

Aim

Q1 what are we trying to achieve?

Aim: That MUH will have a structured implementation of the Framework for ongoing Quality improvement 2016 by year end 2017 with a sustainability assurance.

Areas of Focus (primary Drivers)

1. Leadership for Quality

2. Patient and Family engagement

3. Staff Engagement

4. Use of improvement methods

5. Measurement for quality

6. Governance for quality

Set up a process in MUH to drive all elements of the Framework.

Incorporate this into the HMT monthly meeting.

Build on the relationship with the Canadian accreditation association regarding learning and guidance.

Formalise the contact from the national QI office to help embed all elements of the Framework with structured meetings.

Develop a hospital wide language of QI and embed a culture of QI for excellence in service and care.

Actions (secondary drivers)

Q3 what changes can we make that will result in improvement?

- 1.1 Develop an ethos for quality improvement with the hospital management team
- 1.2 Support training for management staff in QI IHI course
- 1.3 Quality must be clearly identified in all our terms of reference from bedside interaction to HMT decisions.

- 2.1 Set up steering group for patient engagement. Including national QI
- 2.2 Design a recruitment process and campaign for champions including selection.
- 2.3 Design an education programs for patient champions, staff and stakeholders.

- 3.1 Start town hall meeting
- 3.2 Set up staff engagement forum
- 3.3 Improve communication by developing communication strategy.
- 3.4 Formalise staff feedback via hospital wifi page.
- 3.5 Design a recruitment process and campaign

- 4.1 Set a process in place where learning for IHI can be maximised on QI methodology

- 5.1 Develop a communication strategy covering
- 5.2 What we communicate with who and how often and in what format.

- 6.1 Develop organisational charts and make available to all staff and public
- 6.2 Develop guidance for operational and service delivery accountability
- 6.3 Identify staff operational and service delivery accountability levels

updates

Q2 how will we know that a change is an improvement?

- 1.1 This is an ongoing agenda item.
- 1.2 34 IHI licence distributed to staff including Management.
- 1.3 HMT member doing Diploma QI.

- 2.1 In-place
- 2.2 completed
- 2.3 completed

- 3.1 started
- 3.2 In place Launched in September
- 3.3 communication strategy at draft
- 3.4 WiFi ready for Launching.
- 3.5 Filming completed ready for Launching

- 4.1 This is starting to spread
- 4.2 Clinical Audit committee started.

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See Driver Diagram for full details on Governance