

# STANDARDIZATION AND OPTIMIZATION PROCESS

WINDSOR REGIONAL HOSPITAL





## **A Journey, Not a Destination**

To borrow from Walter Emerson's famous quote, The Standardization & Optimization process at Windsor Regional Hospital is a journey, it is not a destination.

KM&T consultants began this journey in the driver's seat, surveying the road conditions and mapping out the course. Along the way they have been training and empowering key people at WRH so they can easily transition into the driver's seat and continue down the road of continuous improvement once KM&T reaches its final stop.

On October 1, 2013 Windsor Regional Hospital (WRH) went through a voluntary realignment of services with Hotel-Dieu Grace Healthcare. This was part of a bold, new vision of hospital services for the Windsor-Essex area and includes plans for a new state-of-the-art acute care hospital. As part of the realignment, WRH assumed governance and operations of all acute services in Windsor, including the former Hotel-Dieu Grace Healthcare, which is now the Windsor Regional Hospital, Ouellette Campus.

The realignment positioned the region in a way that ensures key services are maintained and supports the advancement of necessary acute services. For those in the region, this meant a stronger hospital system moving toward an improved regional hospital system. It made the hospital stronger and opened the door to an exciting future, but for staff, it also meant a lot of change coupled with some natural uncertainty. The two hospital campuses that now make up Windsor Regional Hospital are less than 5 km apart, but at the time of realignment they had entirely different cultures, histories and ways of providing services.

*“We needed a way to bring the two hospitals together; that meant finding a way to standardize the work we do for our patients and creating shared goals that staff at both campuses could get behind and work toward achieving them together. Change is never easy, but realignment offered Windsor Regional Hospital a blank canvas upon which we could draw out our future together. It was an opportunity to take a deep look at the two established and unique hospital campuses, find out what was working, what wasn’t, and make sure that we were moving forward with a solid foundation for our future built on best practices.”*

*David Musyj, President & CEO, Windsor Regional Hospital*

The Standardization & Optimization Process (SOP) was launched to standardize processes between the two sites, optimize care for our patients and implement process based on best practices and innovation. These processes will eventually dictate the design of a new state-of-the-art acute care hospital.

# KM&T - Partners in the journey

KM&T (Knowledge Management & Transfer) were chosen to support the SOP project because of its experience helping hospitals around the world improve efficiency and patient care and its individually tailored approach to break down barriers by empowering everyone from front-lines staff to the board room.

The firm's role was to bring a balanced and holistic approach to WRH's organizational transformation program by working directly with staff to identify opportunities, help develop strategies for services & departments, set up governance and best practice processes for managing projects, enable & empower our teams to implement the necessary changes and to maintain best practices moving forward.

This work includes coaching, training and exciting staff throughout the process to achieve the following goals:

- Standardize care so patients receive the same outstanding care, regardless of location
- Identify and implement best practices at both campuses
- Create a foundation of best practices that will eventually dictate the design of a new state-of-the-art acute care facility
- Strengthen the capability of the WRH team so staff can flow seamlessly between campuses
- Create sustainability through knowledge transfer & capability building

# The Standardization & Optimization Process

*“A goal without a plan is just a wish.”*

*Antoine de Saint-Exupery*

The Standardization and Optimization Process was created to ensure a balanced a holistic approach was used to navigate through the organizational transformation in a systematic fashion.



The hospital hired 4 SOP coordinators to work alongside and learn from KM&T consultants on the following processes:

1. Opportunity Search - A research phase that involved identifying services that will benefit most from standardization. Research is collected by mapping services provision across both sites, analyzing performance data, and engaging staff through meetings and workshops.
2. Set the Standard - Work with staff in the programs and departments chosen during the opportunity search to identify best practices and performance within WRH – set the standard.
3. Optimize Performance - Work with programs and departments chosen during the opportunity search to identify best practice and performance outside WRH
4. Develop a WRH optimized state for each service
5. Implement, communicate and sustain best practice plans
6. Monitor and manage programs via a central hub and program office using visual management

# Mapping the Course

Through an Opportunity Search, the team of KM&T consultants and hospital SOP Coordinators examined hospital performance metrics and patient experience feedback.

They met with staff and executives individually and held information and training sessions. Based on the data collected and conversations with staff members, a Prioritization Roadmap was created and used to guide the project.

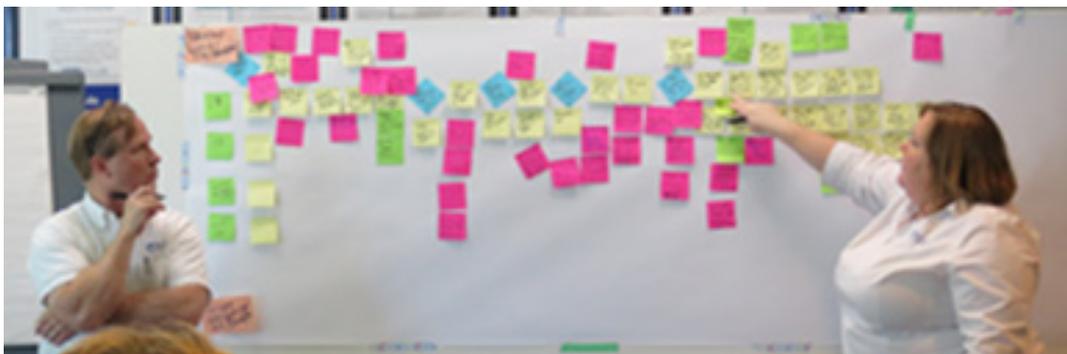
In October, 2014, the project began with the four identified Wave 1, Priority Projects. Staff within those areas were trained and teams of front line staff were identified to work with the KM&T/SOP team on the project. Since then, 2 additional Waves have started down this road and eventually all programs and services will go through the process.



# Everyone on Board

The SOP is a collaborative effort that includes all levels of staff and the community. This is a fundamental shift from the way major changes were made in the past at either of the hospital campuses

Before beginning work on each of the priority projects, the teams got together to map out current processes, look for waste and develop a future state (a goal) together. Everyone was invited to these frank and often difficult discussions – front-line staff, senior management teams, physicians and patients. It was an opportunity map current process and identify waste, but more importantly by bringing everyone together it broke down existing barriers, gave everyone a chance to be heard and view things from a different lens.



By charting our current processes together, everyone had a better understanding of how they work they do fits into the overall process and patient experience.

\*The pink sticky notes indicate waste, inefficiencies and opportunities for improvement.

*“Sitting in that room, listening to patients describe their experiences - the road blocks, the uncertainty, the feelings of helplessness and anxiety – made it clear to me why this process is so important. As a surgeon, I usually focus on the task - or the patient - at hand. The mapping sessions gave me the opportunity to reflect on every step of the patient journey and realize how difficult it can be for them. What a revealing experience!”*

*Dr. Andrew Petrakos, Physician Advisor, SOP*

*“I did break down and cry at one of the sessions because I finally felt like someone was listening. It took a while, but someone finally listened and for that, I am so grateful.”*

*Marie Booze, Booking Clerk*

The mapping sessions for each project concluded with the team agreeing on a ‘future state’ – a goal that the team would work toward over the course of the project, agreeing and delivering the steps required to achieve this goal.

# Where the Rubber Hit the Road

KM&T's role in the SOP program is not to come in and impose solutions. The experts are the people who do the job day to day and in most cases they already know where the waste is and how to get rid of it. What KM&T does is tap into the expertise that already exists within the organization, bring everyone to the table, draw out insights and facilitate projects that will help move the organization toward their shared goals.

The SOP project teams meet weekly to research, test solutions and measure solutions. Once a week they gather to share their results, flag any risks or challenges and celebrate accomplishments with senior management and the executive team.

*“Throughout this process I’ve learned that there isn’t always a right and wrong way of doing things, but with calm, thoughtful discussion and respect you find there is an optimal way.”*

*Project Co-Lead, Charlene Haluk-McMahon*

# Celebrating Milestones

When you put the work people do under this kind of microscope for examination, it is uncomfortable. There is confusion, resistance, barriers. This is to be expected. Finding opportunities to highlight and celebrate the team's accomplishments was an essential way to keep the teams motivated and remind them of the importance of their efforts.



The Medical Incident SOP Team celebrates first medication-incident free month since realignment.



LITTLE TASTE OF SUCCESS: after successfully implement a standard knee protocol at the two campuses, the MRI Wait Time Team celebrated with standard-knee gingerbread men.



After completing the first round of projects the teams invited patients back to share some of their biggest accomplishments and let patients know how their stories and contributions helped improve the experience for future patients.

# Driven by Results

The value in this project can be measured in a number of ways, but the goal from the beginning at Windsor Regional Hospital was to improve the patient experience.

Here are some highlights:

- Improved way finding for Catheterization Lab patients.
- Increased number of semi-urgent patients that received a Catheterization Lab procedure within their recommended wait time.
- Reduced the time a patient waits for an MRI from 114 days to 59 days at the Metropolitan Campus.
- Decreased the 90th percentile wait for total knee surgery across both campuses from 241 days to 232 days.
- Decreased the number of medication errors causing patient harm.
- Reduced the patient wait time in Fracture Clinics from an average of 83.9 minutes to an average of 24.3 minutes.
- Reduced wait time for Patients in ED waiting for a bed in ICU from a median of 109 minutes to a median of 66 minutes at Metropolitan Campus and a median of 73 minutes to 70 minutes at the Ouellette Campus.
- Standardized the OR room set up and cleaning processes at the campuses to increase patient safety.
- Reduced the number of clinic appointments patients require prior to total joint replacement from a maximum of 3 appointments to a maximum of 1 appointment.
- Increased the time nurses spend providing direct patient care by introducing standardized processes and procedures within each unit.
- Removed barriers to patient discharge through the use of standardized electronic care round boards.

*The changes we have implemented so far are evidence based and it is hard to argue with facts when the goal is patient safety.*

By Pam Essery, Project Lead, Surgical Inpatient

## Staying the Course

*The lasting relationships we've built throughout this process between our campuses will enhance our ability to move forward together. These relationships are based on a mutual respect and many 'a-ha moments'. We've become obsessed with learning about our system and its weaknesses, so we can learn and continuously improve. -*

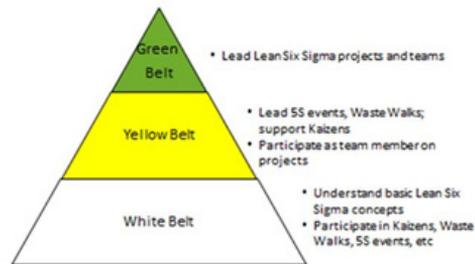
*Christine Donaldson, Director of Pharmacy Services*

With the road map clearly defined and the program in high gear, KM&T is shifting its priorities at Windsor Regional Hospital to sustaining the gains made so far.

The team has recently launched a 3-level training program to allow participants to build upon their continuous quality improvement skills and move into more complex, high impact projects.

The Lean Six Sigma Belt Certification program will be taught by a Lean Six Sigma Master Black Belt and is designed to provide knowledge and skills required to build upon the work that has been done, and ensure staff have the expertise they need to lead and facilitate improvement initiatives– big or small – within their own groups, programs or departments.

### Lean Six Sigma Roles



The 3-level training program is designed to build upon the skills participants at Windsor Regional have learned to date.



Upon completion of each of the 3 levels of training, participants will receive a pin that will signify completion of the program and allow others to easily recognize those in the organization with Lean Six Sigma Belt Certification.

Windsor Regional Hospitals and KM&T set out on this journey almost three years ago – in that time, not only has the patient experience measurably improved qualitatively and quantitatively, the staff are equipped to learn how to problem solve, to work together to find a better way, and ultimately to better enjoy their work.

Working smarter, not harder, is the future of healthcare and Windsor Regional Hospitals is proof that an inclusive, structured approach to improvement delivers better patient care, smarter working and happier staff.



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