

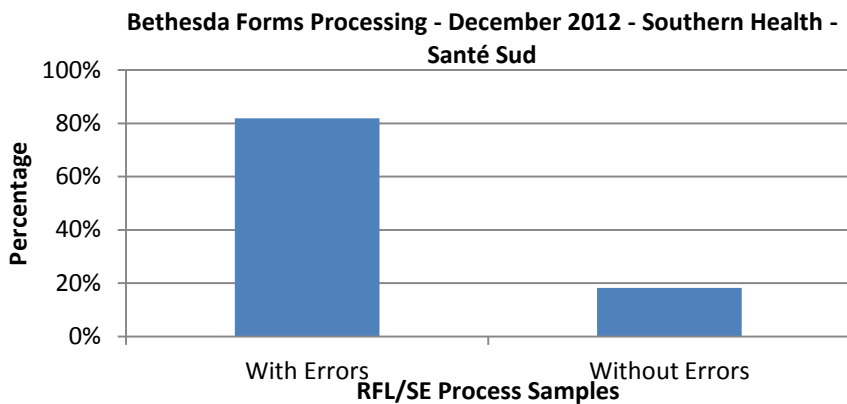
# Project Charter

Project Details			
Region/Agency:	Southern Health-Santé Sud	Facility:	Bethesda Hospital/ Bethesda Place
Project Name:	Surviving Operational Staffing-Part 2	Project Sponsor:	Jan Gunness
Project Start:	February 1, 2013	Project Lead:	Tamara Burnham
Team Members:	T. Jordanov, C. Sobering, D. Rigaux, L. Johnson, S. Hildebrand, I. Legal, R. Wall		

**Problem Statement / Opportunity**  
 The process of staffing & scheduling employees is ineffective and lacks efficiency. Challenges within the system result in customer dissatisfaction r/t the impact on patient care and staff frustration r/t staffing error and payroll discrepancies.

**Background / Context**  
 Bethesda Regional Health Centre (BRHC) & Bethesda Place (BP) are acute & long term care health facilities in Steinbach, Manitoba that employ approximately 400 health care employees. The Human Resource office, responsible for the staffing & scheduling of employees at the two facilities, has faced long term challenges with processes and operations. Only minimal & short term successes have been achieved. A Pursuing Excellence Greenbelt project completed in spring 2012 achieved great success. This Pursuing Excellence Blackbelt project is targeted at continued, larger scale improvements on the same processes.

**Current State Analysis and Measures**



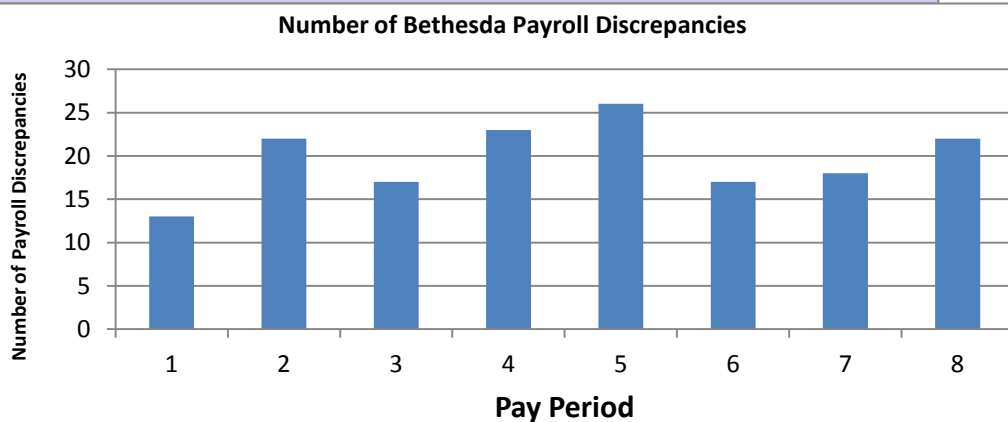
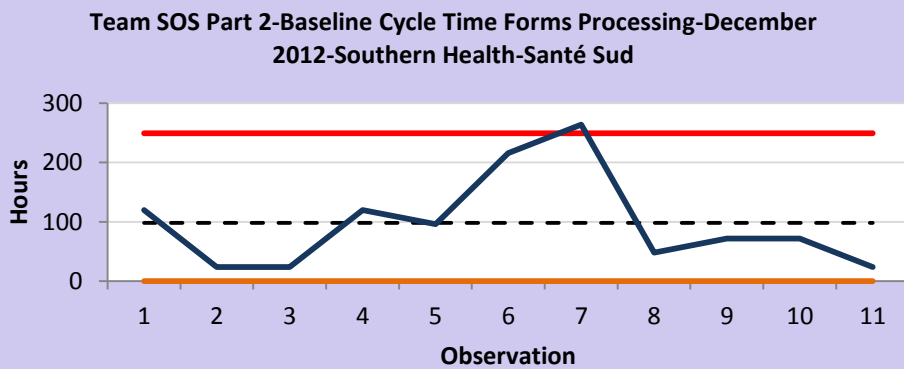
**Data Story**

Measurement of forms processing in the staffing/ scheduling office showed an 82% error rate.

The average time for processing of staffing/ scheduling forms took 4.18 days (98.2 hours).

The number of payroll discrepancies ranged between 13 to 26 per pay period. Bethesda payroll discrepancies accounted for 34-62% of discrepancies in the region each pay period.

An employee survey done indicated that 65.3% of staff were dissatisfied with staffing/scheduling processes.



# Project Charter

## Aim Statement (Future State)

- 75% reduction in forms processing defects
- Average forms processing cycle time reduced by 50%
- Improve staff satisfaction by 30%
- 75% reduction in payroll discrepancies at site

## Improvement Ideas Discussed

- Reorganization of the Bethesda staffer/scheduler role including work assignments, work schedules & efts.
- Trial of ESP staffing/scheduling programming software throughout Bethesda Hospital & Bethesda Place.
- Increase/improve participation of stakeholders
- Assume local responsibility for scheduling tasks (decentralized from regional office)
- Develop standard work to support changes made.

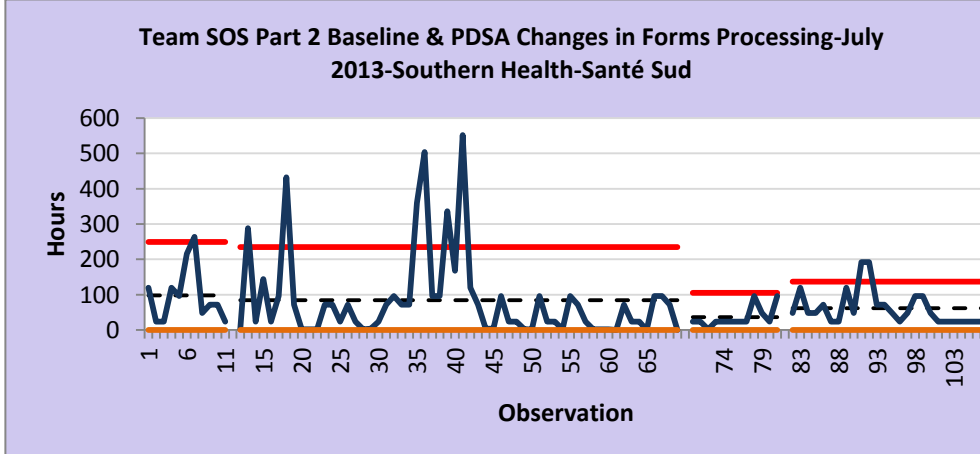
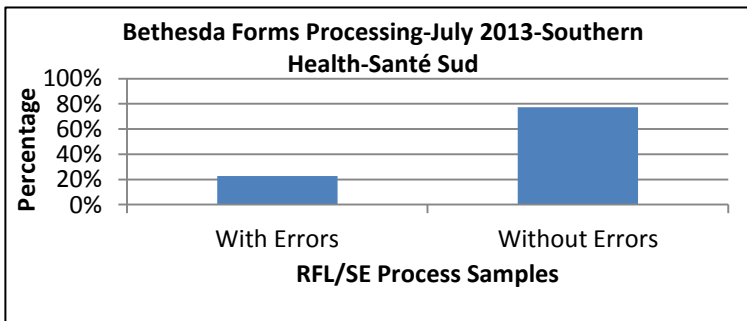
## PDSA Cycle Implementation Plan

- Phased staffing/scheduling office changes beginning with work assignments
- Trial of different electronic scheduling program (ESP) on Surgery/OB nursing unit starting March 10, 2013. Other units will be added 1-2 at a time in subsequent pay periods.
- Phased decentralization of staffing/scheduling processes as units/departments “go live” in ESP
- Ongoing development of standard work.

## Control and Follow-up Plan

A number of changes made to process; fundamental changes included implementation of ESP electronic scheduling system & removal of QHR system, as well of transition of work processes from central location to local site. Numerous standard work & mistake proofing controls implemented as well. Control plan involves ongoing measuring/monitoring of processes to confirm lasting/continued improvement. Spread plan proposes implementation of project changes to remaining units & departments at BRHC & BP as well as to other facilities in the region.

## Outcomes



### Data Story

Measurement of forms defects in the staffing/ scheduling office reduced to a 23% error rate (72% improvement).

The average time for processing of staffing/ scheduling forms reduced from 4.18 days to 1.5 days (36.2 hours), a 63% improvement (statistically significant at 90% confidence interval).

Payroll discrepancies-Statistically significant difference achieved on 50% of units/departments (4 at 95% confidence interval, 1 at 85% confidence interval).

For staff satisfaction, there was a decrease of 47% incorrect (underpayment) to staff & decrease of 29% in special pays required for staff.

## Project Timeline

Project Start	Define	Measure	Analyze	Improve	Control	Project End
Dec. 3, 2012	Dec. 3, 2012	Dec. 10, 2012	Jan. 15, 2013	Feb. 5, 2013	July 18, 2013	July 30, 2013