

Friday, April 7th, 2017

Staff joining in the journey of Clinical Pathway development

As part of the Pathway Improvement Program for the first five QBPs (groups of patients with similar conditions), new Clinical Pathways have been developed.

In March, project teams solicited feedback from front line staff through staff meetings, huddles, 1:1 conversations, posters, and hard copies of the draft documents. With the support of the medical, surgical, and allied health teams, over 275 staff members were consulted and their ideas and suggestions incorporated into the documents.

Changes were made to formatting and content, to make the documents easier to read and use to help better address the clinical concerns of patients. One staff member wrote: "This is a great tool to follow the patient's progress. It is a helpful tracking record for patient outcomes towards discharge".

 WINDSOR REGIONAL HOSPITAL
OUTSTANDING CARE—NO EXCEPTIONS!

DRAFT
04-05-2017

CONGESTIVE HEART FAILURE
Clinical Pathway
Expected Length of Stay: **Less than 6 Days**
Admission Date: _____
Estimated Date of Discharge: _____

Day 1	Date:		Initials		
Assessment Treatment		Interventions	Outcomes	shift	
		Consults/ Referrals			
		<ul style="list-style-type: none"> • Vital signs as ordered • O₂ therapy to maintain O₂ sats greater than 92%, or at baseline • Document Dyspnea score q shift and PRN (Refer to Modified BORG Score attached) • Assess and document degree of edema q shift • Measure weight post first void of the day using the same scale each day • Assess smoking status 	Vital signs within limits as per order set O ₂ sats greater than 92% at rest and with activity, or at baseline Initial BORG _____ At rest _____ With activity _____ Edema decreasing, absent, or at baseline Weight decreasing or stabilized to ideal (dry) weight		
		<ul style="list-style-type: none"> • Consults as ordered • Consider SW involvement if insufficient drug coverage 	Multidisciplinary team notified of consults Multidisciplinary progress notes reviewed as available		

The Clinical Pathway identifies interventions and outcomes each day that are specific to the patient's diagnosis

Sharing your great work



The Performance Boards on the Medical and Surgical units are getting a new look. Currently they display the Monday Morning Huddle results. They will continue to report out the results from the Monday Morning Huddle but now they are going to be unit specific with a new engaging look. They now include key patient outcome and safety indicators from the Standard Unit bundles.

The units have been working hard to make improvements and to standardize care across both campuses. The SOP team has been auditing activity follows with our nurses, post 5S events (sort, set, shine, standardize and sustain), the completion of white boards, and the consistency of shift to shift report. The managers are rounding weekly on patients and are asking them to rate their stay on a scale of 1-5. Now the results are being shared with the staff, patients and families. The new look will enable these results to be shared weekly.

Watch for the changes next week on the 8th floor at both campuses. If you get a chance, stop by, take a look and give us your feedback in person or by emailing future@wrh.on.ca

Welcome our new Standard Unit Lead

The SOP team is happy to welcome Stephanie Martin, RN as a Standard Unit Project Lead. Stephanie is a staff nurse on 4 West Oncology and brings 11 years of clinical experience with her. Her frontline perspective also contributed to the success of the Medicine Redesign project in 2011. Stephanie's role with SOP is to help support and sustain work done on the Standard Units as well as continue with future work planned throughout WRH with this program. Be sure to say hi when you see her visiting!

Have a great weekend!

The SOP Team

future@wrh.on.ca

