



Niki Rodine, RN and Clinical Improvement Facilitator, took her passion for change to the NEXT level.

STAFF FIND A VOICE THROUGH IMPROVEMENT BOARDS AT SUN COUNTRY, ALL PROBLEMS DESERVE A PLACE ON THE BOARD

Niki Rodine, RN and Clinical Improvement Facilitator at Sun Country Health Region beams with pride when asked how Improvement Boards make a difference in healthcare. “It’s great to see a relatively simple idea transform communication between staff and supervisors/managers on issues that are important to frontline staff,” she says.

Niki was introduced to the Improvement Board concept when she attended a presentation by the Saskatchewan Surgical Initiative in

November 2011. “I came back with a passion to spread this great idea,” she said.

Niki’s own project overload actually became the impetus for implementing the Boards. “I was finding it really difficult to keep track of my projects and ideas,” she says. “I felt like a hamster spinning on a wheel not really seeing any changes or progress.”

She got busy and created an Improvement Board in her office with sticky notes of all her ideas and projects. From that starting point, she would move all these sticky notes across the Board as she completed items, “It really helped me and my manager actually see how much I had on the go,” she describes. “It also gave me a great sense of accomplishment when I was able to move something into the completed area!” ▶

Her passion for improvement was kicked up a notch from there. "I wanted to get all our staff to speak up about the issues they come in contact with on a daily basis and hear their ideas on how to solve those issues," she says. Niki knew that many of her colleagues felt that their voices were frequently being lost amongst other agenda items at monthly staff meetings or that their improvement ideas were dropped somewhere along the approval process.

With Improvement Boards, those frontline employees now had a voice. "Improvement Boards are frontline-driven and make improvement visual," says Niki. "They help all parties remain accountable, but more importantly, they move things along in an efficient manner that maintains staff interest."

The Boards have produced not just buy-in, but solid results. Niki highlights how they have been instrumental in getting over 100 frontline staff ideas implemented. "In most cases, they were often simple things that managers didn't realize were a cramp in the daily activities of staff," she says.

The Boards help promote an improvement-focused culture and allow staff to realize they do indeed have a voice. "Staff knows that complaining goes nowhere," she says. "Now they see the power of using their voice to make improvements. This is definitely a move in the right direction."

The next step is to continue to implement them in all facilities, track progress and follow up with staff to see how they feel about the whole process.

"There are no big problems; just a lot of little problems," Niki quips, quoting Henry Ford. Her experience with Improvement Boards is proof that when you break down the problems, change is possible. ■

COLLABORATION IS UNITING SUBSCRIBERS IN THE WEST... IT'S THAT SIMPLE!

A NOTE FROM THE EDITOR

On a recent trip out west to meet with some of our subscribers, I was amazed by all the positive projects taking shape right before my eyes. The one thing that stood out in all these projects is that simple ideas and a little collaboration can lead to incredible change and transformation.

The end goal for all this collaboration: ensuring patients receive care in the safest healthcare system and those caring for them have all the tools and resources at their fingertips to do their job well.

"It's very clear that our healthcare landscape is changing," Susan Bowen, VP Western Region said to me as we drove along a snow-covered Highway 1 (in April) from Winnipeg to Regina. "What's impressive to me is seeing our subscribers out west moving along with the change and not simply standing on the sidelines."

In a time where healthcare is being pulled in so many directions, we're seeing exactly who is adapting, but more importantly, how they are adapting. The endless demands and the pressures are not short-circuiting the human urge to collaborate for change. It's just that simple!

As we continued our drive west, Susan, with her knack for helping others connect the dots, shared how HIROC is adapting to the changing healthcare landscape. "Connecting with our subscribers daily has helped us fine-tune our services," she said. "From the FAQs to the Risk Assessment Checklists program – we're truly in touch with our subscribers' needs and we're constantly adapting based on what we hear from them."

About 600km later, we arrive in Regina, where the final dot falls into place. "You see Philip," says Susan with a smile, "you take this unique Canadian company, which also happens to be a not-for-profit, add over 500 healthcare organizations that are committed to providing superior healthcare, and what does that equal? A 'reciprocal' relationship for success."

Welcome to the Western edition of Connection (our first!). Take a few moments and find out how collaboration is helping move healthcare forward in the west! Thank you to everyone who shared their stories. **All it takes is one voice to make a difference - a safe healthcare system is everyone's business.** ■

Philip De Souza

HIROC PARTNERS WITH ACCREDITATION CANADA

A "go-to-partner" for HIROC on quality improvement and patient safety, Accreditation Canada, held a special event in Edmonton on May 9 and 10. The Quality Conference brought together over 200 delegates who shared successes and strategized on maintaining the positive changes implemented in the healthcare system.

Keynote speaker, Hugh MacLeod, CEO of CPSI (Canadian Patient Safety Institute), spoke about their motto – Ask.Listen.Talk. – and showed how it can help create a culture of safety. "It's really about strong leadership and a healthy, engaged workforce committed to a common vision," Hugh said, "And we must never forget the voice of the patient!" He urged delegates to ask, listen, and talk to our patients and clients - "It's an integral part of planning and delivering safe, high-quality care," he said.

"Accreditation Canada has had the pleasure of partnering with HIROC in support of several of our national conferences," said lead organizer, Monica Lovas at Accreditation Canada. "We believe that HIROC takes a genuine interest in the importance of a patient safety culture and the role it plays in advancing the quality and safety agenda in the healthcare community." ■

For more information on this event, visit www.accreditation.ca



Accreditation Canada staff welcoming delegates.



Rick Farrant (right) shares his thoughts with HIROC's Susan Bowen on the value of being heard.

TRANSFORMING PATIENT CARE THROUGH COLLABORATION: NO PLANS WITHOUT THE PATIENT PERSPECTIVE AT FIVE HILLS

Have you ever said, "If only someone asked for my opinion, things would be different in healthcare?" Well, that's exactly what happened to Rick Farrant, a 67-year old from Moose Jaw, Saskatchewan and a recent patient in the Five Hills Health Region.

After a brief stay in hospital, Rick received an interesting phone call from Bernie Doepker, Director of Community Engagement at the Moose Jaw Union Hospital. "I was asked to participate in a design workshop as a patient representative," he said. "I was amazed that someone actually wanted patient input – I was very skeptical of this whole process."

The phone call was only the beginning of a series of surprises for Rick. When he arrived at the workshop, Rick was amazed to see board members, directors, the CEO, and other professional people waiting for him and the other invited guests. "I thought I was going to some fancy Tupperware party," he says, "I wondered, what am I doing here with these people?"

He quickly began planning a getaway strategy with another skeptical patient representative, both of them plotting how they could leave after ▶

lunch. But what happened that day made Rick glad his getaway strategy was never put into action. “They were actually listening to us,” he says. “They weren’t telling me what to say, rather, they were asking questions and were eager to hear what I felt would work in a hospital.”

Planning was underway for a new facility in the region and the hospital was determined to do things differently. Rick describes going to the first meeting in a giant warehouse, a location chosen so they had room to build mock ups of the various rooms, departments, and operating theatres to scale. Together, the patient/family representatives, healthcare providers, and architects would collaborate to map out the flows of patients, providers, and supplies.

What the hospital heard from patients and other stakeholders gave them pause and prompted them to re-evaluate the ways things were traditionally done. While brainstorming the design of the mental health unit, the group saw initial renderings that had patients having to walk through the entire unit to see reception. “From a patient perspective, that didn’t make sense to me,” says Rick, “so, we suggested that they move reception to the front and then have the patient moved directly into a treatment room so they wouldn’t have to be moved from room to room.” This change was included in the final design.

“I believe that the path that Saskatchewan healthcare is taking is the right path to providing the best service and healthcare to everyone in our province,” concludes Bernie Doepker, “and collaborating with our patients/ family members is a must for this journey.”

“It’s just amazing to know that I have made a difference in our healthcare,” Rick proclaims with pride, but more importantly he notes, “And all the more amazing when patients come first!” ■



Dr. Barb Konstantynowicz's personal mission creates a culture shift.

REMOVING BARRIERS TO IMPROVE COMMUNICATION

While sitting in a committee meeting to discuss the hiring of new physicians at Regina Qu’Appelle Health Region, Dr. Barb Konstantynowicz, a family physician, wondered to herself if certain blockages could be eliminated to help patients get the best care.

What did she do? She took action and brought many along for the ride. “I approached the key players with the goal of improving communication,” she says. After receiving permission from the senior medical officer, Dr. Joy Dobson, to pursue her passion of educating her peers and removing barriers, she was able to consult with the various department heads (family medicine, medical imaging), the executive director of laboratory and diagnostics, as well as the quality officer so everyone was on the same page.

The result has created fundamental changes in the way doctors function and care is delivered at Regina Qu’Appelle. The physicians and radiologists are now working together with improved communication so they can provide the most optimal test to order. “Patients have fewer people to see, they no longer feel ignored or that they are being juggled,” Dr. Konstantynowicz said.

Barb’s quality improvement initiative has done a great deal to reduce physician frustration and help improve patient access. But more importantly, she feels it’s helped create a culture shift. “We know it has improved physician knowledge and improved communication between family physicians and radiologists,” she says.

When asked what drives her passion, she puts the emphasis back on why she studied medicine and says with a smile, “You never stop, you always look for quality improvement, you always look to improve patient care and safety,” she says. “That’s why we’re here!” ■