

MITIGATING ENTERPRISE RISKS:

Optimizing the Reactivation Care Centres' Weekend Admission Process

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DESCRIPTION

Alternative level of care (ALC) patients transferred from the acute units at Humber River Health (HRH) to its Reactivation Care Centres (RCC), are admitted into site-specific patient accounts. From the inception of RCC in 2017, the medical model of care supported Monday to Friday (9am-5pm) admissions. In early 2023, Ontario Health Toronto and HRH focused on access and flow, optimization, and occupancy, which catalyzed the development and implementation of the RCC Weekend Admission Process. Following program and unit leadership changes, frontline providers identified risks, which highlighted the need for process optimization to assure patient safety, process fidelity, documentation accuracy, and data quality.

OBJECTIVE

To develop a RCC Weekend Admission Process that mitigates enterprise risks and optimizes bed occupancy.

ACTIONS TAKEN

- Stakeholder engagement for Version 1 patient account workflow process mapping identified risks to patient safety (orders, medication administration, and documentation) and process fidelity (process timelines and account types).
- Following implementation of the updated Version 2, PDSA cycles identified additional risks to data quality (Ministry of Health daily census report and discharge destination) and site documentation (organizational, patient, and provider).
- Version 3 required a pivot from processes in prior versions, towards the adoption of weekday workflows, with the addition of standardized documentation and RCC manager oversight.

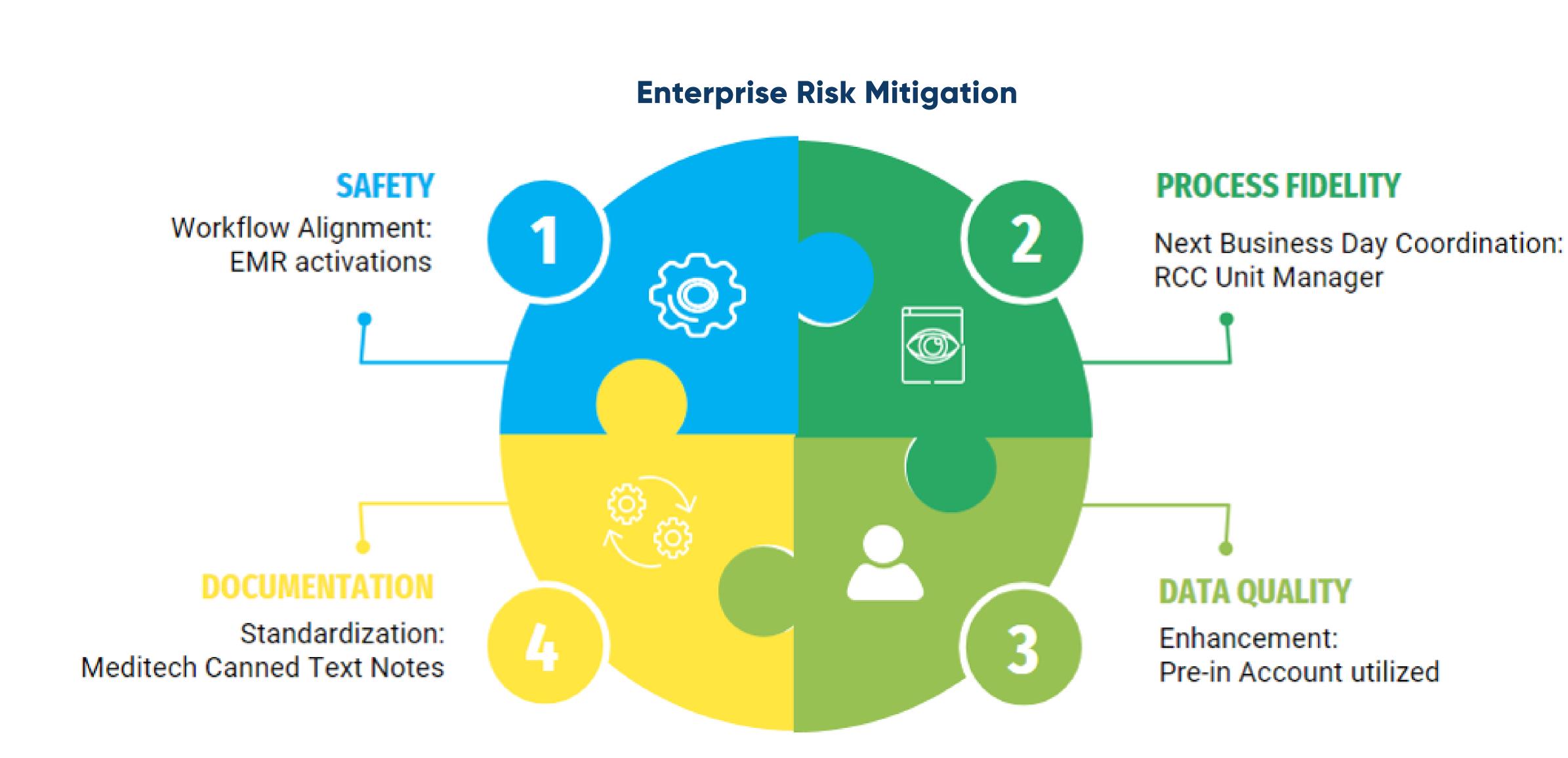


Figure 1. Identifies the domains of enterprise risk and the mitigation improvements in Version 3 of electronic medical record (EMR) activation workflows, next business day RCC manager coordination, standardized Meditech documentation notes, and enhanced pre-in account for the RCC Weekend Process.

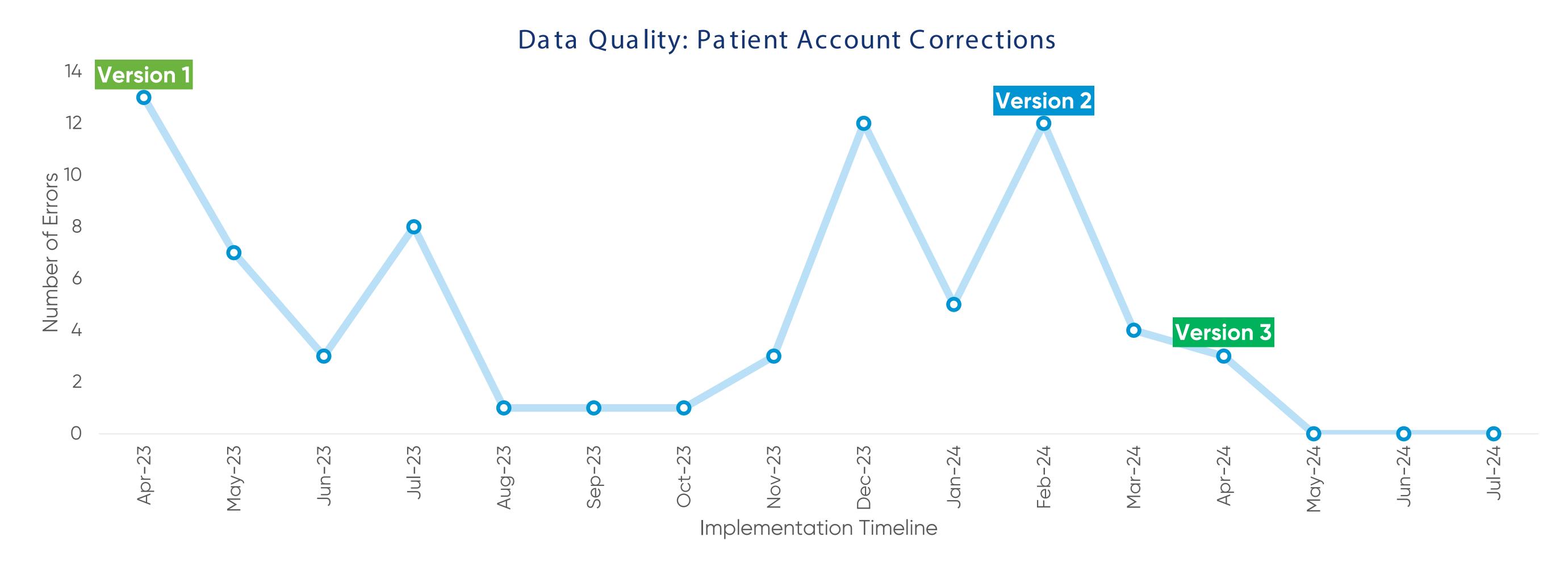


Figure 2. Timeline demonstrating improvements in data quality for patient accounts following Version 3 implementation.

Version 1 March 29, 2023	Version 2 February 3, 2024	Version 3 April 13, 2024
	RCC Patient with Wilson Account	
Wilson Account transferred to WRCC Ghost Account Backdated date/time to admission to RCC		RCC Manager Notification: Pre-in Account created
	RCC Manager Co	oordination: Time Delay
Register Patient RCC Account Backdate date/time		Wilson Account discharged Backdated date/time of Wilson discharge
WRCC Ghost Account discharged Backdated date/time RCC Account creation		Register Pre-in Account Backdate date/time 1 minute after Wilson discharge
		Wilson Account location corrected

Table 1. Details the next business day process evolution of creating and assigning the patient accounts in the RCC Weekend Process.

SUMMARY OF RESULTS

Following Version 3 implementation:

- 100% Weekend Admissions had RCC manager coordination
- 100% Version 3 PDSA cycles identified no risks
- O Quality Risk Management (QRMs) missed medications or order errors
- 0 data quality errors
- 0 registration errors
- 100% stakeholders endorsed adoption of Version 3
- 100% enterprise risks in RCC Weekend Process solutioned

RCC Weekend Process is embedded in organizational operations and supporting RCC bed occupancy of 96% in fiscal year 2024/2025 to date.

LESSONS LEARNED

Complex process implementation requires strong change management oversight, including stakeholder engagement, PDSA cycles for evaluation and adoption, and engagement to iterate and develop effective solutions.