

Building Capacity and Capability to Achieve Zero Harm

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INTRODUCTION AND AIM

This initiative was developed by a highly complex Brazilian hospital system serving both public and private health sectors.

From 2018 to 2021, **112 severe and 26 catastrophic adverse events** were reported from recurrent care processes.

Aiming for zero harm, the hospital set a strategic objective to eliminate catastrophic adverse events and reduce severe adverse events by 50%. A master plan was created to **capacity Improvement Advisors to work on critical processes** for patient safety to achieve these goals.

STRATEGY FOR CHANGE

Between 2013 and 2021, only 30 improvement advisors were trained, leading to a significant shortage of experts. To face this challenge, the institution developed a **master plan based on three pillars to increase the number of improvement advisors**. These pillars include:

1. Foster a culture of peer-to-peer learning and knowledge sharing through the creation of a project management nucleus focused on improvement projects using the model for improvement method;

2. Leadership commitment to improvement initiatives through hiring in-company training to train 30 specialists per year, until reaching the necessary capacity for the organization;

3. Align priorities and metrics with organizational objectives and target key areas of concern through the development of improvement projects. To this end, **the main processes to patient safety were identified**, through the analysis of adverse events with the **RCA2 method** and the main opportunities still in force.

To implement this strategy, **a group of 30 professionals was selected** to develop projects to improve the institution's critical processes from March 2022 to December 2023.

To ensure success, **monitoring and support were carried out**, through checkpoints for monitoring expected deliverables for the project and **support in the barriers**.

This approach helped proactively manage challenges, resulting in successful projects and improved patient care.

Furthermore, it was understood that it was essential to develop a strategy to incorporate the business case into projects and analyze the financial impact of these projects on the organization.

RESULTS

Main Critical Processes Addressed in Projects by Improvement Advisors

- High Alert Medication
- Neonatal Anoxia
- Safe Surgery
- Complications with Devices
- Complication in Colonoscopy
- Critical Results Communication
- Surgical Site Infection
- Pressure Injury
- Prevention Fall
- Retention of Foreign Body
- Diagnostic Process (Sepsis, Shock, Clinical Deterioration)

Projects Performance

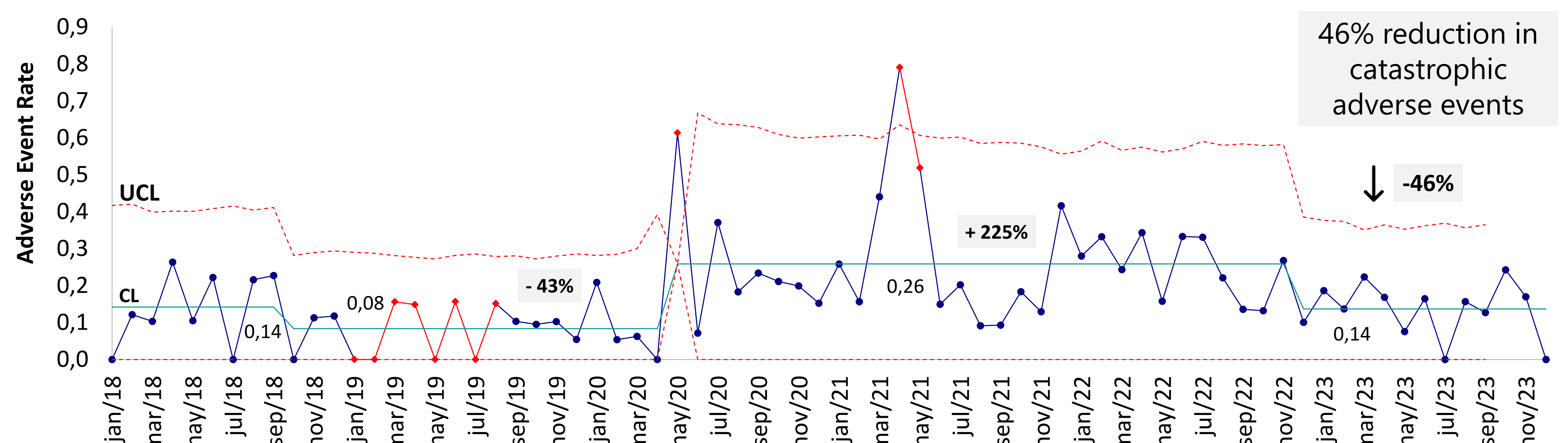
62%	18 improved outcome indicators
21%	6 improvement or trend in process indicators
17%	5 did not show impact on project indicators
67%	16 economic impact analyses realized

USD \$1,496,565M/year
Potential savings

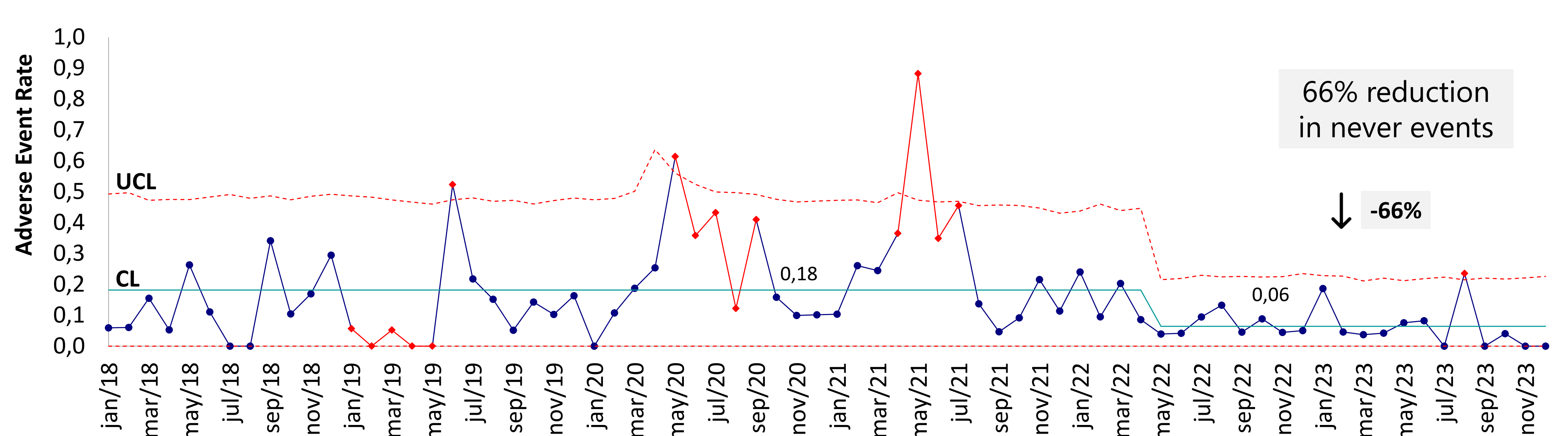
USD \$1.193.408,6M/year
Realized savings

 **459**
Lives without harm

Catastrophic Adverse Events -- SBIBAE, Brazil, UChart



Never Events -- SBIBAE, Brazil, UChart



CONCLUSIONS

- **Regular checkpoints** with project leaders provide greater clarity on definitions and deliverables.
- **Presenting the project directly to sponsors** proved to be a strong motivator for the teams and helped resolve barriers.
- **Allocating 30% of professionals' workloads** to project development proved both **viable and valuable**.

ACKNOWLEDGEMENT

- Embedding quality improvement throughout an organization **requires a systematic and focused effort.**
- **Training alone is not enough;** a continuity plan is necessary to maximize potential.
- Measuring the added value of improvement projects is crucial to demonstrating the **importance of investing in people**, the organization's greatest asset.

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