

A3 Report

| Prepared by: |
|--------------|
| Lorelei Hale |
| |

Project Details

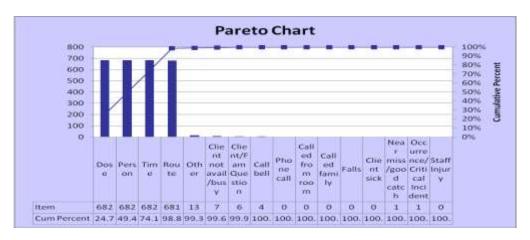
| Organization | Southern RHA | Facility | Home Care Program (Community) |
|--------------------|--------------------|--------------------------------|--|
| Project Name | Waste Not Want Not | Project Facilitator/Belt Level | Green Belt Candidate |
| Project Sponsor | Greg Reid | Project Team | Raquel Giesbrecht Ginette Morgan Dianne Morin Ellen Yatsko Joan MacDonald Misty Hasaan Lorelei Hale (Roffel) Shawna Moodie |
| Project Start Date | December 2, 2013 | Project End Date | September 2014 |

Problem Statement

The current Home Care process of medication support by a Home Care Attendant (HCA) is resulting in a high incident of medication occurrences in the Supportive Housing Units which leads to unsafe client care, low morale and increased frustration in staff, clients, family and management; as well as increased workload for all.

Current State Analysis - What's the Data Story?

When given a tick sheet to complete the medication task, errors are minimized. The times recorded on the data collection sheet are sometimes not realistic (ie. One minute with task completed as per the care plan). The Home Care Attendants will need to be more careful when entering times when data is being collected. When there is a conscious awareness of the task at hand (i.e. audit sheet used), there are less errors.





A3 Report

| Prepared by: |
|--------------|
| Lorelei Hale |
| |

Project Aim

To increase the number of correct medication passes. To empower each Home Care Attendant to do their job with confidence.

Implementation Plan

| | PDSA – Brief Description | Implementation Date |
|---|--|---------------------|
| 1 | Random audits of the medication administration process in Supportive housing | June 23, 2014 |
| 2 | Formalize the follow up process from the occurrence reports of medication errors by an HCA. A skills lab will be held for the RCs to educate them on the direction needed for HCAs who incur a medication error. | July 3, 2014 |
| 3 | Promote and celebrate good catches. Develop a good catch form and educate staff on | Begin July 15, 2014 |
| | what a good catch is. | Ongoing |

Controls Utilized

| ☐ Fundamental Change | | |
|-----------------------|--|--|
| ☐ Error Proofing | | |
| ☐ Visual Control | | |
| ☐Standard Work | | |
| □Training | | |
| ☐ Continue to Measure | Tracking of occurrences and near misses specific to medication administration/assist by an HCA | |
| □Audit | Every three months, two types of audits are implemented | |
| □Checklist | | |
| ☐ Policy & Procedure | Delegated task policy continues to be followed | |
| ☐ Written Sign | | |

Outcomes – Qualitative and Quantitative Outcomes

Near Miss reporting increased. We anticipate a continued increase in reporting as we continue to educate and work with the Home Care Attendants about occurrence and near miss reporting. The focus will be on learning from the occurrence reports and using that information to review our practice and ensure we are providing the quality client care.

Medication Occurrences decreased. We would expect the occurrences to continue to decrease with the continued audits process.