

[Southern Health-Santé Sud]

**Quality Improvement Project
Report Out
CARED For Team!**

[June 2013]

Learning To See



CONSULTING

Define

What process did we looking at?

Neglecting to follow provincial Client Registry Best Practices results in creation of duplicates and inaccurate client demographics. This impacts workload for staff to rectify duplicates and poses risks to the client and may delay care.

Standardization of hiring and orientation processes which impacts recruitment and retention of employees as well as performance.

Streamlining of monthly reporting, collection of data and distribution of reports including identification of required data elements.

Define

What were the main perceived problems with the process?

- **Audits were initiated on the number of duplicates created in Southern Health-Santé Sud and improper search techniques were identified as the leading cause.**
- **Accuracy of client demographic data entry according to Client Registry's provincial Best Practices was not at the required standard impacting linking of clients accurately provincially.**
- **Orientation/Rotations - appropriate guidelines required to ensure adequate, consistent orientation/training occurs including a tool to measure the outcome.**
- **Monthend/Census – identify actual requirements and data elements to ensure the appropriate, comparable information is available.**

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Measure

What did we measure and why? How are the measures related to the process?

Duplicates:

- *We measured the # of duplicates according to reason for error i.e. incorrect searches related to PHIN, MB #s, and names.*
- *For demographic data entry accuracy, we measured data entered in comparison to information available in Client Registry.*
- *Orientation/Rotations - comparison of guidelines at regional centres. A survey related to rotations was distributed.*
- *Monthend/Census – comparison of processes at regional centres and variations with ADT system capabilities.*

Analyze

What story did our measures tell us about our system?

Did the measures validate what we initially thought the problem was?

The measurements confirmed that search methods specifically related to searches using only PHINs was the main problem

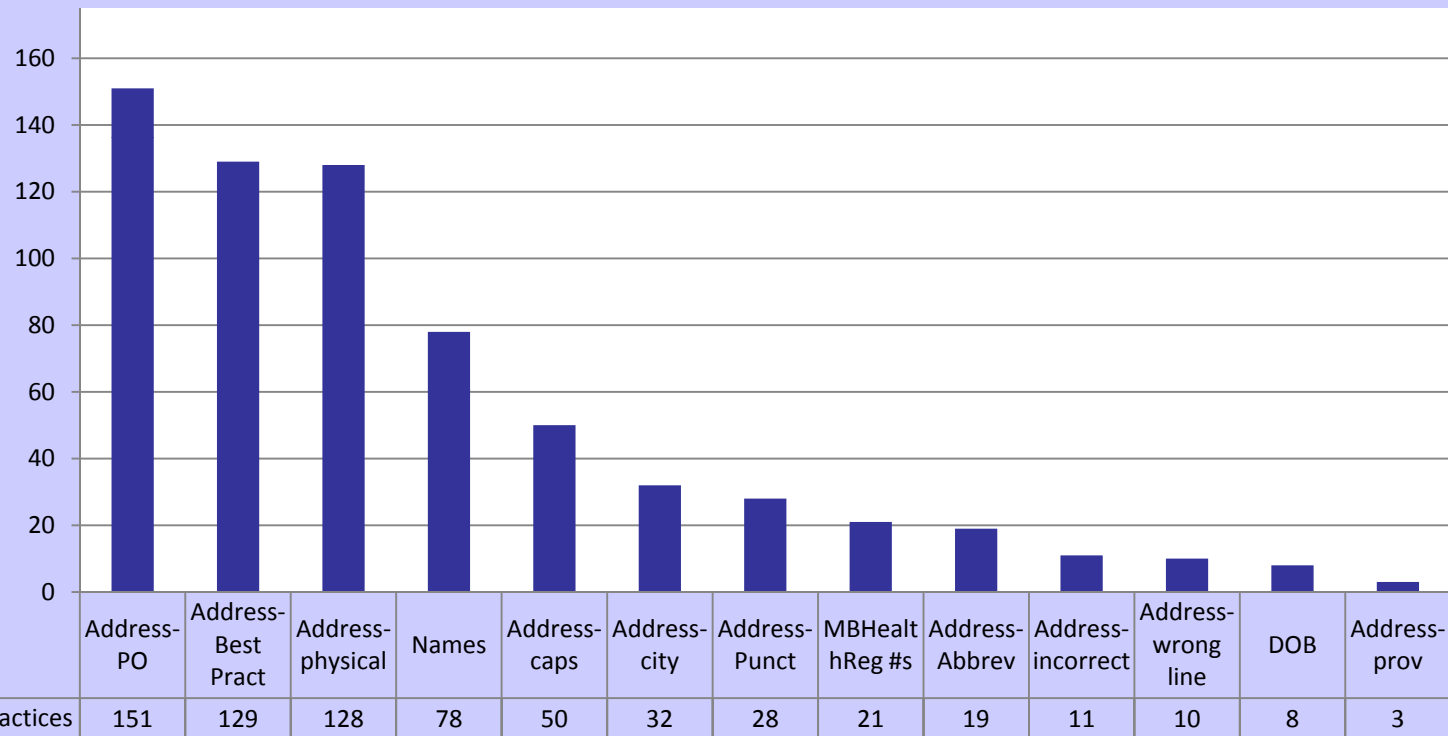
The audit of data entry according to Client Registry Best Practices revealed the bulk of the errors related to the address and name requirements.

Feedback from the survey confirmed the concerns related to the current rotation.

Analyze

of Data Entry Best Practices Defects

(based on 481 registrations - 138.9% error rate - multiple errors per registration)



Improve

What improvements did our team come up with?

- Provide Search cards for Standard Work at each station
- Provide screen shots of 'correct' data entry
- Education –a Self Learning Package (SLP)
- Communication – to staff with highest errors individually
- Communication – to staff individually as errors occur
- Orientation/Rotations – complete guideline of Orientation including pertinent policies. Survey to understand employees' concerns related to rotations.
- Monthend/Census – Communicate with applicable departments to identify data elements and allow for standardization.

What changes were implemented?

- All changes were implemented

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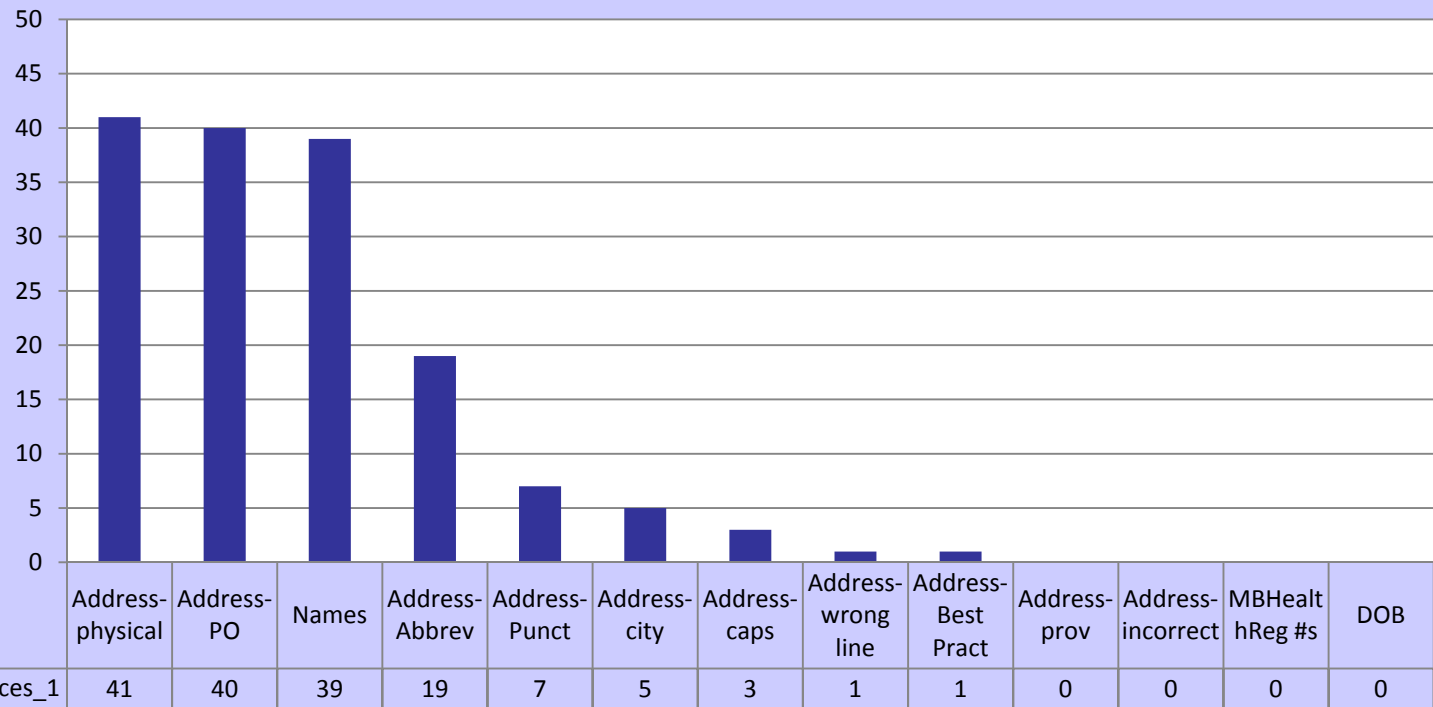


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Improve

What were the results of the changes?

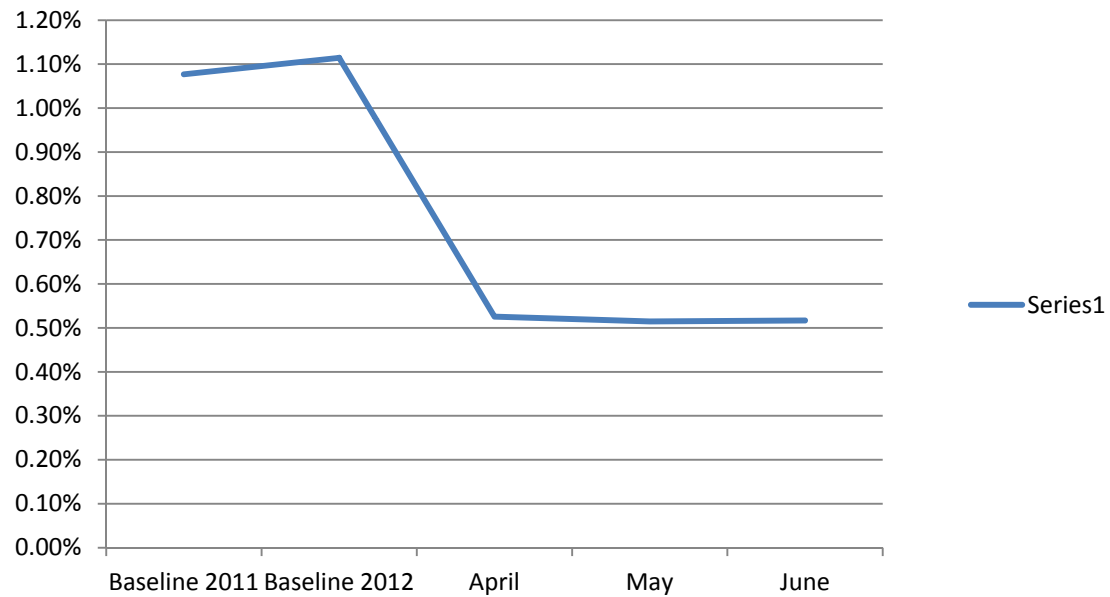
of Data Entry Best Practices Defects - post PDSA
(based on 227 Registrations - 68.7% error rate)



Improve

What were the results of the changes?

% of Duplicates



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Control

What controls have we put in place to ensure that performance does not lapse?

Duplicates/ Data Entry - share individually with staff creating errors, Client Registry will forward data entry tips regularly and Best Practices training is scheduled for fall.

Orientation/Rotations – Standardized Select/Hire, Orientation and Exit/Termination Checklists and packages developed.

New rotations will be developed to address staff's concerns and ensure Union rules are adhered to.

Monthend/Census – defined process for data entry, definitions, and distribution.

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Lessons Learned

What were some of the key things we learned about quality improvement while doing this project?

Communication is a big part of the learning process!

Staff awareness of the impact they have on downstream systems.

Staff appreciative of resources for reference.

Orientation package is used as a tool to teach/reinforce Best Practices and ensure staff are adequately and consistently trained!

An understanding of the current monthend/census process to eliminate steps done as part of 'we've always done it that way!

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Next Steps

What next QI project is our organization going to be do next?

- Flagging of Charts - AROs
- Printing of Communication sheet
- Communication - OR Slating
- Death Notification process – related to Client Registry Report
- Patient Service – medically discharged vs awaiting panel.

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THE TEAM!



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