

A3 Report

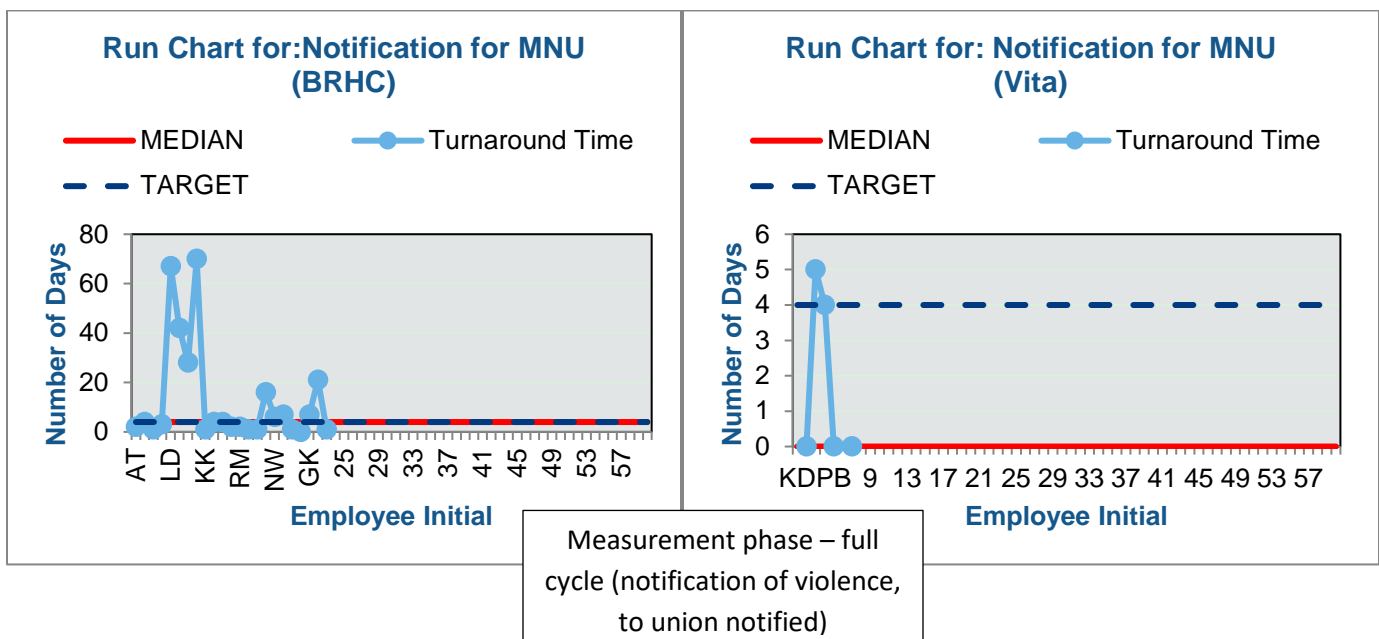
Project Details

Organization	Southern Health-Santé Sud	Facility	Bethesda Regional Health Centre, Bethesda Place, Vita and District Health Centre, Vita PCH
Project Name	LEAN to 96	Project Facilitator/Belt Level	Shawna Moodie (GB - YB project)
Project Sponsor	Kim Dyck	Project Team	Cleia Medeiros, Debbie Rigaux, Erin Penner, Janet Chobotar, Marge Smoke, Mark Nore, Rachel Fehr Sandra Aerssens Young, Tamara Burnham (mentor) Stephanie Rozsa (joined Jan2018)
Project Start Date	November 14, 2017	Project End Date	April 19, 2018 (Control day) June 12, 2018 (final report out)

Problem Statement

We are not compliant with the collective agreement (MNU 7A04) 96 hour reporting requirement and Workplace Safety and Health legislation due to lack of awareness, incomplete or missing occurrence reports, process barriers that stall the process and contribute to the delay. This results in an impact to staff/patient/resident/client health, safety, care and wellbeing, making the organization vulnerable to grievances, incurred costs and negative reputation.

Current State Analysis - What's the Data Story?



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Project Aim

90% of all abusive/aggressive (violence) incidents reported to Manitoba Nurses Union within 96 hours by April 2018.

Implementation Plan

	PDSA – Brief Description	Implementation Date
1	Algorithm developed for reporting process	February 1, 2018
2	Centralized location (secure drop box) for reports at each site	February 1, 2018
3	Education on reporting expectations	February 1, 2018
4		

Controls Utilized

<input checked="" type="checkbox"/> Fundamental Change	Remove old forms that aren't occurrence reports/section C
<input type="checkbox"/> Error Proofing	
<input checked="" type="checkbox"/> Visual Control	Consistent color-coded information for manager & employee roles (e.g. notes/memos, reference sheets, algorithm use the same color for all manager-related items)
<input checked="" type="checkbox"/> Standard Work	Algorithm; standard supply of forms e.g. occurrence report forms in supply room not printed on ward etc.; Designated location (site/unit specific) to drop off forms
<input checked="" type="checkbox"/> Training	Violence prevention program training (Regional General Orientation, Facility Orientation) – update info; Every 3 year training; Tracking enrolment; Reminder at Nursing Advisory Council (NAC) regarding violence reporting
<input checked="" type="checkbox"/> Continue to Measure	Continue to capture data at 3 initial sites for project roll out until Summer 2018
<input checked="" type="checkbox"/> Audit	Include violence reporting at Workplace Safety and Health meetings (not just specific to MNU violence)
<input type="checkbox"/> Checklist	
<input checked="" type="checkbox"/> Policy & Procedure	Employer info notes; Update to occurrence report form and resource manual
<input checked="" type="checkbox"/> Written Sign	Signs/posters in staff rooms to encourage attendance at VPP and encourage reporting. Also example of using site all staff email distribution.

Outcomes – Qualitative and Quantitative Outcomes

Based on the sample sizes there is an 85% confidence level that the improvements were statistically significant. Bethesda Regional Health Centre and Vita and District Health Centre met the 96 hour turnaround time post-improvement. Portage District General Hospital met the 96 hour turnaround for 7 of 8 data points, with one outlier at 5 days.