VIDEO TRANSCRIPT: ‘Think sepsis. Act fast.’ scaling collaboration

Below is a transcript of the following video: [youtube.com/watch?v=qv9Ks16\_19w](https://www.youtube.com/watch?v=qv9Ks16_19w)

**Karin Thursky – Sepsis Improvement Statewide Clinical Lead**

Infections are very common in our community, pneumonia, skin infections, abdominal infections like appendicitis but sepsis is much more than that. Sepsis is once the infection has triggered an overwhelming response in the body and leads to damages of its own tissues and organs. The delay in management of sepsis is actually what leads to serious outcomes for the patient. Timeliness of management of sepsis is absolutely key, because early recognition has been demonstrated to reduce deaths, to reduce length of stay in hospital and to reduce admission to the intensive care unit.

**Kelly Sykes – Sepsis Improvement Statewide Project Lead, Royal Melbourne Hospital**

At the Royal Melbourne hospital like many health services we identified that there was variation in how sepsis was being recognised and managed and we were concerned that that variability would pose a potential risk to our patients. The first thing we did was develop a comprehensive communications plan to increase awareness of what sepsis actually was amongst all staff. Next, we developed a multi-disciplinary education package for everyone clinical. And then after that, after extensive consultation, we developed a medical record- based clinical pathway. It’s a 6-hour care bundle but has an emphasis on first 60 minutes focusing on 6 key actions in the first 60 minutes following recognition of sepsis. We were lucky enough to receive funding from Better Care Victoria the innovation fund grant for this project. So it was fully supported by Better Care Victoria.

**Mark Macleod-Smith – Sepsis survivor (Murray Bridge Hospital, Flinders Medical Centre)**

Sepsis for me came from when I came out of hospital I was in for treatment and then just seemed to come on very quickly. I was at home feeling very lethargic and really just couldn’t get it together. I was very hot, threw up, I was very sick, and it just went downhill very quickly I think. I initially went into the hospital and the doctor there treated very quickly. He was contacting Flinders which is where I was previously. Yeah, very calm, very methodical just went through put lines in.

**Belinda Macleod-Smith – Partner**

What is sounds like from the point of the hospital when you were first admitted to when you were first taken by ambulance to the next hospital is that a lot of things happened really quickly. The communication between stuff was excellent. There was a lot of, and perhaps if things hadn’t happened that quickly with that kind of open communication and understanding about what was happening, you wouldn’t have had as good as an outcome.

**Mark Macleod-Smith – Sepsis survivor (Murray Bridge Hospital, Flinders Medical Centre)**

I think if you act quickly, to have fingers and toes, to have everything where it should be, makes a big difference. I think the quicker people recognise and act the better outcome for a patient anyway. So, for me I guess getting on it straight away, and treating it straight away is a great thing.

**Kelly Sykes – Sepsis Improvement Statewide Project Lead, Royal Melbourne Hospital**

There’s been numerous positive outcomes for our patients and our staff as well. We’ve seen that patients whose care is guided by the sepsis pathway they have a 50% reduction in mortality, 51% reduction in time to first antibiotic, they have a 43% reduction in length of stay and 65% reduction in admission to ICU.

**Douglas Travis – Chair, Better Care Victoria Board**

The reason we are doing the sepsis collaborative is to provide safer and better care for the people of Victoria. It sits on a basis of evidence that thinking sepsis and acting fast actually gets better health outcomes for the people who are unlucky enough to have a serious infection that puts them in the hospital.

**Kelly Sykes – Sepsis Improvement Statewide Project Lead, Royal Melbourne Hospital**

So, the really exciting part about this next phase of the initiative is that seeing the success at the Royal Melbourne Hospital were going to be using that same approach in implementing a similar pathway across other Victorian hospitals.

**Douglas Travis – Chair, Better Care Victoria Board**

We are very smart in our hospitals we have a lot of really intelligent people, but our hospitals have tended to exist in isolation. They do very good things, but it tends to stay at the one hospital. So, the reason for existence for Better Care Victoria is to help take these good ideas and spread them to other places in Victoria so that the whole of the population can get benefit from the great ideas that are generated within our public hospitals and private hospitals.

**On-screen message**

We thank the Royal Melbourne Hospital staff and consumers for their participation in the ‘Think sepsis. Act fast.’ project and video. We acknowledge that while experiences referred to in this video took place outside the Royal Melbourne Hospital, the theme of timely, appropriate, and well communicated sepsis care align with the ‘Think sepsis. Act fast.’ project.