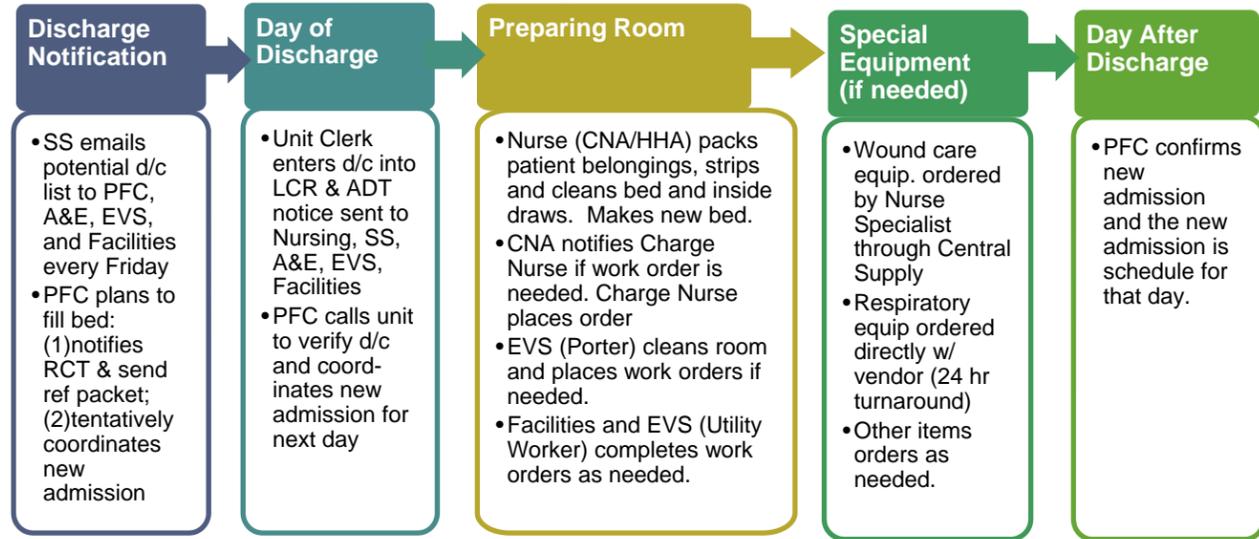


I. Background:
 During Laguna Honda's first VSM Workshop, which centered around the new admission process, it was determined that room readiness would be the focus of our 3rd Kaizen. With improvements made to the pre-admission process through our 1st Kaizen, the number of potential residents on Laguna Honda's waitlist has increased significantly. With a high demand for beds, we need to review our processes of preparing rooms/beds for new admissions.

The Process boundaries are from when the room and bed are vacant to when the room and bed is ready for a new patient. This is a collaborative effort between Nursing, Social Services, Environmental Services (EVS), Facilities, and Materials Management. Nursing & Social Services notify EVS that a room is vacant. EVS ensures that rooms are cleaned thoroughly. Facilities makes any repairs to the room or equipment in response to work orders. Materials Management facilitates any requests for new/special equipment for incoming residents. Nursing cleans the furniture above the grounds, the mattress and bed and makes the bed. In the current state, this process can 2-7 days to have a room prepared and ready for a new admission or relocation.

II. Current Conditions

Abbreviations: PFC - Patient Flow Coordinator; SS – Social Services; A&E – Admissions & Eligibility; d/c – discharge; RCT – Resident Care Team; ADT – Admission, Discharge Transfer list



Problem Statement:

Vacant rooms are scheduled to be occupied by a new admission within 24 hours of a discharge. However, the process of cleaning and repairing a room after a discharge can take several days which often leaves rooms unprepared and/or unrepresentable when new residents arrive.

III. Goals & Targets

- 1) 100% of discharges get the "Facility Room Readiness Inspection Checklist" by Facilities Dept. when notified of a discharge (planned and unplanned).
- 2) 100% of vacant rooms pass quality assurance on first attempt after work is completed by Operations and Nursing.
- 3) 100% of time room is ready within 24 hours.

IV. Analysis

WASTES Observed from the Gemba

Nursing

- Did not use inventory list when packing belongings
- Looking for charge nurse
- Personal belongings still in room
- Breakdown in communication between roles
- Stained linens from clean linen cart
- Damaged dresser not reported
- Bedside table legs dirty
- Did not have packing box available and used plastic bag
- Bed made before facilities can complete work

EVS

- Stains on door
- Has to wait until nursing is finished to clean the floor
- Leaky faucet
- New shower curtain touched dirty floor
- Broken shower hooks
- Sticker left on baseboard

Facilities

- Unnecessary removal of equipment
- Picture missing from wall
- Light bulb string – one was missing, one was dirty
- Damaged drawer
- Unclear work order report taking longer time to assess problem

Root causes

- Not a clear communication path for when a room becomes vacant and what to do.
- No standardize definition of what a ready room is.
- Confusion on the units on who does what (EVS, Nursing, Facilities) and in what sequence.
- No initial and final assessment done of room before a new patient is admitted.
- Work order missing identification of who found the issue/problem.

V. Recommendations / Proposed Countermeasures

If We	Then We	Expected Results
1. Have a checklist that defines room readiness,	Will know when a room is ready	Visual cue in room that indicates vacant room is ready
2. Have a final assessment for Nursing, EVS and Facility to complete,	Will know a room is ready	Final Assessment document with designated person signing the form
3. If we add a box on the work order (WO) for who reported/found the issue,	Will find the person to explain the issue further preventing confusion and/or steps	Faster resolution to the WO
4. Create inventory tools and process	Will have residents' belongings inventories and packed boxes	Faster and more consistent resident belongings are removed from room and cleaning can start
5. Provide supplies training and info	Will be consistent with following the 7-steps standard	All rooms prepared pass inspection
6. Create a structured workflow to ready the room	We will reduce waste and over processing	Reduced defects of room not passing
7. Create standard work for communication between Facility, EVS and Nursing	We will reduce motion and avoid repetition of work.	Vacant rooms are ready within 24 hours of discharge

VI. Plan

#	Action Item	Owner	Due	Notes	Status
1	Conduct the Facility pre-assessment checklist to complete when a planned discharge notification is received.	Diana Kenyon	6/16/17	Start as of 6/17/17	Completed
2	Pilot on S3 the sequence and checklist of preparing a vacant room for a new admission.	Diana Kenyon Jacky Spencer-Davies Maxwell Chikere	6/30/17	Pilot week of 6/26/17.	Completed
3	Spread hospital wide the sequence and check list of preparing a vacant room for a new admission.	Diana Kenyon Jacky Spencer-Davies Maxwell Chikere	8/31/17	Need to develop a spread plan	
4	Determine if colored card to be placed in the corridor in the room # nameplate.	Kath Durand Rosemary Beltran	6/30/17	Mock up completed and it will be tested on S3.	Completed
5	Develop a resource guide for work order entry users to improve efficiency.	Diana Kenyon Maxwell Chikere	7/6/17		Completed
	Train nursing team	Crystal Figlietti	7/30/17		
6	Develop standard work for Social Services notification of upcoming discharges to the community	Janet Gillen (Elizabeth Schindler)	6/30/17		Completed
7	Implement a ongoing schedule for inventory and exchange of low bed.	Mivic Hirose	6/30/17	Finalize data collection spreadsheet. Begin weekly/monthly (tbd) review.	Completed
8	Develop a performance improvement plan for Linen Vendor to provide quality linens and meet standards per contract	Maxwell Chikere	6/30/17	Improvement plan in place and will be monitoring.	Completed

VII. Follow-Up

- 30 – 60- 90 target sheet metrics
- 4 post workshop weekly meetings with Process owner and sponsor to review progress on implementation and completion of the Kaizen action bulletin
- Report out to Executive Committee, Quality Council, Dept. meetings and other appropriate meetings