Southern Health - Sante Sud

Quality Improvement Project Report Out Over Storage Wars

February 27, 2017



Define

The focus of the Over Storage Wars Team has been to undertake a 5S project in the Steinbach Home Care Supply Rooms, using the knowledge that was learned from the Law and Ordering Project.

Problem Statement

The current process for inventory management is inefficient, timeconsuming, wasteful and costly which lends itself to delays for the home care team to perform optimal client care. There is ambiguity with regards to roles of the team, the process and accountability.

Aim Statement

To reduce the area that supplies are stored in the Steinbach Home Care Office by 25% by March 31, 2017.

To create a standardized ordering process and top up list for Home Care by March 31, 2017.



Gemba Walk

Defects:

• Wrong supplies or wrong amount of supplies are ordered; Supplies being ordered twice by mistake; Wrong supplies sent; Wrong amount of supplies sent; Same supplies can be found in the nursing supply room, the incontinent supply room, nursing supervisor office, in the treatment clinic supply area and in the palliative area of the supply room resulting in excess amount of the same supply and the risk of supplies expiring; Some things that are ordered as non-routine and signed by the nursing supervisor are actually items that are in the catalogue and are stock items; When they are on backorder supplies are reordered. When this occurs product is wasted and care delayed.

Motion:

Case Coordinator sometimes brings supplies from their office, then collects some from the incontinence room and then collects some from the nursing supply room; Searching; DSN's walk up to the CC office to obtain client specific supplies; Palliative care team walks to multiple locations to gather supplies.

Overproduction:

Having excess stock in store rooms, not being used that items expires;
Restocking items on shelves, but not being mindful to place older items in the
front; Nursing supervisor or case coordinator ordering items that could be
ordered using the regular process; Looking for ordering information multiple
times when needed instead of having one central list.

Transport of product or materials:

 Coordinator's order incontinent supplies then when a client needs the supplies, they go down to the incontinent product room, gather the supplies and then put them at the front desk for family to pick up.

Unnecessary Waiting:

Not understanding lead times so waiting for product; Waiting for backordered items.

Inventory:

• Incontinent products are ordered and sit in the stock room until clients call for them. Excess inventory in all areas.





















Improve

PDSA 1

Create a top up list.

Date Implemented: March 31, 2017



Steps to Creating the top up lists

- Obtained usage report from Materials for 3-4 month period.
 Also had staff track all items signed out of the supply room for 3 months.
- From the usage report determined amount of supply ordered and divided it by the number of weeks that the report covered to determine amount of supply required per week.
- Obtained a list of supplies being used by the staff when ordering (they had a homemade top up list).
- Assigned a minimum and maximum number to each supply item. This will allow us to carry 1 week of supply plus a safety stock.



Steps to Creating the top up lists

- Provided the list of supplies, including the minimums and maximums to Mike in Materials to create a top up list in the format that the Materials department would prefer.
- Refined the top up list by discussing it with the other Nursing Supervisors and comparing it to the Approved Best Practice Wound Care Product List. Removed some items and did research with the staff to determine if some items are truly needed on the top up list. This step is taken to reduce variability in supplies carried. (in process)



Steps to Creating the top up lists

- Next steps: Create several top up lists for different functions:
 - List of nursing supplies and palliative supplies that are used regularly and can be ordered regularly without close monitoring.
 - List of nursing supplies that are not used as regularly or are more expensive that require supervisor approval before ordering to ensure closer monitoring.
 - List of incontinent supplies for the Case Coordinators.
- List of supplies that are special orders for Case
 Coordinators and Nursing that cannot be found in the
 Materials catalogue to avoid staff from having to submit a
 Request for Information when the information is already
 known by someone else. It allows more timely ordering
 and gives us information on lead time so we know how fair in advance we need to order.

Improve

PDSA 2

Organize the space 5S project

Date Implemented: November 8th; November 9th; January 12th;

Final steps April 27, 2017



Sort

- Determined minimum and maximum amount of supplies needed (as per the steps for the top up list)
- Went through each supply and removed excess quantities based on the maximum number
- Went through the supplies and determined which items were not needed – put them in the red tag area.
- Created an overstock area for supplies that will get used up over a short period of time
- Counted and costed out the items in the overstock and red tag areas.





Sort





Red Tag Area

- Met with palliative care and Case Coordinators to determine which items in the overstock area and red tag area need to be kept.
- Sent expired items to HOPE (condom catheters; adaptic touch)
- Met with Mike in Materials to determine which items could be returned (done in phases).

7/14/2017

Red Tag Area/Over Stock Area







Set in Order

- Used the following labels in the supply room:
 - Gauze
 - Moisture retention dressings
 - Exudate management dressings
 - Odour management dressings
 - Antimicrobials
 - Wound Cleansers
 - Compression
 - Negative Pressure Wound Therapy
 - Urinary Supplies
 - Gloves
 - Needles/Syringes
 - Still need to create a few more labels (IV solutions)



Dressing Categories

- A presenter at a workshop in the Summer of 2016 emphasized the importance of categorizing wound care products.
- This allows a nurse to make a decision about a dressing based on its function.
- The presenter quoted a statistic that said clients experience 18% quicker wound healing when dressings are organized like this.



Set In Order

- Supplies were set up by the DSN and HCA so that the most frequently used items were towards the front and less frequently used items in the back.
- Items were grouped together
- We used blue bins that were available in the Materials/ Maintenance Department at no additional cost



Set in Order







Set in Order







Before and After







Before and After







Shine

- Shelves were added.
- Some shelves that were not as efficient in terms of space were



Improve

PDSA 3

Develop a process for ordering supplies and putting the supplies in to the supply room. Communicate the process. This process clarifies roles and responsibilities so the team knows who is responsible for each step in the process.

Date Implemented: March 31, 2017



Standardize

Next steps:

- Create a process for ordering using the KAN BAN system and the newly created top up lists.



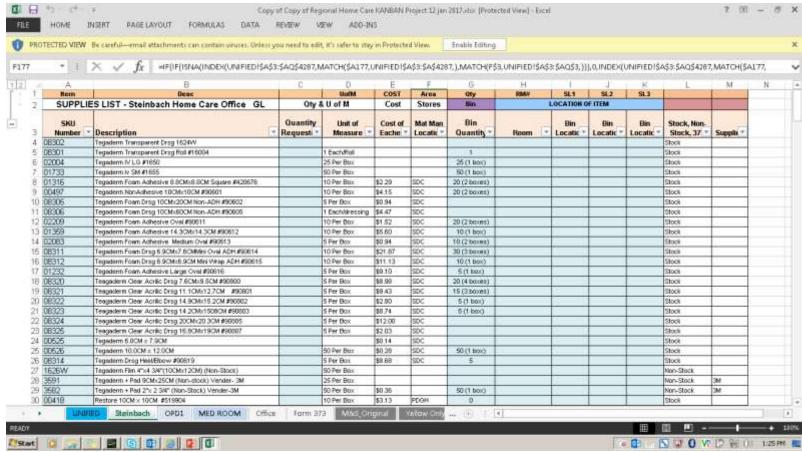
Sustain

Next steps:

- Develop ordering process and set up training
- Finalize the top up list
- Get appropriate sized bins
- Complete KAN BAN system
- See Control Slide later in presentation



KAN BAN System





KAN BAN System







Incontinent Products and Quality Life Direct Shipping

- Currently many incontinent supplies that are provided by Case Coordinators to Home Care clients' are being direct shipped through Materials Distribution Agency (MDA). There is a mark up on these products.
- To determine if further cost reduction is possible we are doing a study to determine cost effectiveness of having Quality Life direct ship incontinent items to clients homes.

- A meeting was held with Quality Life, Materials and Home Care to determine the logistics of having Quality Life direct ship supplies to client's homes.
- A meeting was held with Case Coordinators and Resource Coordinators to create a process map for ordering incontinent supplies
- Each Case Coordinator provided a list of incontinent supplies that they provide to clients.
- This is still in process.



Improve

Staff comments and customer feedback on the improvements in the supply room

- It looks a lot tidier
- Initially it was really difficult and frustrating but we are starting to feel some of the benefits now
- Before the room felt overcrowded and cluttered and now it's easier to find things.
- It is far more organized
- It is easier to identify out of date supplies
- I am still not used to where to find things but if I ask the HCA's they can help me
- Palliative care stated that it is easier to find the supplies they need.



Cost Savings

- In the overstock area, there were supplies that equalled to \$22,827.
- Some supplies are being recirculated instead of re-ordering.
- The rest are being returned in waves. The first amount of supplies was returned and credited to our GL code. The amount was: \$412.
- We are working on the 2nd and 3rd wave of returns now.
- Materials is also calculating the savings that could be realized if we start to have incontinent products delivered directly by Quality Life rather than by MDA.
- The nursing supervisors are working on which items might be removed from the supply top up list with the goal of reducing cost there as well.
- The Financial Officer, Materials and Home Care met on Feb. 27th to ensure that products are being coded to the correct GL segment (ie. med/surg vs dressings)



Lessons Learned

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

Other leadership engaging in the project helps to gain a deeper understanding of quality improvement principles and how it helps with decision making.

Something that could be done differently next time might be to meet with the staff in-person to let them know what to anticipate as the project rolls out.

This project validates:

- the use of top up lists in management of supplies.
- the importance of defining roles and responsibilities when it comes to ordering and managing supplies
- that efficiencies can be found with 5sing the supply space
- The importance of understanding the Materials process
- The importance of providing SKU numbers and Reference numbers to Materials the first time you send them something for cost analysis or for returning items.



Next Steps

What next QI project or where is the project spreading?

Develop an action plan to spread the lessons learned from the project that include:

- Finalize the top up list and implement it in all of the home care offices
- Use usage reports in each office to determine quantity of supplies to stock so that the top up list for each office can be individualized.
- 5S each supply room in each office
- Create standard work using the steps that were used in the Over Storage Wars project

Check out our project on the Internal Portal Service. Link: to be determined.



Control Plan

Fundamental Change:

Put supplies in bins.

Visual Control:

- · Labeling of supplies for each bin is in place.
- Kanban cards are being developed and will include cost of each item.
- Empty bin when product needs to be re-ordered.

Standard Work:

- Top up list with minimums and maximums.
- Future control: Written process for ordering supplies and maintaining the supply space.
- Future control: Ensure that labels are regularly checked and updated.
- Future control: List out steps for the Over Storage Wars Project so that it can be replicated in the rest of the offices.

Training:

Incorporate the procedure that will be established in orientation of new staff.

Continue To Measure:

• Future control: Point in time audits of the space. Periodic evaluation of top up list, minimums, maximums and usage reports incorporating evidence based products.

Audit:

Future control: Audit of the space once a month to see if all products are in their correct spots

Checklist:

Top up lists.

Policy and Procedure:

Procedure established; 7 days of supplies taken in to homes; Supply ordering process

Written Sign

Labeling of supplies.



The Team!



Vanessa Wiens, Bev Hamm, Mike Wlock (not pictured), Sara Martens, Mae Suebzon, Lorraine Friesen, Ron Morrice (not pictured) Aleasha Whenham, Debbie Harms Darren Tindall (not pictured)

