

Quality and Safety Walk-rounds

Toolkit Resources



Féidhmeannacht na Seirbhíse Sláinte
Health Service Executive
Quality Improvement Division



Part 3

Toolkit Resources

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Resource 1 : Terms of Reference Quality and Safety Walk-round Steering Group

Role and Responsibilities

- Agree on membership and invite new members as required
- Approve the selection of new walk-round leadership team members
- Develop and implement a Communication Plan
- Identify training requirements and approve and develop new programmes
- Provide overall direction and leadership for the delivery and implementation of the project
- Approve all stages and plans, commit resources and resolve issues as required
- Oversee the implementation of quality and safety walk-rounds in clinical and non-clinical areas and to agree pace of rollout
- Ensure that the programme receives local and national recognition
- Ensure that the programme is on target and meets its approved objectives
- Sign-off on key programmes milestones/ deliverables
- Approve the use of external walk-round methodologies/toolkits within the organisation
- Evaluate and regularly review the effectiveness of the programme
- Support the sustainability of the programme

Reporting Relationship

- Provide reports to Clinical Governance /Quality and Safety Committee / Board /Executive Management Team

Membership

- CEO Project Sponsor
- Representatives from Senior Management Team / Executive
- Director of Nursing
- Hospital Board Nominee
- Chair of Clinical Governance
- Director of Human Resources
- Director of Finance
- Representative from each Directorate Management Team
- Quality and Safety Manager
- Facilities Manager
- Learning and Development
- Medication Safety Lead

Resource 2 : Quality and Safety Walk-round – Contact information and Schedule

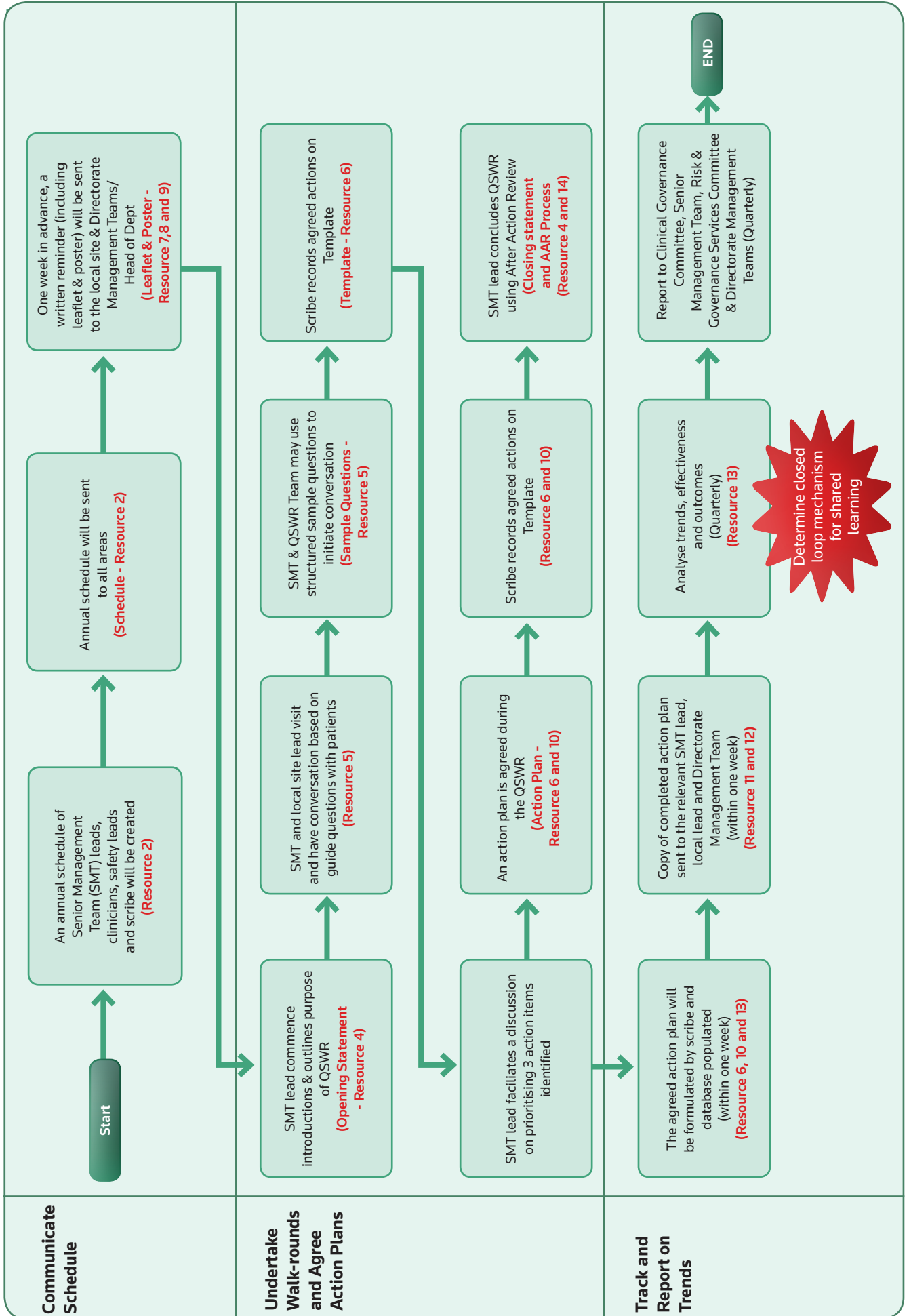
Quality and Safety Walk-round Contact Information

	Ward/Department/ Unit	Directorate/ Division	Nurse/Midwife Lead	Medical Lead	Phone	Email

Quality and Safety Walk-round Schedule

Department/ Directorate	Unit/Team	Date	Day of Week	Time	REPRESENTATIVE			
					Senior Manager	Clinical Lead	Safety Lead / Other	Scribe

Resource 3 : Quality and Safety Walk-round Process



Resource 4 : Quality and Safety Walk-round Opening and Closing Statements

Opening Statement

This sets the context of the QSWR and provides an opportunity to explain the process and outline everyone's role.

We are here on a Quality and Safety Walk-round today and the team is made up of a senior management representative (Name & Role), a member of our safety team (Name & Role), a clinical lead (Name & Role) and (Name & Role) will assist us with note keeping today.

So could you introduce yourselves and tell us your roles.

We are interested in focusing on systems and processes and not individuals. Each of us has an important role to play in patient safety so your views are very valuable. We must highlight that this is not an inspection or an audit.

We are here to listen to you as we want to work together to improve patient care and safety. Our aim is to discuss good safety practice and concerns and work with you to improve the environment and overall delivery of care. During our visit today we would like to meet with 1 or 2 patients (if appropriate for the area being visited) to seek their views on safety also.

Where would be a good place to have our discussions today?

Closing Statement

This allows the Quality and Safety Walk-round team feedback what has been heard and observed during the walk round, it also allows for all parties to recap on the agreed actions timeframes and responsible persons. The closing statement will also remind staff to identify good practices that can be shared.

Thank you for taking the time to meet with us today. We appreciate how busy you are and hope you have found some benefit from the conversation. We are very glad that we have come here today as this has been very beneficial. There are some actions that we have agreed can be managed by yourselves or that you need to discuss with your directorate management team. You have also highlighted some issues that the directorate management team and ourselves will need to discuss further to follow up.

From here the actions we have agreed together to prioritise will be sent within xxxxx (agree a timeframe) to you (Unit Manager) and to your directorate management team to support you with follow up.

One of the things today that we have been so impressed with is how proactive you and your team have been with (give an example of a quality initiative that has been discussed). We would like you to think about how you can share this great initiative with other similar areas in the hospital.

Following today, we would like you to inform your team about today's walk-round so that all staff members are aware of the agreed actions.

Resource 5 : Quality and Safety Walk-round Customised Questions

The questions can be used at any time throughout the visit to assist with open communication as needed. It is not imperative that the team stick to these questions but rather use them to get engagement. There are also patient questions if deemed appropriate.

Beaumont Hospital Questions Bank

Introduction Questions

1. *What do you do well – what are you most proud of here?*
2. *What patient or staff issues cause you concern in relation to quality and safety?*

People patient/staff

1. *Can you describe how communication either enhances or inhibits safe care on your unit in the following areas - Handover, multidisciplinary team, patients or relatives?*
2. *How can patients/relatives raise safety concerns?*
3. *Have any concerns been raised by staff members with regard to quality or safety?*

Equipment

1. *Do you have any safety concerns about the equipment in your area?*

Task

1. *Today are you able to care for your patients as safely as possible? If not, what is prohibiting you?*
2. *Do you feel you have the ability and support to perform the tasks which are expected of you?*

Environment

1. *Can you think of a way in which the environment fails you or your patients on a regular basis?*
2. *Are there opportunities for improving the environment that you think are feasible?*

Organisational

1. *What specific action could the leadership team take to make the work you do safer for patients and staff?*
2. *What could you and your team do on a regular basis to improve quality and safety for patients and staff?*
3. *Can you highlight an example of good practice that could be shared with other areas?*

Patient Engagement

1. *Is there anything that we could do better with regard to quality and safety?*

Resource 6 : Quality and Safety Walk-round Transcription Template

Quality and Safety Walk-round Transcription Template

Date:		Time:	
SMT Lead:		Location:	
Clinical Lead:		Scribe:	
Other:		IQS:	

Did the area receive letter of (i) Notification of QSWR? (ii) QSWR Leaflet?

Present	Grade/Role	Present	Grade/Role

Action Plan

**Pick 3 key areas for Local Action and Corporate Action*

1	Description:	
	Work to Date:	
	Action Req:	
	Action Owner:	Review Date:

2	Description:	
	Work to Date:	
	Action Req:	
	Action Owner:	Review Date:

3	Description:	
	Work to Date:	
	Action Req:	
	Action Owner:	Review Date:

Discussion Notes:	

Resource 7: Quality and Safety Walk-round Notification E-mail

This letter/e-mail is sent to the visiting area one week in advance of the walk round. It highlights the date/time and outlines what the areas should expect from the visit and also outlines the need for the area to prepare in advance and ensure the appropriate staff is present. Walk-rounds should be scheduled on a day and time that suits the area being visited.

[insert date]

Dear XXX,

XXXX ward/unit has been scheduled for a Quality and Safety Walk-round (QSWR) on the dd/mm/yyyy from XX:XX am to XX:XX am.

These walk-rounds are part of our commitment to patient safety and improving patient care.

The aim of the Quality Safety Walk-round is to provide an opportunity for a member of the senior management team to meet with a consultant / clinical director, the local manager and multidisciplinary team members to showcase good practices and highlight any concerns. To make the most of this opportunity, it would be useful for you and the team to reflect on what you would like to discuss. Prior to the walk-round you are asked to ensure that both yourself or representative and a clinical lead is available to participate on the Quality and Safety Walk-round.

All staff have an important role to play in improving safety, therefore the walk-round team would like to use the visit as an opportunity to speak to key staff of any grade or profession. Please inform staff members of the quality and safety walk-round and their opportunity to engage in the process. The walk-round team would also welcome the opportunity to speak with patients if possible and this can be discussed on the day.

Attached is a leaflet on the Quality and Safety Walk-round process which provides more detail for your team to help them understand the purpose of the visit. A Quality and Safety Walk-round notice is also attached and we would appreciate it if you could display this in a visible area.

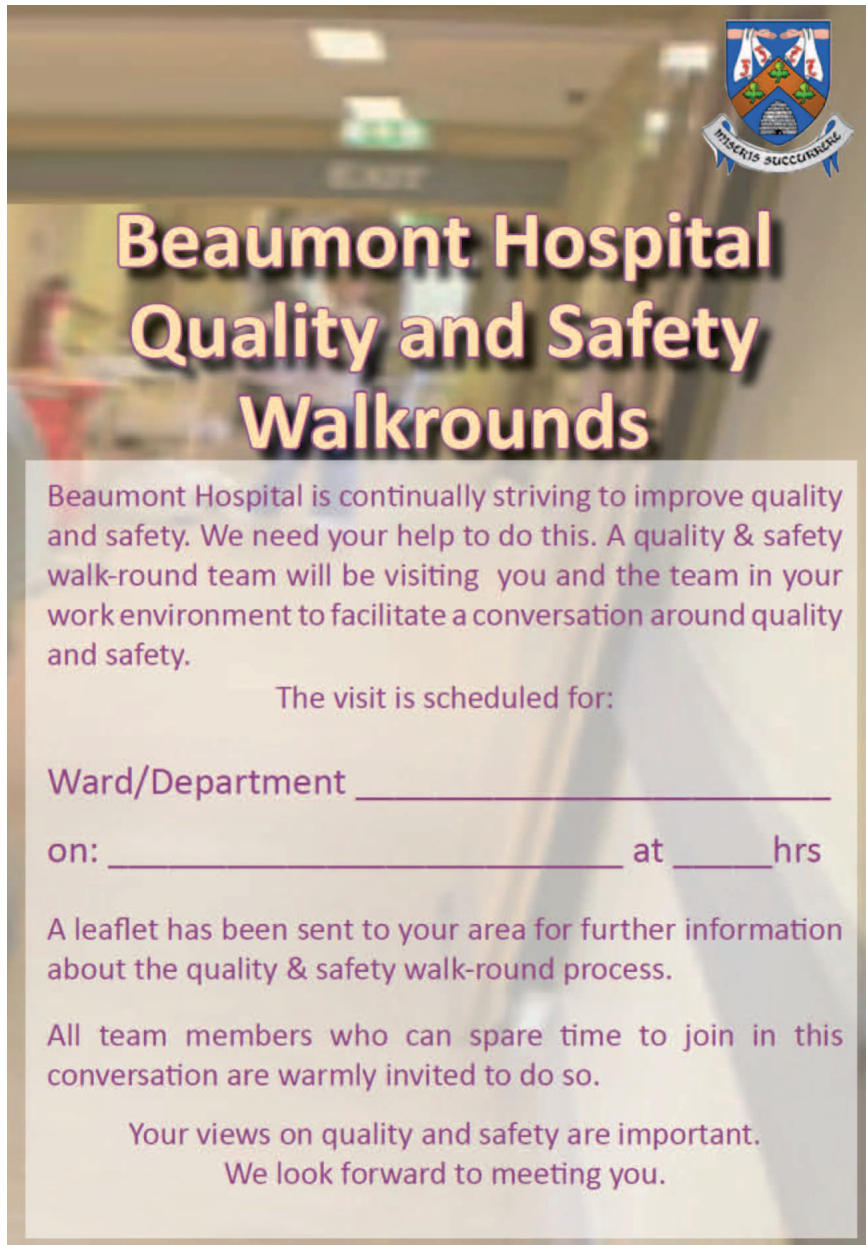
We look forward to meeting with you and your team.

Kind regards,


If you have any queries please contact...

c.c. Directorate Management Team / Department Heads / Service Manager.

Resource 8: Quality and Safety Walk-round Notice



The image shows a notice for Beaumont Hospital's Quality and Safety Walkrounds. It features the hospital's crest in the top right corner, which includes a shield with various symbols and a banner below it with the motto 'IN SCIENTIA SUCCURRERE'. The main title is 'Beaumont Hospital Quality and Safety Walkrounds' in large, bold, orange-outlined letters. Below the title, there is a paragraph of text explaining the purpose of the walkrounds and asking for staff participation. There are also lines for providing the ward/department and the scheduled time. The background of the notice is a blurred image of a hospital hallway.



Beaumont Hospital Quality and Safety Walkrounds

Beaumont Hospital is continually striving to improve quality and safety. We need your help to do this. A quality & safety walk-round team will be visiting you and the team in your work environment to facilitate a conversation around quality and safety.

The visit is scheduled for:

Ward/Department _____
on: _____ at _____ hrs

A leaflet has been sent to your area for further information about the quality & safety walk-round process.

All team members who can spare time to join in this conversation are warmly invited to do so.

Your views on quality and safety are important.
We look forward to meeting you.

Resource 9: Quality and Safety Walk-round Leaflet

Beaumont Hospital Safety Programme

The Quality & Safety Walk-rounds process is aimed towards improving patient and staff safety in Beaumont Hospital. The safest organisations are those able to:

- create a culture that puts patient quality and safety at the centre of everything we do;
- provide guidance and support to remove barriers and develop people to improve patient safety;
- Ensure quality and safety are strategic priorities for the organisation
- Share good practices throughout the organisation and beyond.

Quality & Safety WalkRounds

References.

A. Frankel, E. Graydon-Baker, C. Neppi, T. Simmonds, M. Gustafson, and T.K. Gandhi (2003) "Patient Safety Leadership Walkrounds", *Joint Commission Journal on Quality & Safety* 29 (1):16-26

M. Leonard, A. Frankel, T. Simmonds, and K. Vega (2004). "Achieving Safe and Reliable Healthcare Strategies and Solutions" [Health Administration Press, Chicago, IL]



Beaumont Hospital

Quality & Safety
Walk-rounds
(QSWRs)

Beaumont Hospital striving to continually improve quality and safety.

Date Issued: June 2014
 Review Date: June 2016
 Author (s) Quality & Safety Walk Rounds Group
 Approved by: Quality & Safety Walk Rounds Group



PRINTROOM PDON PROOF 26032014U0002015

WHY ARE WALKROUNDS IMPORTANT?

Walk-rounds are a way to connect Senior Management with staff in clinical and clinical support areas to talk about their ideas and issues about quality and safety. The aim of the Walk-rounds is to:

- Increase staff engagement and develop a culture of open communication
- Identify, acknowledge and share good practice.
- Strengthen commitment and accountability for quality and safety.

provide an opportunity for the team to reflect on quality and safety for their area in preparation for the walk-round.

On the day of the walk-round an Executive member will explain and introduce the walk-round process, you and the team will be asked some structured questions to facilitate a conversation about quality and safety in your area and the discussions will be captured by a note taker. The discussion will be about:

- Your key patient or staff safety concerns
- How can we improve quality and safety together?
- Teamwork - how does your local team work?
- Are there any communication issues?
- What good practices are performed in your area and can we share them

At the end of the process we will agree at least 3 key shared actions as priorities to be taken forward to make the area safer for patients and staff.

WHAT WILL HAPPEN TO THE INFORMATION WE GATHER?

A summary and action plan will be sent to the local team following the walk-round, confirming the main issues discussed & key actions to be undertaken, including who will take responsibility for them and a time frame identified.

WHERE DOES THE WALKROUND TAKE PLACE?

The walk-round team and local staff can meet in any area that suits the ward or department normally close to the area of activity.

The area should allow approximately 1 hour for the walk-round to take place. This will comprise of a brief walk-round of the area followed by a discussion in a convenient meeting area with the team members

WHAT HAPPENS AT THE WALK-ROUND?

Prior to walk-rounds, a scheduled annual rota of QSWRs will be available to all areas which will include dates, times and locations of QSWRs. Each area will be reminded one week in advance of scheduled walk round. This reminder will

At Beaumont Hospital we pride ourselves in seeking to attain the highest standards in everything we do. Each one of us has a duty to know what is required of us and to play an active part in promoting Quality & Safety in the workplace.

WHO IS INVOLVED?

We would like the whole team in your area to be involved as everyone has a valuable contribution to make. The executives visiting the clinical / clinical support area would like to meet the local manager who will attend the walkround and facilitate relevant MDT staff in the area including students, doctors, nurses, HCAs, Technicians, Catering, AHP's, Portering, Admin staff, managers working in the area and any other staff. Patients may also be involved in this process.

The walk-round team will consist of a maximum of 4 people and may include people such as the Chief Executive Officer, Chief Operations Officer, Directors of Human Resources & Nursing, Medical Director, Clinical Governance, IQS staff, General Services, & TSD. A member of the Beaumont Hospital safety team will record the issues discussed.

KEY MESSAGE

Quality & Safety walk-rounds are an opportunity to raise patient & staff safety issues directly with executives, whether to discuss challenges you face or good practice you would like to share. They are not an inspection. The issues raised can be for action or information.

Resource 10: Quality and Safety Walk-round Action Plan Template

CATEGORY	ISSUE OR CONCERN RAISED	WHAT HAS ALREADY BEEN DONE TO ADDRESS ISSUE	ACTION TO BE TAKEN FOLLOWING WALK-ROUND	PERSON RESPONSIBLE	DUE DATE
Organisation/ Management					
Environmental					
People (Staff and Patients)					
Equipment					
Task					

FEEDBACK	SUGGESTIONS

Resource 11: Quality and Safety Walk-round Communication after the Quality and Safety Walk-round

A copy of the draft Action Plan is circulated to all those present at the walk-round for comment and approval. All positive feedback and suggestions for improvements are also noted and these are included in the email sent to the team following the walk-round. In some instances, it can be useful to focus on a small number of high priority issues identified on a Quality and Safety Walk-round. A suggested email template is as below. It is good practice to distribute the draft action plan within an agreed time frame.

[insert date]

Dear XXXX,

Thank you for investing the time and participating in the Quality and Safety Walk-round to XXXX unit/team on dd/mm/yyyy.

As agreed, please find attached a draft version of the action plan that highlights safety action points that together we will take forward with the intention of resolving or raising further awareness on the issue.

In addition, we would like to note the positive feedback we received during the visit:-

- 1.
- 2.

Suggestions for unit/team to consider as part of promoting further good practice are:

- 1.
- 2.
- 3.

If you wish to make any amendments to the attached report or to the comments above, I would be grateful if you could please let me know by XXX 20XX. The final action plan will then be emailed to all concerned to ensure agreed actions are taken forward.

Kind regards,

Resource 12: Quality and Safety Walk-round Final Communication after the Quality and Safety Walk-round

The final action plan is circulated to all participants in the walk-round within an agreed timeframe. An example email template is as below. The named person for coordinating the Quality and Safety Walk-rounds takes responsibility for following up progress on the action plans as the deadlines approach. Progress on all other issues are normally captured at the next walk-round visit for that particular area (or as agreed by the executive/senior management team).

[insert date]

Dear XXX,

Thank you for participating in the Quality and Safety Walk-round to XXXX unit/team on dd/mm/yyyy.

Further to my email (dated XXX) please find attached the final action plan that takes account of your comments and highlights the agreed priority issues that will be taken forward.

Again, we would like to note the positive feedback we received during the visit:

- 1.
- 2.

Suggestions for unit/team to consider as part of promoting further good practice are:

- 1.
- 2.
- 3.

Our agreed time scale for addressing the issues is dd/mm/yyyy. Please keep me briefed on the progress to enable me to update the Quality and Safety Walk-round database.

Kind regards,

Resource 13 : Quality and Safety Walk-round Database Fields

Clinical Unit	Area	Ward Contact	Date	Day of Week	Time	Representatives

Actions Sent	Action Deadline	Actions Followed Up	Actions Outstanding	Actions Chased	Actions Closed	Final Report Sent

Resource 14 : After Action Review Process

After Action Review (AAR) Process

An After Action Review (AAR) is a discussion of an event that enables the individuals involved to learn for themselves what happened, why it happened, what went well, what needs improvement and the lessons learnt. The AAR seeks to understand the expectations of all those involved and provides insight into events and behaviours in a timely way with the learning leading to personal awareness and action.

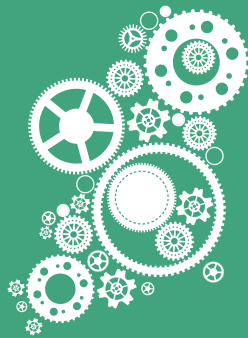
After Action Review (AAR) The Four Steps

What was EXPECTED?	What ACTUALLY happened?
<p>Before the event, what was the objective, plan or expected outcome? What did we set out to do?</p> <p><i>It could be a shared plan, a formal agreement, a guideline, a personal expectation, or simply regular practice</i></p>	<p>After the event each participant describes what they did, saw or experienced during the event</p> <p><i>Explore the facts, while acknowledging the perspective and feelings of others</i></p>
WHY there was a difference?	What can be LEARNED?
<p>Why there was a difference between the expected outcome and the reality of the moment?</p> <p>Reflect on the successes and failures What worked well ? why ? What didn't work? What could have gone better ? why?</p> <p><i>Check if expectations were properly shared and what constraints on people, time or resources prevented expectations being realised</i></p>	<p>Learning is the prime action within an AAR. What will be different next time?</p> <p>What are the two or three key lessons you would share with others ?</p> <p><i>It may be a change in practice or policy or a change in attitude, behaviour, shared understanding or greater insight. Direct the collective wisdom to improving future performance.</i></p>

AAR GROUND RULES

- Leave hierarchy at the door
- Everyone contributes and all contributions are respected
- The purpose of the AAR is to learn
- No BLAME – Discussing mistakes should not lead to blame
- Everyone will have a different truth to share of the same event
- Contributions should be through what people know, feel and believe
- Respect time pressures but all must be fully present
- Make no assumptions, be honest and open
- All must agree with these ground rules

Adapted from : Andrews, (2008) University College London (UCL) Hospitals NHS Foundation Trust.



We are all responsible ... and together we
are creating a safer healthcare system