

the Standard



Standardized Unit: *Driving Change*

As we standardize processes across the Medical and In-Patient Surgical nursing units throughout the organization, the Standard Unit Phase 1 Bundle includes the following components: 5S Event, Electronic Care Round Boards, Shift to Shift Report, In-Room Patient White Boards and the Transfer of Accountability tool.

Through in-depth planning and organization, our team has successfully completed 5S events on nearly every medical/surgical in-patient unit across the organization. The 5S event gives us the opportunity to focus strictly on the clean up and removal of waste. This includes: sorting, setting, shining, standardizing, and sustaining nursing units. The goal here is to free up nurses time so they can spend more time with patients.

Through the implementation of the Electronic Care Round Boards, we will have been able to facilitate a clear discharge plan for our patients. This will help meet our discharge goals of 11am and 2pm. During care rounds, we discuss and create the plan of care for our patients in order to provide focussed



6E at Ouellette Campus is in the process of completing the roll out of Standard Unit project components. Pictured above, Dayna Seguin a nurse on 6E is seen providing care to one of her patients.

care for our patients.

The Shift to Shift process includes the process of reporting, the integration of the Patient Summary Tool (PST), the Patient Care Needs Assessment (PCNA) and the National Early Warning Sign (NEWS). The goal in all of this is to make the communication that happens during the hand over process from nurse to nurse more efficient and to ensure the continuity of care so patient safety is a priority at all times.

Here is what frontline staff are saying about the changes:

“The 5S has made the unit much tidier and has created easier access to equipment” - **Julia Masotti (Project Team Lead)**

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It Takes a TEAM!

In April 2016, the Magnetic Resonance Imaging (MRI) Project Team moved to Alumni Status. Operating independently, the team continues to monitor its outcomes and seek further gains to reduce patient wait times and increase efficiencies.



Synergy is defined as the interaction or cooperation of two or more organizations, substances, or other agents to produce a combined effect greater than the sum of their separate effects. Synergy is on display everyday in MRI.

With finite operating hours and significant demand, everyone has a vital role to play. Clerks, Porters, Radiologists and Technologists all combine to form a significant piece of the MRI team.

A Key Performance Indicator (KPI) the project team has been tracking for a number of months is the turnaround time for a priority 2

patient (for imaging, priority 2 is defined by the government as an inpatient). Inpatient MRIs require significant coordination by all staff to ensure that table time is used in an effective and efficient manner.

In addition to creating additional inpatient scan time, a dedicated Diagnostic Imaging Porter at Ouellette Campus has been devoted to the inpatient time slots to ensure patients are arriving for their scans in a timely fashion.

To date, we are able to achieve a 48 hour turnaround time for WRH inpatient scans 84% of the time—no small feat considering the significant demands the team faces on a daily basis. Well done!



DID YOU KNOW?



PROCESS MAPPING

Mapping is the pictorial representation of the flow of work. Mapping does not focus on job roles, but rather shows us the way we are carrying out steps in a process while interacting with patients and others. Maps can also trace the pathway of paperwork, verbal communication, electronic information and supplies.

By using a map to review a process or a series of parallel processes, we can readily see where bottlenecks and waste occur as we provide services to our patients.

The SOP Team Welcomes a New Cohort of Master of Business Administration (MBA) Candidates

For the second year in a row, the SOP Team has entered into partnership with the Odette School of Business (University of Windsor) to provide students with a glimpse of what it means to implement continuous quality improvement in a healthcare organization.



The SOP Team is pleased to introduce this year’s Master of Business Administration (MBA) Candidates from the University of Windsor; Al Yelle, Paige McParlan, and Dane Rife. While acquiring and applying new skills in continuous quality improvement, they will be bringing forward knowledge and experience from areas such as small business ownership, research in health sciences, finance and quality management.

With eagerness and a shared drive to succeed, the SOP Team is looking forward to their support and collaboration on Wave 3 projects until the end of their school term in December.



Standard Unit: Driving Change... (continued from page 1)

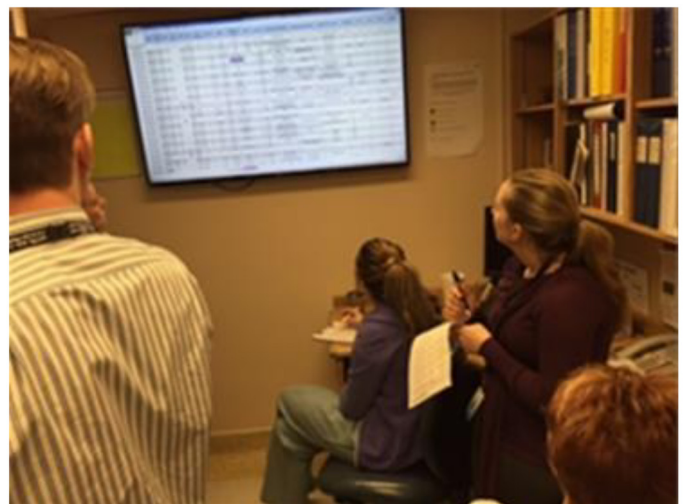
“As a part-timer, the care round board makes it easier to follow the history of the inpatients stay, providing a more focused plan”-**Anonymous, Surgical Nurse**

“Shift to Shift report supports a good team work model”- **Karla Cea Martinez**

In continuation with our standard unit rollout, we are pleased to announce that our new and improved Transfer of Accountability (TOA) tools are up next! This tool is used for communication purposes as a way to share information about our patients when transferring between units, campuses or outside of the organization. In an effort to standardize this

process through the organization, the launch will include two versions of the TOA tool– the *General* and *Surgical*. This TOA tool is used to promote patient safety, continuity of care and prevention of harm.

The launch date is yet to be determined.



Opening the Gate to the Future:

The SOP Team's experience on project stage gating.

As we approach Wave 3, we reflect on how far we have come with our projects and what is next to come. In order to move forward, our projects must be assessed through a number of phased evaluations. The evaluation process provides us with confirmation that the project has met the anticipated outcomes, determine whether there are any outstanding barriers and directions for our next steps. Stage gating provides an opportunity to review the progress we've made and ensures that our goals and objectives are in-line and on track.

Project stage gating is a challenging and rigorous process, because it forces you to look deep at the good and not so good in every project. We had to go back and look at our initial objectives and ask ourselves if they had been met. We knew our teams had done plenty of hard work, but had to ask if the results were there and if we had the data to support it. All of this had to be presented in just 3 slides with a crystal clear focus.

We had the responsibility of communicating all of the hard work completed by our project teams over the course of two years and wanted to ensure we did our teams justice. With the vast amount of information to communicate, our projects were

presented over a series of meetings.

An emphasis was placed on the work that was done and for every project we had to answer the question: *'how is this benefiting our patients?'* This brought us back to the reason for all of these projects. Patients have always been at the heart of the Standardization and Optimization Process.

Following each project report, a lively and intense discussion took place. It gave us the chance to share the results of our work with sponsors for feedback and evaluation. Common barriers were identified across the projects revealing further opportunities to achieve successful outcomes. Stage gating highlighted the importance of remaining patient-focused while implementing lean processes. If the objectives proved to not relate to patient outcomes, the message was clear— *"Don't do it!"*

This experience outlined clear priorities, and helped bring focus as we look at future objectives.

As we open the gate to future projects, we will be able to apply our many learnings to ensure success. In the meantime, we are looking forward to Wave 3!



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