

QUALITY LEARNING BOARDS

INFORMATION FOR CLINICIANS & HEALTH PROFESSIONALS

Quality Learning Boards (QLBs) are a tool used to tell a complete story to staff, patients and visitors about the quality and safety activities in a clinical unit. They can be used to display:

- Outcomes of safety indicators;
- Staff and patient experience data; and
- The quality and safety activities currently in progress

What QLBs are not

QLBs are not boards that are tucked away in back offices or side corridors which contain layers of static information with no explanation or opportunity for input from clinical staff, patients or visitors.

What is the purpose of a QLB?

- Display measurable indicators at a glance that highlight what is working well and areas which are a current focus for improvement;
- Assist with identifying the areas to prioritise safety and quality improvement activities;
- Ensure a focus on continuous learning; and
- Provide data in a meaningful way to communicate information that matters to local staff, patients and visitors.

What type of information is displayed?

QLBs are data driven, eliminating the risks of relying on opinion and potential miscommunication.

They present current data alongside target goals:

- This is our aim;
- This is where we are; and
- This is our action plan to achieve our goal.

Acknowledgement

The Clinical Excellence Commission acknowledges the Clinical Governance Unit, Western NSW Local Health District for allowing the CEC to use their materials as an example on this information sheet.

The team decides on the types of information to be displayed starting with a few key areas, for example:

- Hand hygiene performance;
- Hospital acquired infections; and
- Medication incidents.

They use qualitative data to attach meaning to the measures that are displayed, such as:

- Patient experience data; and
- Staff awards and recognition.

A benefit of displaying actions taken to improve what is not working well demonstrates accountability taken and the team's commitment to continuous learning and improvement.

How is the information presented?

Using a mix of styles such as run charts to visualise trends and change over time, and qualitative data such as patient compliments and staff experience data.

Where can we access the data for our QLBs?

Information can be sourced from Safety Crosses, local audit data such as from the Quality Audit Reporting Systems (QARS), trigger tools and other voluntary reporting systems.

What are the benefits of QLBs?

- Promotes engagement and enhances teamwork and communication;
- Increases risk awareness amongst staff;
- Supports local change efforts as staff are aware of how they're performing towards current improvements;
- Enables patients and visitors to see what works well and what actions the team is taking to improve what's not working so well; and
- Engages patients and visitors to provide input to the QLB.

Having a section on the QLB to demonstrate actions taken could look as simple as:

You said ...

We're doing ...

We did ...

How often is the QLB updated?

QLBs are not static and are therefore updated daily, weekly or at least monthly.

Where are QLBs located?

QLBs are positioned in public areas and contain information that is useful for ward staff, patients, visitors and healthcare leaders.

OUR TEAM: THE WAY WE CARE

Description of team / service. E.g. In X Emergency Department, we see over 2000 presentations each month. On average, each patient stays for 2 hours

PATIENT SAFETY
Example: Number of falls

RELIABILITY & RESILIENCE
Example: % Unplanned leave

QUALITY IMPROVEMENT
What we are working on: X

PERSON-CENTRED CARE
You said.....

Example: Number of medication errors

Example: % Hand hygiene compliance

What we are working on: Y

We did.....

Falls Rate Per 1000 Occupied Bed Days by Qtr
What our team has done well today

Medication Error Rate 2000 Occupied Bed Days by Qtr
Compliments this month

Complains this month

Bright Spots!

Last updated:
Contact:

Our Health District
Living Quality & Safety

Days free from: e.g Falls

Days free from: e.g Pressure Injuries

Days free from: e.g UTIs

About the Team Effectiveness Program

The CEC's Team Effectiveness program aims to work with clinicians working at the point of care to enhance teamwork and communication and create the conditions that will allow continuous improvement to occur.

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Released November 2018, © Clinical Excellence Commission. SHPN (CEC) 180812