparency and accountability to the defined goals. HRU outcome dashboard is shown in Image 2. Serious safety events on the unit remained at zero. Severe peripheral IV infiltration rates decreased by 27%. Interventions targeted at throughput resulted in a 10% improvement in patients discharged by 1400. Diagnosis specific clinical pathways were created which resulted in improved length of stay and direct cost compared to baseline institutional and PHIS (Pediatric Health Information System) data. Overall patient and employee satisfaction improved from institutional and national benchmark. Next steps include sustained improvement and expansion to additional units.

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