

Achilles	Reduce mortality rate for patients presenting to emergency department with signs of sepsis by 10% by end of 2014.
Scorpio	90% of patients presenting to ED receive IV antibiotics within 1/24 Double the number of ward patients receiving IV antibiotics within 1/24.
Polaris	Develop and implement a sepsis pathway in ED including a 'sepsis code' which involves a senior ICU registrar within 30 minutes. Six months until implementation to continue with sepsis management post cessation of research led ARISE trial.
Fury	Reduce adverse patient harm after hours in MMH by reducing the number of delayed/missed patient care activities by 80% by the end of June 2014.
Viper	To have established the impact of sepsis on patient safety in our organisation and have it identified as a pt safety priority based on findings by next HRT – pt safety forum.
Panther	Achieve a 20% improvement in interdisciplinary staff satisfaction with clinical governance processes in Department of Medicine.
Panther	To achieve interdisciplinary collaboration and use of data to drive continuous improvement and patient safety in alignment with Metro South Clinical Governance operational plan and strategic direction in the Division of Medicine by August 2014.
Panther Mental Health	<ol style="list-style-type: none"> 1. Reduction in preventable harm – by a reduction of medication related error across all wards by 30%. 2. Working within consumer consultants on establishing a fast discharge survey process for all mental health inpatients.
Sirius	To implement sepsis pathway in selected inpatient units outside ED, leading to increased identification of sepsis and time to 1 st antibiotic in line with state KPI, by June 2014.
Sirius 2	To embed ED sepsis pathway with: <ul style="list-style-type: none"> - 20% improvement in time to 1st antibiotic by Dec 2013 - Time to 1st antibiotic inline with state KPI by June 2014.
Sirius 4	To achieve consistent compliance with ED sepsis pathway reporting on state-wide data base with performance on 1 st antibiotic within state KPI by Dec 2013.
Thunder	To reduce falls by 20%.
Hera	Reduce total red blood cell wastage by 50% across the organisation by June 2014.
Electra	To implement the Alfred's Hospital at night model across all inpatient units by June 2014. Step 1. Evaluation of current workload tasks/process overnight (RMOS) by Dec 13.
Artemis	Improve hand hygiene compliance of all healthcare professionals by 20% by Dec 2013, and consistently stay or exceed this for further six months by June 2014.
Fox	Engage adult ED on agreed sepsis management pathway by Dec 2013.
Cougar	Improve time to theatre for patients admitted with #NOF to benchmark levels and reduce mortality in patients with #NOF.
Regulus	20% reduction in time from recognition of sepsis to administration of antibiotics across the organisation.

Jason	Appropriate surgical antibiotic prophylaxis for all surgical patient groups to > 90% in 24 months.
Rebel	80% of patients with a # NOF will be in the Operating Theatre within 48 hours (a 20% improvement).
Caboolture	To develop and convene by end of 2014 RMO Patient Safety Sessions.
Salus	Decrease medication error by 30% by improving medication safety and providing governance (Monitor through audit).
Fauna	Reduce sepsis mortality rate by 30% by Dec 2014 by implementing a sepsis pathway.
Hornet	Establish a patient safety framework for the Calvary Health Care Act by November 2013.