

Paediatric Care Improvement Group (B11)

14-15 March 2018, Brisbane
Meeting Code HRT1804

Why participate?

- ❑ Compare performance in Paediatric care with other specialist services
- ❑ Track clinical and operational trends on key Paediatric indicators
- ❑ Share issues and innovations with your colleagues
- ❑ Develop practical action plans to improve your service over the next year

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Select Optional Activity B11 on your subscription agreement and return by email to:
accounts@healthroundtable.org

COST

\$A5,250* for first facility in your network. \$A4,250* for each additional facility. *excl GST

Individual delegate venue fees are billed separately.

ENQUIRIES

General Manager

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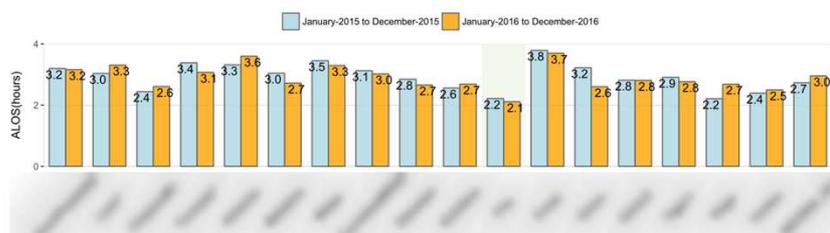
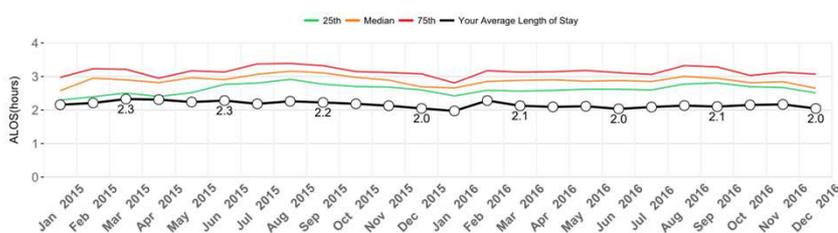
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This year we will look at “*Ways to improve the experience and outcomes for children and their families.*” We will focus on issues relevant to both a specialist paediatric hospital and a General Hospital that also has a paediatric department.

The group will examine different models of care and compare results across the member hospitals. What impact do they have on Emergency Access Targets? How is Length of stay effected? Is there an impact on re-presentations to the Emergency Department?

Jan 2016 - Dec 2016 | Paediatric Emergency (U17) |

In January-2016 to December-2016 period, the average time spent in ED for all patients at Fox was 2.1 hours



* Hospitals do not have continuous 12 months of data in the current period

In addition, each Hospital will receive an extra version of the National Standards Report, Hospital KPI Report, Emergency Report, Inpatient Briefings and a Top Ten Report adjusted to only include Paediatric patients. This will lead to much more meaningful comparisons across the membership group.

Standard	Indicator	Latest 12 months	HRT median	Performance*	2 year trend	Latest quarter	Details on page
1- Governance for safety and quality	1.1 - Hospital standardised mortality ratio (HSMR)	73	73	🟢	📈	56	3
	1.2 - Percentage of ED waiting times within 4 hours	72%	72%	🟢	📈	70%	4
	1.3 - Acute care type RSI (excluding mental health)	90%	91%	🟢	📈	92%	5
2- Partnering with consumers	2.1 - Proportion of formal complaints closed within 35 days*			🟢	📈		6
	2.2 - Proportion of formal complaints acknowledged in 5 days*			🟢	📈		7
3- Preventing and controlling risk	3.1 - Healthcare associated SAB per 10,000 bed days	0.9	0.7	🟡	📈	0.3	8
	3.2 - Rate of hand hygiene compliance*			🟢	📈		9
	3.3 - Risk adjusted rate of urinary tract infections	0.6%	0.5%	🟡	📈	0.6%	10
4- Medication safety	4.1 - Skin adverse effects per 10,000 bed days	0.3	0.3	🟢	📈	0.2	11
	4.2 - Coagulation defects due to drugs per 10,000 bed days	3.4	3.0	🟡	📈	4.2	12
6- Clinical handover	6.1 - 28 day emergency readmission rate	7.5%	7.0%	🟡	📈	7.7%	13
	6.2 - 28 day emergency readmission rate (excluding short stay)	5.5%	6.9%	🟢	📈	5.7%	14
	6.3 - Mental health 28 day readmission rate	7.4%	11.6%	🟢	📈	6.8%	15
7- Blood Management	7.1 - Transfusions in planned major gastrointestinal surgeries	6.6%	7.5%	🟢	📈	6.4%	16
	7.2 - Transfusions in planned hip and knee replacements			🟢	📈		
8- Preventing and managing pressure injuries	8.1 - Risk adjusted rate of pressure injuries	3.3%	1.5%	🟡	📈	3.7%	18
	8.2 - Risk adjusted rate of stage 3 and 4 pressure injuries	0.07%	0.03%	🟢	📈	0.07%	19
	8.3 - Rate of unspecified pressure injuries	12.9%	20.6%	🟢	📈	7.8%	20
9- Recognising and responding to clinical deterioration	9.1 - Risk adjusted rate of cardiac and respiratory arrest	0.14%	0.05%	🟢	📈	0.17%	21
10- Preventing falls and harm from falls	10.1 - Risk adjusted rate of in-hospital falls	0.19%	0.24%	🟢	📈	0.20%	22
	10.2 - Falls with fracture or intracranial injury per 10,000 bed days	0.7	0.9	🟢	📈	1.4	23

* Performance bands are quartiles of the z-scores. ^ Indicators marked have results for the last 6 months as they are collected at a different frequency.

Paediatric Care Improvement Group

What do you need to do?

- ❑ Designate a key liaison contact for questions and follow-up
- ❑ Regularly review updated reports for questions, comments or issues
- ❑ Report on progress made on improvement aims
- ❑ Organise a multi-disciplinary team to attend the annual workshops
- ❑ Identify improvement objectives for implementation based on innovative ideas learnt

What does The Health Roundtable do?

- ❑ Produce tailored 'Paediatric only' reports six monthly extracting data from the inpatient episode collection, highlighting trends and differences in performance
- ❑ Invite expert speakers who can share innovative ideas on the key topic for the workshop
- ❑ Facilitate the annual meeting, and provide help identifying innovative practices for implementation
- ❑ Liaise with the Paediatric Steering Group to make sure The Health Roundtable data and meetings are relevant for your priorities

Date	Timeline 2018
16 Jan	Pre-meeting survey distributed
17 Feb	July–Dec 2017 IP data on Website
8 Mar	Pre-meeting Briefing package distributed
14-15 Mar	Paediatric Group Workshop Brisbane
Nov	Jan–June 2018 data on website

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The Health Roundtable helps health executives learn how to achieve best practice in their organisations. We collect and analyse operational and clinical data of our member organisations to search for innovations in patient care. We promote collaboration and networking amongst health executives and staff through our roundtable meetings, workshops, and other activities.

Health Roundtable Reports for Paediatric Group members include a 'Top 10 DRG' report highlighting potential opportunities to reduce length of stay compared to other hospitals with paediatric patients. This report will be age restricted.

Name	RSI	Eps	Savings
B76 SEIZURE	145%	150	242
D11 TONSILLECTOMY, ADENOIDECTOMY	112%	201	168
E62 RESPIRATORY INFECTN/INFLAMM	102%	143	163
K60 DIABETES	134%	71	159
K62 MISC METABOLIC DISORDERS	118%	61	140
D63 OTITIS MEDIA & URI	119%	203	125
P67 NEO,ADMWT >2499G-SIG OR PR	72%	77	112
G70 OTHER DIGESTIVE SYSTEM DIAG	124%	185	106
E70 WHOOPNG CGH &ACTE BRNCHIO	76%	166	97
B81 OTHER DSRD OF NERVOUS SYS	137%	38	90

Savings: 1,401



Comments from workshops:

- » Great to see non tertiary centres being involved
- » Very interesting to know differences. Also reassuring to know similarities
- » Great resources on website, excellent networking opportunities