

Caboolture Hospital – Surgery Review

Implementation Plan commencing 28 October 2021

Governance:

The Metro North Hospital and Health Service (MNHHS) Board Chair has established a Caboolture Hospital Review Steering Committee (CHRSC) to ensure all Caboolture Hospital review recommendations and additional actions are fully implemented and evaluated in a timely, effective, and sustainable manner.

This steering committee will report to the MNHHS Board Chair and Board monthly. The first Board progress report from CHRSC will be provided in December 2021. CHRSC monthly progress reports will be made available to Caboolture Hospital staff and posted to the MNHHS public website for the community. A final evaluation report will be provided by CHRSC to the MNHHS Board in September 2022 after the evaluation review of progress by Dr James Sweeney in August 2022.

Membership:

- The CHRSC will be Chaired by the MNHHS Acting Chief Executive (A/CE)
- Executive Director Caboolture and Kilcoy Hospitals and Woodford Correctional Health (ED CKW)
- Representative of Health Consumers QLD
- Executive Director Clinical Services (ED CS) MNHHS
- Executive Director Clinical Governance, Quality Safety and Risk (ED CGSQR) MNHHS
- Secretariat provided by MNHHS CGSQR

Metro North Hospital and Health Service Governance Action	Accountable Officer	Due date
1. Establishment of Caboolture Hospital Review Steering Committee, including development of Terms of Reference and initial meeting	Executive Director Clinical Governance, Safety and Quality and Risk – Metro North Hospital and Health Service	Caboolture Hospital Review Steering Committee (CHRSC) TORS for CHRSC approved by Board Chair 4 November 2021 First meeting by week of the 15 November 2021
Caboolture Hospital Surgical Review Recommendations – Actions	Accountable Officer	Due date
1. Educate all Caboolture Hospital operating room staff on Metro-North intranet page and credentialing information that is available – https://gheps.health.qld.gov.au/metronorth	Acting Director Medical Services Caboolture Hospital Acting Director of Nursing Caboolture Hospital	10 December 2021
2. Caboolture Hospital to ensure a Caboolture Hospital surgical consultant is available using an on-call roster that is centrally accessible to all staff	Acting Director Medical Services Caboolture Hospital Acting Medical Director – Surgical and Intensive Care Caboolture Hospital	12 November 2021
3. Caboolture Hospital to establish a surgical clinical development facilitator (CDF) to improve education/training for nursing staff and provide support to less experienced staff.	Acting Director of Nursing Caboolture Hospital Nursing Director – Surgical and Intensive Care Caboolture Hospital	28 January 2022
4. Encourage more multidisciplinary team members (MDT) to attend the Morbidity and Mortality (M&M) monthly meetings held, to identify achievements and opportunities for improvement related to surgical outcomes and performance.	Acting Director Safety and Quality Caboolture Hospital Acting Director Medical Services Caboolture Hospital Executive Director Caboolture and Kilcoy Hospitals and Woodford Corrections Health	12 November 2021

<p>5. Develop a flow chart/process for new employment of medical officers (MOs) defining and communicating the scope of practice.</p> <p>a. MNHHS Medical Services and MNHHS Surgery and Intensive Care Stream implement a more detailed level of individual surgical procedure training and mentorship for Senior Medical Officers (SMOs) in smaller MNHHS hospitals in partnership with the tertiary hospitals Royal Brisbane and Women's Hospital (RBWH) and The Prince Charles Hospital (TPCH).</p>	<p>Chief Medical Officer– Metro North Hospital and Health Service</p> <p>Executive Director Clinical Services – Metro North Hospital and Health Service</p> <p>Executive Director Surgery and Intensive Care Stream – Metro North Hospital and Health Service</p>	<p>29 April 2022</p>
<p>6. Establish a peer review process across the MNHHS Surgery and Intensive Care Stream of surgical complication cases and document actions for improvement.</p>	<p>Executive Director Surgery and Intensive Care Stream – Metro North Hospital and Health Service</p> <p>Executive Director Clinical Services – Metro North Hospital and Health Service</p> <p>Executive Director Clinical Governance, Safety and Quality and Risk – Metro North Hospital and Health Service</p>	<p>28 January 2022</p>
<p>7. Executive Director CGSQR, MNHHS and Executive Director Caboolture and Kilcoy Hospitals and Woodford Corrections Health Centre to ensure the Patient Safety Officer and Service Improvement Unit team of Caboolture Hospital are provided with clinical incident management and report writing training, supervision, networking opportunities and quality assurance, improvement, consumer complaint management and audit training.</p>	<p>Executive Director Clinical Governance, Safety, Quality and Risk – Metro North Hospital and Health Service</p> <p>Executive Director Caboolture and Kilcoy Hospitals and Woodford Corrections Health</p>	<p>24 June 2022</p>
<p>8. Ensure that past RCAs and HEAPS analyses between 2020 and 2021 are re-reviewed independently by MNHHS CGSQR to identify and strengthen recommendations for improvement.</p>	<p>Executive Director Clinical Governance, Safety, Quality and Risk – Metro North Hospital and Health Service</p>	<p>Commenced immediately 28 October 2021 to be completed by 25 March 2022</p>

<p>9. MNHHS CGSQR provide Serious Clinical Incident Review committee members and senior clinicians with clinical incident management and open disclosure training.</p>	<p>Executive Director Clinical Governance, Safety, Quality and Risk – Metro North Hospital and Health Service</p>	<p>28 January 2022</p>
<p>10. MNHHS CGSQR amend and standardise Caboolture Hospital and all MNHHS Facilities and Directorates:</p> <ul style="list-style-type: none"> a. HEAPS and RCA templates to include a ‘contributing factor’ box above each ‘recommendation’ box so that factors are clearly linked to recommendations and to include a ‘Timeline’ section. The use of contributing factor diagrams (e.g., ‘fish’ diagram, tree diagram etc.) is strongly encouraged. b. The Metro North Clinical Incident Management Procedure be amended by MNHHS CGSQR to include a system of sharing of incident analysis findings/recommendations across the whole MNHHS. c. The Initial Briefing Document – Severity Assessment Classification 1 (SAC1), be amended to include the question, ‘Has a similar SAC1 event occurred previously?’ d. The approval of recommendations includes a process to check if previous recommendations have been duplicated and ensure MNHHS policy is followed by Caboolture Hospital and all MNHHS Facilities and Directorates and all RCA, SAC and HEAPS reports are sent to MNHHS CGSQR unit for review before finalisation. 	<p>Executive Director Clinical Governance, Safety, Quality and Risk – Metro North Hospital and Health Service</p>	<p>11 February 2022</p>
<p>11. MNHHS Surgery and Intensive Care Stream committee collaboratively develop, implement, and monitor additional surgical process and outcome measures benchmarked across all surgical sites, to inform and drive safety and quality improvements in partnership with MNHHS CGSQR unit.</p>	<p>Executive Director Clinical Governance, Safety, Quality and Risk – Metro North Hospital and Health Service</p> <p>Executive Director Surgery and Intensive Care Stream – Metro North Hospital and Health Service</p>	<p>25 February 2022</p>

	Executive Director Clinical Services – Metro North Hospital and Health Service	
12. MNHHS establishes a protocol for access to health information data to ensure it remains secure and is not used for unauthorised dissemination.	Acting Chief Digital Health Officer – Metro North Hospital and Health Service Chief Finance and Corporate Officer – Metro North Hospital and Health Service Executive Director Clinical Governance, Safety, Quality and Risk – Metro North Hospital and Health Service	28 January 2022
13. Metro North centralise to MNHHS CGSQR team existing Caboolture Hospital and all local Safety and Quality facility data roles and resources to develop and support a contemporary, standardised, mature clinical health informatics system that provides transparent, timely, consistent and accountable “Ward to Board” Safety and Quality performance measures that can be benchmarked for all of its hospitals and across clinical streams, including surgical services.	Executive Director Clinical Governance, Safety, Quality and Risk – Metro North Hospital and Health Service Chief Executive, Metro North Hospital and Health Service	29 April 2022
14. Improve the content of the safety and quality reports produced by and for Caboolture Hospital through the inclusion of critical analysis and links to improvement actions at Caboolture Hospital and the Surgical and Intensive Care department Safety and Quality committees respectively.	Executive Director Caboolture and Kilcoy Hospitals and Woodford Corrections Health Hospital Acting Director Safety and Quality Caboolture Hospital Executive Director Clinical Governance, Safety, Quality and Risk – Metro North Hospital and Health Service	28 January 2022
15. Review and restructure the Service Improvement Unit, Caboolture Hospital to provide contemporary support of safety and quality systems and reporting. Change the Director’s position to operational, and professional reporting to the Executive Director CGSQR, MNHHS in partnership	Executive Director Caboolture and Kilcoy Hospitals and Woodford Corrections Health	17 December 2021

<p>with the Executive Director Caboolture Hospital with embedded day to day reporting to enhance professional and operational support and a level of transparency and independent objective leadership aligned to the MNHHS Safety and Quality Strategy.</p>	<p>Executive Director Clinical Governance, Safety, Quality and Risk – Metro North Hospital and Health Service</p> <p>Acting Director Safety and Quality Caboolture Hospital</p>	
<p>16. Ensure that collated consumer feedback and experiences data and information is monitored and used by the Surgery and Intensive Care department to improve the safety and quality of services and care, including:</p> <p>Develop consumer feedback summaries across MNHHS from a range of resources including RiskMan, PREMS, OHO requests, Ryan’s Rule requests, and analyse the frequencies and free text data about consumer complaints to regularly inform communication, staff attitude and timeliness with consumers and their families.</p>	<p>Executive Director Caboolture and Kilcoy Hospitals and Woodford Corrections Health</p> <p>Acting Medical Director - Surgical and Intensive Care Caboolture Hospital</p> <p>Acting Nursing Director – Surgical and Intensive Care Caboolture Hospital</p> <p>Acting Director Safety and Quality Caboolture Hospital</p> <p>Acting Chief Digital Health Officer – Metro North Hospital and Health Service</p> <p>Executive Director Clinical Governance, Safety, Quality and Risk – Metro North Hospital and Health Service</p> <p>Executive Directors, Caboolture, Redcliffe, TPCH, and RBWH</p>	<p>30 June 2022</p> <p>28 April 2022</p>
<p>17. Consider ways to educate and address the underlying culture issues prevalent throughout Caboolture Hospital. This may include implementation or refresher empathy training, leadership mentoring, Communication and Patient</p>	<p>Manager of Culture and Engagement Caboolture Hospital</p> <p>Executive Director Caboolture and Kilcoy Hospitals and Woodford Corrections Health</p>	<p>26 August 2022</p>

<p>Safety (CaPS) and Communication, Respect, Accountability = Safe Healthcare (CRASH).</p> <p>Also enhanced opportunities for collaboration with multidisciplinary teams through attendance at safety and quality committee meetings.</p>	<p>Caboolture Hospital Executive and Senior Leadership Team</p> <p>Acting Senior Operations Officer, Caboolture Hospital</p> <p>Executive Director Caboolture and Kilcoy Hospitals and Woodford Corrections Health</p> <p>Acting Director Safety and Quality Caboolture Hospital</p>	<p>12 November 2021</p>
<p>18. Ensure that Quality Action Plans include non-clinical aspects of care.</p>	<p>Executive Director Caboolture and Kilcoy Hospitals and Woodford Corrections Health</p> <p>Acting Director Safety and Quality Caboolture Hospital</p> <p>Acting Senior Operations Officer, Caboolture Hospital</p>	<p>12 November 2021</p>
<p>19. Implementation of empathy training and improved patient communication/feedback for all staff at Caboolture Hospital to enhance patient and staff health literacy skills.</p>	<p>Executive Director Caboolture and Kilcoy Hospitals and Woodford Corrections Health</p> <p>Acting Senior Operations Officer, Caboolture Hospital</p> <p>Executive Director Clinical Governance, Safety, Quality and Risk – Metro North Hospital and Health Service</p>	<p>28 October 2021 training program being established. Commence formal training 22 November. All staff CH completed by 28 August 2022</p>
<p>Additional Actions</p>	<p>Accountable Officer</p>	<p>Due date</p>
<p>1. All cases of unsatisfactory surgical outcomes at Caboolture Hospital, which have been identified through the Hot Line or through personal contacts or the media to followed up with those individuals and/or their families.</p>	<p>Executive Director, Clinical Governance, Safety, Quality and Risk – Metro North Hospital and Health Service</p>	<p>28 January 2022 (underway and continuing)</p>

	<p>Executive Director Caboolture and Kilcoy Hospitals and Woodford Corrections Health</p> <p>Acting Director, Medical Services, Caboolture Hospital</p>	
2. Commission Dr James Sweeney to evaluate the implementation of the Recommendations of the Independent Review of Caboolture Hospital Surgical Services	Board Chair – Metro North Hospital and Health Service	26 August 2022
3. Appoint a senior and respected Surgeon from within MNHHS to support and mentor clinical staff in the Surgical and Intensive Care department at Caboolture	Acting Chief Executive Metro North Hospital and Health Service	3 December 2021
4. Review and update performance and development plans for staff in the Surgical and Intensive Care department to ensure that the commitment to implement the relevant recommendations of the Review, including attendance at important Safety and Quality meetings, are incorporated within those plans. Those plans to apply from 1 January 2022.	<p>Executive Director Caboolture and Kilcoy Hospitals and Woodford Corrections Health</p> <p>Acting Director, Medical Services, Caboolture Hospital</p>	7 January 2022
5. The reporting of incidents of inappropriate behaviours including bullying and harassment be encouraged.	<p>Executive Director Caboolture and Kilcoy Hospitals and Woodford Corrections Health</p> <p>Caboolture Hospital, Human Resource Business Partner</p> <p>All line managers, Caboolture Hospital</p>	Commenced immediately 1 November 2021 and ongoing