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LEARNING HOW TO MAKE MORE TIME FOR PATIENT CARE GOAL OF RESEARCH TRIP TO BRITAIN

Representatives from government, regulatory organizations, a union and regional health authorities will spend September 22-26, with a delegation from New Zealand, in Britain learning how to implement a program that allows nurses to spend more time in front-line patient care.

The United Kingdom-based program is called "Releasing Time to Care: The Productive Ward". It empowers nurses, and other members of care teams, to look at how their ward is organized and to make changes that allow them to spend more time with patients. In Britain, the program has enabled nurses to more than double the time spent on direct patient care (from 20 per cent to 45 per cent), cut handover time on shift changes by a third and reduce time spent on medicine rounds by 63 per cent.

Saskatchewan Health Minister Don McMorris, the Health Quality Council, officials from Regina, Saskatoon and Five Hills health regions, Saskatchewan Registered Nurses Association, Saskatchewan Licensed Practical Nurses Association, and the Saskatchewan Union of Nurses will be meeting with their counterparts, the National Health Services Institute for Innovation and Improvement (which developed the program), Nottingham University Hospital and University Hospitals of Coventry and Warwick (flagship hospitals where the program is in place), and the National Institute for Health and Clinical Excellence (which identifies standards and evidence for best practices). Seven delegation members will be learning to become master trainers so they can lead the program's implementation in Saskatchewan. As evidence of the collective desire to create a more efficient workplace, each organization is paying its own travel and accommodation costs, with the Health Quality Council picking up the tuition fees.

"There is more than enough work for everyone in the health care system and we need to make sure everyone is working to their full scope of practice so that we use our valuable human resources most effectively," McMorris said. "It's critical that we enable nurses to spend more of their time providing care and service that add value from the patient's perspective. The patient's perspective will be a key element in our upcoming Patient First Review."

The plan is to test pilot the program in one ward in Moose Jaw Union Hospital, then make it available in early 2009 for all health regions to test in one ward. Any necessary adjustments will be made and then it will be rolled out across the province as soon as possible thereafter.

"The Releasing Time to Care Program is part of the \$5-million Accelerating Excellence initiative led by the Health Quality Council," Health Quality Council board chair Dr. Marlene Smadu said. "One of the HQC's key roles in our health care system is to seek out and learn from high performing-systems elsewhere that engage and involve front line care providers. Providing them with the tools and confidence to make changes is critical in improving health care quality and safety. When we involve people working on the front line, our diagnosis of problems is richer and the solutions reached are far more relevant."

"It is an exciting opportunity to focus together on nursing strategies that improve patient outcomes and nursing leadership at the local level," Saskatchewan Registered Nurses Association executive director Donna Brunskill said. "We saw exciting results before in our quality workplace program but this has the potential to put that program on steroids."

"We are happy to commit resources to this process," Saskatchewan Association of Licensed Practical Nurses President Cynthia Gutek said. "While by no means the first or only productivity initiative in Saskatchewan, this one may be one of the most ambitious and inclusive. We see great potential for positive outcomes for the people of Saskatchewan."

"Evidence shows that patients who receive more hours of direct care from Registered Nurses (RNs) and Registered Psychiatric Nurses (RPNs) recover faster, and have better outcomes. If our colleagues in the UK have figured out how to increase the hours of direct care per patient, and improve patient outcomes, we can do that here in Saskatchewan," said Rosalee Longmoore, President of the Saskatchewan Union of Nurses.

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