

# the Standard



SOP Critical Care Team is working collaboratively to transfer patients to the ICU from the ED in a timely manner.

## ED to ICU transfers—Collaboration for improvement in performance

Collaboration is a key element to many improvement efforts. An excellent example of collaboration is seen in the Critical Care SOP Team project.

The Critical Care Team is working to reduce the time it takes to transfer patients between units, specifically Emergency Department (ED) to ICU. In addition the Critical Care Team is working to not only reduce the time it takes to transfer patients but to also exceed the provincial target, which is currently 90-minutes.

Initially, our process was designed without ED collaboration. The result was a process that worked for one department but created

challenges for another. Since collaborating, we are now testing a process that works for both groups. To achieve the goal of reducing ED to ICU transfer time, the SOP Team has worked closely with representatives from the ED to map the process to support this flow, identify barriers, and work together across all staff including Physicians, Nurse Practitioners, Nurses, Clerks and Managers to collect data.

Collaborating to understand the barriers and challenges at each step of the process allows the SOP Team to design a process that reduces barriers and wastes, allowing for a smoother more timely transfer for the patient. Through collaboration, we are able to achieve outstanding care – no exceptions!

## OR Turn Around Times - Collaboration between Environmental Services Met and Ouellette Campus Cleaning Design Day



Spaghetti Diagrams! Lines, lines everywhere—staff members from both campuses create a Spaghetti Diagram to visualize the flow of housekeeping staff in the Operating Room.

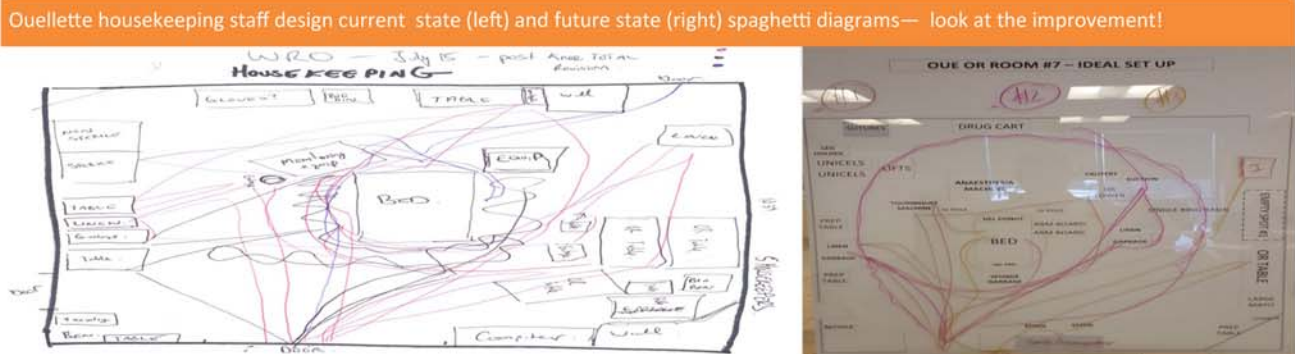
On January 15<sup>th</sup>, the SOP OR Turnaround Team met to design one standard way of cleaning an operating room between surgeries.

Developing a standard method of cleaning an Operating Room is an important task for this team. Not only do we anticipate a positive impact to OR Turnaround times, but it also promotes clear, standard training for new staff, prevents rework within the process and ultimately reduces errors within the process.

The opportunity to standardize the cleaning method arose when the OR Turnaround Team noticed a large variance between the Ouellette and Met Campus processes. This variation spanned from 5 min to 18 min. Such a large variation in time makes it challenging to coordinate with other members of the OR team, and ultimately may be contributing to longer waits between cases. In an effort to better understand why this was happening, team members shadowed this process within the OR and created “spaghetti diagrams.” A spaghetti diagram is a drawing that shows a person’s movement in a room from a bird’s eye view—the more ‘spaghetti’, the more movement. The evaluation of these diagrams showed the team several opportunities for improvement.

After designing the new cleaning process, the team drew new spaghetti diagrams to visualize the impact of the new method. The verdict? Far less spaghetti!

“We are very excited about redesigning the process,” said Christine McDonough. She is an RN in the Met OR and co-lead on the OR Turnaround Time project. “Collaborating with all of the different departments and coming up with a better process was rewarding and even a bit fun. Now it’s time for the tough part – educating all of the staff and collecting data to see if it truly is an improvement. Stay tuned!”



Ouellette housekeeping staff design current state (left) and future state (right) spaghetti diagrams— look at the improvement!



## SOP's Contribution to Accreditation 2015

*SOP Project teams create standardized, well aligned process to support a 4 year accreditation with commendation!*

On December 15, 2015, Windsor Regional Hospital was informed by Accreditation Canada that it received Accreditation with Commendation for the 2015-2019 period.

The Accreditation Team spent 5 days on site at Windsor Regional Hospital touring, both campuses while examining compliance with over 2316 standards and organizational practices. A key element of quality is the ability to measure, redesign and reorganize work to create consistent, predictable outcomes in patient care. A foundational principle of approach in this process work is to understand the patient experience at Windsor Regional and to combine this with input and experience of staff to redesign services. In addition, one component of the Accreditation evaluation is the degree to which work is carried out in a standardized fashion, adhering to current best practice. The SOP Team provides encouragement to the Project Teams.

Since the SOP Teams work very hard to create standardized process across tasks and campuses, this work is also well-aligned.

The Accreditation Team recognized the great work being done by the SOP Teams to improve quality and standardization across the organization, utilizing both staff and patient experiences.

The Accreditation process is an excellent way to provide an impartial outside look at the improvement activities being carried out by WRH teams. This offers the SOP Team a valuable perspective to better understand the impact of the work that is being carried out, and supports opportunities for additional improvements. Overall, the "Accreditation with Commendations" status points to some of the value the SOP team provides and provides encouragement to the SOP Project Teams to continue the amazing work they have started.

## The Final Results are in and the

Thank you to all of the Canstruction participants! Your generous contributions amounted to the donation of approximately 1200 non-perishable items. Both the 11:00am and 1:00pm huddles collected the items and SOP Team members were able to build festive structures.

The Executive Committee judged both structures and the 1:00pm huddle was announced as the winner! Coffee and treats will be provided for the 1:00pm huddle.



## SOP Care Benefits

*Understanding, quantifying and celebrating the positive results achieved within SOP*

With multiple activities and changes happening concurrently within and across all of the SOP projects, it can be easy to forget to stop, collect, and recognize all of the positive results that are being achieved by the teams.

Each and every team is striving to make improvements toward their overall project outcome (i.e. reduce OR turn-around times) and while they are testing multiple changes to achieve that, many

other benefits are also realized. The SOP Teams are collecting and collating a summary of the multiple positive results they are achieving and these are being categorized into three categories: Quality, Patient Experience, and Cost Efficiencies. Stay tuned as we celebrate and share examples of Care Benefits achieved within projects in future editions!



## Improving Patient Experience



As SOP continues to work on improving efficiencies throughout the hospital, collecting patient feedback is crucial. This feedback offers the SOP Teams a way to ensure patients feel safe and satisfied, and are not experiencing negative impacts as a result of the changes made by project teams.

SOP Teams will continue to monitor patient experiences and engage with patients and family members to ensure all input is considered when working on improving processes. The feedback and positive remarks reassure us all that we are headed in the right direction.

Patients reflect on their experience both before and after the medication administration process changes.

*"I wish every nurse would explain the pills like 'the pink pill is for...'"*

*"the nurse explains why I'm taking it, goes step by step answering any questions I have"*

*"ok place to wait but, several times wait was 1-1/2 to 2-1/2 hours."*

*"this was the quickest visit at the fracture clinic"*

The fracture clinic improves the patient experience significantly by reducing wait time.

*"I was worried until I was informed of my appointment date"*

*"Good instruction over the phone"*

The operating room scheduling department provides a peace of mind for patients waiting for appointment information.

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## Poka Yoke—The Lean Tool of the Month

Error proofing a process to prevent mistakes from occurring is exactly what Poka Yoke does. An example many are familiar with is the three prong electrical plug which prevents plugging in appliances with the polarity reversed.

This technique assumes that humans will make errors, and eliminates the possibility of an error occurring. As a result , no training is required.

