

Cook Children's Culture Journey

Lorrainea Williams, PharmD

Rachel Wenthe, RN, MBA

Catie Jensen, MA, CHES

Our Promise

**ZERO
HARM**
OUR CALL TO SAFETY

“Knowing that every child’s life is sacred, it is the promise of Cook Children’s to improve the health of every child in our region through the prevention and treatment of illness, disease and injury.”



Training Background



Phased rollout Lessons Learned

2013-2014

- Gaps in training completion
 - LMS set-up/ system constraint for accomplishing phased roll-out led to difficulty tracking
 - Recommend – do one course/event type for tracking. Front load course as required.
 - Some new hires missed during the extended rollout period
- Team classes very effective – varied times, smaller groups
- Slight inconsistencies in training message with 30 different trainers
- Started with high-risk areas, may be best to be more familiar with material then do areas most susceptible to risk

- Sample Zero Harm slide used in board presentations, new hire training and on intranet:
 - Blue = 0 events for month; numbers deleted for this presentation
 - Grey = Needs Information
 - Added unit specific data in 2017 on intranet

Zero Harm - Every Zero Matters												
2017	January	February	March	April	May	June	July	Aug	Sept	Oct	Nov	Dec
Central Line Associated Blood Stream Infections (excluding MBI)												
Catheter Associated Urinary Tract Infections												
Ventilator Associated Pneumonias												
Surgical Site Infections												
Medication Errors (Severity 6/F or higher)												
Serious Falls												
Venous Thromboembolism Events*												
Hospital Acquired Pressure Injuries (stage 3, 4, Unstageable)												
Preventable Readmissions - 7 days or less												

Daily Safety Briefing Evolution

2013

When started – 6/2013

- Week days only
- Asked yes/no: Any safety concerns?
- Reviewed and revamped one month in after discussing with department leads – what metrics are meaningful to know?
- Clear roles

2017

Now

- All days of the week
- Specific metrics and safety concerns (no more yes/no); review with sustainment team what data is needed from what team
- Clear roles

Senior Leader Rounding

2014

- Started 2/2014
 - Documentation in qualtrics after rounding
 - Paired clinical SL with non-clinical SL with admin support in quality handling logistics – setting up calendar appointments, tracking cancellations, ensuring all involved
 - Met monthly to discuss logistics and findings

New Hire Training changes

2013

2015

2017

- 2013-2016: 2 separate classes for all new hires, 5 hours of training
- 2017: Reduced from 5 hours to 3 hours.
 - Many videos were removed, the biggest being the safe choices initial training.
 - The main concepts for Error Prevention and Just Culture are presented.
 - CME credit is now offered.

Safety Coach Program



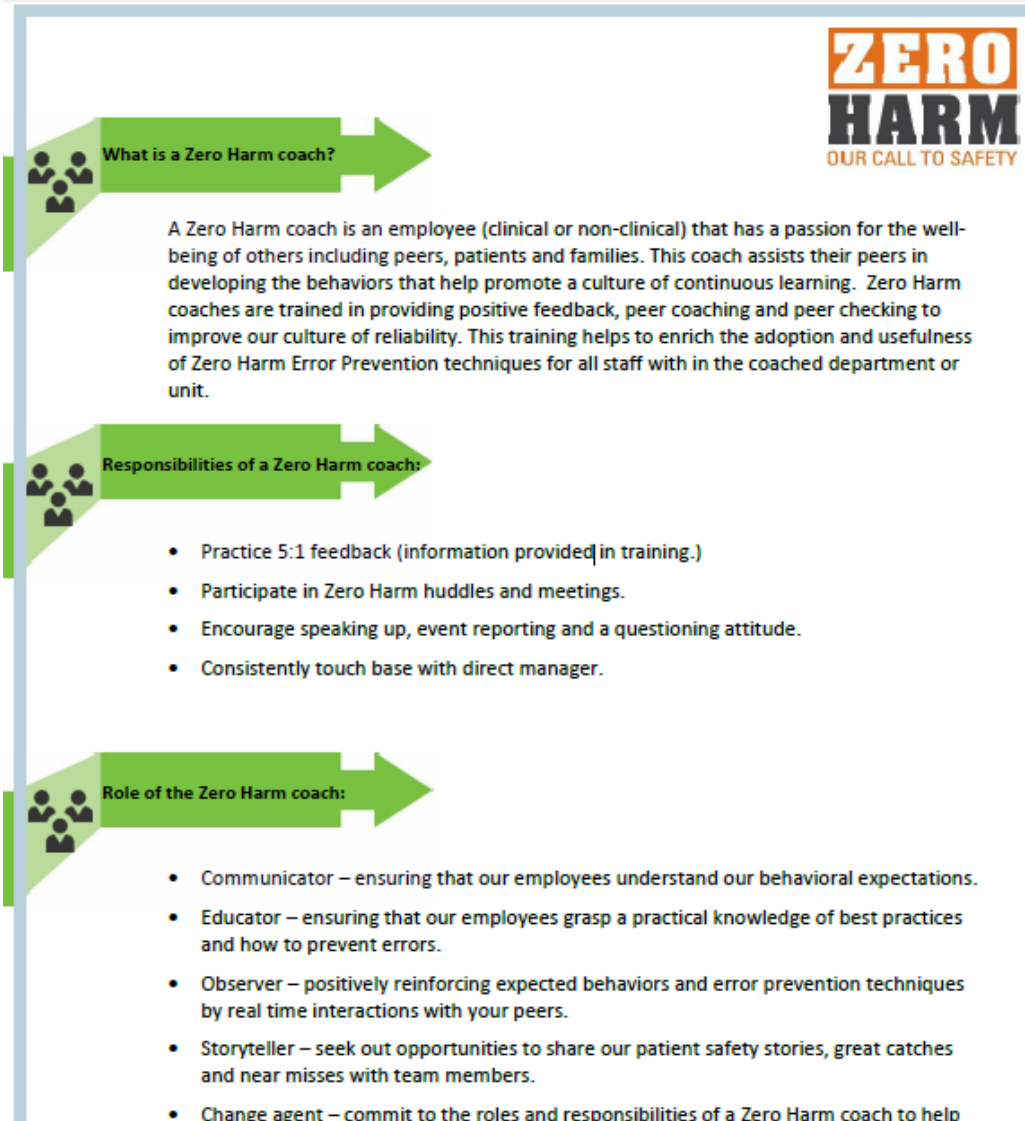
2014

2017

- Pilot in PICU & NICU in 2014 with incentive
 - Lessons learned: BOTs lost meaningfulness, debriefs very helpful, huddles chosen to add monthly structure to program
- All of Medical Center rollout in October 2014
 - Coach driven, lots of feedback over the last 3 years
 - Accountability for coach role led to clarify completion requirements in 2016
 - Curriculum with additional development in 2017

Clarify Role

Bringing life to safety...



Energy to
teams!

Clarify Expectations



Expectations of a Zero Harm Coach



- Review month email & topic.
- Share topics with your team.
- Facilitate discussion with your team.
- Complete Zero Harm coach curriculum (tracked in ULearn) which equals about 4 hours/year of development. Opportunities include:
 - Huddle– 15 min
 - Rounding with Safety Program Educator – 30 min
 - Annual meeting – 1.5 hours
 - Breakout sessions – 1 hour
 - Quality Quick Topic – 30 min

We promote safety and compliance to best practices!

"Connection is the energy that is created between people when they feel seen, heard, and valued."

-Brene Brown, PhD, LMSW

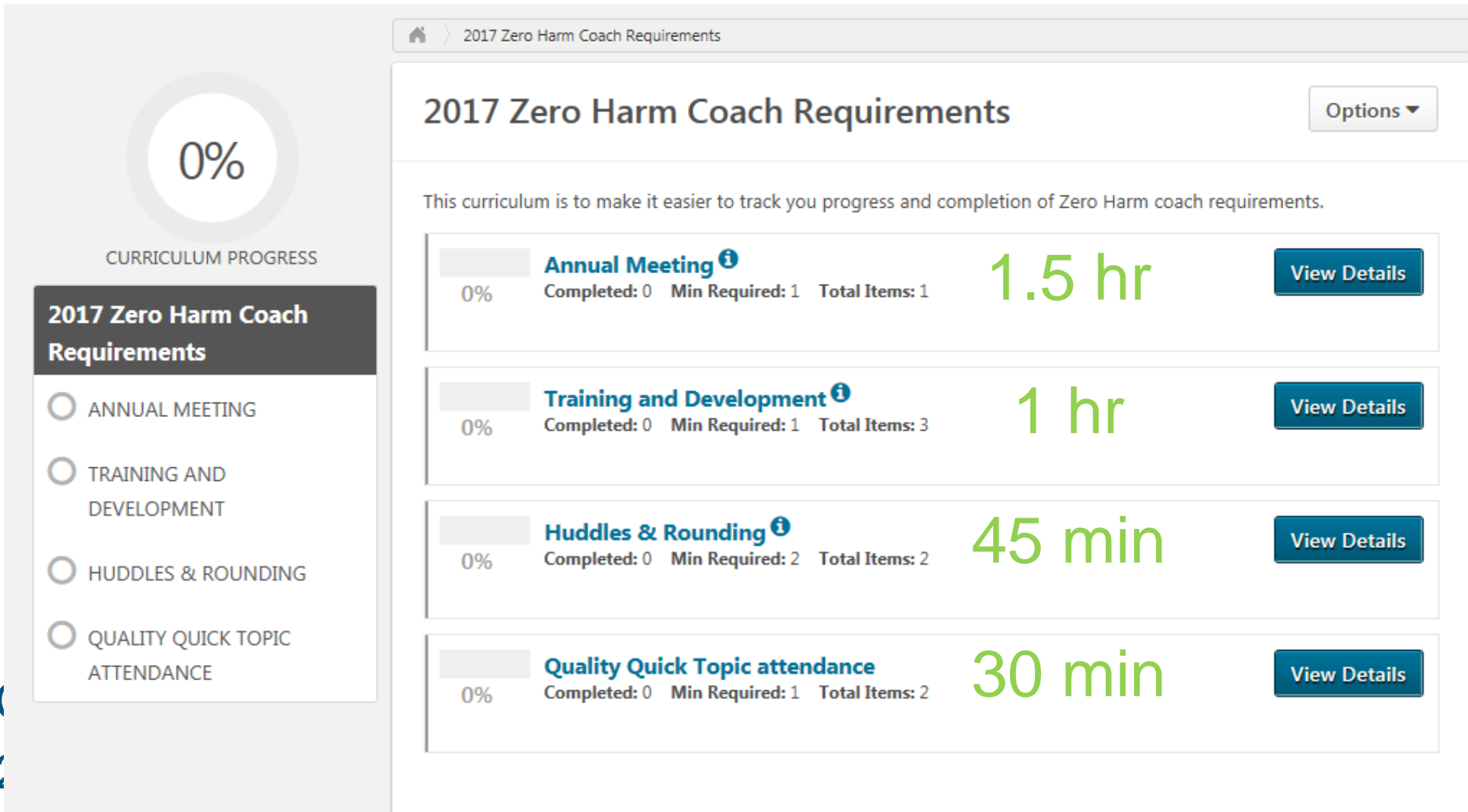


What tool works great for communicating an issue?



SBAR! It is a tool that clarifies all necessary details that a decision maker needs to know. Parents, managers, and coworkers in other areas benefit when you use SBAR!





Varied experiences



Additional Requirements found on ULearn Curriculum

What	When	Description	Where
Breakout Sessions	(see below)	Choose from 3 topics Interdisciplinary discussions to improve our reliability and safe journey	Pavilion Classroom 6
Huddles	(see below)	Monthly learning opportunities	Varied, see below
Quality Quick Topic	Schedule with Catie	Practical application of skills learned in training	Hochberger
Rounding			In your unit/area



Development based on coach feedback/needs


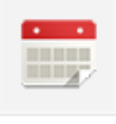
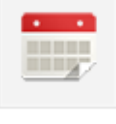
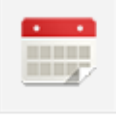


2017 Zero Harm Coach Requirements

Options ▾

0%

Training and Developmentⁱ
Completed: 0 Min Required: 1 Total Items: 4

	Zero Harm Tools: Peer to Peer conversations Status: Approved Due: No Due Date Training Hours: 1 hrs 30 min Feedback is essential to a proactive learning culture that can reach performance excellence and the goal of Zero Harm. Participants will practice giving effective...	Select Session ▾
	Zero Harm: Healthcare Safety Science Status: Approved Due: No Due Date Training Hours: 1 hrs Safety Science has evolved tremendously in all industries in the last century. In healthcare, improvements in safety science are happening at a rapid pace....	Select Session ▾
	Zero Harm: Respect & Safety Status: Approved Due: No Due Date Training Hours: 1 hrs Culture transformation that allows for safety and learning is dependent on respect. Participants will be involved in meaningful discussion and activity...	Select Session ▾
	Just Culture: Algorithm Work Session Status: Approved Due: No Due Date The Just Culture Algorithm, a decision-tree tool, helps us create a fair and just learning culture by thoroughly investigating and evaluating events and near...	Select Session ▾

Application and mentoring

2017 Zero Harm Coach Requirements

Huddles & Rounding ⁱ

0%

Completed: 0 Min Required: 2 Total Items: 2



Zero Harm Safety Coach Huddle

Status: Pending Prior Training Due: No Due Date



Zero Harm Coach Rounding

Status: Pending Prior Training Due: No Due Date Training Hours: 30 min
This is to track rounding with the safety program education coordinator or other designated lead. This includes engaging peers in the coach's work environment in safety conversations and a short debrief to allow for development of the coach's feedback skills.

Huddles

Four per month, only attend one per month, required to attend one in 2017. Follows a consistent monthly schedule:

- First Wednesday at 1015, mostly** Atrium Classroom
- Second Tuesday at 1515 (3:15pm), Atrium Classroom
- Third Thursday at 1415 (2:15pm), Dodson 2B (third full week)
- Fourth week, rotating a quarterly **night time huddle** (2215) with *Friday huddles* (1015), mostly** Pavilion Classroom 6

Date	Day	Time	Room
January 3	Wed	1015-1030	Atrium Classroom
January 10	Tue	1515-1530	Atrium Classroom
January 19	Thu	1415-1430	Dodson 2B
January 26	Thu	2215-2230	Pavilion Classroom 6
February 1	Wed	1015-1030	Pavilion Classroom 6**
February 14	Tue	1515-1530	Atrium Classroom
February 23	Thu	1415-1430	Dodson 2B
February 24	Fri	1015-1030	Atrium Classroom**

Further sustainment – Quality Quick Topics

2015

- 30 minutes sessions, two per month (Leaders & all staff)
- Varied topics related to culture development & improvement work
- Well attended – average of 42 leaders/ month and 135 staff / month (up from 92 last year)

Quality Quick Topic Series

The Quality Quick Topic series is a monthly educational offering for highlighting key concepts, theories, and practices to support high quality outcomes, service and care.

Objectives:

- Distinguish ways to improve quality in your job role and team.
- Identify ways to improve your work, work environment and outcomes.
- Apply quality practices to enhance the patient experience, process, interpersonal relationships, communication, teamwork, and safety.

Still much to improve upon

- Idea from our region regarding:
 - How to measure 5:1 feedback?
 - Making huddles a solid/consistent practice in every department?
 - Have seen much growth in this practice but it is not yet in every department
 - Leaderships Rounding reliability in every department, local leaders