

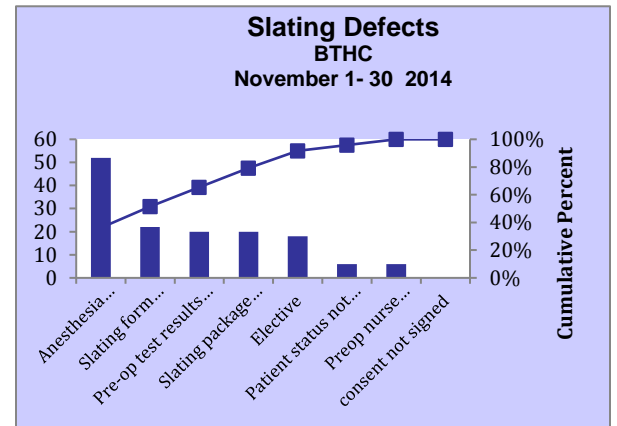
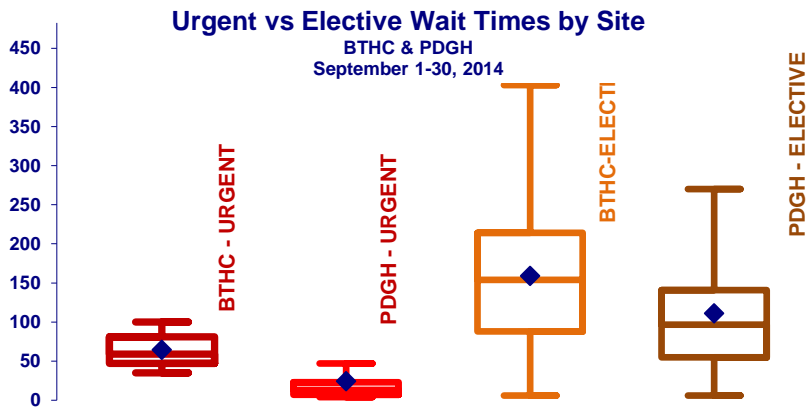
Project Details

Organization	Southern Health Santé Sud	Facility	Boundary Trails Health Centre
Project Name	PAC-Attack	Project Facilitator/Belt Level	Eileen Vodden/Green Belt
Project Sponsor	Dr. Denis Fortier	Project Team	Maureen Gamache, Dalyce- Fredette Percy, Carole Lavack, Val Askin, Ron Morrice, Cindy Terwin
Project Start Date	October 21, 2014	Project End Date	March 10,2015

Problem Statement

The pre-op and pre anesthesia process/ packages are incomplete and cause delays in booking the operating room procedure for the patient. This leaves the patient feeling ignored, forgotten and anxious. The staff experience frustration with the current process and note an increase in workload.

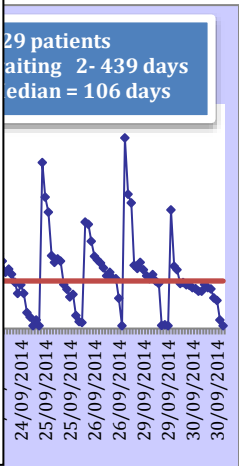
Current State Analysis - What's the Data Story?



A3 Report

Prepared by:
 Eileen Vodden

- Wait time for elective surgery ranges from 2 - 439 days.
- Median wait time is 106 days.
- Urgent cases wait time ranges from 2- 100 days (Standard requires 42 days for urgent cases)
- Wait time attributed to history physicals incomplete, pre op tests incomplete and anesthesia consultation difficult to access.
- Slating packages had an 80% defect rate and anesthesia consults had an 85% defect rate.



Project Aim

To reduce urgent referral wait time from decision to treat to surgery date by 50% by January 31, 2015

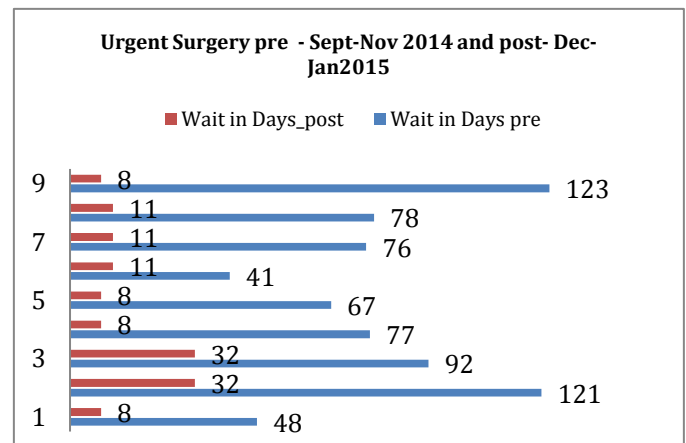
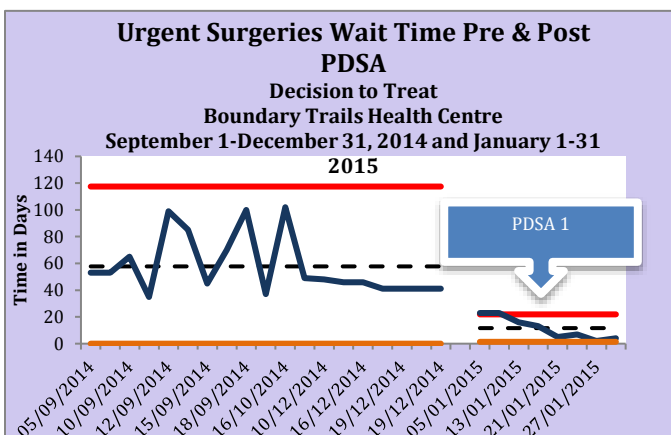
Implementation Plan

	PDSA – Brief Description	Implementation Date
1	To fast track forms from decision to slating - highlight “ urgent process = 42 days (14 days surgeon clinic, 14 days pre op hx/phy and pre op tests, 10 days booked surgery.) -Educate stakeholders – clinics, slating, anesthesia, surgeons, PAC	January 5,2015 December 29,2014 January 5,2015
2	Anesthesia to see the patient needing urgent surgery in the PAC clinic at the Hospital	January 9-16, 2015
3	Request slating form and consent be forwarded to the slating office within 24 hours of consult with the surgeon.	January 9, 2015
4	Add lap cholecystectomy as an urgent case with current evidence provided	January 9,2015
5	History physical and preop tests to be completed and sent to hospital by day 28	January 9,2015

Controls Utilized

<input checked="" type="checkbox"/> Visual Control	Highlighted 42 days on slating form
<input checked="" type="checkbox"/> Standard Work	Standardized the slating process for booking urgent surgeries for all sites
<input checked="" type="checkbox"/> Training	Education and training occurred with clinic staff, PAC staff, slating staff, surgeons and anesthesia to develop a consistent process to meet the urgent surgery requirements
<input checked="" type="checkbox"/> Continue to Measure	Measurements will occur on a monthly basis for the next year to ensure targets are being met.
<input checked="" type="checkbox"/> Audit	An audit on urgent case cycle time has been developed; as well a defect audit will occur to ensure required documents are completed.
<input checked="" type="checkbox"/> Checklist	Summary checklist to ensure history/physical, pre op tests, consent, anesthesia consult is a standardized process for every surgery now.
<input checked="" type="checkbox"/> Policy & Procedure	Slating policy has been revised to meet the urgent surgery patient needs.

Outcomes – Qualitative and Quantitative Outcomes



- Urgent Surgery median wait time decreased from 48 to 10 days or 79.17%.
- Urgent Surgery range decreased from 102-41 days to 23 – 1.365 days
- Elective Surgery range decreased by case mix grouping’s varying from 51% - 96% reduction.
- Lap cholecystectomy surgery wait time median from 77 10 11 days or 85.6%.