Reaching for Zero Update
Faculty Meeting
March 2023

Reaching for Zero Excellence

Reaching for Zero Hero for 4th qtr:
Brad Oelker

- Every step does matter
- Reliability to processes strengthens resilience
- Questioning attitude triggers desired actions
- Look for ways to improve the process and/or system when safety events happen.

Good Catch of the Month

- McKenzie Young, PharmD: Insulin pump prescribing mistake. 26.8 units/hr vs 26.8 units/day divided into 4 doses of varying amounts.
- Ashley Casper, PharmD: aminophylline prescribing, ideal body weight and height measurement
- Kyle Harwood, PharmD: discrepancy between roadmap and Beacon and orders as it related to IT chemotherapy.

Reaching for Zero Impact: 2022 Program Summary

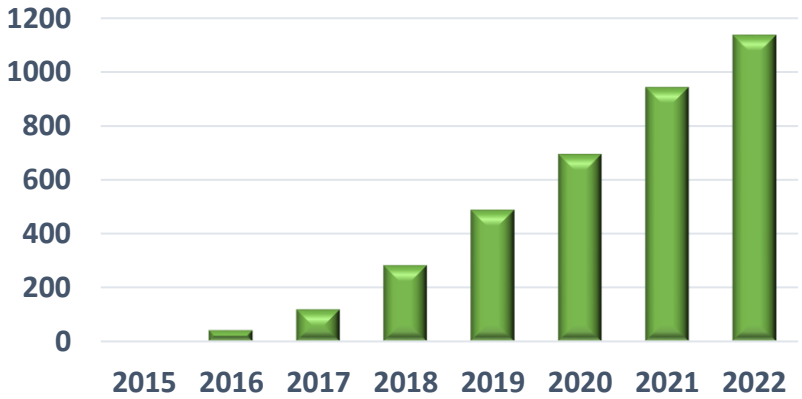
CHILDREN SPARED

- Since 2015 (baseline), **1137 children** at NCH have not had a Reaching for Zero Event

REACHING FOR ZERO PROGRESS

- 2022 compare to 2015 – **46% reduction**
- 2022 compared to 2021 – 15% reduction

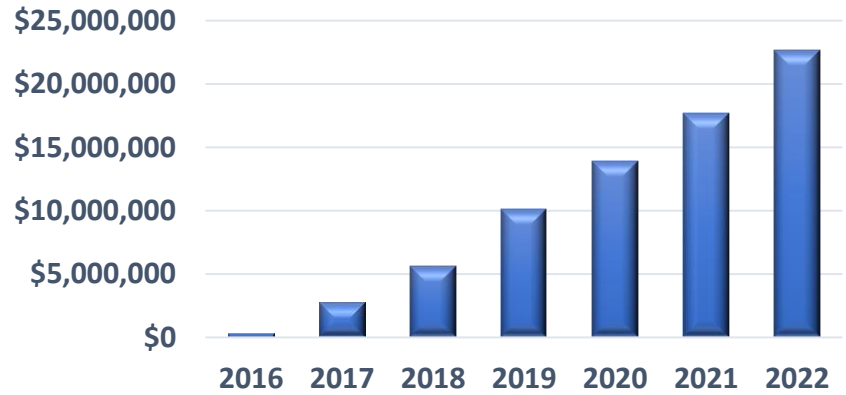
CHILDREN NOT HARMED: CUMULATIVE



REACHING FOR ZERO events (year added)

- CAUTI (2015)
- CLABSI (2015)
- C difficile (2015)
- Falls (2015, moderate or worse injury)
- Mislabeled specimen (2015)
- MRSA bacteremia (2015)
- NAKI (2019)
- PIVIE (2021, severe only)
- Pressure injury (2015, moderate/worse)
- SSI (2015, CV, shunt, spine)
- SSI colon (2015)
- UE (2015, NICU 2016)
- Serious safety event (2016)

Cumulative Dollars Saved

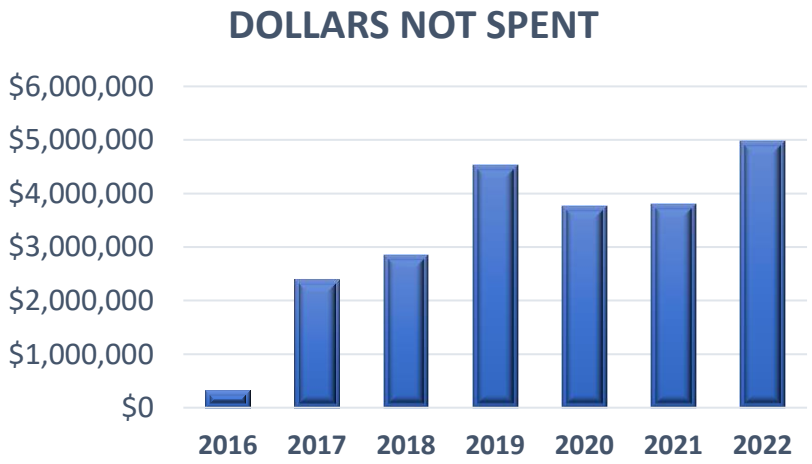


Norton Children's

R4Z By the Numbers

- Increase in 2022 compared to 2021 related to CLABSI (5 more compared to 2021), mislabeled specimen (23), and unplanned extubation (20).
- CAUTI: 1 – 2 per year, no active hospital team, periodic reliability observations.
- CLABSI: 10 – 35 per year, general trend down in # but rate has not statistically improved or worsened since 2018. Hospital wide team. Reliability observations throughout the hospital each month. Good at individual elements. Opportunity to improve that each child gets all applicable bundle elements each and every time. Focus for 2023
- C difficile: Peak at 23 in 2016. Steady downward trend since then. Less than 5 in 2021 and 2022. Decreased testing in inappropriate situations.
- MRSA bacteremia: Less than 5 per year starting in 2016. Went over a year without 1.
- SSI: 5 or fewer since 2019, no hospital wide team, no active monitoring.
- SSI-colon: 0 – 4 per year, none in 2022, active hospital team. Working with other SPS hospitals to create the science for prevention.

R4Z By the Numbers



- Mislabeled specimens: Generally trend downward until 2022. Trend upward started in late 2021 and continued throughout 2022. No hospital wide team. No reliability observations to buddy system. High and very low volume units at risk.
- PIVIE: one of our newest additions, hospital wide team and reliability observations. Focused on reduction of severe events. Focus for 2023
- Pressure Injury: Generally trend downward except for 2021. Hospital wide team and reliability observations. Awesome work by team in learning from 2021 events and revamping approach to prevention.
- Unplanned extubations: Generally trend downward year to year except 2022. Challenging to prevent UEs in NICU population (here and throughout SPS network). Hospital wide team, reliability observations in all ICUs each month. Focus for 2023. Focused work in SPS to identify additional factors which may reduce UE in the NICU population. Working with other SPS hospitals to create the science for prevention.

Employee Injury

- Reporting of injury may be variable, especially minor injuries.
- 95 reported injuries in 2021; 123 in 2022.
- New category of workplace violence
- Rates measured are DART and TRIR (OSHA terms)
- Active hospital behavioral health team with current focus on early identification.
- Participating in an SPS workgroup to further learn about and create the science for injuries resulting from the actions of behavioral health patients.

Learning from Excellence: Reaching for Zero Hero Recognitions

- Nomination criteria – *consistently advocates for safety and quality; used the R4Z error prevention strategies; willing to speak up; has a questioning attitude*
- Anyone can submit a nomination. Just email me. CARE Innovation leadership selects monthly recipient.
- Clinical and non-clinical nominees eligible.
- Annual selection of Zero Hero of the Year.

Reaching for Zero Hero Challenge

5 yr old with a new diagnosis of a brain tumor: **Dr. Madelyn Huttner and Dr. Samantha Lucrezia**

I just wanted to share our sincere appreciation for the attention we were given in the Norton Children's ER. My 5 year old son was dealing with bouts of stomach issues for about 2.5 months. We visited our pediatrician's office 4-5 times over this and were in the midst of being referred to a GI specialist for further care. He had another episode and we decided to drive to the ER. We arrived at Norton Children's ER early that morning, were seen in a matter of minutes, and 2 different doctor's listened intently. Due to his nausea and vomiting frequently happening in the early morning, they thought to add a CT scan to the list of tests. The CT revealed a tumor in his brain within minutes. At a time where our world was spiraling out of control, they handled the communication and next steps for my wife and I with great care and professionalism. We are forever grateful for the care that our son received that morning.

Reaching for Zero Challenge

From Kris Bryant: I am writing to let you know that my colleague, **Chandra Vethody (Allergy/Immunology)** is amazing.

Last year, she evaluated a 17-year-old patient who carried the diagnosis of DeGeorge. This patient was referred for recurrent fevers and pancytopenia; the latter prompted an urgent referral to Hematology. This was a complicated patient who was ultimately hospitalized with nosebleeds and abdominal pain. Multiple services were involved, and he was ultimately diagnosed with Coxiella burnetti endocarditis.

Dr. Vethody carried out an immune evaluation. The first thing she did was dig into very old records from Riley Childrens and figured out that this patient did not actually have DIGeorge. After initial immune testing was abnormal but not diagnostic, the patient was referred to Cincinnati. Their assessment was that he didn't have any immunodeficiency deficiency

Dr. Vethody did not believe that and persisted. Whole exome sequencing was ultimately positive for Rubinstein-Taybi syndrome. This is a B cell defect characterized by low memory B cells and sometimes low naïve T cells. I want to recognize **Dr. Vethody** for the outstanding care she provided to this patient, her diagnostic acumen, and her outstanding use of QVV.

Do you have a Reaching for Zero story to tell? 2023 Challenge: Send me at least 6 "my colleague is the best" patient stories in 2023. Take a moment to celebrate excellence. It's way more fun than the oops.

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National Patient Safety Week

- March 13-17th
- Virtual storyboards – please share your good work with us
  - Did you publish something this year related to maximizing outcomes, improving care? Send me the publication and I will create the 1 slide storyboard.
  - Trainees – would love to showcase their work
- Special activities throughout the week
  - Presentation of Good Catch of the Year and R4Z Hero of the year on 3/16 at 1 in Scheen
  - Pediatric Grand Rounds on the 17th: Patient and employee safety in the ambulatory setting
  - Distribution of Goody bags to units/departments, workroom throughout the week
  - Kahoots questions on NCH facebook page and during daily safety huddle

Reaching for Zero Prevention Focus on Reliability

What: Become highly reliable

When: Every step. Every person. Every day. Zero Heroes can help us achieve our goals by using reliability skills in their daily work

How: Use error prevention strategies and safe behaviors. Incorporate reliability skills into your routine. Support each other – 200% accountability.

Tip: prevent the mistake from reaching the patient by using reliability skills in your work to set the standard.

Every step. Every person. Every day.

Department of Peds Safety and Quality Webpage

- https://uoflpeds.wixsite.com/qiresources
- Qi@23
- NHC requires that any QI project that is planned with the intent to publish or share external to NHC, must be submitted for approval. The document which describes the process will be posted on this site.

NCards

- Can send from your phone – takes less than 5 minutes
- Go to your app store and download and follow the instructions. Takes about 5 minutes to download and connect to NHC. Use your Norton logon information. Open app and tap on the APPRECIATE NOW blue bar.