



## Capital Health Performance Excellence Program

### Our Services

#### **QUALITY IMPROVEMENT**

##### **Accreditation**

Accreditation is the promotion of excellence through participation in national and international accreditation programs that provide external validation about the quality of services being provided. The Accreditation Canada Qmentum program is used by Capital Health to assess and promote continuous improvement of quality care. Accreditation also provides recognition that an organization's services are meeting national standards of quality.

##### **Performance Measurement**

Performance measurement is a process by which an organization can focus on its actual performance. Performance Excellence works collaboratively with Decision Support to continuously improve performance measurement. The monitoring and reporting of indicator data, as described in Capital Health's Strategic Reporting Framework, focuses on 3 levels: Operational, Organizational, and Governance levels of reporting.

##### **Indicator Development**

Working with stakeholders and Decision Support, we aid in the development of appropriate indicators. Indicators should be aligned with Our Promise and the five strategic streams. Indicator development occurs at three levels; Operational, Organizational and Governance levels. At these levels we track things such as daily operations, evidence of our progress towards the 2013 Milestones and system level performance.

##### **Program Evaluation**

Evaluation is a judgmental process, involving the assessment of findings/observations against standards, for the purpose of making decisions. The evaluation is focused on data-based judgments about program effort, efficiency, effectiveness and relevance. Performance Excellence staff can assist you in evaluating your program by providing guidance in logic model development, evaluation design, data collection and analysis. Performance Excellence also offers a course in Program Evaluation, free of charge for Capital Health employees and physicians.

##### **Patient Experience**

Capital Health has adopted a district-wide patient experience survey process. The survey process includes quantitative and qualitative results for inpatient and ambulatory services. The results are stratified to the service/program level to enable the information to be reported and translated into quality improvement actions. Service/program level results will be reported annually, but collected continuously and interim organizational level results tracked more frequently.

## **EDUCATION**

The Performance Excellence Program offers a wide variety of online and class based education sessions structured around Quality Improvement, Patient Safety and Project Management. Every Capital Health employee is responsible for updating their patient safety training on an annual basis. We facilitate this by providing training to new employees and a variety of online modules in the Learning Management System (LMS) focused on the importance of patient safety and a number of Quality & Patient Safety Round sessions per year. Additional courses offered by Performance Excellence include: Lean 101, Introduction to 5S, FMEA 'just in time' education, and Program Evaluation.

## **PATIENT SAFETY**

The Canadian Patient Safety Institute defines the patient safety culture of an organization as the collective values, knowledge, skills and commitment to safer patient care that is demonstrated by every member of the organization. At Capital Health, every person who works, learns or volunteers must act with an awareness of whether an action could harm a patient and what should be done to prevent or minimize that harm.

In 1999, the Institute for Medicine in the United States released the Report "To Err is Human", suggesting that 48,000-98,000 people were dying in American hospitals as a result of adverse events in their care (Kohn, Corrigan, & Donaldson, 2000). In 2004, the Canadian Adverse Events study (Baker et al.) suggested that as many as 23, 000 Canadians died as a result of preventable adverse events in acute care hospitals and that one in thirteen patients (7.5%) admitted to Canadian hospitals would suffer an adverse event. Thirty-seven percent of these adverse events are deemed to be preventable. The Patient Safety focus is on those events that are preventable. CH has introduced many structural changes and initiatives to improve Patient Safety in CH such as the development of a multi-year Patient Safety Plan, implementation of Leadership Safety rounds, improved communication to staff, and the development of a Quality and Patient Safety template for unit level reporting. Our department provides patient safety training to all new employees in the organization, and offers a variety of electronic courses on LMS that fulfill the annual patient safety education requirements.

## **SYSTEM EFFECTIVENESS AND EFFICIENCY**

### **LEAN and Six Sigma**

Leading and facilitating improvement efforts with clinical teams to eliminate wasteful process steps, and improve system performance. "Lean is a systematic methodology to reduce the complexity and streamline a process by identifying and eliminating sources of waste in the process – waste that typically causes a lack of flow. Six Sigma is a systematic methodology to home in on the key factors that drive the performance of a process, set them at the best levels, and hold them there for all time. Lean looks at what we shouldn't be doing and aims to remove it: Six Sigma looks at what we should be doing and aims to get it right the first time and every time, for all time." From: Lean Sigma: A Practitioner's Guide, Ian D. Wedgewood.

### **Cost Reduction/Containment**

Cost reduction/containment projects are perhaps one of the most significant activities Management Engineering can lead. The strategies can range from extensive employee involvement/suggestion systems to activities focused on particular areas such as staffing and scheduling, skill mix analysis, materials usage analysis, and purchase cost comparisons.

These activities can lead to significant savings with minimal investment in consulting or training expenses. The keys to successful cost reduction programs include setting reduction targets, creating a sense of urgency, encouraging manager and employee involvement in the process, management support and accountability, and organization-wide participation in the program.

### **Flow & Process Redesign**

Work flow and process redesign utilizes a number of techniques to study how people and material resources (i.e. paper, equipment, technology, systems, etc.) interact. The main goals of the studies are to review, recommend and ideally implement solutions that result in improved efficiency and utilization of resources.

Some examples of application are in the following areas: workflow analysis using flow process charts to determine a more efficient flow, workload review using time study techniques to substantiate staffing or scheduling requirements in a department (this helps to streamline processes and is not appropriate to address performance issues) and review of efficient use of space using systematic layout planning.

### **Scheduling Patients and Staff**

Management Engineers can work with managers to design scheduling solutions for everything from outpatient exams to X-rays to meals to surgical procedures. The significant expense of fixed equipment and labor resources makes optimal scheduling an essential financial strategy and patient service goal. Engineers may use statistical techniques such as Queuing theory, demand forecasting, and variance analysis, as well as interviews with patients, staff, and managers to assure optimum flow of patients and availability of staff. Objectives in this work include reduced patient waiting time, increased patient satisfaction, as well as increased staff productivity. Proper scheduling can avoid peaks and valleys in workload and reduce staff expenses.

### **Benchmarking**

Some operational reviews benefit from conducting a benchmarking analysis. Comparable clinics/services at other Canadian hospitals, or within Capital Health, are surveyed or interviewed for information and data that would allow for an assessment of how the service under review measures against the benchmarked sites. Also serves as a means of seeking and identifying best practices. Benchmarking is the process of comparing one's business processes and performance metrics to industry bests and/or best practices from other industries. Dimensions typically measured are quality, time, and cost. Improvements from learning mean doing things better, faster, and cheaper. Benchmarking involves management identifying the best firms in their industry, or any other industry where similar processes exist, and comparing the results and processes of those studied (the "targets") to one's own results and processes to learn how well the targets perform and, more importantly, how they do it.

### **Computer Simulation Modeling**

Developing computer models which accurately simulate real life systems, clinics or processes in the hospital using computer programming. The models provide value to the user by enabling them to change operational conditions and test the results. These changes may be expensive, or impossible to test in real life, the model can allow new ideas and solutions to be tested in a digital environment. Simulation modeling can be used to improve resource utilization, scheduling, system throughput, efficiency and other key operational functions.

## **Data Analysis and Presentation**

Lead review and provide project support using effective data collection and analysis methods. Collect information and data from analyses using time studies, data system reporting, work travelers and other techniques. Use statistical analysis to provide insightful results, and develop practical solutions. Publish results by packaging summary reports, presentations and maps to be delivered to the end user, or team to aid in their decision making process.

## **Project Management**

The Performance Excellence Program uses Project Management processes to support large operational reviews, work flow, process redesign and patient flow initiatives. Applying a process of systematic planning and coordination to a major project helps to ensure success. The most important aspect of project management is the creation and adherence to a well-thought out and realistic plan. Project Management components can include: Writing an Objective Statement; Assembly of a Project Team, Developing an implementation plan (perhaps including a project map); Implementation of that plan including regular monitoring through status reports.

## **Operational Review**

Operational reviews are large overall analyses of an organization, program or department that are conducted to identify gaps in service or major issues with the operation of the area. The recommendations produced are usually general in nature and advocate taking a closer look at specific processes or procedures in defined areas. Generally support systems including procedures, policies, skills, equipment and technology are studied.

## **Operational Planning**

Operational planning includes working with stakeholders to provide more responsive and proactive facilities to support both long and short term business needs. At the same time minimizing employee disruption, and maximizing productivity by providing quality and efficient work environments.

## **Utilization Management**

Utilization Management is a process of managing resources through a multi disciplinary approach. UM includes both utilization review and management. The review process involves analyzing utilization data and comparing performance to standards to assess utilization patterns. From there, UM strategies are identified and implemented to address trends.

**If you have any questions, please contact:  
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Capital Health requests may be submitted at the following project request link:  
<https://survey.nshealth.ca/TakeSurvey.aspx?SurveyID=71LH3625>

