

Friday, January 12th

Patient Flow Improvement Program withstands the “Holiday Storm”

It has been a challenging few weeks. The extremely cold winter weather wreaked havoc with the roads and brought people into hospital with various storm related ailments. Holiday time is always a difficult time for patient flow – more staff are on vacation, some services have limited hours, community resources are closed, and yet people in our community continue to experience significant illness, especially during flu season. This year, however, the challenges to patient flow were met with some significant positive influences.

The Patient Flow Improvement Program, which began in the medicine program on October 23, 2017, had already put processes in place that helped guide our decisions and assist WRH during these challenging days. While our wait times in ED and inpatient medicine units did increase as compared to “normal” times, many staff commented that it was far better than previous years and all the elements associated with the Patient Flow Improvement Program, including the Command Centre, Assessment Bays, Bed Allocation, Care Rounds and other components, helped to create a structure that improved our ability to provide effective and efficient patient care during very busy times.

“Compared to previous holidays, patient flow was improved because of the processes and the standard work that was already in place. It helped to guide our decisions during these hectic times,” said Theresa Morris, Director of Emergency Services

Effective systems should be designed to withstand pressures when it is overburdened. The patient flow teams will continue to look at improvements and processes and continue to identify strategies to ensure they remain effective during these challenging times.

Who is following me?: Sustaining and checking in on Standard Unit

Activity Follows are being scheduled for the Medical/Surgical Units that have been standardized in the past to see what activities have been sustained and to continue to identify areas for improvement for nursing workflow that benefit the patient!

An “Activity Follow” is a 1-hour detailed recording of what activities nurses do and contributes to a snap shot of activities on the unit. These are repeated each hour over a 12 hour shift from 7am to 7pm. The results can expose opportunities to reduce and/or eliminate “wasteful” activities. Doing this allows us to understand how much time staff spend on direct patient care.

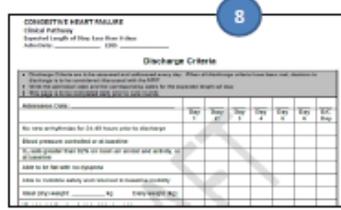
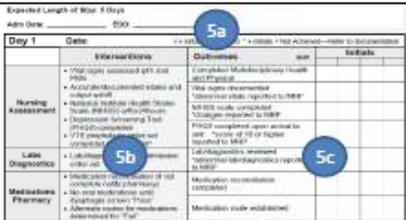
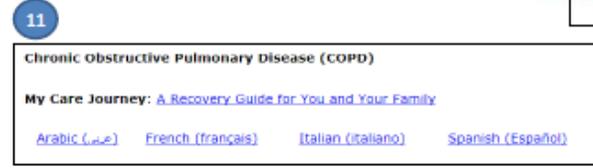
Upcoming Activity Follows	
January 22-February 5	February 5- February 19
Met Campus	
6 North	4 North
7 North	4West
8 North	5 North
Ouellette Campus	
7 East	8 East
7 West	8 West
6 West	6 East

Starting January 22 until mid February, you will see staff volunteers and trained Green Belts and Yellow Belts conducting the activity follows up on the units. They will be looking for nurse volunteers to follow. Keep an eye open on your units and welcome those conducting activity follows!

What is Standard Work anyways?

Standard Work is a Lean Manufacturing tool that clearly documents work procedures. The work procedures reflect the most reliable, safest, accurate, and efficient methods and sequences for each work procedure. Standard Work is already being used across Windsor Regional Hospital. Documenting the standard process of “giving report” as part of a Shift to Shift Report to ensure critical information is not missed is one example. Clearly outlining how a QBP Pathway Bundle is implemented and used at the bedside is another.

Standard Work Instructions are designed to ensure the same best practice care processes are delivered across every unit. Below is an example of Standard Work for using the QBP Pathways. Ask your manager for copies of the Standard Work in place in your areas!

QBP Pathway Improvement Program - Standard Work Instructions		
Using Order Sets, Clinical Pathways & Patient Experience Pathways	Objective: To standardize patient care for patients with similar conditions (Clinical Pathways) and improve communication to patients and families (Patient Experience Pathway)	Date: 12-Jul-17 Owner: SOP
Front Line Staff & Physicians		
1 Patient is admitted to the hospital 2 ER clerk (or ERP) selects the QBP Pathway Package and adds to the chart Order Sets: 3 ERP, in consult with MRP if possible, fills out condition specific QBP "Emergency Department Transitional Order Set" at the time of admission 4 Within 24 hours, MRP rounds in person and completes the "Inpatient Phase Order Set", which automatically stops the "Emergency Department Transitional Order Set"		
Clinical Pathway:		
5 Within the first 4 hours post-admission, the Clinical Pathway is initiated as below: 5a The Admission Date, EDD [Expected Date of Discharge], and Today's Date are written down. The shift is written in the column near the initials section. The EDD is based on the expected length of stay. For example, a Monday admission with an expected length of stay of 3 days would be discharged 3 days after Monday (Saturday) 5b The interventions section for that day are reviewed as a guide to care and recommendation for consideration 5c The outcomes section is reviewed and noted with initials for complete and * + initials for not completed. Any outcomes with a * should be addressed in the nursing/progress notes		
6 Each shift, the Clinical Pathway interventions are reviewed, and outcomes assessed and noted by the primary nurse 7 Each morning, before Care Rounds, the last page Discharge Criteria are reviewed and assessed as to whether the Discharge Criteria has been met or not 8 The Clinical Pathway is brought to Care Rounds and the outstanding Discharge Criteria are discussed, as well as any concerns from the Interventions and Outcomes that are preventing the patient from progressing 9 If the patient remains on the pathway longer than the expected length of stay, use the "Blank Discharge Criteria" page, found as additional documents in the Order Set Library or order through Print Shop		
Patient Experience Pathway:		
10 As soon as possible after admission, the patient or family member is provided with the My Care Journey Booklet and My Care Journey Mobile App Postcard <i>Note: Use clinical judgement to provide the booklet and postcard at an appropriate time depending on family support and patient acuity</i> 11 If necessary, print text copies of the Booklet in French, Arabic, Italian or Spanish from the WRHCareJourney.ca website 12 Explain the Booklet and Mobile App to the family; There is valuable information to help in their recovery 13 Patient and family review the Booklet and App as needed 14 Update the patient's In Room Whiteboard each shift with the goals and expectations outlined in the Patient Experience Pathway Booklet; Remind family about the Mobile App		
		Revision Date: 10/20/2017

Have a great weekend!

The SOP Team

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