

# Project Charter



Project Details			
Region/Agency:	Central RHA	Facility:	BTHC
Project Name:	IMPACTS	Project Sponsor:	Linda Buhr

Improving Medical Patient Access and Care to Therapy Services

Project Start:	February 6, 2012	Project Lead:	Mona Livingstone
Team Members:	Tina Bueckert, Diana Kissick, Gail Brewis, Jackie Derksen, Rob Sinclair		

## Problem Statement / Opportunity

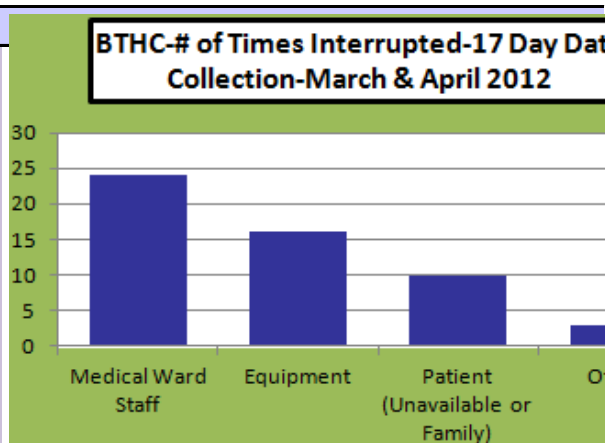
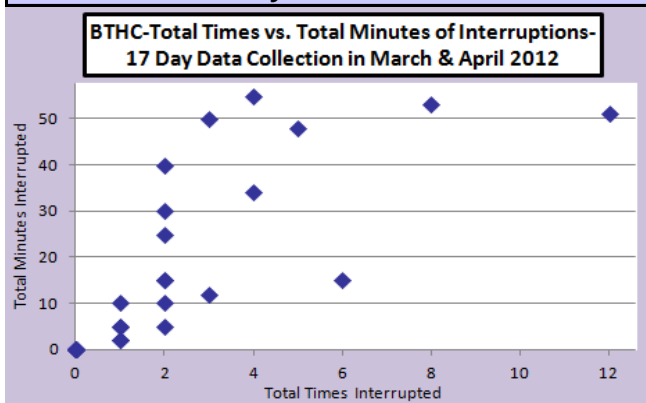
Increased volume of admissions and complexity of the patients, together with facility constraints on bed usage/utilization, impacts timely & effective Rehab service provision to the patients on the medical ward

## Background / Context

Increased occupancy has a direct impact on the clients need for the right services at the right time in the place. Over the past ten years there has been a greater scope of service expectations from health care by clients and their families. Increasingly complex care, along with policies, admission and discharge criteria, and changed provider scope of services. The types of services within BTHC have expanded and changed to meet the demands of the population.

In improving medical patient access and care to therapy services, policies, procedures and patient flow have been evaluated to ascertain that the service is adequate and timely.

## Current State Analysis and Measures

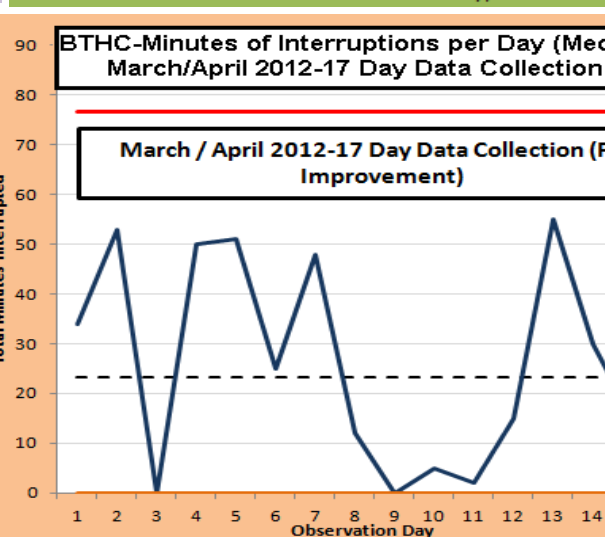


**Data Story**

- Interruptions have a strong impact related to the chaotic process flow; high number of occurrences and high number of minutes
- The Scatterplot diagram shows a positive correlation between the variables
- Average number of interruptions per day is 3.12, for an average of 23.24 minutes per day

Improvements available with:

- Communication between Medical Ward Staff to reduce Interruptions
- Equipment access
- Patient readiness



## Aim Statement (Future State)

An opportunity exists to improve communication between staff members, reduce interruptions, improve equipment and examine philosophies of care delivery to patients requiring therapy services.

Success will be measured by achieving improved communication between staff, increase access to appropriate equipment, and have patients ready at the appropriate time resulting in a decrease in minutes of unscheduled interruptions by at least 50%.

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## Improvement Ideas Discussed

Ideally there would be a change in culture, through increase communication and staff awareness of core priorities, with an aim to reduce the amount of interruptions and create a smoother flow for the patient. IMPACTS brainstormed improvement ideas and came up with a number of potential options including: a assembly, STAXIS as transport chairs, use of rehab gym, Aide assistance, patient whiteboards, clustering staffing guidelines/best practices, therapy supply toolkit.

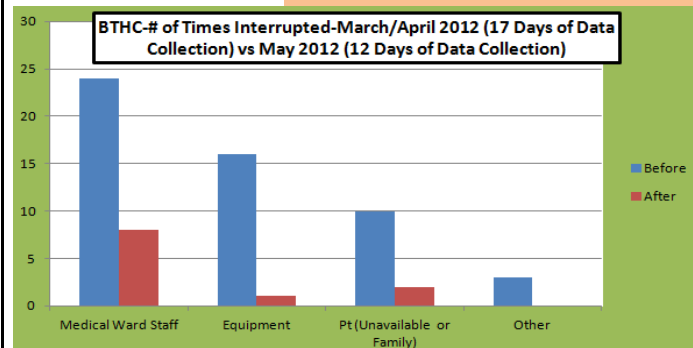
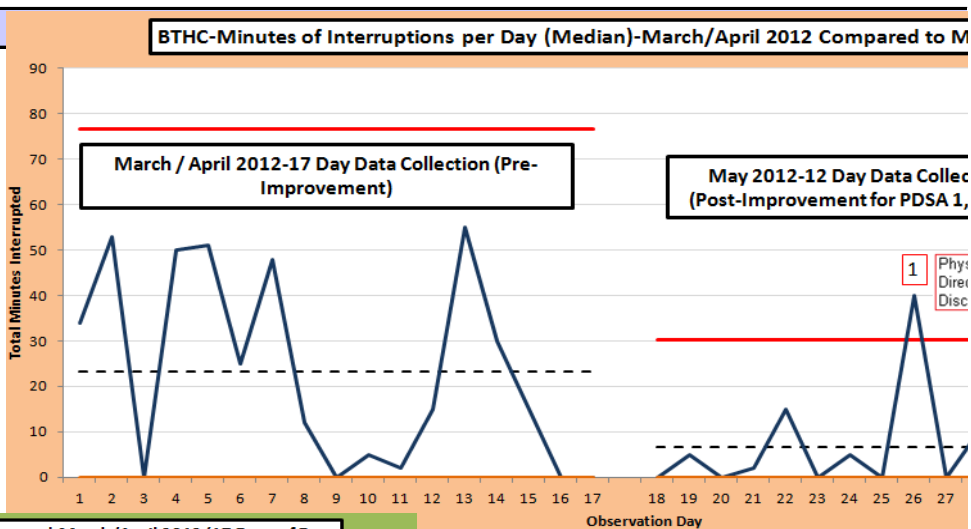
## PDSA Cycle Implementation Plan

The first 3 PDSA's are new steps outlined in the "Future State Process Map". PDSA 1 - "Therapy in Session creating private therapy space during patient interventions (similar to other clinical disciplines). PDSA 2 Therapist Calendar; identify when therapist expected on ward providing direct patient care, identify who therapist within the facility providing non-direct patient care, result in increased appropriate communication. PDSA 3 - Place Notepad by Clipboard; reducing the types, forms, and processes of communication to allow for more consistent service delivery to patients. PDSA 4 - Storage Room Reorganization; use defined 5S method to organize storage areas including creating charting space in Electric Alley, to allow for more accessibility of products/equipments needed at the source (scheduled implementation in September 2012).

## Control and Follow-up Plan

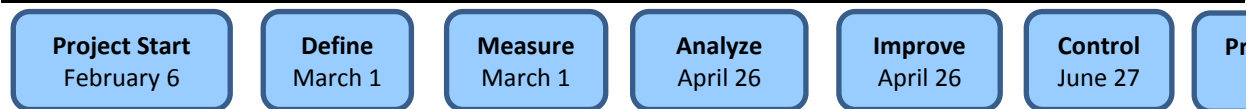
The Future State Process Map has become standard work used for staff training/orientation; manuals, procedures, algorithms, "cheat sheets" and other approved documentation being implemented September. Other Control measures include Visual Cues to create private therapy space; an automated request has been set up as a reminder to post Therapist calendar; regularly scheduled meetings will discuss maintenance of Control Plan. Scheduled audits will measure compliance with Control Plan.

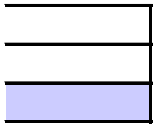
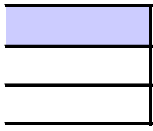
## Outcomes



- 71% reduction in interruption minutes per day, average of 23.24 minutes to an average of 6.69 minutes
- 73% reduction in the number of interruptions per day from an average of 3.12 per day to an average of 0.91 interruptions per day
- One outlying data point in post-improvement data: hallway conversation with physician
- **Total Projected Time Saved = 7,344 minutes annually**

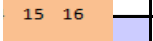
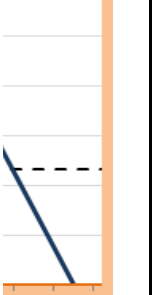
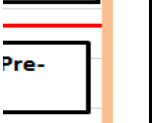
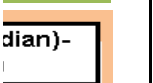
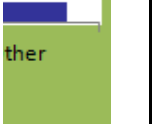
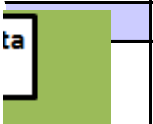
## Project Timeline





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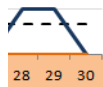
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