

Step 1: Identify the problem

High Level Goal/Purpose: Caring -Measure and improve the value of care

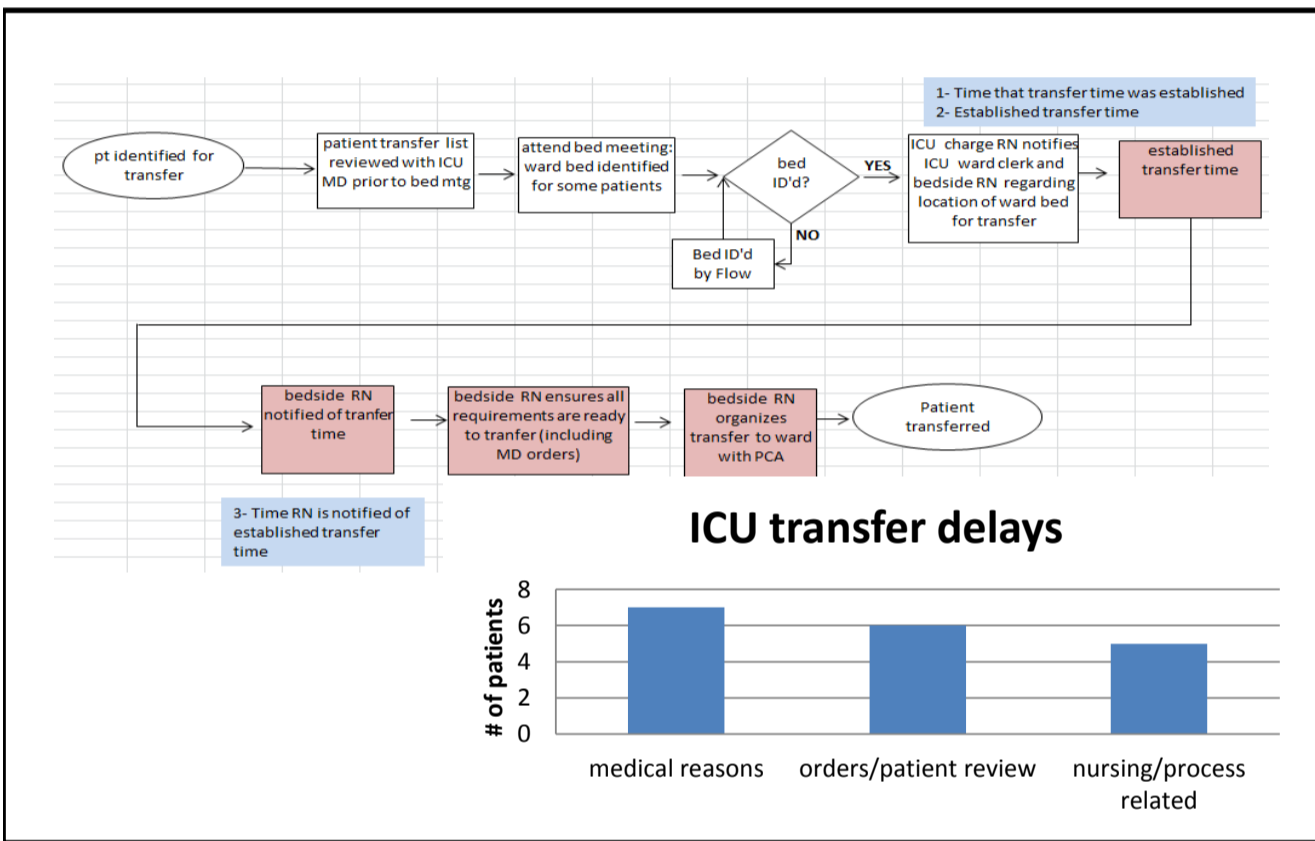
Background / Current Situation: Currently 60% of ICU transfers are delayed. Of those patients, 28% are delayed by internal ICU processes.

This affects patient flow and impacts the ICU's ability to admit patients and results in patient and staff dissatisfaction.

Gap: transfers are delayed an average 35 minutes and 28% are delayed >30'

Ideal Situation: ICU Patients will be transferred to ward with no delays.

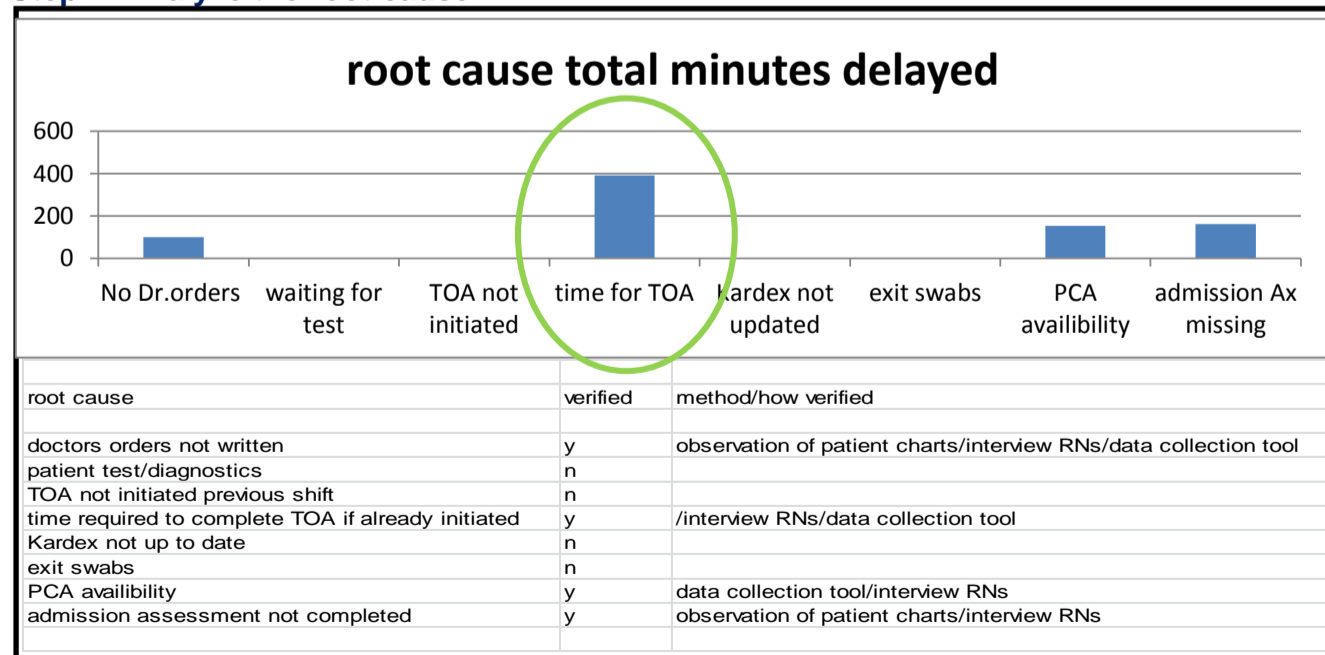
Step 2: Break down the problem:



Step 3: Goals / Targets:

Reduce average transfer delays from 35' to less than 17' by September 2015.

Step 4: Analyze the root cause:



Step 5: Develop countermeasures:

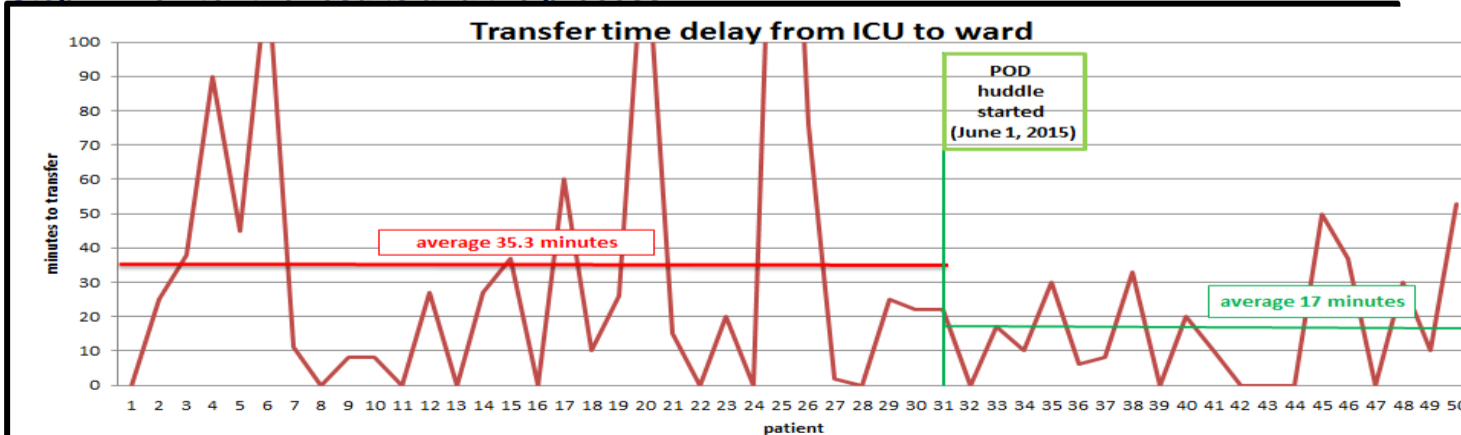
		3= excellent 2= acceptable 1= not good		Criteria for selection			
Root cause(s)	Possible countermeasure	cost	training	ease of implementation	patient preferred	Total	
Time to complete TOA	Shorten TOA	1	2	2	NA	5	
	Ensure TOA is done by 0900 hrs if bed ID'd in bed meeting	3	1	1	NA	5	
	workload: consideration of transfers/admissions for shift when assigning pts- single out or double L2 according to acuity/activity.	3	2	2	3	10	
	Make a Neuro Resource RN available	1	2	3	3	9	

	Countermeasures	Possible countermeasure
1	workload	POD huddle every morning at 0900 hrs L2 assignments finalized @ 0630 hrs post neuro rounds after transfers/tests decisions made Double L3 patients to free up RN to assist with L2 activity

Step 6: Make Changes - Implement Countermeasures:

Implementation plan					
	Task (what)	Where	Who (responsible)	Due Date	Status (%done)
1	Implement POD Huddle	POD 103 & 104	PCC	01-Jun-15	80%
2	Train charge nurses to conduct POD huddle every morning in PODS103 and 104	POD 103 & 104	PCC	June 1, 2015	25%
3	Train Full Time RNs (excluding permanent night staff) re expectaton to to participate in POD huddle every morning in PODS103 and 104	POD 103 & 104	Day Charge Nurse (with leadership)	June 30th 2015	36%
4	Train Part Time RNs (excluding permanent night staff) re expectaton to to participate in POD huddle every morning PODS103 and 104	POD 103 & 105	Day Charge Nurse (with leadership)	June 30th 2015	36%
5	Train Casual RNs re expectaton to to participate in POD huddle every morning in PODS103 and 104	POD 103 & 104	Day Charge Nurse (with leadership)	July 9th 2015	6%
6	Change Night Charge Nurse routine: L2 assignments finalized @ 0630 hrs post neuro rounds after transfers/tests decisions made	ICU L2	Night Charge Nurse	June 25th 2015	40%
7	Double L3 patients to free up RN to assist with L2 activity for first 4 hours/ busy period/TOA/nursing assessment	ICU L3	Night Charge Nurse	June 25th 2015	40%
8	Double L3 patients to free up RN to assist with L2 activity for first 4 hours/ busy period/TOA/nursing assessment	ICU L3	Day Charge Nurse	June 25th 2015	29%

Step 7: Monitor the results and the process:



Step 8: Standardize successful process:

New standard work has been created and implemented to ensure the changes remain.