

Southern Health-Santé Sud

**LEAN to 96
Report Out**

June 2018

LearningToSee



CONSULTING



Define - Scope

The LEAN to 96 project is looking at the process of reporting violence – abusive/aggressive occurrences – to the Manitoba Nurses Union. The initial project scope is focusing on two facilities, Bethesda Regional Health Centre and Vita and District Health Centre.

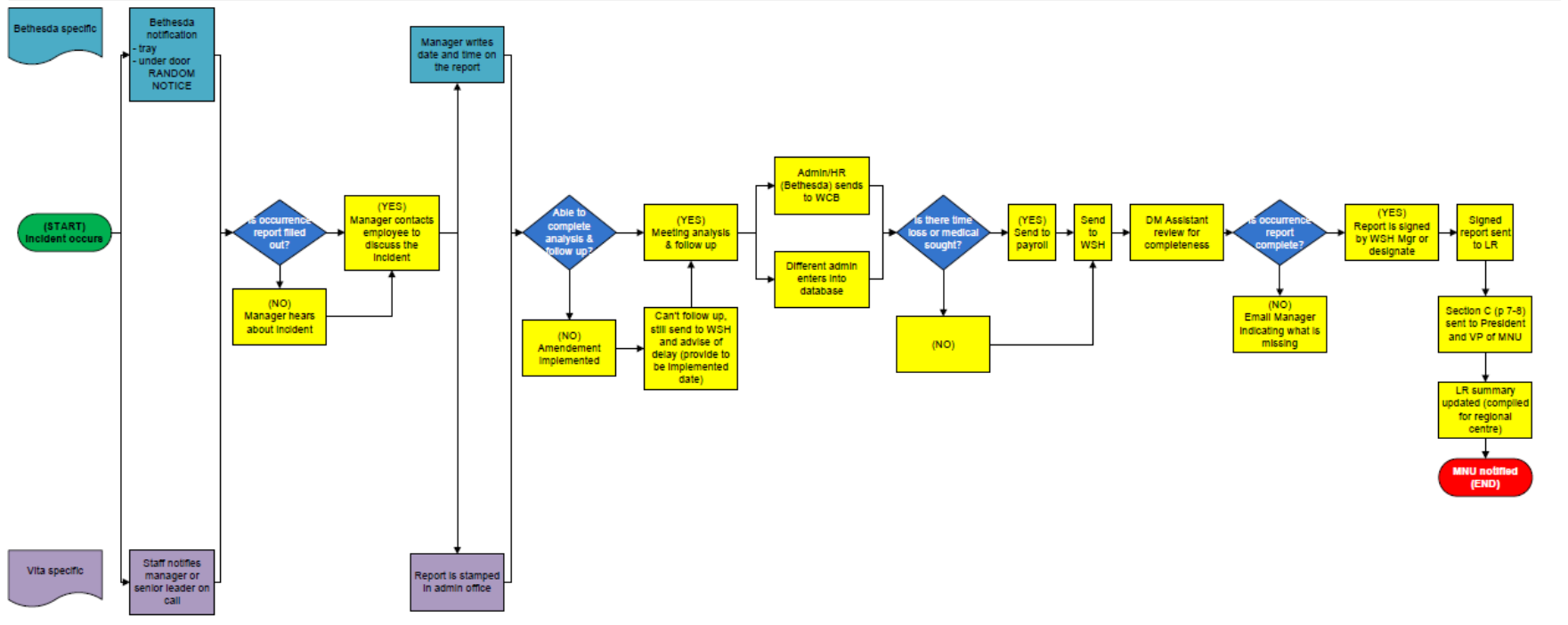


Define – Problem Statement

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.

Define – Current State Map

Current State Process Map: LEAN to 96
Reporting of Violence for MNU Members Date: Nov 17, 2017



Measure – Measurement Plan

Organization:	Southern Health-Santé Sud
Facility:	Bethesda Regional Health Centre & Vita District Health Centre
Project:	LEAN to 96

What?	How?	Where?	Who?	When?
What is being measured?	How will you track the measurement? Tracking sheets, observations, other? Do you need any items to measure? Clock, pedometer, etc.	On which unit/area will the data be collected?	Who is responsible for collecting the measures measurements?	When are the measures being collected?
Incomplete occurrence reports	Defect check list	Bethesda Regional Health Centre, Bethesda Place, Vita and District Health Centre, Vita PCH	Vita: Director of Health Services Bethesda: CSMs WSH Admin	WSH can review retrospective from April 1, 2017
Location report was submitted	Defect check list	Bethesda Regional Health Centre, Bethesda Place, Vita and District Health Centre, Vita PCH	Bethesda: CSMs	Testing Nov 15/17 and ongoing
Process times	Process time tracker	Bethesda Regional Health Centre, Bethesda Place, Vita and District Health Centre, Vita PCH	Vita: Director of Health Services Bethesda: CSMs Workplace Safety and Health Office Admin (both sites) <u>Labour Relations</u>	Retrospective to April 1, 2017 and ongoing

Measurement Check Point #1:	November 27, 2017 (test phase)
Measurement Check Point #2:	Fridays
Measurement Check Point #3:	"

Communicate

VOLUME 1, ISSUE 1
DECEMBER 1, 2017

LEAN to 96: Violence Reporting

Southern Health-Santé Sud

- Special points of interest:**
- Project pilot taking place at Bethesda Regional Health Centre and Vito and District Health Centre
 - Aim is to complete the first phase of the project within 4 months
 - First meeting date was November 14, next meeting scheduled mid-January
 - Project is currently in the measurement phase

What is LEAN to 96?

A key component of a safe workplace is the timely and comprehensive reporting of abusive/aggressive occurrences that impact aggression, physical and verbal aggression, or violence, can impact the work environment and lead to staff injuries. Analyzing reports and implementing follow up actions, as well as helping with prevention of future occurrences.

A project was started in November to address one aspect of this type of occurrence: the reporting of abusive/aggressive occurrences by Manitoba Nurses Union (MNU) members, as there is a 96 hour reporting requirement to the union that is not met. The initial project scope needs to be smaller in scope initially, so the focus is on MNU reports of Bethesda and Vito. Once measurements have been taken and improvements implemented, what is learned will be shared with other sites and programs, and for other staff members.



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.

The Project Team

Bethesda Regional Health Centre
Claire Madarros
Debbie Eggen
Faisal Faher
Tamara Burnham (Mentor)
Vito and District Health Centre
Janet Chobotar

Questions? Ask a member of the team!

Workplace Safety & Health
Erin Penner
Mark Nore

Labour Relations
Marge Smoke
Sandra Aerssens Young

Sponsor
Kim Dyck
Facilitator
Shawna Moodie

LEAN to 96

VOLUME 1, ISSUE 2

FEBRUARY 2018

LEAN to 96 Project Update

The LEAN to 96 project is focused on the reporting of violence occurrences (abusive/aggressive) for Manitoba Nurses Union members. There is a target to have these reported to the union within 96 hours. The Lean project team is working on how to improve the process to meet the legislated requirements while also focusing on the safety of our staff.

The first project meeting was held on November 15, 2017. At this meeting the team worked to fine the process—mapping out the current process (it is always helpful to have a visual to truly “see” and understand the process) and also to identify the problem. From that meeting, the team planned some measurements that would take place at two sites, Bethesda

Regional Health Centre and Vito and District Health Centre. Measurements on the time it was



starting from the date of the incident, to being reported to Workplace Safety & Health, Labour Relations and finally, to MNU, were collected. This included retrospective measures going back to April 2017 and they have been ongoing since the

first meeting.

One way to make sure that any measurement represents the actual picture of what's going on is to make sure that there are enough measurements collected. We had enough measurements to get a good picture of the current state, because we could go back in time to collect. However, “new” occurrences were not that frequent (which is a good thing when considering staff safety). This did present a challenge when planning to test improvements. So after looking at our measures and planning to test improvements the team invited Portage District General Hospital to participate. We will be testing out a new process and look forward to your feedback. The goal of the project is to make improvements that work for all.

LEAN to 96 Team

Southern Health - Santé Sud
Workplace Safety & Health
Erin Penner
Mark Nore

Labour Relations
Marge Smoke
Sandra Aerssens Young

Sponsor
Kim Dyck
Mentor
Tamara Burnham
Facilitator
Shawna Moodie



Southern Health - Santé Sud

LEAN to 96

Volume 1, Issue 3
April 2018

Project Results

The LEAN to 96 team was established in November 2017 to address the challenges of reporting violence occurrences to the Manitoba Nurses Union. The team began by defining the problem as it was known at the time: “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.”



LEAN to 96 Team
Back: Kim, Ciela, Stephanie, Shawna, Mark and Rachel
Front: Erin, Debbie and Marge

Southern Health - Santé Sud
Workplace Safety & Health
Erin Penner
Mark Nore

Labour Relations
Marge Smoke
Sandra Aerssens Young

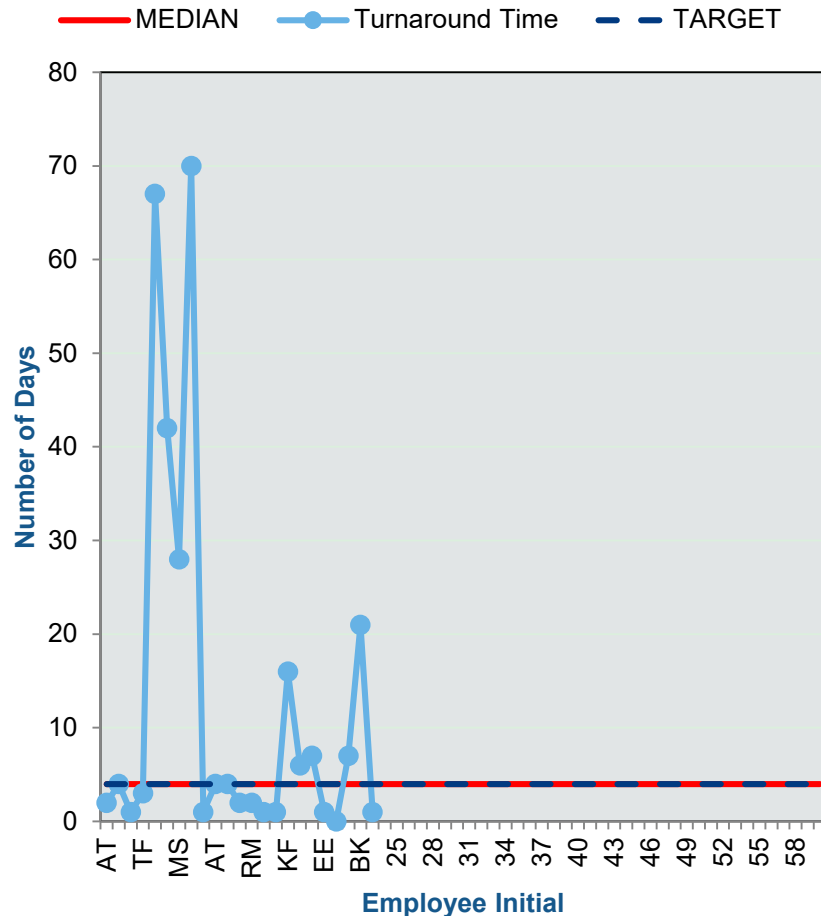
Sponsor
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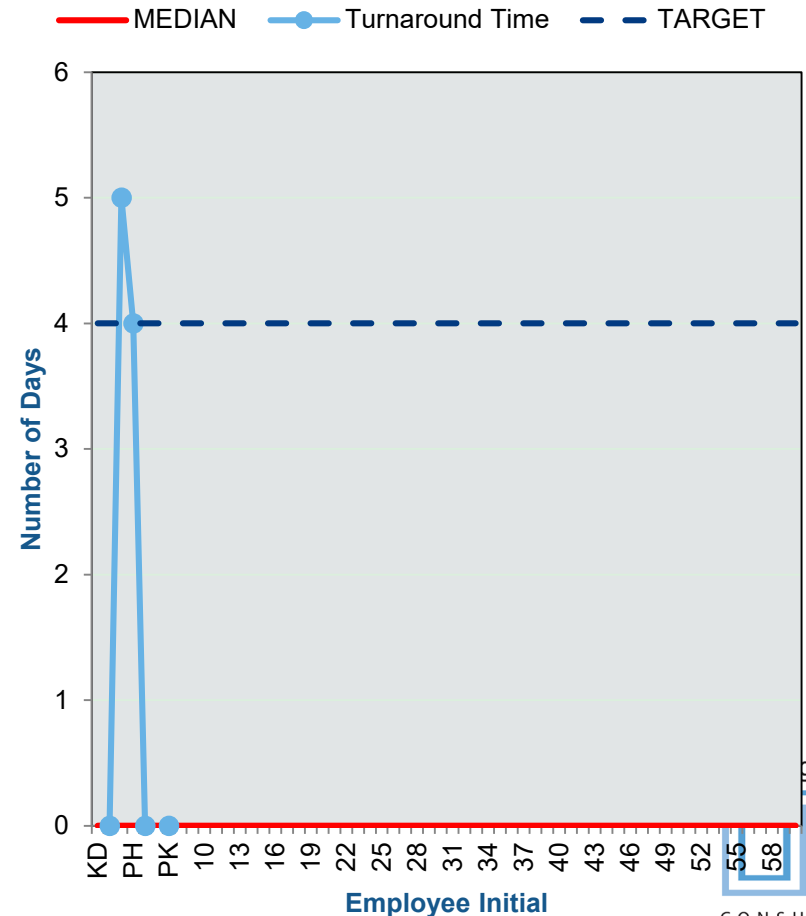
important to plan any improvement before implementing and then take the time to analyze whether or not it is working as intended. In April 2018 the team met to share results. 95% of violence occurrences after the target. This means 496 fewer days saved each year. Savings are currently being calculated. The team will now focus on sharing results and maintaining the current improvements.

Analyze – Incident to MNU (Full Cycle)

Run Chart for: Employer Notification for MNU (BRHC)

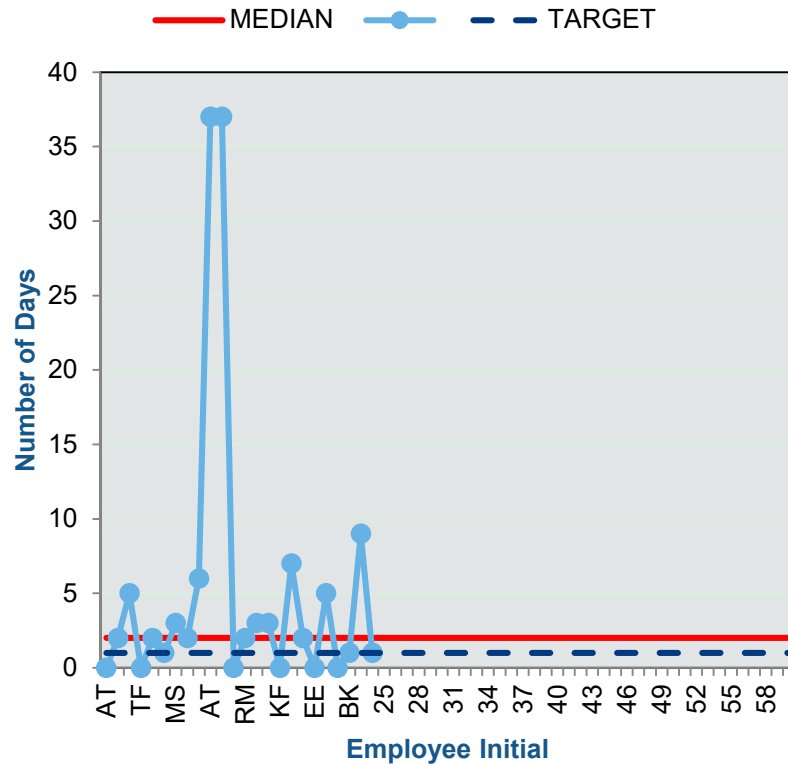


Run Chart for: Notification for MNU (Vita)

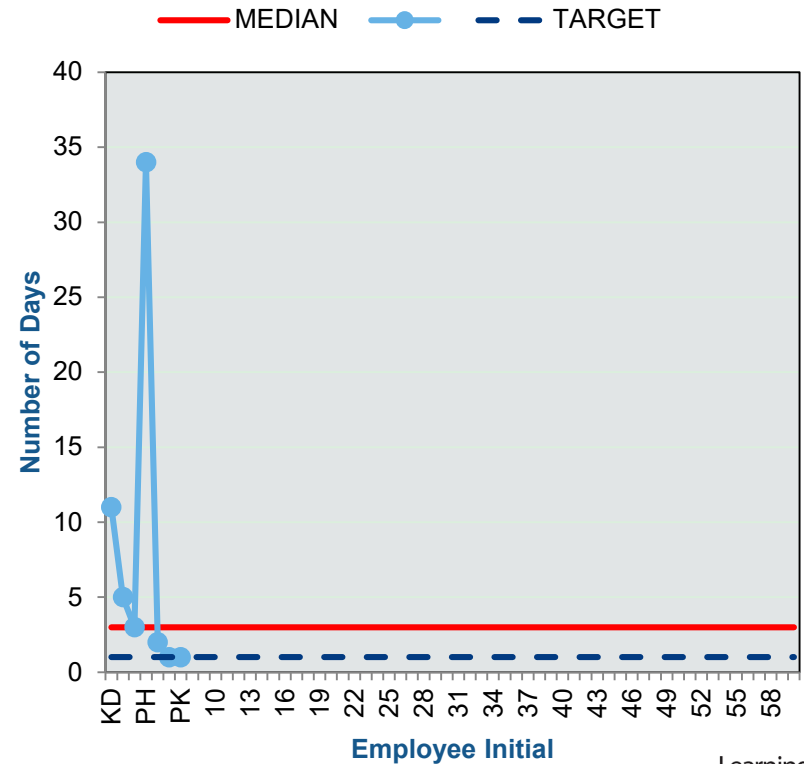


Analyze – Incident to Manager

Run Chart for: Incident to Manager (BRHC)

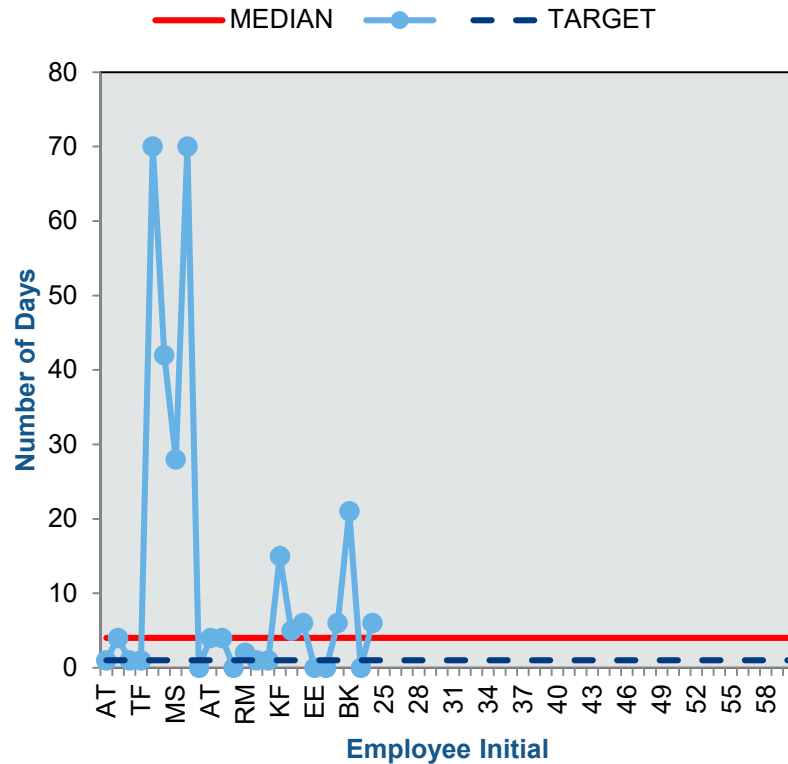


Run Chart for: Incident to Manager (Vita)

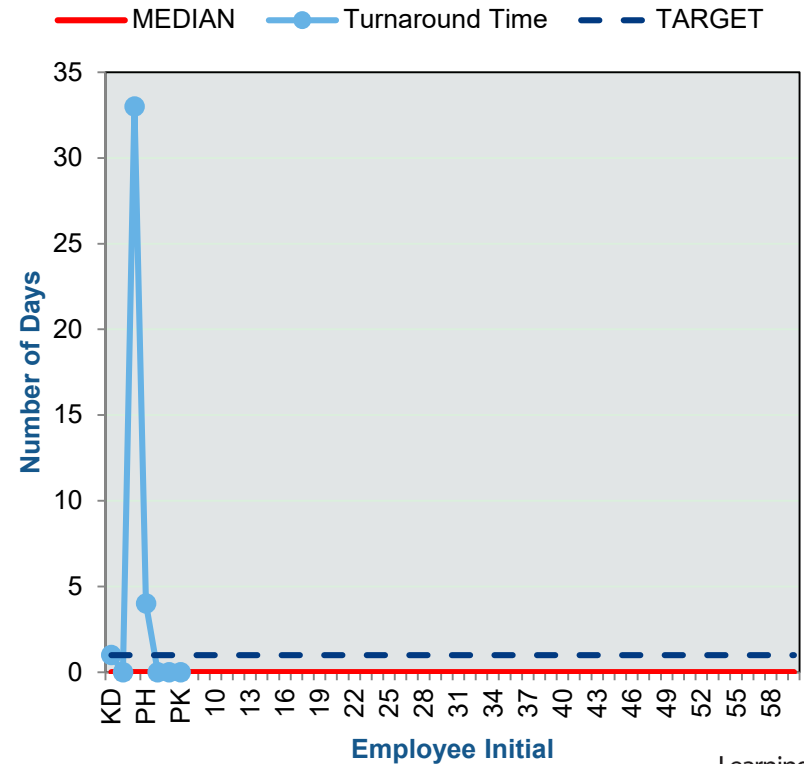


Analyze – Manager to Workplace Safety & Health

Run Chart for: Manager to WSH (BRHC)

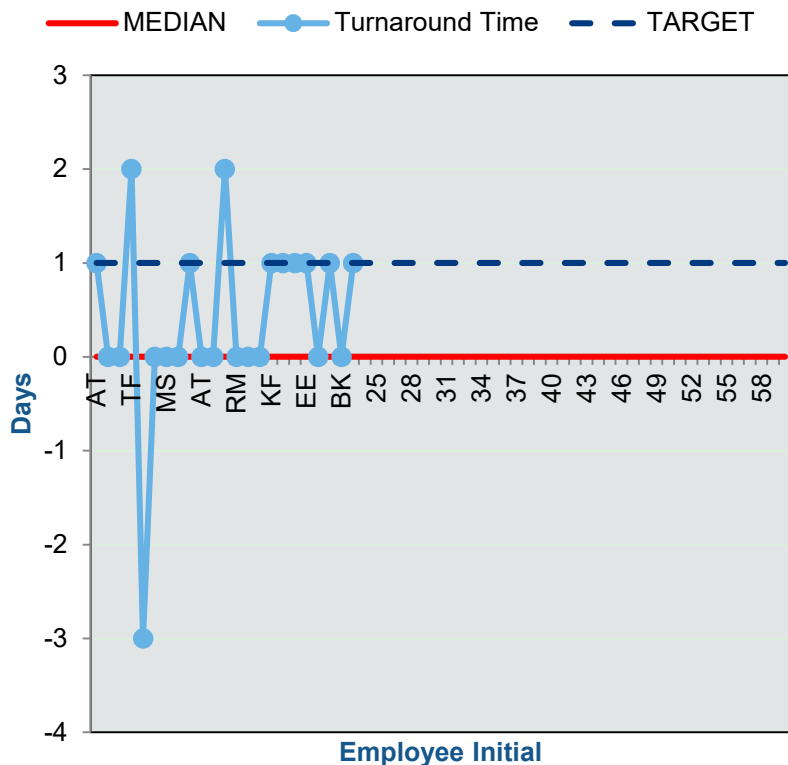


Run Chart for: Mgr to WSH (Vita)

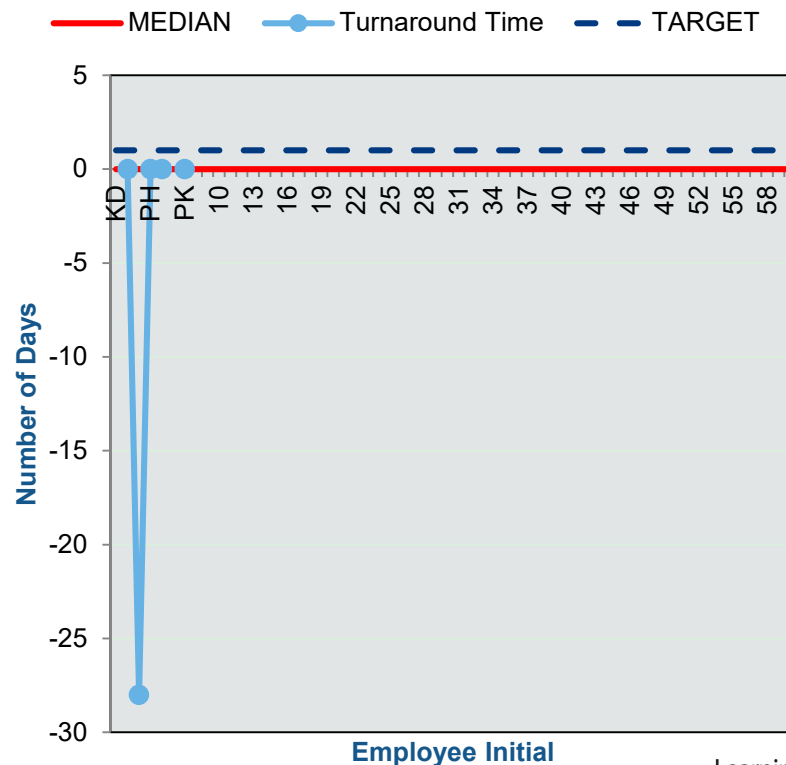


Analyze – Workplace Safety & Health to MNU

Run Chart for: Employer WSH - MNU (BRHC)



Run Chart for: WSH - MNU (Vita)





Analyze - Defects

No data for incomplete reports or reports that were misdirected e.g. stuck under doors.

Some of the data could not be collected retrospectively, and no new data for the active measurement phase prior to analyze/improve day

The information available retrospectively is as follows

Workplace Safety and Health

2 MNU members on one form along with another 3rd employee (send back to separate occurrence reports)

1 occurrence report needed to have other information requested in order to understand incident (staff injury form indicated to “see page 4” but didn’t include info)



Analyze

The data confirms that there is variation, including special cause variation (e.g. due to lost forms), in the process. There is also variation between the two sites analyzed.

There are also challenges with regards to the frequency of the events applicable to the project. Sufficient data was available retrospectively, but obtaining data when testing improvements will be a challenge.

A third site, Portage District General Hospital, has been added to the project as a result of this analysis. Retrospective data is being collected and reviewed. This additional retrospective data is on the following slides. For testing improvements, Bethesda Regional Health Centre and Place, Vita and District Health Centre and PCH, and Portage District General Hospital will be included.



Improve – AIM Statement

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



Improve

PDSA 1

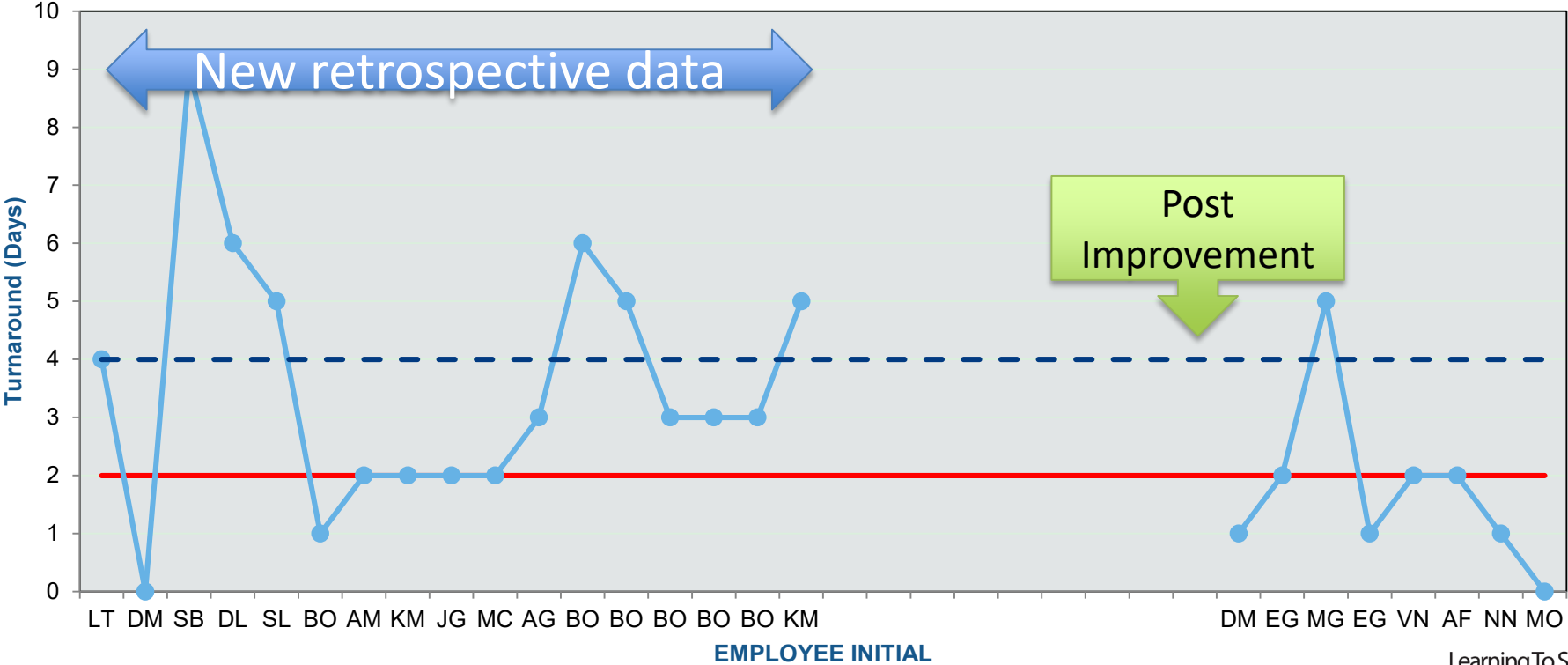
Description: Algorithm created outlining new process for reporting violence occurrences to MNU members. Central secure drop location for reports at each site, checked daily by admin. Admin stamps receipt date and advises Manager of follow up. Manager completes follow up. Admin sends page 7&8 of occurrence report to Workplace Safety & Health and Labour Relations at the same time.

Date Implemented: February 1, 2018

Improve – Incident to MNU

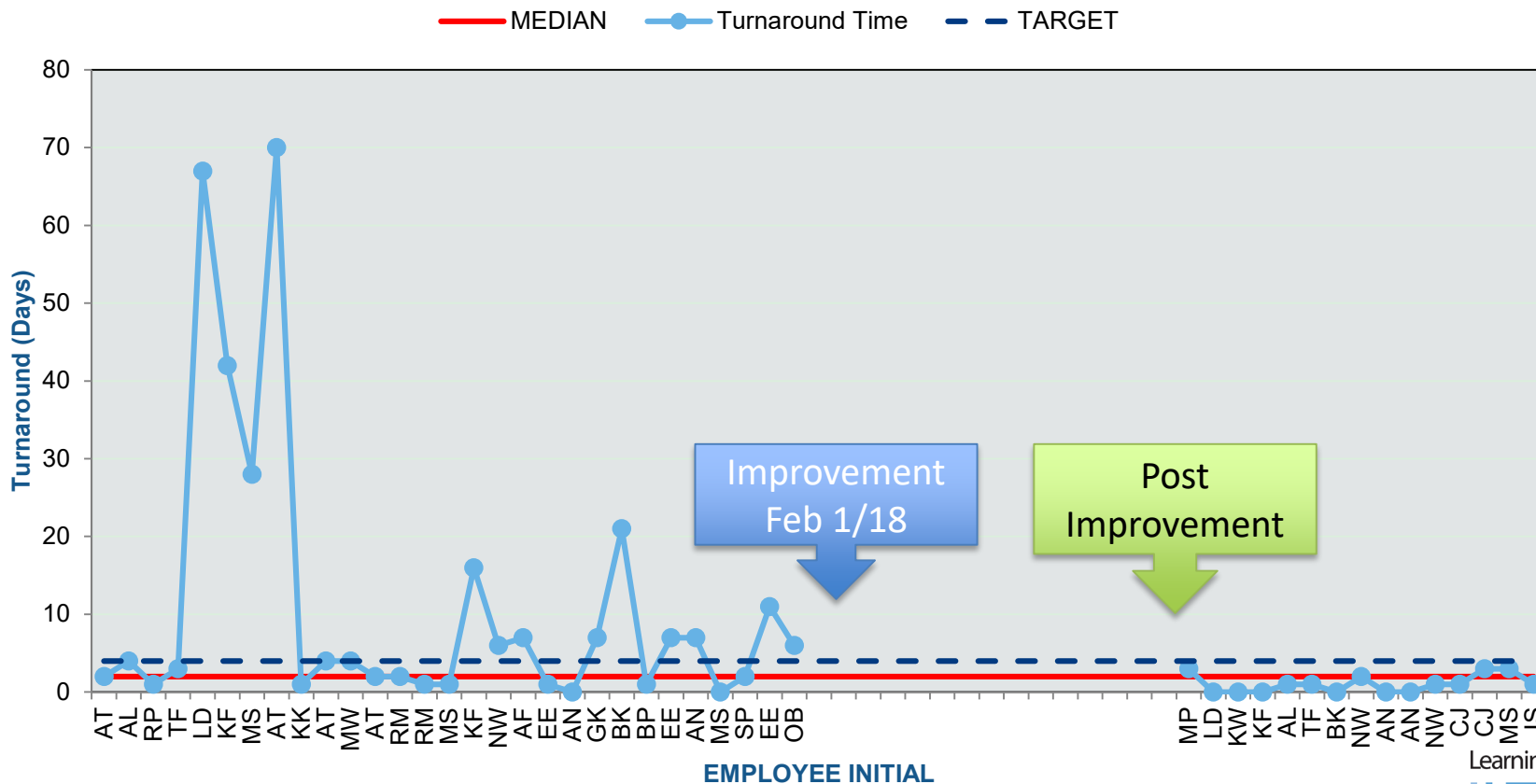
Run Chart for: Incident to MNU (PDGH)
Post Improvement Plan Feb 1, 2018

MEDIAN Turnaround Time TARGET



Improve – Incident to MNU

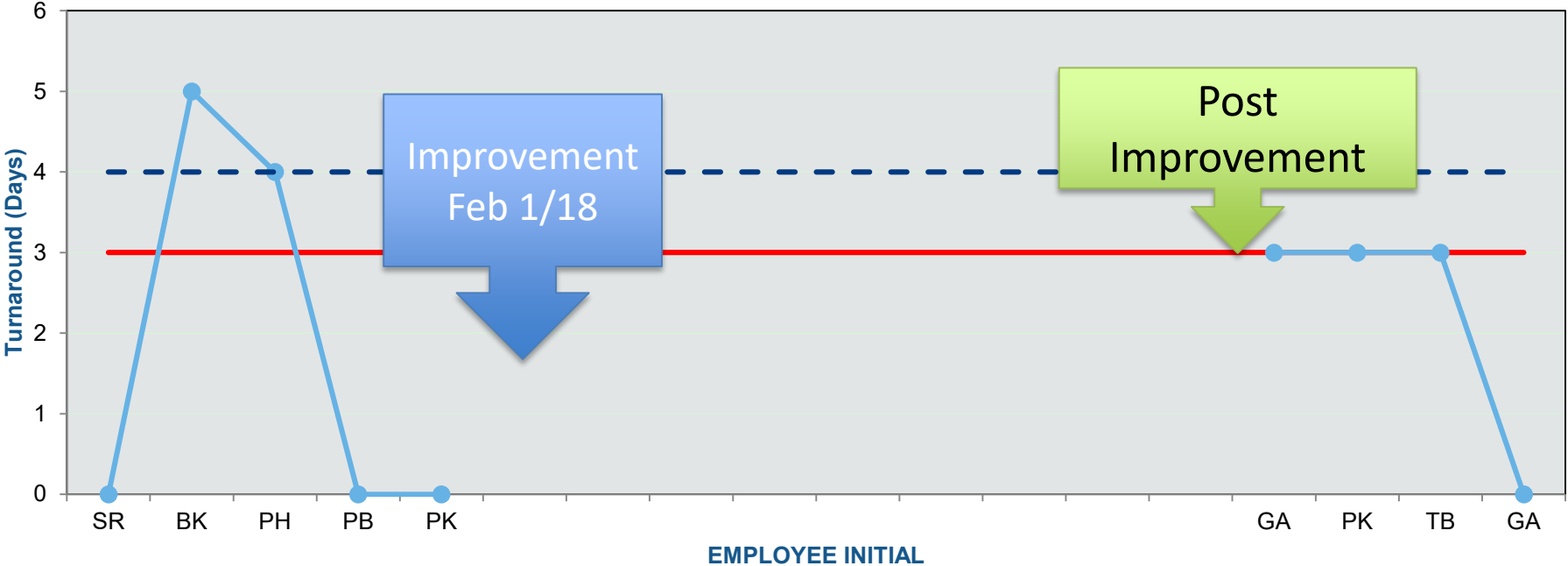
Run Chart for: Incident to MNU (BRHC)
Post Improvement Plan Feb 1, 2018



Improve – Incident to MNU

Run Chart for: Incident to MNU (Vita)
Post Improvement Plan Feb 1, 2018

— MEDIAN ● Turnaround Time - - TARGET





Improve – AIM Statement Review

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



96% of abusive/aggressive incidents reported to MNU within 96 hours post improvement



Improve

Based on the sample size, there is an 85% confidence level that these improvements were significant.

Post Improvement

Portage District General Hospital had one outlier at 5 days, and the 7 other data points met the 96 hour turnaround

Bethesda Regional Health Centre met the 96 hour turnaround

Vita and District Health Centre met the 96 hour turnaround

SAVINGS = 496 processing days/year



Improve

Staff comments and customer feedback on the improvements

You understand just how much has to happen in 96 hours – not business hours

When coordinating with other people, communication is important

Manitoba Nurses Union reports with violence get prioritized

LearningToSee



CONSULTING

Control Plan

Organization:	Southern Health-Santé Sud
Facility:	Bethesda Regional Health Centre & Place, Portage District General Hospital, Vita and District Health Centre & PCH
Project Name:	LEAN to 96

Which controls are you using and explain how they are being used

<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.

Lessons Learned

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



- ✓ Your perception of the problem changes when you see the process and the data
- ✓ Understanding just how many hands are involved in the process
- ✓ Learning that every facility had their own process
 - ✓ Struggles, however, are similar at other places

Next Steps

Project to be spread to the following facilities initially:

- Altona Hospital
- Carman Hospital
- Ste Anne Hospital

Report out presentation to be shared regionally

Meeting with Staff Development to present project and update orientation and training to reflect new process

Connect with Regional Leadership Team to assist with further spread

Education packages updated and team members available to consult/assist with spread



The Team!



L-R: Kim Dyck (sponsor), Erin Penner, Cleia Medeiros, Stephanie Rozsa, Debbie Rigaux, Shawna Moodie (Green Belt), Mark Nore, Marge Smoke, Rachel Fehr

Missing: Janet Chobotar, Sandra Aerssens Young, Tamara Burnham (mentor)

Thank you!

Are there any questions for the team?



Key Message

- **Please share the project results with your teams!**
 - **Project materials are available for your use and can be modified to fit your site/program**
 - **Contact Shawna Moodie for copies or look at the Health Provider Site (available soon)**
 - **The LEAN to 96 team is available if you have questions or want assistance spreading to your site/program**

