

Building blocks
Safe ward

Safety Huddles
Post Fall Huddles

Intentional
Rounding

Clinical bedside
handover

MDT bedside
Rounds

Review data for
improvement

Team Safety Fundamentals

Strategic Priority

Support LHDs to test and implement the CEC supported model for Comprehensive Care



Hydration and nutrition



Cognitive Impairment



Patient care fundamentals



Safe and early mobilisation



Engage patient, family, carer in care
planning 'what matters to me'



Medication review

Minimising Harm

Model for Comprehensive Care – Minimising Harm

- Enable access to meals
- Assist with meals and opening food packages
- Prompt to drink water & consume protein
- Prevent, identify & treat malnutrition

- Prevent, identify, treat, and manage delirium
- An older patient may have a dementia, anxiety and/or depression

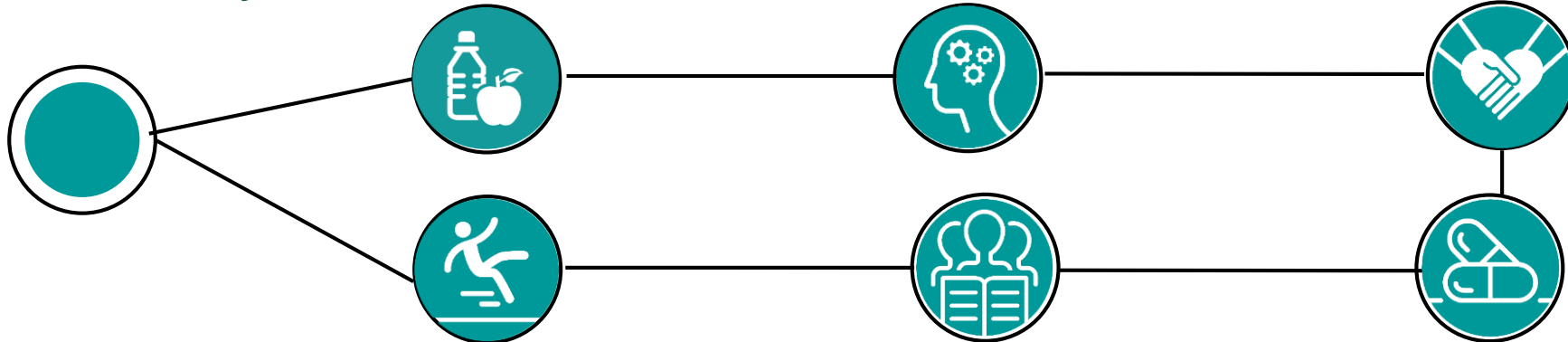
- Personal care assist
- Skin Care
- Dental/Oral Hygiene
- Toileting plan & assist
- Showering Environment
- Environment conducive to sleep
- Managing pain

Hydration & nutrition

Cognitive Impairment

Patient care fundamentals

Team Safety Fundamentals



Safe and early mobilisation

'What matters to me'

Medication review

- Patients out of bed where possible– sit in chair, march on spot, walk to end of bed/toilet – mobility plan in place.
- Identify an area that is safe for the patient to walk with family or staff
- Mobility equipment checked and within reach

- Plan care in discussion with patients and families/carers
- Discuss and explain patient safety risks – e.g. falls, delirium
- Wellbeing

- Review medications to reduce delirium and fall risk
- Reduction in use of night sedation
- Discuss medications with the patient and family/carer before discharge from hospital.