## SOPUPDATES

Standardization & Optimization Process



Friday, November 9, 2018

## In Pursuit of Outstanding Care Contest

Standard unit bundles were created to:

- 1. Reduce or eliminate patient harm by following Best Practices.
- 2. Create an environment where all patients receive the same care at both campuses improved processes, communication.
- 3. Create an environment where all members of the Care Team have the assurance that the basic practices that will reduce patient harm are known, understood and practiced by all.
- 4. Maximize time for direct patient care

Monday was the launch of the first ever Standard Unit contest called 'In Pursuit of Outstanding Care.'

A daily email with a fact and question/activity, focused on one of the Standard Unit bundles is sent to all staff. There are options for both areas that have implemented Standard Unit bundles and those who have not. Each day a draw will take place for all units who have correctly submitted the answers. A special care package will be given to one Standard Unit and one Non-Standard unit for each campus. All entries must be submitted by midnight to be eligible for the daily prizes. If a team has missed the midnight deadline, complete the activity and still receive a game piece that will be eligible for the final prize draw.





The contest runs from Nov 5-16. It is not too late to start collecting your game pieces for a chance to win the final prize. If your area has not received the game card please reach out at Future@wrh.on.ca

	WINNERS TO DATE					
A statement of the stat	STANDARD UNIT	NON-STANDARD UNIT				
And a second sec	DAY 1: MET CAMPUS: 4 NORTH OUELLETTE: 4 MED	DAY 1: MET CAMPUS: CANCER CENTRE OUELLETTE: PHARMACY				
	DAY 2: MET CAMPUS: 7/8 NORTH OUELLETTE: CTU	DAY 2: MET CAMPUS: OCCUPATIONAL HEALTH OUELLETTE: DISTRICT STROKE				
HMEDE	DAY 3: MET CAMPUS: 4 WEST OUELLETTE: IPAC	DAY 2: MET CAMPUS: DECISION SUPPORT OUELLETTE: MENTAL HEALTH				
		CTU				
Units participating in the Care Round activity.						



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## WRH Improvement Programs Featured at Conference!

Staff from WRH were "centre stage" during the Great Lakes Biennial Nursing Conference hosted by the University of Windsor on November 2, 2018. WRH staff were well represented and led two oral presentations and one poster presentation:

"I Will Not Waste A Day Of Your Life": Working Together To Improve Patient Flow In Medicine Units" presented by Kristi Cecile, Director of Medicine and Lori Mariuz, Utilization Nurse.

"How Standardized Practices Assist Nurses In Providing Safer Patient Care", presented by Jeff Geml and Lynda Truong, Operations Managers.

"Nursing Staff Take a Leadership Role in Improving Mobility for Patients", presented by Padma Ravi and Kuljeet Kalsi, Nursing staff and members of the Mobility Team.

Congratulations to all those who presented and represented all of us at WRH who are working to improve processes and provide outstanding patient care.

## **Patient Flow Metric 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 October 26, 2018 - November 02, 2018				Met Campus			Ouellette Campus			Results YTD Oct 1-31st	
Metric	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 for September
Admit to Bed Times (in hours)*	A - Janice N.	11.0	0	M: 3 0: 5	3.6	4.0	3.0	8.1	10.9	7.6	Admitted patients wait 5.7 hours less for an inpatient bed
# of Patients Beyond EDD by 5 Days or More (avg. per day)†	D - Kathleen M. / Marie C.	N/A	0	24%	49 out of 122 (40%)	49 out of 122 (40%)	37 out of 122 (30%)	70 out of 126 (56%)	65 out of 126 (52%)	41 out of 126 (32%)	Met: 8 more patients beyond EDD >5 avg./day Oue: has 18 more patients beyond EDD >5 avg./da *4 week average - since Oct 23,2017
# of Patients Admitted Off Service (total for the week)***	N/A	38	0	M: 3 0: 4	0	5	3	3	4	5	34 less patients admitted off service
# of ALC patients (avg. per day)	D - Kathleen M. / Marie C.	M:18 0:30	0	M:18 0:26	12	13	13	20	21	21	M: 5 less alternate level of care patients/wk O: 9 less alternate level of care patients/wk
# of Admit No Beds (avg. per day at 7am)	A - Rose D.	M:8 0:16	0	M:2 0:3	1	2	1	4	6	4	M: 7 less admitted pts without a bed at 700 O: 12 less admitted pts without a bed at 700
Discharge by 11:00	D - Monica S.	M:31% O:16%	32%	32%	42%	42%	33%	14%	15%	17%	D/C 11:Met 2% increase, Oue 1% increase D/C 14:Met 2% decrease, Oue 3% increase
Discharge by 14:00	D - Monica S.	M:72% 0:54%	70%	70%	79%	78%	70%	53%	53%	57%	
Weekend Discharges (daily avg. # discharged on: Weekdays/Sat./Sun.) % discharged Weekday/Sat/Sun)	D - Dr. Seski	M:13/7/6 O:13/8/6	TBD	TBD	14.8/12/4 100%/81%/27%	13.9/11/5.3 100%/79%/38%	14/7.5/7.2 100%/53%/52%	13.2/8/7 100%/61%/53%	14/9.5/8 100%/68%/57%	16.1/9.5/7.2 100%/59%/45%	M: Sat 1 increase in patient discharge / Sun 1 increase in patient discharges O: Sat 2/ Sun 1 increase in patient discharges *Improvement since FY16/17
# of Patients to Assessment Bays (medicine only)	A - Emily C.	N/A	100%	100%	65 out of 74 (88%)	272 out of 289 (94%)	3764 out of 3983 (95%)	35 out of 39 (90%)	133 out of 167 (80%)	2454 out of 2832 (87%)	M:95% of pts in assessment bays (since launch) O: 87% of pts in assessment bays (since launch)
f of Grey Days (weekly total, weekly avg. for last 4 weeks, weekly avg. since data collected )**	TBD	NA	0	TBD	1	1	3	1	2	9	

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