



Friday, June 22, 2018

## Wave Three of Quality Based Procedures is Under Way



The Wave Three Quality Based Procedure (QBP) teams have begun meeting to make improvements to their respective QBP's. The Wave 3 of QBP's include:

- Breast (Cancer Related)
- Hysterectomy (Cancer Related)
- Prostate (Cancer Related)
- Shoulder (Reverse & Total)

These multidisciplinary teams will be working on bundles for each of these surgical procedures. The Bundles will include physician Order Sets, standardized Care Plans called Clinical Pathways and day

by day guides called Patient Experience Pathways. The patient experience pathway will also include the addition of these QBP's to the WRH My Care Journey mobile app!

## SOP Medicine Patient Flow Project Highlighted at Town Hall



There was cause for celebration at both Met and Ouellette campuses last Thursday. David Musyj and Karen McCullough shared the wonderful progress that our organization is making in areas related to patient safety, efficiency and effectiveness. The weekly patient flow scorecard was shared with staff showing the incredible improvements as a result of our patient flow initiatives in the medicine program. Check out the scorecard on the next page to see the great results!





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## **Patient Flow Metrics Report - Medicine Only**

Targets are set as 20% improvement since Oct 23rd launch, exceptions include: ALC, DC by 11&14 where corporate targets already existed



Reporting for the week of June 8th - 14th					Met Campus			Ouellette Campus			Results YTD
Metric	Admission (A) Discharge (D) Lead	FY 16/17	Goal	Target	This Week	Last 4 Weeks	Since Launch (Oct. 23/17)	This Week	Last 4 Weeks	Since Launch (Oct. 23/17)	Improvement Since Launch (May)
Admit to Bed Times (in hours)*	A - Janice N	11.0	0	M: 3 O: 5	2.2	3.4	4.3	6.8	6.6	6.9	Admitted patients wait 5.4 hours less for an inpatient bed
# of Patients Beyond EDD by 5 Days or More (avg per day)	D - Michele/Marie	N/A	0	24%	28 out of 122 (23%)	33 out of 122 (27%)	36 out of 122 (30%)	30 out of 126 (24%)	36 out of 126 (29%)	35 out of 126 (28%)	Met: 24 less patients beyond EDD >5 avg./day Oue: 14 less patients beyond EDD >5 avg./day *weekly - since Oct 23,2017
# of Patients Admitted Off Service (total for the week) ***	N/A	38	0	M: 3 O: 4	1	2	3	5	6	5	33 less patients admitted off service
# of ALC patients (avg per day - 2N ALC patients in brackets)	D - Michele/Marie	M:18 O:30	0	M:18 O:26	14	15	13	17(8)	22	22	M: 5 less alternate level of care patients/wk O: 7 less alternate level of care patients/wk
# of Admit No Beds (avg at 7am)	A - Debbie R	M:8 0:16	0	M:2 O:3	0	1	2	3	3	4	M: 6 less admitted pts without a bed at 700 O: 13 less admitted pts without a bed at 700
Discharge by 11:00	D - Monica S	M:31% O:16%	32%	32%	37%	42%	30%	10%	12%	16%	D/C 11:Met 2% decrease, Oue remains the same D/C 14:Met 4% decrease, Oue 3% increase
Discharge by 14:00	D - Monica S	M:72% O:54%	70%	70%	75%	77%	68%	48%	53%	57%	
Weekend Discharges (avg # discharged on: weekdays/Saturday/Sunday)	D - Dr. Seski	M:13/7/6 O:13/8/6	TBD	TBD	14.6/8/10	14/8/7	14.5/7.5/8	17.2/15/6	15.9/10.3/8	16.7/9.6/7	M: Sat 1 /Sun 2 increase in patient discharges O: Sat 2/ Sun 1 increase in patient discharges
# of Patients to Assessment Bays (medicine only)	A - Emily C	N/A	100%	100%	76 out of 80 (95%)	290 out of 305 (95%)	2372 out of 2511 (94%)	45 out of 53 (85%)	174 out of 216 (81%)	1657 out of 1890 (88%)	M:94% of pts in assessment bays (since launch) O: 88% of pts in assessment bays (since launch)
# of Grey Days (total for the week)**	TBD	NA	0	TBD	7	Coming: June	Coming: June	27	Coming: June	Coming: June	

This metric measures how long a patient woits from the time the decision-to-admit is made in the Emergency Dept to the time the patient reaches the bed. This includes bed cleaning and availability
\*\*\*NEW - Count of grey days by site, NOT individual patients. Trending will start in June after 4 weeks of data collection.

\*\*\*AG # Morth 2013, This metric does not include overflow areas \$24.8.7

\*\*20 ALC TOTAL, 7 of which are on 2N



