

## Clinical Indicators

Clinical Indicators are a measures of elements of clinical care which may, when assessed over time, provide a method of assessing the quality and safety of care. The Eye Hospital collect a number of clinical indicators which can be benchmarked with for quality performance with similar Day Surgery Facilities . These include:

- Failure to Arrive
- Unplanned overnight admission
- Unplanned delay in discharge
- Cancellation after arrival due to pre-existing medical condition, acute medical condition, administration or other organisation reason.
- Medication error/adverse drug reaction
- Unplanned return to operating room
- Hospital acquired infection
- Patient falls

## Training and Development

The Eye Hospital staff conduct regular training through a wide variety of sources these include:

- Performing CPR
- Manual Handling
- Infection Prevention & Control
- Refreshers on policies and procedures
- Triage training and Technical training

## How can you help us manage Safety and Quality?

We value our patients, their carer's and families. Please feel free to let one of our staff know if you would like to assist with reviewing any of our Safety and Quality initiatives.

### Would you like more information?

Our CEO/DoN , Theatre Manger & Quality Coordinator will be happy to discuss any questions or concerns you may have with our Safety and Quality.

Contact details by phone 63 344 960 or  
e-mail: [reception@eyehospital.com.au](mailto:reception@eyehospital.com.au)

Meanwhile, we are here to assist you so please do not hesitate to ask for assistance at any time.



**T H E  
E Y E  
HOSPITAL**

*‘Putting Patients First’*

**Safety & Quality Activites  
Patient & Carer Information**

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The Eye Hospital is committed to ensuring that we are delivering the best possible service to patients. Whilst we have an excellent record in delivering quality patient care and managing risks, our facility continues to focus on improvements to ensure our services are as safe as possible and that we minimising risks at all times.

The Eye Hospital is a fully accredited facility, having been certified by the auditing agency, Global Mark for achieving the International Organisation for Standardization (AS/NZS ISO 9001:2016) and the National Safety & Quality Health Service Standards (NSQHS).

The Eye Hospital also subscribes to the national Quality Performance Systems (QPS) Benchmarking program, which enables us to regularly audit ourselves against other facilities and examine our results compared to other Day Surgery Hospitals throughout Australia and find where improvements can be made.

This brochure introduces you to the safety and quality activities which take place at The Eye Hospital.

### **What are Safety and Quality Activities?**

Quality improvement is part of a health care facilities accreditation. It covers areas such as:

- Management and Leadership
- Infection prevention and control
- Hand hygiene
- Patient waiting time
- Patient Satisfaction
- Clinical Indicators
- Training and Development
- Compliments and Complaints
- Consumer rights and Consumer and Community Participation

There is always room for continuous improvement, it may be something as simple and quick as changing a work practice or procedure. However, on occasion it may require a significant change.

The quality improvement process begins with an idea or suggestion, whether from a staff member, patient or someone in the community. It is then discussed further with staff and management to decide how and when it could be implemented.

### **Management and Leadership (Medical Advisory Committee)**

The Eye Hospital has a formal Medical Advisory Committee which consists of our CEO/DoN, Surgeons, Anesthetist's and Theatre Manager . This committee has the ability to co-op other specialist members and consumers as required. The committee address clinical compliance and excellence.

### **Hand Hygiene**

The Eye Hospital is committed to the National Hand Hygiene Initiative program and conducts regular audits to ensure compliance. One of the most effective means to prevent infection spreading amongst patients is for all health professionals to wash their hands. Visitors to The Eye Hospital are encouraged through appropriate signage to use antiseptic hand wash throughout the facility.

### **Infection Prevention and Control**

The Eye Hospital has a comprehensive infection prevention and control program in place to minimise the risk of infection to patients, staff and visitors to our facility. Our facility and staff are regularly audited for their compliance with national infection prevention and control guidelines, *Australian Standards for reprocessing of reusable instruments (AS4187)* and the *Australian Commission of Safety and Quality in Healthcare [ACSQHC] National Safety and Quality Health Service Standards*.

Patients who have surgery at The Eye Hospital are also encouraged to contact us if they if they develop any type of infection within 28 days of their procedure, even if they don't think it is related to the surgery, to assist monitoring of possible infections.

### **Patient Waiting Time**

The Eye Hospital conducts quarterly audits to ensure Patient Waiting Time is kept to a minimum and continues to explore ways to improve this.

### **Patient Satisfaction**

The Eye Hospital has adopted *The Australian Charter of Healthcare Rights* and is committed to realising these values.

Your feedback allows us to continually evaluate and improve on all aspects of our performance.

Patient Feedback Forms are available to enable patients to provide feedback on their experiences and formal Patient Satisfaction Surveys are conducted on a regular basis throughout the year.

### **Consumer and Community Participation**

All patients, community members, doctors and staff are given the opportunity to provide feedback, formally or informally.

This feedback is treated with the utmost confidentiality and may be provided anonymously via our feedback brochure. Your opinion is important to us so when you receive a survey we encourage you to take the time to fill it in.

There have been a number of changes to patient information as a result of patient feedback over the years. All feedback is tabled at our Senior Management Committee meetings as well as our Medical Advisory Committee meetings.