

# THE Productive Times

ISSUE 1 The Productive Ward and Paediatrics – Wolverhampton New Cross Hospital

**EXCLUSIVE: NURSES GO HOME ON TIME PAGE 2**

## The WOW factor

Wolverhampton's New Cross Hospital is releasing a significant amount of extra hours on its children's unit to spend with patients and their families, thanks to The Productive Ward programme.

The paediatric unit has increased direct care time by more than a third in six months, thanks to The Productive Ward programme from the NHS Institute for Innovation and Improvement, which they have been implementing over the past six months.

The Well Organised Ward (WOW) module has dramatically reduced the time staff spent running around looking for things or interrupting each other. By videoing staff on the ward going about their usual daily routine it was easier to identify where time and effort was being wasted and how they could make changes. Studies have now shown that staff have reduced time spent in motion from 100 minutes a shift to just 20 minutes.

Becoming a Well Organised Ward means more than a tidy-up: the team redesigned the rooms on the unit, created a smart accessible storage system and dedicated rooms where children can play computer games or undergo treatments without being interrupted by staff preparing drugs. The team also returned £1,500 worth of drugs that weren't used and cleared out unwanted or broken equipment. Keys



have been colour-coded to speed up drug preparations.

Project facilitator and staff nurse Laura Patrick explains: 'A lot of the time we couldn't find anything so we would reorder it. It was manic - there was stuff everywhere. We had a treatment room which was also used for drug preparation. Children undergoing treatment are already nervous so it didn't

help having people coming in and out all the time.

Now the unit has a drug preparation room and store room. If we can't see it, we know it's not there. We've cleared another room to use solely as a treatment room, so no more interruptions!

The end result of WOW is a much calmer environment which increases staff morale and is

comforting for patients and families, who feel reassured by the atmosphere and greater accessibility to staff time.

Ward manager Karen Allen said: "It wasn't until we watched the waste walk video that we saw what was actually happening and asked ourselves, 'is it really like that?'. We'd run it every afternoon for the first few weeks as a training and

education exercise for staff to see what the ward was like from the parent and child's point of view

'At one point I actually moved my office into a store room, so that the actual store cupboard could be next to the treatment room. It was necessary, but not ideal. We have much more of a team spirit here now - which makes it easier to work here - and makes my job easier too'.



Storeroom before



Storeroom after



# Why The Productive Ward tastes better

**A**fter four years and no takers, liver and onions is finally coming off the menu at the children's unit in Wolverhampton's New Cross Hospital.

The appointment of a new catering manager proved to be the perfect time to begin the Meals module of The Productive Ward and has been really useful for reviewing the menu, how food is ordered and how the meals arrive on the ward and are distributed.

Research showed the unit spent £75 a day on snack boxes, including crackers and other snacks. Most of the contents were being thrown away uneaten. Now children can choose snacks individually. New items on the menu include jacket potatoes with a choice of hot and cold fillings.

Food is now ordered on the day instead of 24 hours earlier, which helps patients – who have an average stay of 0.7 days – get the food they ordered and reduces unwanted or over-ordered meals.

Providing a child-friendly menu in appropriate portions will also help reduce the number of parents bringing in food, including fast food.

There are no longer separate meal trolleys for younger and older children and two staff now work together to hand out meals. Patients now get their food

in half the time.

Play leader Zoe Lea is leading the module: 'We are changing the way we all work around mealtimes to help save time and money. If children eat, they feel better and, in turn parents also feel better psychologically and don't fret about them not eating'.



## EXCLUSIVE: Nurses go home on time!

Nursing staff have halved the time it takes to do a shift handover, helping to free up hundreds of additional hours to spend with patients and their families – and



more time with their own families.

The staff on the paediatric unit have combined the Shift Handover module with Patient Status at a Glance to release 1,600 hours in six months for direct care time.

The team have saved 50 minutes on each handover – with one of the major benefits that staff no longer leave work 20 minutes late. Nurses no longer spend the day worried about whether they might be late for family commitments.

Staff coming on shift can spend more time with their patients. Ward manager Karen Allen adds: 'time spent with patients, and particularly families, increases the quality of care we provide'.

## Dear Project Manager...



**There are so many staff here, it's going to take ages to tell them all. Do I need to?**

Yes, it's essential. Spending time at the beginning of The Productive Ward making sure everyone knows what you are doing and why, will pay dividends as you go through the programme. If you don't involve everyone at the very beginning, you'll find it much harder to call on them for support further down the line.

It is vital to get the goodwill of all staff. Involve the cynics where possible – they can be your biggest supporters once they are proved wrong!

Paediatric ward manager Karen Allen agrees: 'There are 64 staff on our unit and it was very difficult to get around to everybody. If I did it again, I would spend much more time preparing and talking to everybody. You need everybody on board'.

**How can we get our clinicians involved?**

We found the Patient Status at a Glance was a very effective way to get visiting staff and clinicians on board. They might not think that improving organisation and handovers has much to do with them, but being able to see key information about patients at a glance - without having to track down a nurse to ask - shows them how much easier a productive ward is to work on.

**Can we do this on our own?**

Leadership is crucial to this project. In order to free up resources and staff time to concentrate on the project, you need to have active support from nursing leaders and the trust board. We had a director of nursing and clinical director who provided a lot of support to the project team. Trust board members also attended Productive Ward open afternoons every week. In the day-to-day management, the ward leader is the most influential person, but all the senior level people have been crucial in keeping momentum going.

**I don't think The Productive Ward will work on our specialist unit.**

When we were looking for showcase wards in our hospital, our paediatric unit was one of the strongest contenders. Its staff were so enthusiastic. The modules were easily adapted to particular issues. The one area that did need some significant rethinking was how we measured specific things – like falls for instance. Children have a tendency to fall over frequently. How could we measure this?

In my experience paediatrics has been one of the most successful wards and has saved the most time – saving 1,600 hours in six months.

## Newsletter launched

New Cross will be launching a new Releasing Time to Care monthly magazine to keep staff up to date with The Productive Ward work going on in the hospital. With 32 wards now taking part, or about to take part, in the programme, the Trust's project team have recognised the need to share information. The magazine will provide regular updates, and share advice and ideas with wards going through the different modules.

## The Wii room opens

A new dedicated Wii room with a games console is proving particularly popular with teenagers on the ward. The room was created following a reshuffle of rooms during the Well Organised Ward module.

# Patient Status at a Glance

Staff on the Childrens' Ward at New Cross not only know where to find items, but also where to find patients - thanks to the Patient Status at a Glance board.



The board is now in the ward manager's office and is increasingly being used by therapists and clinicians to find their patients, instead of interrupting or asking ward staff. It is proving to be a great way to involve clinicians in The Productive Ward programme.

The board is still a work in progress and is used in combination with names, ages and a diagnosis book.

Karen Allen comments:

'everyone can come in and look at the board. Theatre assistants use it when they collect children for operations and nurses change it for their patients. Over the two months that we have had it, it has been regularly updated and maintained.'

Pamela Wade, from the children's hospital school adds: 'first thing in the morning we always look at the board for the name, age and location of all the children on the ward. It saves us going from door to door to find the information we need because it's now all on the patient status board. Before we had to find the ward book to get the information and we were all looking for the same book! It's been a huge improvement and it also gives me the chance to see the ward manager every morning because the board is located in her office.'



## Job opportunities The Productive Ward has brought to New Cross Hospital

### SECONDMENT OPPORTUNITY: Project Administrator

David Bartlett was seconded onto the team in February 2009 as the Clinical Administrator. He had been working as an auxiliary nurse for 15 years, 10 of which were on the same ward. 'I never saw myself as doing anything else' he admits and, although he had studied computing in his own time, he had never used the skills at work. 'The job has brought my IT skills up to scratch and my communication skills have gone through the roof. I meet new people every day.

I knew something had to change on the wards. When I was told about the project, I was hooked.'

His role includes providing support to the team and working closely with the wards on the programme, helping them with their projects. This can include everything from creating labels for shelving in new Well Organised Ward store rooms to making sure they have got the equipment they need, such as magnetic white boards for Patient Status at a Glance boards. 'I don't miss the ward because I love the project and helping the wards get their working areas right to 'be all they can be'.

### SECONDMENT OPPORTUNITY: Project Facilitator

Paediatric staff nurse Laura Patrick became project facilitator in February 2009 after five years as a nurse.

She said: 'It's fantastic what can be achieved. It has made me look outside of the box more and see that I can change things. Rather than wait for things to be done by someone else you can put your hand up. It's a totally different experience. I would never have thought a few years ago that I would be facilitating, and if it wasn't for this project, I still probably wouldn't be doing it.'

In her new role she supports the project leader and facilitates staff on the wards to work through the modules. The highlight of the work for her has been seeing the change created by the Well Organised Ward - which has had the most impact for staff and patients.

Her ward manager Karen Allen comments: "She's developed tremendously, and she has been a wonderful support. I didn't want to lose her as a nurse, but I can see the benefit of what she is doing now'.

## 60 seconds with... a Clinical Leader



Dr Chrisantha Halahakoon is a consultant paediatrician and neonatologist. She is also clinical director of paediatrics at New Cross Hospital.

### What were the issues before The Productive Ward?

There were a number of issues on the ward which needed to change. We have fewer patients now but those we have are more seriously ill. We've reduced the number of children having to be admitted by doing paediatric assessments first, but there were still concerns that the nurses didn't have enough time to see patients. We heard about The Productive Ward, and I was pushing for lean methods, so it made sense.

### Did it matter that paediatrics was a specialist ward?

Paediatrics is like a mini hospital and not like a specialist ward. You have all the different specialisms right here in one place and it's often hard for the nurses to keep their skills up in all these areas.

### Did it make a difference?

We needed to do something radical. We had a lot of clutter so often if I needed something, I could never find it and would have to call a nurse to help me.

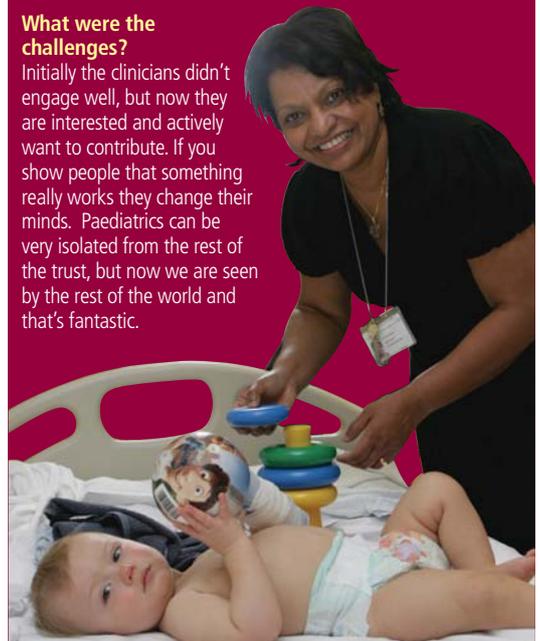
We have now shown the improvements that can be made and, in turn, that it has improved the amount of time nurses can give to patients. The staff are happier and you can see they are more content. Parents have noticed and have commented that the nurses are more engaged and have more time to look after their children.

### Is it finished?

We are tackling things one at a time: we are on a journey now and we don't want to stop. It's not always easy to change the mindset or the culture. You have to start with small changes and gradually build on them.

### What were the challenges?

Initially the clinicians didn't engage well, but now they are interested and actively want to contribute. If you show people that something really works they change their minds. Paediatrics can be very isolated from the rest of the trust, but now we are seen by the rest of the world and that's fantastic.



## Project Leader

Project Leader Clare Nash took on the project leader's job in June 2008. She was sceptical at first: 'I felt I didn't have the skills, but this has probably fitted me better than any job I have ever done'.



# The Latest Score

The paediatric unit has so far worked through Knowing How We are Doing, the Well Organised Ward, Shift Handover, Patient Status at a Glance and Meals, and many of these modules are still ongoing with improvements being made all the time.



## Saving time

- Increase in direct care time from 21 per cent to 35 per cent.
- Time spent in motion reduced from 23 per cent to four per cent in six months.

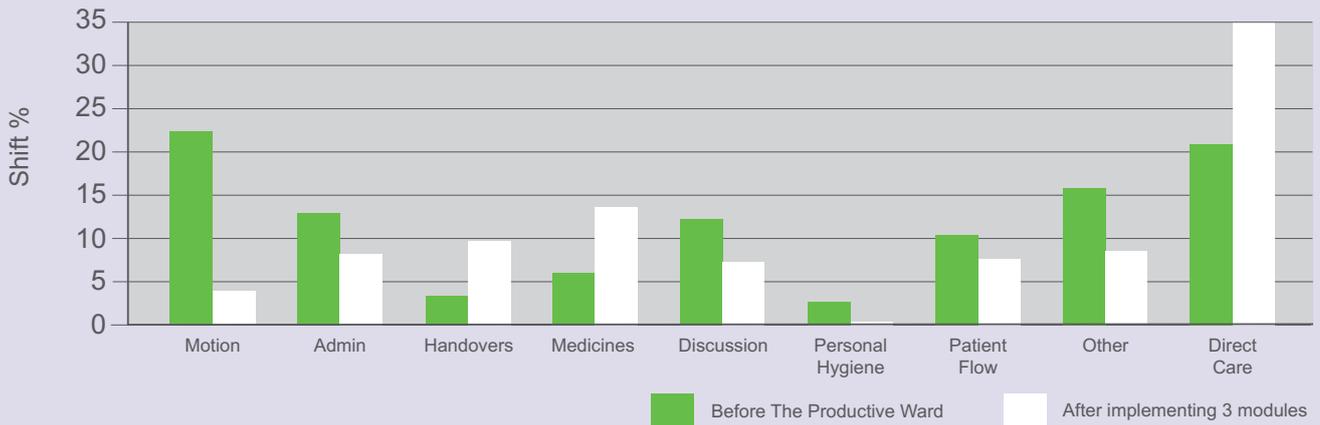
This translates to a calm environment where staff can spend more time with patients and families, and also instil confidence in the ward and their colleagues by not running around in a state of panic.

Ward manager Karen Allen comments: 'The children on the ward are often out playing, or in school, so a lot of that direct care time is spent with the families, talking to them. The ultimate measure is in the satisfaction levels of patients and families on the ward. The team know that staff spend less time running around looking for things and interrupting each other while each of them is with patients and families. Parents who have been regulars on the ward have commented to staff that the ward feels quieter - even though the ward may be full - because of the calmer environment.'

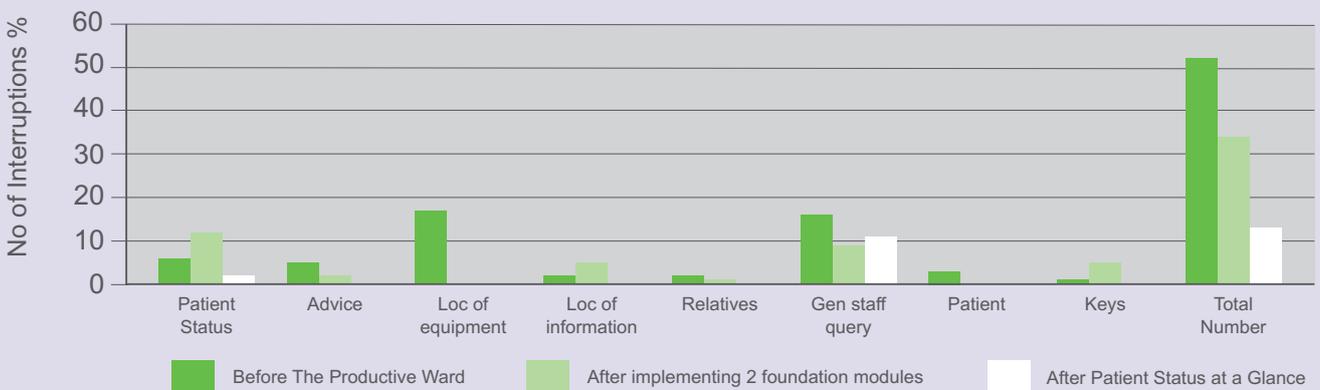
Parent Parminder Mehat said: 'I had never been in a hospital until I had children but I feel the staff have been really welcoming and friendly'.



## Activity During an Early Shift



## Interruptions on shift before Productive Ward (Average interruptions per hour – 6)



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