

## **SAFETY AND QUALITY CHECKLIST**

What is safety and quality?

A simple definition is:

Doing it right all the time even when no-one is watching.

Safety and quality in health care is becoming something that patients expect more and more. The Office of Safety and Quality coordinates activities in safety and quality in health care throughout WA. A number of programs have been set up but the two that affect District Health Advisory Councils the most are:

**Patient First**

The Patient First Program was launched in November 2006. The program is intended to improve consumers' participation in their own health care by providing information about how they can do this. There are fourteen topics covering:

- Informed consent;
- Making the right decision for you;
- Understanding your risk;
- Understanding the risks of my procedure
- Your rights and responsibilities;
- Managing your medication safely;
- Correct patient, correct site, correct procedure;
- Preventing falls;
- Preventing pressure ulcers;
- Avoiding infection;
- Improving your emotional wellbeing;
- Maximising your recovery;
- Your health, records and privacy;
- Your health information.

The Patient First Program resources include:

- Booklet
- Brochures
- Flier
- DVD which can be shown in health services

While the development of the resource has been an achievement the real challenge is in implementing it and making it accessible to patients. District Health Advisory Councils have the chance to be involved here by ensuring that Patients First materials are available and being delivered to patients in their local health service.

**Safety and Quality for Reform (SQIRe) Program**

The Department of Health has established an \$8 million Safety and Quality Investment for Reform (SQIRe) Program to provide a clinical governance approach to administering the Department of Health's investment in safety and quality at a patient and health service level. The aims of the SQIRe program are to:

- Ensure the delivery of safe, high quality, evidence-based health care to patients and the community;
- Improve the efficiency of the WA health system;
- Reduce the incidence and impact of adverse events and sentinel events in the WA health system;
- Encourage health care which supports and encourages excellent staff
- Provide incentives for safe health care; and
- Ensure that adequate clinical governance and safety management systems are in place in Area Health Services across the WA health system.

More information is available from the Office of Safety and Quality in Health Care website: [http://www.health.wa.gov.au/safetyand quality/](http://www.health.wa.gov.au/safetyandquality/)

How can District Health Advisory Councils assess the standard of Safety and Quality activities in their own health service?

This document describes some ways that District Health Advisory Councils can participate in the Safety and Quality activities of their health service. Safety and quality is an important aspect of providing health care that meets the needs of consumers and ensures that their health care does not harm them.

#### Complaints

Monitor complaints reports (de-identified) to note the trends in complaints and whether they relate to safety and quality.

District Health Advisory Councils should receive complaints reports as the Western Australian Complaint Management Policy No 10 Complaint Handling and Reporting states that:

The process for recording and reporting complaints should include the following:

10.5.3 community advisory councils of each health service

#### Medication safety

How is medication stored?

How is it administered?

How is it recorded?

#### Rights and Responsibilities

Is information about health consumer rights and responsibilities prominently displayed in the health service?

Is information about feedback

#### Hand Hygiene

Hand hygiene: are there basins and/or hand gel convenient to each patient?

Do staff use the hand hygiene facilities before and after each patient?

#### Access

Do site audits to check:

Are doors automatic or do people have to manually open and shut them?

Are there hazards in the waiting areas? Eg tables, objects where people need to walk.

Are there unsafe floor surfaces? Eg wet floor, slippery surface, mats.

Other associated programs are: