

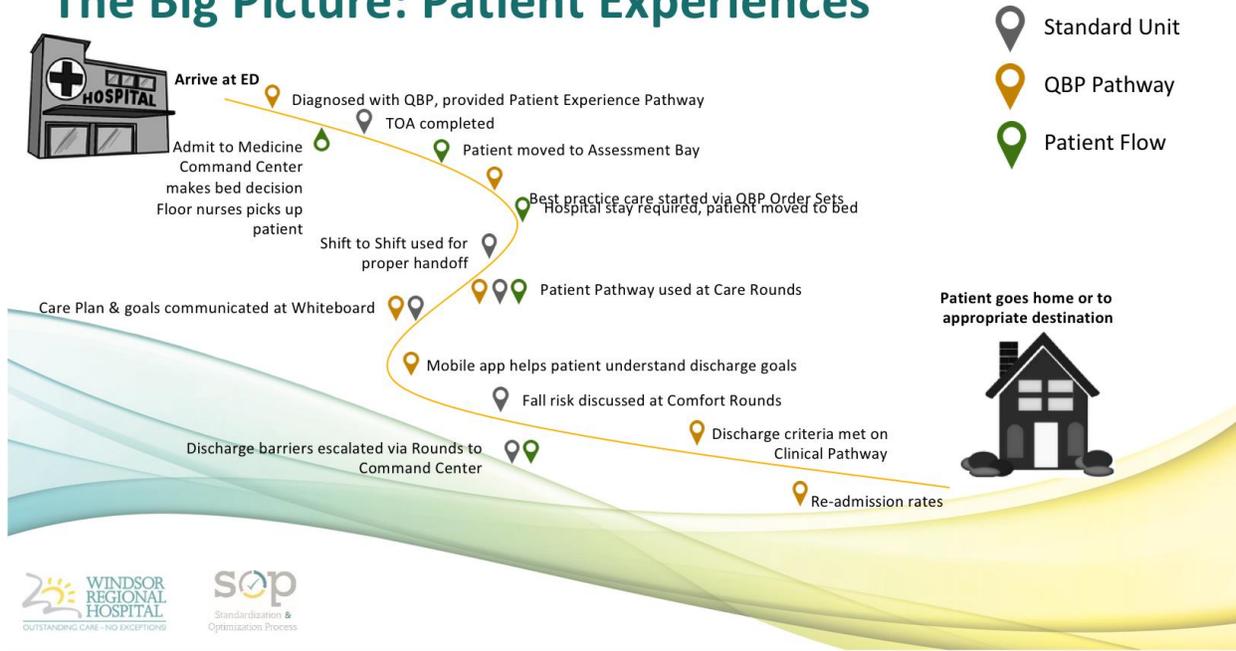
Date: May 2018



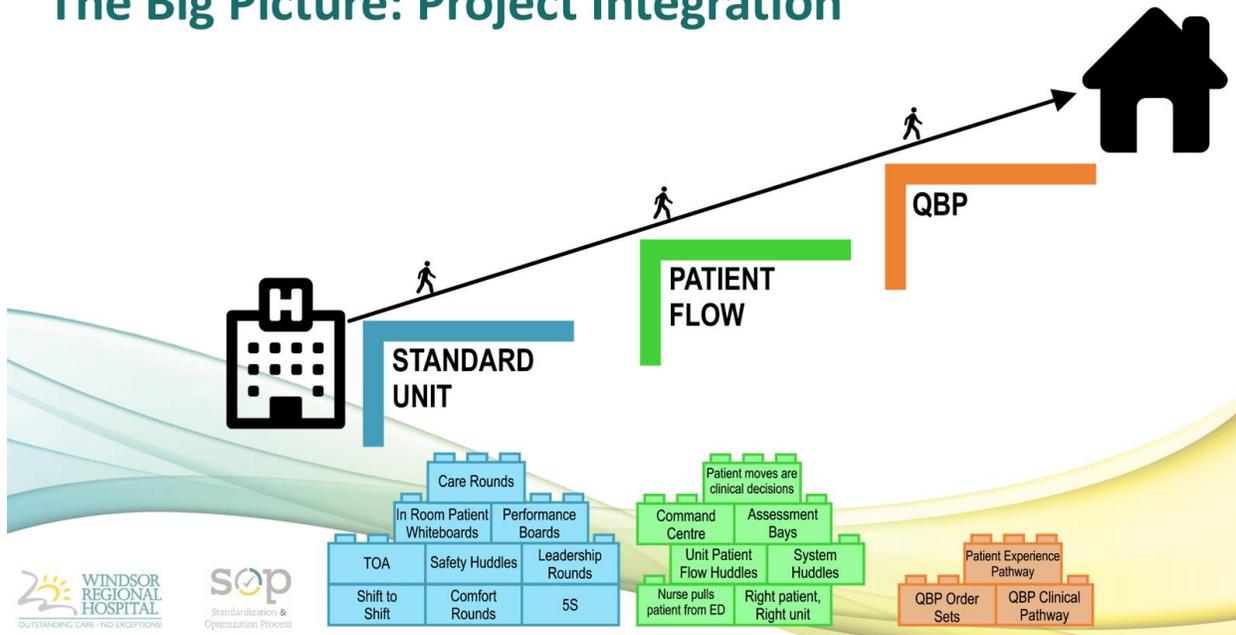
Strategic Direction - Strengthen the culture of patient safety and quality care & Champion accountability and transparency

This past month we highlighted the achievements to date of the patient experience across Windsor Regional Hospital. This is a journey. As a team, we have made amazing progress but we all know there is more to do. However, on the following pages I will try to highlight our team's outstanding journey to date

The Big Picture: Patient Experiences



The Big Picture: Project Integration



The eight Standard Unit bundles are the foundation for many of our patient safety and flow initiatives. They are evidence-based best practices that were launched in the medicine/surgery programs a few years ago and are now being rolled out to ED, Mental Health, and Critical Care. Very soon the ninth standard unit bundle – improved mobility for patients will be piloted on 4North at Met and CTU at Ouellette.

Standard Unit – Bundles



We are celebrating some milestones that improve patient care – and here is one example. Care Rounds: the process of checking on patients every two hours with a focus on specific questions related to their needs – this has contributed to the reduced number of falls and falls with injury on inpatient medicine and surgery units.

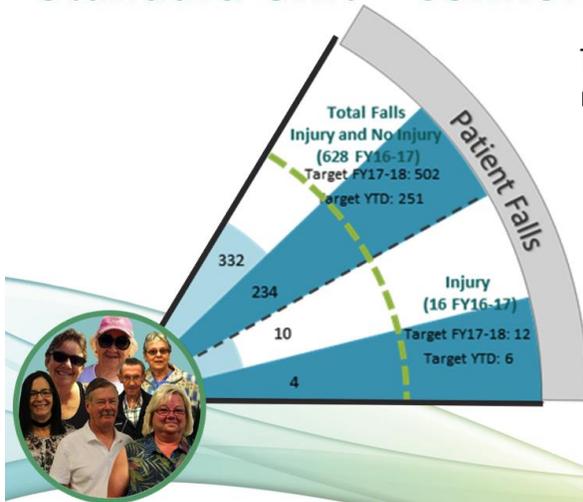
Standard Unit – Comfort Rounds

Comfort Rounds reduces the number of patient falls and improves safe patient care.



As you can see – this is a portion of our corporate metrics that is focused on patient falls. In 2016/2017 we had 502 falls by this time. While our goal is always zero falls, our target was a 20% improvement which is 251 and we had 234 which is below target. Our goal for falls with injury is 0, however our target is 6 and at this time we are below target.

Standard Unit – Comfort Rounds



There has been a significant improvement in the number of patient falls compared to last year.



Several other standard unit bundles also contribute to safe patient care. These include a more comprehensive transfer of accountability when transferring patients between campuses, units, and organizations



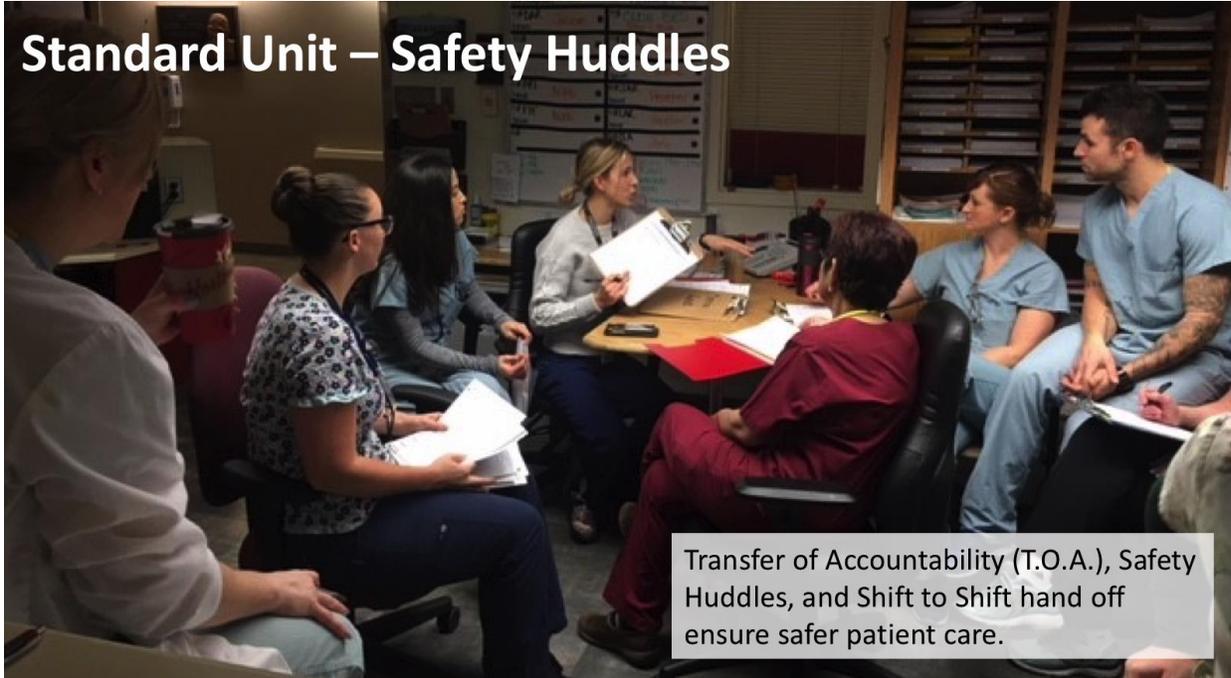


Standard Unit – T.O.A.

Transfer of Accountability (T.O.A.), Safety Huddles, and Shift to Shift hand off ensure safer patient care.

Safety huddles also contribute to safe patient care. Safety Huddles are held within 2 hours of shift and lasts 3-5 minutes. These huddles include information about fall risks, infection control, high risk meds, and any other risks that need to be discussed like similar last names, AOB etc.

Standard Unit – Safety Huddles



During shift change, nurses report to each other in person using the patient summary tool and this allows for the discussion of important patient details.

Right now, all these standard unit bundles are being used to provide a great foundation for patient care and safety. The second wave of standard unit bundles was reviewed by ED, MH, and CC teams, they have been fine tuned to meet the patient population and are also now being launched. We are looking forward to presenting their results during the next Milestone Celebration.



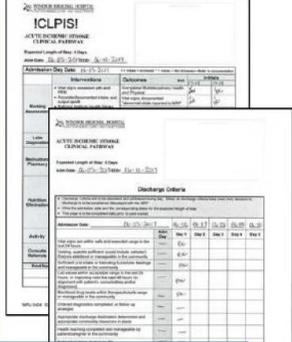
Quality Based Procedures or QBPs are a specific set of diagnoses that have been identified as having specific lengths of stay based on prescribed treatment plans. There are now diagnoses listed as QBPs including two types of stroke, congestive heart failure, community acquired pneumonia, hip fracture, total knee replacement, COPD, knee arthroscopy, elective hip replacement. Each QBP has an order set completed by the physician, a clinical pathway that outlines care and treatment for each day and patient information – both a brochure and a mobile app.

QBP

Order Set



Clinical Pathway



Patient Experience My Care Journey



9 QBPs now have best practice Order Sets, Clinical Pathways and Patient Experience Pathways – standardized treatment plans.

To celebrate milestones that improve patient care, since the launch of QBPs, patients with COPD, Pneumonia and hip fractures are being discharged one day sooner compared to the previous year.



OUR VISION: OUTSTANDING CARE - NO EXCEPTIONS!
 OUR MISSION: DELIVER AN OUTSTANDING PATIENT CARE EXPERIENCE DRIVEN BY A PASSIONATE COMMITMENT TO EXCELLENCE

QBP

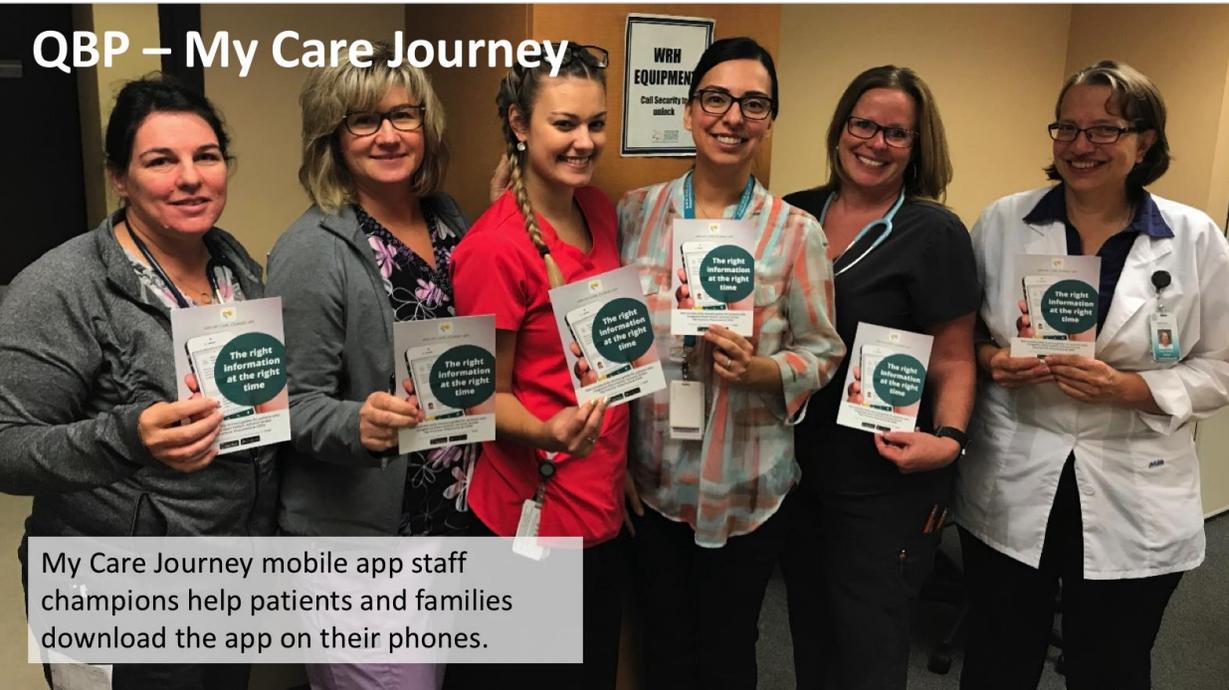
QBP	Length of Stay (LOS)			
	FY16-17	ON25 Target	FY17-18 (Dec)	Change
COPD	6.7	6.2	6.0	0.7
Pneumonia	7.1	6.3	5.8	1.3
Heart Failure	7.1	6.6	7.3	0.2
Ischemic Stroke	6.3	5.8	6.0	0.3
Hip Fracture	9.7	7.1	8.8	0.9

Patients with COPD, Pneumonia, and Hip Fracture are going home one day sooner compared to the previous year.



The My Care Journey mobile app lets patients and their families download important information about their acute care stay – what they can expect to happen each day in hospital. It answers questions about their acute care stay, and prepares them for discharge. Mobile app staff champions were trained on how to help patients and families download the app. Additional promotion during the recent weeks have led to more than 1000 downloads.

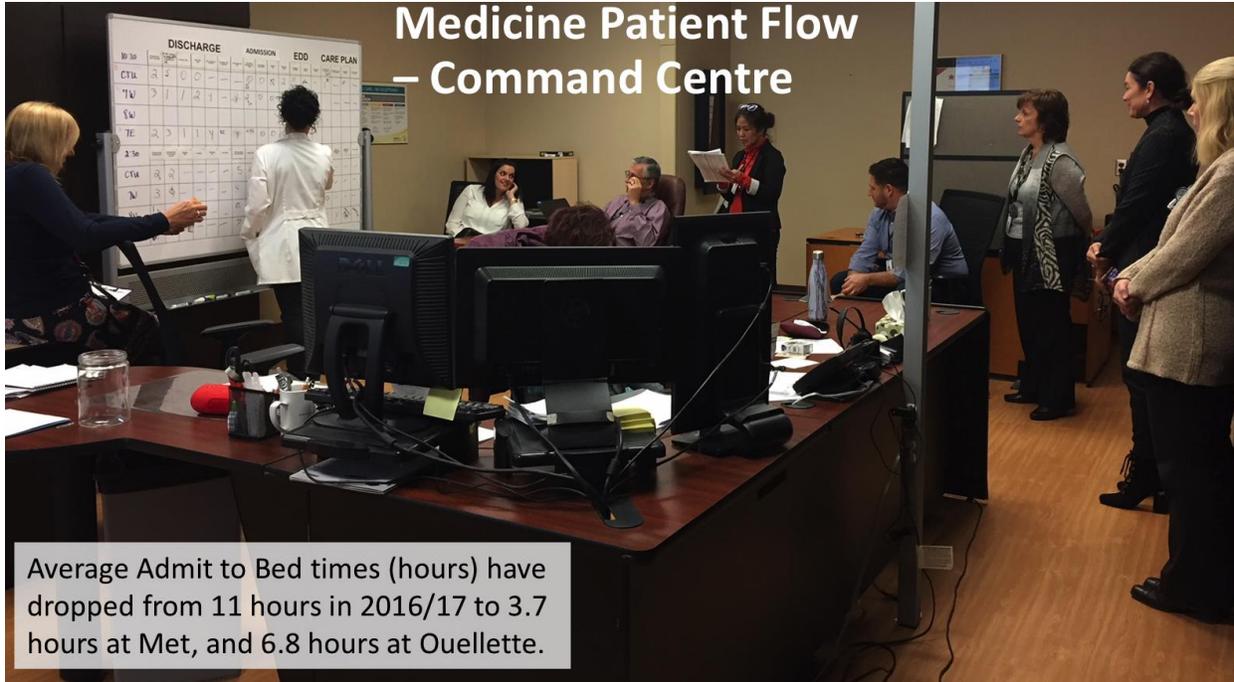




The medicine patient flow program was launched on October 23, 2017 with the goal of improving several metrics related to patient flow within the medicine program. The Command Centre is an integral part of this program. It is the central hub where decisions are made about where to place patients and issues related to wait times in ED and problems with care and discharge are escalated. Since the launch of the program, the average time it takes from decisions to admit a patient to bringing a patient to the inpatient unit has decreased significantly, as you can see.



Medicine Patient Flow – Command Centre



Average Admit to Bed times (hours) have dropped from 11 hours in 2016/17 to 3.7 hours at Met, and 6.8 hours at Ouellette.

It's important to make sure that our admitted patients are going directly to the correct service – the first time. It improves their care, and limits multiple transfers which isn't a good experience for the patient and doesn't use our resources efficiently. Last year, on any average week there were 38 patients that were placed off service. Since the launch of the program this has been dramatically reduced to 5 patients.

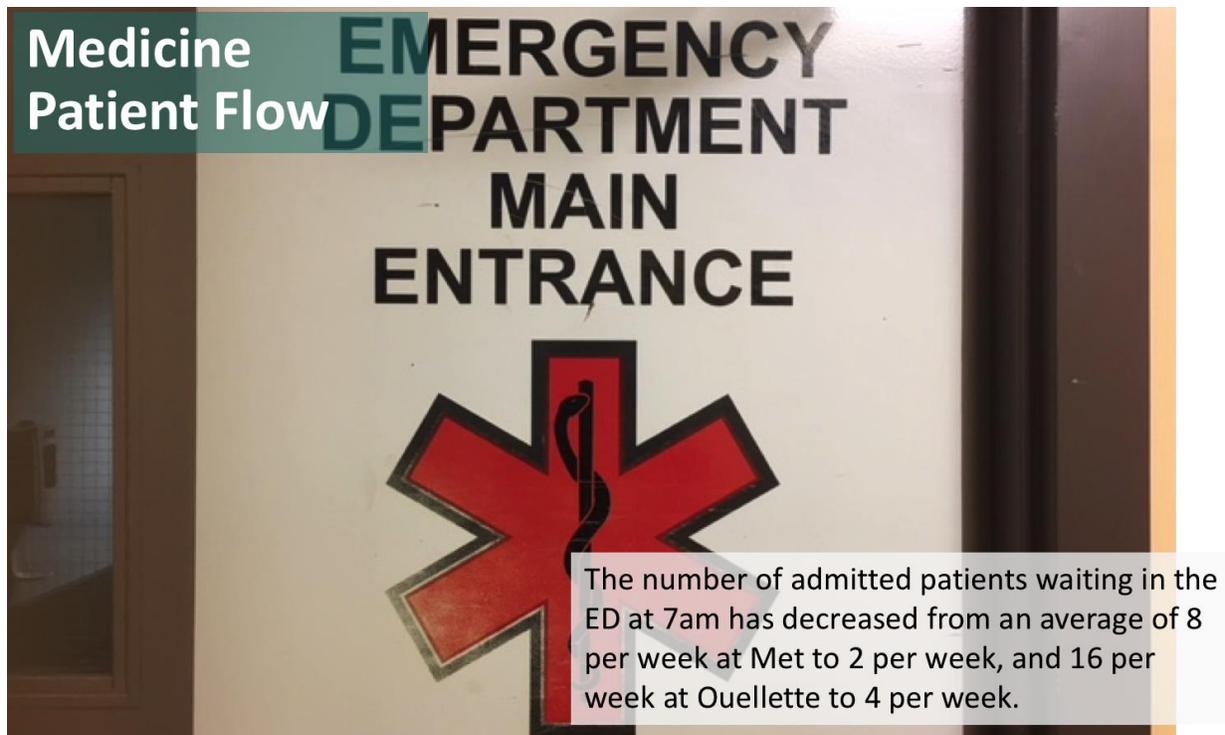
Medicine Patient Flow

* → Weekends

The number of patients admitted to an "off-service" unit has decreased from an average of 38 per week in 2016/17 to an average of 5 per week since the program launched.

Discharge							Admission			EDD			Care Plan			
# Planned D/C from Yesterday	# Planned D/C for Tomorrow	# D/C by 1100	# D/C after 1100	Plan in place for D/C Y/N	Escalation to whom Y/N	Issue Resolved Y/N	# Yesterday Adm since 1500	# Patients without EDD	# ANB in ED	# Patients at EDD	# Patients over EDD	Plan R	Plan	Exception issues from Yesterday	Escalate to whom	# grey pt on unit
1030																
4W																
4N	2		0	1	YES	YES-SW	7	1	0	1	22					
5N																
6N																
1430	# Planned D/C for Tomorrow	# Patients that did not leave by 230	Escalate Y/N	To Whom	Resolved Y/N	If no why?	# Patients Adm since yesterday	# ANB in ED	# ALC	# New ALL today	Is this included in plan	Was Issue Resolved Y/N	If no why?			
4W																
4N																
5N																

Patients waiting in the ED in the morning is an indication of how well our patient flow processes are working. It relies on us getting patients discharged within their lengths of stay and using our inpatient assessment bays and beds efficiently. We have also experienced positive results when comparing the number of admitted patients waiting in the ED for inpatient medicine beds.



Congratulations to all those who participated on the Standard Unit, QBP, and Patient Flow teams. Thanks to all staff who embraced the changes.

Questions, Feedback, Suggestions? Email: future@wrh.on.ca or talk with your leader or any team member.

Strategic Direction - Develop a sustainable corporate financial strategy

Opportunity for additional funding under LHIN/WRH Optimization Review

Windsor Regional Hospital is excited to announce to staff an initiative in collaboration with the Erie St. Clair Local Health Integration Network – one that may justify an increased budget in the short term, and position us for the future funding requirements over the longer term as we move towards a new state-of-the-art acute care hospital.

This collaborative and voluntary Optimization Review will examine whether Windsor Regional Hospital has been sufficiently funded since our realignment of hospital services in October 2013 – one of the most extensive hospital transformations that has ever taken place in our province. It will also identify anticipated funding requirements as we work towards a new state-of-the-art acute care hospital and urgent care centre just a few years from now.

WRH has long felt that in order to meet the demands of our community, additional funding flexibility is required for the current term and for the longer term. Currently, according to Health Services Funding Reform results, WRH is performing operationally better than expected and better than the average of our hospital peer group in Ontario.

The timing of such a review makes a lot of sense – we are closing in five years since the local hospital realignment and we are about to prepare for Stage 2 of the government-approved capital funding process. Under that context, reviewing our finances retroactively and looking forward presents an excellent opportunity for our organization.

An independent, third party evaluator will study WRH’s financial and operational position and prepare a summary of its findings for the hospital and the ESC LHIN. We expect this process to take about six months to complete.

Strategic Direction - Create a vibrant workplace

National Nurses’ Week

National Nurses’ Week is coming May 7 to 13, 2018 and ahead of that week all nurses have the opportunity to tell us why they love nursing and be eligible for a gift card!

Stay tuned to hear all of the exciting events celebrating nurses across our organization and the region. Expect to hear all about the nominees for the Jean Mance Nursing Excellence Award and also the Lori Dupont Bursary.

Medical Laboratory Professionals Week Celebrated

From April 22-28, 2018, we celebrated Medical Laboratory Professionals week. Medical Laboratory Professionals are an integral part of patient care at Windsor Regional Hospital.



Medical Laboratory Professionals work endlessly to provide accurate and timely results vital to medical decisions about one's health. These health care professionals use a variety of instruments and equipment to collect, prepare and analyze tissue and fluid samples. At WRH, onsite testing is available in several modalities including Chemistry, Hematology, Transfusion Medicine, Microbiology, Surgical Pathology and Cytology.

Local stats on the work performed at Windsor Regional Hospital include:

- 177,941 Blood Collections
- 2,435,654 Chemistry tests
- 311,793 Hematology Tests
- 12,100 Number of Transfusions
- 61,617 Surgical Pathology Specimens
- 3,298 Cytology Specimens
- 134,913 Microbiology Tests

“We complete the picture! Our role in the health care system is rarely seen but our job is vital to patient care. I, along with over 130 of our Laboratory Staff, are pleased to celebrate National Medical Laboratory Professionals’ Week at Windsor Regional Hospital Met and Ouellette Campuses, as it is our opportunity to share the work we do, who we are and that we are proud of our profession!” stated Jeff Booth, Director, Laboratory Services at WRH.

Strategic Direction - Strategically engage with external partners

Windsor Essex County Association of REALTORS (WECAR)

The Windsor Essex County Association of REALTORS (WECAR) have become Centenarians and are celebrating their 100th Anniversary this year with a number of initiatives that include supporting Windsor Regional Hospital.

“Our Centennial Task Force and Association staff have worked tirelessly over several months to bring a program that will thank the public with highly visible and impactful advertising throughout the region,” stated President, Daniel Hofgartner, a 21-year REALTOR and Broker with Buckingham Realty (Windsor) Ltd.



REALTORS in Windsor-Essex achieved \$2.1 billion in transactions in 2017; a new era in real estate sales. Daniel went on to say, “We cannot thank people enough for their loyalty and we are well-positioned to maintain and strengthen our REALTORS CARE Program which has contributed to numerous Windsor and Essex County not-for-profit charitable organizations over the years. The REALTORS will continue to contribute through many initiatives planned this year.”

On May 26, WECAR’s Appreciation Day, members will launch a major fundraising project where they will sell 10,000 raffle tickets at \$10 each, aimed at raising \$100,000 through the Windsor Regional Hospital Foundation, in support of the future Windsor-Essex Hospitals Project. There will be a number of key prizes to win and tickets will be available from May 26 to December 7, 2018, the day of their WECAR Annual Holiday Gala. For more information on WECAR’s 100th Centennial celebrations, go to <https://100.windsorrealstate.com>

Strategic Direction - Continue the pursuit of new state-of-the-art acute care facilities

Run for Windsor

The Ahmadiyya Muslim Jama’at (Windsor Chapter), in cooperation with the City of Windsor and Windsor Regional Hospital held its first fundraiser in May 2017 for the future Urgent Care Centre/Satellite Emergency Department raising \$15,000.

This year’s Run For Windsor will take place Saturday, May 12, 2018 at Windsor’s Riverfront Plaza. The 5 km run/walk has become a tradition going into its second year. To register, go to: www.runforwindsor.com.

