

**Name of Organization**

Sunnybrook Health Sciences  
Centre

**Healthcare Organization Type**

Acute Hospital

**Client Since**

2006

**Products**

Feedback

**Key Challenges**

- Walkaround data collected in spreadsheets
- Participants not informed about issue follow-up and closure

**Key Benefits**

- Priority issues quickly identified & feedback acted upon
- Walkaround data collected in Feedback, allowing for trending reports
- Senior leaders informed of progress throughout

**Client Website**

[www.sunnybrook.ca](http://www.sunnybrook.ca)

**CLIENT CASE STUDY**

# Sunnybrook Health Sciences Centre

## Integrating patient safety walkarounds & feedback management software

**The Challenge**

'Highly-reliable' industries – such as aviation, nuclear power plants and air traffic control – have used safety walkarounds for many years. Dr. Allan Frankel, formerly the Director of Patient Safety for Partners HealthCare, adopted walkarounds into a tool for healthcare. Since then, they have been widely used across North America with over 400 hospitals participating in this process.

Walkarounds foster communication between front-line staff and senior leadership, offering staff an opportunity to speak directly to senior leaders about patient safety concerns within their own environment. This helps bring attention to individual, serious patient safety issues in addition to systemic roadblocks to creating safer environments. However, in large, complex organizations such as Sunnybrook, resolving the issues that arise from these walkarounds isn't as simple as just picking up the phone.

Sunnybrook needed a tool to accurately collect the information gathered during walkarounds, track progress, report on the data and promote a fast turnaround of the priority issues. The walkarounds support team also required status reports and trend charts that identify underlying issues. After years of using Excel® spreadsheets, the team turned to RL Solutions for help. Working together with RL Solutions, Sunnybrook adapted Feedback patient feedback software to monitor activities related to walkarounds.



### Organizational Snapshot

Sunnybrook Health Sciences Centre is one of Canada's largest hospitals with over 10,000 staff, physicians and volunteers providing care for approximately 1 million patients every year. Over the past 60 years, Sunnybrook has evolved from its original role as a veterans' hospital to a center of excellence for research, cardiovascular care, trauma and many other specialties. Sunnybrook was also Canada's first hospital to establish a department focused on patient safety and is currently the research home base for the Centre for Patient Safety (affiliated with the University of Toronto and The Hospital for Sick Children).

### Objectives of Walkarounds

There is no 'right' way to conduct walkarounds. In fact, many organizations have developed creative models to better suit their environment, available resources and organizational structure. However, despite the many variations of this tool, they are all based on a common goal: improving patient safety. This is accomplished by building and fostering cultures of safety through more open communication between healthcare silos.

For its walkarounds, Sunnybrook identified the following as additional goals:

- Increase awareness of patient safety issues by all clinicians and senior leaders
- Make it apparent that patient safety is a high priority for senior leadership
- Educate staff about patient safety concepts, such as

the importance of reporting adverse events and near misses

- Identify and act on patient safety concerns elicited from staff

As well, Sunnybrook aimed to deliver timely results to walkaround participants, especially for issues identified as 'priorities'. This is essential to building trust and the success of patient safety walkarounds. Communicating the progress and results is vital to establishing commitment at all levels of the organization to improving the safety of patients.

### Walkarounds Process

Sunnybrook conducts walkarounds with at least one senior leader and a combination of other participants. The team has identified that the best walkarounds in terms of depth and focus include physicians, nurses,

pharmacists, educators and other allied health and ward personnel. Participants engage in a guided dialogue, identify numerous patient safety issues and then select 3 priority issues. The senior leader then assigns a director or manager to each priority issue.

The information collected during the walkaround is transcribed into Feedback and thank you letters are sent to walkaround participants. Also, directors/managers who are responsible for priority issues receive an initial follow-up letter (from a template), with copies sent to the senior leader and the unit's patient care manager. Directors/managers address the priority issues assigned to them by creating an action plan (also sent to the senior leader) and following-up until the issue is resolved. The last communication is a final confirmation letter to the patient care manager from the original senior leader once they have addressed the three priorities.

### Entering Data into Feedback

Sunnybrook spent two months customizing Feedback to adapt it for use with walkarounds. The team took its existing spreadsheets and adapted them to fit the structures of Feedback. The result was the following series of screens that capture relevant data from issues identified during walkarounds:

1. **Detail:** Input basic demographic data (date, location and name of the participating senior leader).
2. **Issues:** Identify each issue as a 'priority' (needs immediate action) or 'other' (captured for purposes of trending overall safety concerns).
3. **Classification:** Issues are further classified in 8 self-defined categories. A drop-down help section assists users in assigning the right classification consistently.
4. **Text:** Note the description of the safety concern (in the walkaround participants' words), along with the subsequent the action plan and resolution. Unlike in Feedback where more details are better, Sunnybrook's walkarounds program encourages submitters to be succinct, with an emphasis on quick & actionable tasks.

### Communication: Managing Issue Resolution Using Feedback

Letters based on a template are sent to directors, managers and other stakeholders using data from Feedback to alert them of the status of priority. Sunnybrook also uses Feedback's system alerts and task prompts to notify those assigned to address priority issues to meet targeted timelines.

The walkarounds support team creates reports and

“Our walkarounds identified lots of issues, but it was difficult to keep track of the ongoing issues or identify trends. With Feedback's reports, we know right away.”

**Guna Budrevics, Performance Improvement Specialist**  
Sunnybrook Health Sciences Centre

graphs in Feedback and exports information from Feedback into Microsoft Office Visio to create graphs. These reports and graphs outline elements such as the total number of walkarounds completed, what percentage are priority issues, what percentage are complete and the breakdown of the issues by category. The team also reports quarterly to senior leaders to show feedback and resolution on walkarounds.

### Lessons Learned

Conducting walkarounds and tracking the information collected in Feedback has proved invaluable for Sunnybrook. Along the way, the team has learned many lessons in conducting effective patient safety walkarounds:

- A good balance of representation from the patient care team is essential for a successful walkaround.
- Systemic process defects are challenging to address and fixes are time-consuming to diffuse. Sunnybrook created a limited fund to fix systemic problems that arise during patient safety walkarounds.
- Priming senior leaders for their visits with summaries of local incidents is another way enhancing the walkarounds conversation.
- Environmental and equipment issues are a common concern.
- It's essential to bring board members 'onboard' to continue the program's success.
- Walkarounds are equally valuable in acute/direct patient care settings and 'interface' locations (medical imaging, laboratories, ambulatory settings, etc.).

Sunnybrook's next steps include sharing these solutions with other organizations within its local health integration network (LHIN) and with other RL Solution clients. The team intends to use its existing data to help individual units - and the organization as a whole - focus on improvement tactics and look externally to leverage its findings.

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