Improving Safety in Brazil
The Salus Vitae Story

6th December 2016
28th Annual National Forum on Quality Improvement in Healthcare
Camila Sardenberg, Kathy Luther, Kevin Rooney, Paulo Borem & Camila Lajolo
BREAKING THE ICE
Practicing your Portuguese
Tell your colleagues something you have done that is unique.
THE SYSTEM WE ARE TRYING TO IMPROVE
The environment

Country profile: upper middle income
- Population 208,000,000
- GDP 1.75 trillion dollars
- Expenditure on health: 8.3% GDP

Health system
- Public system: universal access, free of charge, decentralized
- Private system: 25% population
- 5,100 general hospitals
  - 71% beds for the public system
  - 34% occupancy rate
  - Majority small: 50 beds

Congregação de Santa Catarina

Present in 13 countries

1 Germany
2 Benin
3 Belarus
4 Brazil
5 Cameroon
6 Philippines
7 Finland
8 Haiti
9 Italy
10 Lithuania
11 Poland
12 Russia
13 Togo
Associação Congregação de Santa Catarina

More than 500,000 patient/days

17,000 staff
33 facilities
8 states

More than 5,400 students

Approximately 7,000 social care visits

70% beds for SUS patients
Associação Congregação de Santa Catarina

2,600 beds
20,000 deliveries
100,000 surgeries
350,000 visits
110,000 admissions
“We are here because we believe a more just and compassionate world is possible”
Your turn...What does your system look like?
A BURNING PLATFORM:
MOTIVATION FOR CHANGE

- Cancer: 585k
- Heart disease: 611k
- COPD: 149k
- Suicide: 41k
- Motor vehicles: 34k
- Firearms: 34k

Based on our estimate, medical error is the 3rd most common cause of death in the US.

However, we’re not even counting this - medical error is not recorded on US death certificates.

Data source: http://www.cdc.gov/nchs/data/nvsr/nvsr64/nvsr64_02.pdf
We are dialysis patients of HCT clinic in Teresópolis.

https://www.dropbox.com/s/9rq3tjzs8f0yne0/HSJ-Hemodialise.mp4?dl=0
Is there a burning platform for change in your organization? Do you need to convince people there is a problem?

Is there any improvement initiative that has inspired you to take action? What was special about it?
Key factors for success

Will

Ideas

Execution
Which of the three factors for success would be more challenging in your organization?
SOLUTION: MOVING BEYOND JUST QUALITY CONTROL
WE CANNOT SOLVE OUR PROBLEMS WITH THE SAME THINKING WE USED WHEN WE CREATED THEM

-Albert Einstein
A galvanizing aim

It is not about reducing harm, but suffering
A clear set of actions

High impact leadership

Improvement science in action

Patient safety  collaborative
A method

What specifically are we trying to accomplish?

What change(s) might we introduce and why?

How will we know that a change is actually an improvement?

“ACT”

“PLAN”

“STUDY”

“DO”

“The Model for Improvement” @2009 API
High impact leadership
New Mental Models
How leaders think about challenges and solutions

High-Impact Leadership Behaviors
What leaders do to make a difference

IHI High-Impact Leadership Framework
Where leaders need to focus efforts

Courtesy of M.Pugh.
New Mental Models
How leaders think about challenges and solutions

<table>
<thead>
<tr>
<th>Volume</th>
<th>Value</th>
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<tbody>
<tr>
<td>Patient Satisfaction</td>
<td>Persons as Partners in Their Care</td>
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<tr>
<td>Increase Top-Line Revenue</td>
<td>Continuously Decrease Per Unit Cost and Waste</td>
</tr>
<tr>
<td>Complex All-Purpose Hospitals and Facilities</td>
<td>Lower Cost, Focused Care Delivery Sites</td>
</tr>
<tr>
<td>Quality Departments and Experts</td>
<td>Quality Improvement in Daily Work for All Staff</td>
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</tbody>
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Courtesy of M.Pugh.

Would leaders in your organization support an improvement initiative?
Improvement Science in Action
WHAT KEEPS YOU AWAKE AT NIGHT?
falls flow problems medication errors patient delays OR maternal care identification

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One team’s journey

Sponsor: Leonardo Figueiredo de Menezes
Project Leader: Daniela Contage Siccardi Menezes
Team: Ana Paula Stutzel, Andressa Amaral, Gabriela Fecher
Setting a clear quantifiable aim

Reduce bed turnaround time (BTT) in Santa Isabel ward from 4 hours (232 minutes) to 2 hours (120 minutes), by March 31, 2016.
Becoming a team

July, 2015

September, 2015
Learning the method

Model for Improvement
What are we trying to accomplish?
How will we know that a change is an improvement?
What change can we make that will result in improvement?

Act | Plan
--- | ---
Study | Do

Mr. Potato Head and PDSA
Steady pace of testing ideas

- **Reliable data**
  - Test: Sep/30/2015
  - Implementation: Oct/02/15

- **Utilization of software ZELA for bed sanitation management**
  - Test: Sep/30/2015
  - Implementation: Oct/02/15

- **Medical discharge released on real-time system**
  - Test: Aug/19/2015
  - Implementation: Nov/05/2015

- **Real-time hospital bed panel “Leito à Vista”**
  - Test: Oct/26/2015
  - Implementation: Dec/15/2015

- **Hospital discharge communication**
  - Test: Dec/21/2015
  - Implementation: Feb/18/2016

- **Hospital discharge folder**
  - Test: Dec/07-18/2015
  - Implementation: Jan/04/2015
Achieving sustainable results

Bed turnaround time - Santa Isabel Ward

June 2015 - November 2016

- Software ZELA
- Medical discharge on real-time system
- "leito à vista" + hospital discharge communication

MEDIA
- 191.5 minutes
- 154.5 minutes
- 113.9 minutes
Successful spread

“Is it always like this or is it just because it’s me?”
A bold (scary) aim

↓CLABSI, VAP, CAUTI by 50% in 13 adult ICUs by December/216
Humanizing Health Care: The Language of Patient Safety

By Kevin Rooney | Friday, September 16, 2016

Fear of Zero

As I work with critical care teams in Europe, the Middle East, and Latin America, I come across challenges that are both familiar and unique. In Brazil, for example, I faced the “we’re different” mentality I have encountered many times before.

They told me they were different because of what they called their “fear of zero.” They had tried to reduce VAP and CLABSI unsuccessfully in the past, and what they saw as their failure left them demoralized. They were convinced that it was impossible.

Consequently, at first they only wanted to aim for a 10 percent reduction during the Collaborative. We pushed back gently but firmly. We asked them to humor us. We provided practical advice and steadfast support. We talked about patients harmed by infections and developed a sense of urgency for improvement.

http://www.ihi.org/communities/blogs/_layouts/ihi/community/blog/itemview.aspx?List=7d1126ec-8f63-4a3b-9926-c44ea3036813&ID=303
Would people be afraid of setting bold improvement aims in your organization? Why?

What would it take to convince them otherwise?
A method: 18 month IHI Breakthrough Series (BTS)

Select Topic (Develop Mission)

Expert Meeting

Planning Group

Develop Framework & Changes

Enroll participants

Prework

LS 1 → AP 1 → LS 2 → AP 2 → LS 3 → AP4* → LS 4

Support: email, extranet, video conferences, site visits, sponsors, monthly team report

Dissemination

Publications, Congress, etc.

Holding the Gains

*AP4 – continue reporting data as needed to document success

Source: IHI

LS – Learning Session

AP – Action Period
Results: 42% reduction in CLABSI rates

Tests performed with unequal sample sizes
No teams reporting data 10-13, average 12/13 (92%)
Results: 39% reduction in VAP rates

Tests performed with unequal sample sizes

N° teams reporting 10-13, average 12/13 (92%)
Results: 41% reduction in CAUTI rates

CATHETER ASSOCIATED URINARY TRACT INFECTION
U Chart

Tests performed with unequal sample sizes
N° teams reporting 10-13, average 12/13 (92%)
300 patients free from suffering HAIs
Top 5 challenges

- Setting bold aims
- Org. changes
- Technical knowledge
- Getting measures right
Sustainability...the greatest challenge
What would you do to sustain the results?
PATIENT CENTERED CARE...IT IS ABOUT THEM, AFTER ALL
O que importa para você?

Por um cuidado centrado na pessoa

Dia o que importa para você?

6/6
Sharing your own stories
The Power of Simple Things: “What Matters to You?” Stories from Brazil

By IHI Multimedia Team | Wednesday, October 26, 2016

Dealing with Doubts about Asking “What Matters to You?”

By IHI Multimedia Team | Thursday, October 27, 2016
O QUE Importa PARA VOCÊ? 6/6
POR UM CUIDADO CENTRADO NA PESSOA

https://www.dropbox.com/s/x8469e3wh5e18g6/Retrospectiva_WMTY_IHI%20%281%29.mp4?dl=0