Movement Matters: One Step At A Time

The Mobility team continues to send the message to health care teams, patients and families that movement does matter to help with recovery. It is important to get out of bed every day to maintain muscle strength, independence, and prevent complications.

The ambulation team has been instrumental in developing a mobility pilot program 'Movement Matters: One Step at a Time' on 4 North (Met) and 7 Medical (Oue) for patients who are most at risk for complications related to immobility and require assistance to ambulate. Each day staff and patients have been tracking distances that patients have travelled and marking those milestones on a wall map located on the unit for all to see. The map is a fun way to track steps and shows the journey to a number of popular Windsor destinations (WFCU, Caesars

Windsor, etc). This activity has motivated patients to track their collective progress on the road to recovery.

For example, a patient at the Ouellette campus was motivated to walk just to help the team arrive to the next map destination.

Once the momentum started on 7 Medical it took only 10 days to travel 56.8 km. At Met, 4 North, a unit half the size of 7 Medical, is just 9 km short of the finish.

We look forward to seeing how far Windsor Regional patients will travel together toward a healthier outcomes!
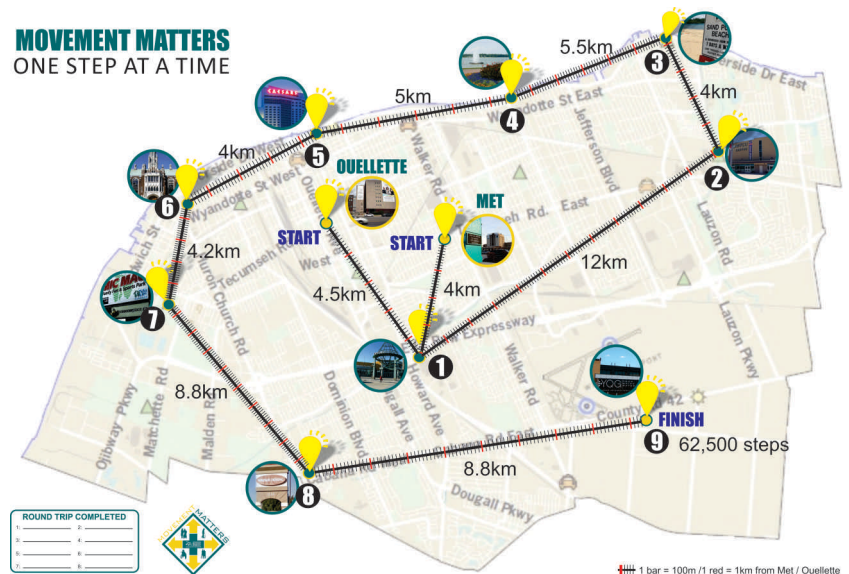
The Importance of Standard Work

By now almost everyone has heard about the use of an effective tool in process improvement called 'Standard Work'. At WRH, the use of standard work is the foundation of most of our SOP projects, including standard unit bundles and patient flow processes. Standard work is defined as instructions that break down work and/or processes into elements that are sequenced and organized. Effective standard work is developed after examining best practices and pilot testing the process to make sure it creates the results that we all want for our patients and families.

Some people struggle with understanding why it's so important to follow standard work. Standard work isn't designed so people act like "robots" or don't have any ability to use their good judgment. Research shows there are many benefits to standard work:

- It makes sure that all work is done according to current best practice;
- It simplifies and speeds up training for new staff – training that is consistent, helps staff understand expectations, and removes uncertainty;
- It improves quality and increases patient satisfaction – patients can expect the same level of care regardless of site, program, or caregiver because there are consistent guidelines to follow;
- It makes results predictable and measurable, and helps with finding the source or root cause of errors or problems;
- It makes improvement easier and faster – it's harder to improve a process that isn't well understood or consistently applied, and standard work removes variability and ambiguity.

The key to successful standard work? Everyone has to follow it in order to get the results that will benefit both staff and patients.

Thank You and Good Luck Sheraz!

The SOP team has been fortunate to have Sheraz Thomas as part of the SOP team over the past year. Throughout his time with SOP, Sheraz was focusing his efforts on the Medicine Patient Flow project. His contribution to this project has been pivotal. We are grateful for his time with us and wish him all the best as he furthers his career in healthcare at the Windsor-Essex Community Health Centre!

Patient Flow Metric Report-Medicine Only

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

Reporting for the week of June 15, 2019 - June 21, 2019

Metric	Lead	FY 16/17	Goal	Target	Met Campus This Week	Met Campus Last 4 Weeks	Met Campus Since Launch (Oct. 23/17)	Ouellette Campus This Week	Ouellette Campus Last 4 Weeks	Ouellette Campus Since Launch (Oct. 23/17)	Results YTD May 1-31st Improvement Since Launch for May
Avg. Admit to Bed Times (in hours)*	A - Janice N.	11.0	0	M: 3 O: 5	1.9	2.4	2.2	4.8	4.2	4.1	Admitted patients wait 7.8 hours less for an inpatient bed
Daily Avg. # of Patients Beyond EDD by 5 Days or More†	D - Kathleen M. / Marie C./Kristi C.	N/A	0	24%	39 out of 122 (32%)	42 out of 122 (34%)	39 out of 122 (32%)	59 out of 126 (47%)	58 out of 126 (46%)	47 out of 126 (37%)	Met: 2 less patients beyond EDD >5 avg./day Oue: 15 more patients beyond EDD >5 avg./day *4 week average - since Oct 23.2017
Weekly Total # of Patients Admitted Off Service***	A - Theresa M.	38	0	M: 3 O: 4	1	4	4	11	10	6	33 less patients admitted off service
Daily Avg. # of ALC patients	D - Kathleen M. / Marie C.	M:18 O:30	0	M:18 O:26	8	9	12	23	23	21	M: 6 less alternate level of care patients/wk O: 5 less alternate level of care patients/wk
Daily Avg. # of Admit No Bed Patients at 07:00	A - Janice N.	M:8 O:16	0	M:2 O:3	0	0	1	2	2	3	M: 7 less admitted pts without a bed at 700 O: 13 less admitted pts without a bed at 700
Weekly % of Patients Discharged by 11:00					28%	30%	33%	15%	19%	17%	D/C 11:Met 2% increase, Oue 1% increase
Weekly % of Patients Discharged by 11:00 per Service	D - Monica S. / Kristi C.	M:31% O:16%	32%	32%	TEL/MED - 19% ONC - 14% HOS/SSM/UNA - 37%			CTT/TEL - 22% CTU - 18% HOS - 11% ASU - 11%			
Weekly % of Patients Discharged by 14:00					65%	67%	71%	50%	55%	57%	
Weekly % of Patients Discharged by 14:00 per Service	D - Monica S. / Kristi C.	M:72% O:54%	70%	70%	TEL/MED: 56% ONC: 65% HOS/SSM/UNA: 72%			CTT/TEL - 59% CTU - 36% HOS - 56% ASU - 56%			D/C 14:Met 1% decrease, Oue 3% increase
Daily # of Patients Discharged on Weekends (Weekday Daily Avg.|Sat.|Sun.)	D - Dr. Seski	M:13|7|6 O: 13|8|6	M: 9|9 O: 11|9	M: 9|9 O: 11|9	16	4	11	15.6	8	6.5	14.0	7.6	7.4	15.2	4	6	17.7	6.8	6	16.2	9.3	7.3	M: Sat 1 / Sun 1 increase patient in discharges O: Sat 2 / Sun 1 increase in patient discharges *Improvement since FY16/17
Weekly Total # of Patients Admitted to Units with Assessment Bays	A - Emily C.	N/A	100%	90%	78 out of 84 (93%)	273 out of 290 (94%)	6084 out of 6465 (94%)	40 out of 46 (87%)	189 out of 220 (86%)	3801 out of 4425 (86%)	M:94% of pts in assessment bays (since launch) O: 86% of pts in assessment bays (since launch)
Weekly Total # of Grey Patients**	D - Kristi C.	NA	0	M:0 O:0	2	5	3	11	19	17	
Weekly Total # of Patients Waiting Greater Than 3 Hours for a Bed††	A - Kristi C.	N/A	0	M:0 O:0	5	8	9	18	18	15	

†Data source changed from Care Round Boards to Medworxx on July 20th, 2018
*This metric measures how long a patient waits from the time the decision-to-admit is made in the Emergency Dept. to the time the patient leaves the Emergency Dept.
**Total # of Grey patients for current week displayed, 4 week weekly avg. since start of data collection also displayed.
***As of March 2017, this metric does not include overflow areas 524 & 7
†† Total # of ANB>3hrs patients for current week displayed, 4 week weekly avg. and weekly avg. since start of data collection also displayed.