From knowing to doing

Putting human factors to work for patient safety

Nicola Davey[1] Louisa Chrisman[2], Andrew Kermode[2], Soumen Sen[2], Suzi Lomax [2]
[1] Quality Improvement Clinic, UK, [2] Royal Surrey County Hospital, UK

Royal Surrey County Hospital NHS Foundation Trust

SCReaM Surrey Crisis Resource Management

QIC learn

pledge to action

PROBLEM

There are a lot of things that can go wrong during an operation.

So we train a lot of staff in human factors. They enjoy it, but we're not convinced that they use what they've learnt to make care safer for patients. EVERYONE needs a better return on this investment!

AIM

Staff working in our theatres routinely use human factors informed tools and techniques themselves to make care safer for their patients by December 2019

MEASURES

Process:

No. of staff making pledge to action during training day
No of staff capturing and posting details of putting pledge into action
Tools chosen by participants

Outcomes:

Apply learning from human factors training session to something in sphere of personal control

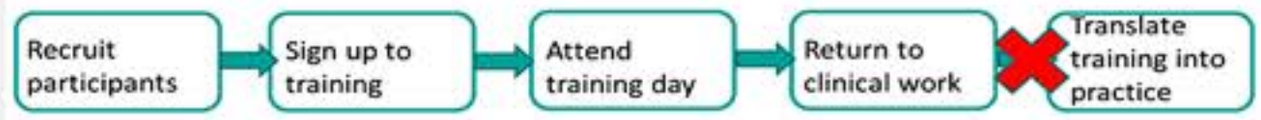
RESULTS TO DATE:

Main theatres: No trained 78
No making Pledge = 52
No Pledge to Action = 28
35%
Figures for Cardiac Cath lab lower

LEARNING TO DATE

- Using the Pledge to Action Tool we can increase the translation of knowing into doing
- This supports personal reflection and learning
- And provides evidence that the training is generating observable behaviour change in practice
- Social learning appears to increase participation
- Facilitators can provide nudges and feedback in real time
- Learners need support to take small steps and make micro-changes in order to build their confidence that they can make a difference

DIAGNOSTICS



CHANGE IDEAS

Pledges made at the end of training days

Worksheet to help participants convert pledge to action

Positive feedback on target behaviours observed

Use of examples in subsequent training days

Encourage selection of changes within own immediate sphere of influence

PDSA Test #	PLAN	Do	STUDY	ACT
1	Get staff to make pledges on 1 day programme	Post its handed out and filled in at end of the day. 14 pledges out of 16 participants	Realised now need to DO something with the data that is meaningful!	Analysis needs to be easy, time light. meaningful to participants and informing to faculty
2	Feedback pledges to staff to learn if they converted pledge to action	Pledges converted to SMART aim – 14 pledges and sent by email to participants. 14 pledges sent via email 5 replies – poor quality Follow up 6 weeks later.	Several hours to convert pledges to SMART statement. Not sustainable for Faculty	Think of other ways of getting people to complete pledges and create their own SMART aim on the day
3	Get participants to write their own SMART aim on a new word template with 2 week follow up	Pledge sheets handed out in 2 training sessions with worked example 14 + 15 pledges made. 3+2 returned	Participants found Pledge sheet confusing Poor rate of return	Need to think again about how we convert pledges to action Make new template
4	Use a new template informed by QI to encourage participants to try ONE thing learnt on programme and provide feedback on Whatsapp	New Pledge to Action sheets handed out at end of day with worked example. Whatsapp group used to capture pledges in the room. 18 participants, 17 pledges on Whatsapp, 12 returns with feedback	Simpler Pledge to Action sheets and Whatsapp group worked well. Challenge of creating Whatsapp group 'in the moment'	Continue to use Pledge to Action sheets and Whatsapp for follow up Try introducing 'Make a pledge' earlier in the day
5	Continue with Pledge to Action sheet and Whatsapp group. Use lunchtime session to start developing Pledges	2 sessions on pledges. Mixed group on 2 day programme. 9 pledges made, 2 returns	No improvement in ease of making pledges despite twice the time devoted to it. Different group dynamics on 2 day programme. Cardiology Cath lab not theatres.	Return to making Pledges at end of training day. Use examples of previous pledges as examples. Amend wording to relate Pledge to 'Self' not others! Include Main theatres. Exclude Cath lab.
6	Add word 'MYSELF to pledge wording Provide 3 examples from previous groups to illustrate Pledge for MYSELF Use just for HF training for Main theatres at end of day.	In progress		

pledge to action

OVERARCHING AIM

Through supporting our staff to translate and sustain a change in their practice following training, we aim to demonstrate an improvement in patient safety in our theatres

FUTURE CHANGE IDEAS

- Continue with Pledge to Action template
- 2 faculty to set up & monitor Whatsapp on training days
- Send 2 week 'nudge' reminder on Whatsapp & email
- Themed analysis of Human Factors behaviour focus in pledges
- Monitor Human Factors driven behaviours within theatre team briefs
- Test Pledge to Action social learning programme