

Purpose

A project to enable clinical and other staff to deliver greater time for direct care to patients by minimising non-value added activities. The project will use a multidisciplinary inclusive approach focussing on team collaboration to improve ward processes and environment with the ultimate aim of improving patient safety and reliability of care. The techniques being applied are from Lean Thinking concepts.

Key Deliverables

- Standardised principles for a well organised ward and implementation of 5S practices. ●
- Implementation of the Collaborative Framework for the Delivery of Nursing Care policy. ●
- Implementation of an effective system for communicating patient status for the whole multidisciplinary team. ●
- Implementation of a process redesign for a key priority area on each pilot ward. ●
- Financial Investment (excludes project resource) \$39,000

Progress

Phase 3

- Work ongoing to address 'marbles' and 'tennis ball' issues. Wards have completed between 30—80% of marbles (target = 100%)
- Wards have chosen specific activities around handover, medication processes and stock ordering using problem solving methodologies. Opportunities exists for wards to work together on these issues.
- 5S of ward areas is underway—predominantly office areas and medication rooms. All wards awaiting completion of tasks by Maintenance department and external contractors. This has slowed down progress and causes staff frustration.
- Standardised documentation module completed on 2 wards and underway on the other 3 wards.

Progress Update

- Patient status communication board module underway on Wd 25. Preparation on other wards will begin week of 18th January.
- Planning to redesign electronic whiteboard on Gynae ward to align with standardised patient status communication board. Discussions underway.
- All wards to start looking at Patient Focussed Team Nursing module.
- Fortnightly training in quality tools ongoing throughout project.

Phase 2

Med/Surg

- All wards have completed the mandatory modules ie. team nursing, patient status communication board, 5S and fast track standardisation. Ongoing work needed to embed the changes.
- Final patient status communication boards have been installed on Wds 18, 26 and 31. Ward 19 are in the process of signing off their final board.
- Wards undertaking post programme staff/patient surveys and audits. Activity follow data demonstrated problems in methodology. Investigating use of radio frequency technology for Phase 4.
- Wards and nursing management have committed to ongoing MT4C initiatives. However, no dedicated resource assigned.

Maternity

- Project lead resource has been extended. MT4C programme will be ongoing until April 2010.
- Improvement activities underway: Team Midwifery, drug cupboard swipe card access, planned discharge process, hand hygiene
- Post programme surveys and activity follows underway. Patient satisfaction survey results showed significant improvement in staff hand hygiene and knowledge of discharge date.

● Week Ending: 8 January 2010

Orthopaedic Rehab Unit/Surgical Orthopaedic Unit

- Project lead resource available to continue the MT4C programme until Phase 4.

Pilot Wards

- Consolidation phase required to embed changes and sustain improvements

Fast track standardisation

Put It Back Jack (PIBJ), Documentation, Patient Status Communication Boards, Team Nursing and IV trolley modules

- Full time project resource seconded for 4 months. Time-frame to be extended
- Intranet based training packages have been created for Put It Back Jack and Patient Status Communication Boards. Standardised documentation module under development.
- PIBJ module started on Wd 27 and TPMH. Implementation timeframes have been pushed back at request of wards. Post implementation results still to be compiled.
- Master list for standardised documentation filing now finalised. Retrospective roll out to pilot and Phase 2 wards.
- Patient Status Communication board trials underway at TPMH and Wd 23 (non MT4C wards)

Next Steps

- Liaise with new Maintenance co-ordinator re MT4C programme and prioritisation
- Roll out of Patient Status Communication Board (PSCB) module across TPMH
- Meet with Specialist Mental Health Service re PSCB module
- Plan for Phase 3 showcases