NURSE-LED IMPROVEMENTS TO THE SAFETY AND QUALITY OF NURSING CARE FOR HOSPITAL PATIENTS

HIRAID® INPATIENT



What is HIRAID®?

- History, including Infection risk, Red flags, Assessment, Interventions, Diagnostics, reassessment and communication
- An evidence-based framework to support nurses assess and manage patients.
- · Originally developed for emergency nurses has been adapted for Aged Care and now...

Responding to sector demand, a standardised, 'whole-of-patient' nursing framework for hospital inpatients - HIRAID® Inpatient - will be designed to support nurses in optimal patient assessment and escalation of care of deteriorating patients.

Why do we need HIRAID® Inpatient?

Preventable adverse events in Australia's hospitals are a major safety issue.



In 2021-2022, 608,995 of Australia's hospital patients experienced an adverse event that led to unintended harm or death, costing an extra \$4.1 billion.

Over half of these events are preventable and involve nurses' inadequate prevention, recognition, or response to clinical deterioration.

APPROPRIATE MANAGEMENT AND/OR ESCALATION OF CARE

How will HIRAID® Inpatient be implemented?

Phase 1

CO-DESIGN AND ADAPTION

Co-design of HIRAID® for inpatient wards with end users (including ward nurses, doctors, consumer representatives, allied health staff and managers).

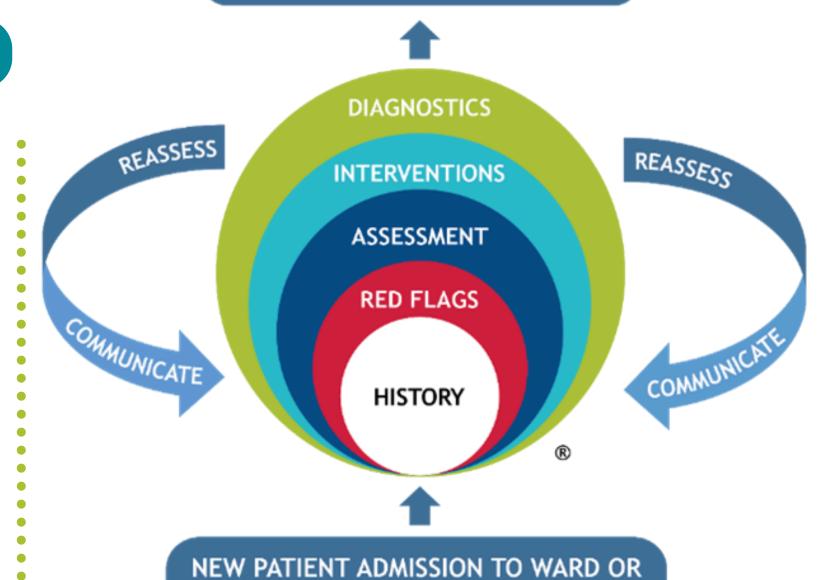
Phase 2

IMPLEMENTATION STRATEGY

Mixed method study using staff surveys and focus groups to develop an evidenceinformed implementation strategy for sustained behaviour change that is feasible for use by medical and surgical ward nurses.

Phase 3 **IMPLEMENTATION AND EVALUATION**

Type II effectiveness-implementation hybrid study assessing HIRAID® impact on patient, staff and health service outcomes via a stepwedge cluster RCT in 35 wards, 10 hospitals.



CLINICAL CHANGE IN HEALTH STATUS

What are the expected outcomes from implementing HIRAID® Inpatient?



20% Reduction in preventable patient deterioration and rapid response team reviews



10% Reduction in Hospital Acquired Complications (HAC03 and HAC06)



20% Reduction in events causing patient harm or near



10% Improvement in experience of care reported by patient or



10% Increase in quality of nurse communication and handover

NURSE UNIT MANAGERS

Contribute to the adaptation and co-

Participate in focus groups Complete surveys

Facilitate and support your nurses to

✓ attend training and apply the framework in practice

and surveys

Attend training

Use HIRAID® in clinical practice - all supported and during worktime

What does the HIRAID® Inpatient study mean for me?

Participate in the framework adaptation

Complete surveys

Contribute to the co-design process Complete surveys

PATIENTS AND CARERS

OTHER STAFF

(Doctors, Allied health)

NURSES

Engage in co-design via focus groups

Collaborate on the design of HIRAID® Inpatient Support nurse training and

Enable research governance processes

implementation at the ward level Provide performance unit data

HOSPITALS































