



Implementation of A Multidisciplinary Weekly Safety Briefing in A Tertiary Paediatric Cardiothoracic Transplant Unit

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PROBLEM : A busy tertiary unit made up of disparate departments comprising cardiology, surgery, anaesthesia and intensive care who provide shared care for patients between environments including the ward, intensive care and clinic. There was no structured forum for communicating information such as staffing shortages, significant events and prescribing errors across the various multidisciplinary teams.

AIM : To provide a platform for pan-departmental communication to improve efficiency, safety and patient care.

METHOD :

- An initial survey was conducted where 80% of staff supported the implementation of a weekly safety briefing.
- The briefing comprised four headings : **Staffing, Awareness, Fix and Events (SAFE)** .It was delivered verbally by a junior doctor at the weekly departmental meeting and and then emailed to all departmental staff.
- Staff emailed or approached us in person to contribute information.

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Freeman Safety Briefing	
Staffing	Consultant: Dr Reinhardt Registrar: David <i>Sho cover needed weekend nights</i> <i>Echo tech sick</i>
Awareness	<ul style="list-style-type: none">• Prednisolone only given in mornings – Due to prescribing errors• No need to send G+S on <u>cath</u> cases
Fix	<ul style="list-style-type: none">• Darth Vader currently broken
Events	<ul style="list-style-type: none">• RSV teaching Friday afternoon <u>IoT</u>

Diagram 1 : Example of safety briefing



Results : A repeat survey was conducted after 8 weeks of delivering the briefing.

80% of responders thought that the briefing should be continued.

Recommendations :

To include clinic availability and extend email circulation to include more staffing groups. To ensure sustainability a permanent staff member oversaw the process to ensure its continuation with the rotation of junior doctors.

Conclusion :

We successfully introduced a junior led safety briefing to improve vigilance, safety and communication . This was maintained when the original implementation team subsequently left the department.