

Alberta Health Services (AHS) Workplace Health and Safety (WHS) and Quality Improvement (QI):

- Within AHS's overarching goals, AHS WHS Senior Leadership recognized the need for a stronger "QI Culture" within AHS WHS that includes:
 - A broader awareness of QI;
 - A better understanding of QI methodology and applications;
 - Integrating QI principles into the evolution and evaluation of existing Programs; and
 - Integrating QI principles into the development, implementation, and evaluation of new Programs.

The Fit Test Designate (FTD) Program:

- In discussion with AHS WHS Senior Leadership, the FTD Program was chosen in order to frame the application of the AHS Improvement Way (AIW) Yellowbelt QI methodology in addition to certain QI tools from the Evidence-based Practice for Improving Quality (EPIQ) methodology.
- The FTD Program was thought to be a good choice as it was a well-established Program with areas requiring review and that may additionally benefit from QI.

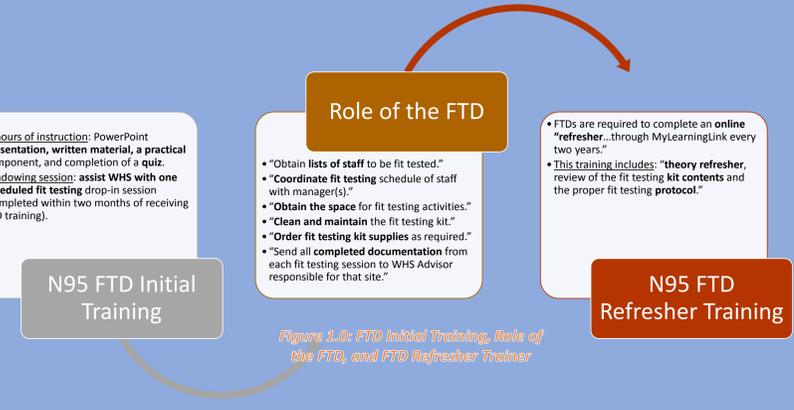


Figure 1.0: FTD Initial Training, Role of the FTD, and FTD Refresher Training

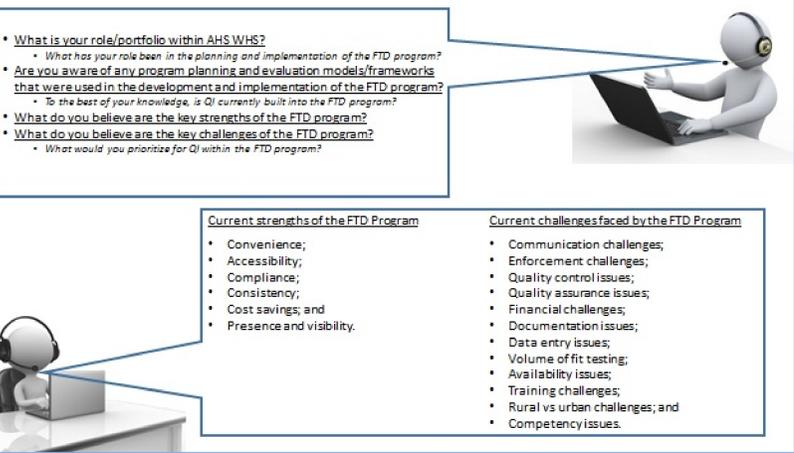


Figure 2.0: Interview Questions and Current Strengths and Weaknesses of the FTD Program

Applying the AIW Methodology and EPIQ Tools to the FTD Program:

Problem Statement

- There is currently no process, including no tools and timelines, in place for the assessment of FTD competence – specifically for the "during" and "immediately after" portions of a fit test session.
- It is known that fit testers who incorrectly fit respirators and do not communicate effectively to those being fit tested can contribute to incorrect respirator assignment and use [1].
- This would put employees being fit tested at risk for airborne hazard exposure [2].

Goal Statement

- Through a series of interventions, and corresponding QI cycles, spanning approximately 2 years; a sample of recently trained FTDs will have their competence assessed at 1 year post-initial training.
- Those with competence scores of <85% at this first (annual) competence assessment will undergo both online and in-person "refresher" training such that all the FTDs in this sample will have competence scores of >85% at 2 years post-initial training compared to the scores of baseline sample of FTDs at 2 years post-initial training.
- Under the current standard practice, the baseline sample of FTDs would not have had a competence assessment at 1 year post-initial training and they would have only been required to complete an online "refresher" at 2 years post-initial training.

Table 1.0: (Sample) "SIPOC" Diagram for the FTD Program

| Suppliers | Inputs | Process | Outputs | Customers |
|--------------------------------------|--------------------------|-------------------------------------|------------------------------------|----------------------------------|
| AHS WHS – FTD Program. | FTD initial training. | FTD reviews contents of FTD script. | Completion of respirator card. | Employees requiring fit testing. |
| Manager identifies FTD candidate(s). | FTD completes shadowing. | FTD completes sensitivity testing. | Completion of paper documentation. | |
| | Etc... | Etc... | Etc... | |

Table 1.0: (Sample) "SIPOC" Diagram for the FTD Program

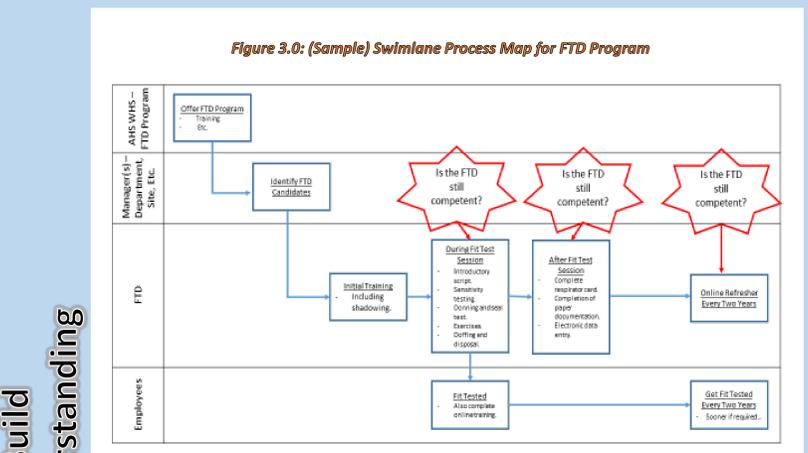


Figure 3.0: (Sample) Swimlane Process Map for FTD Program

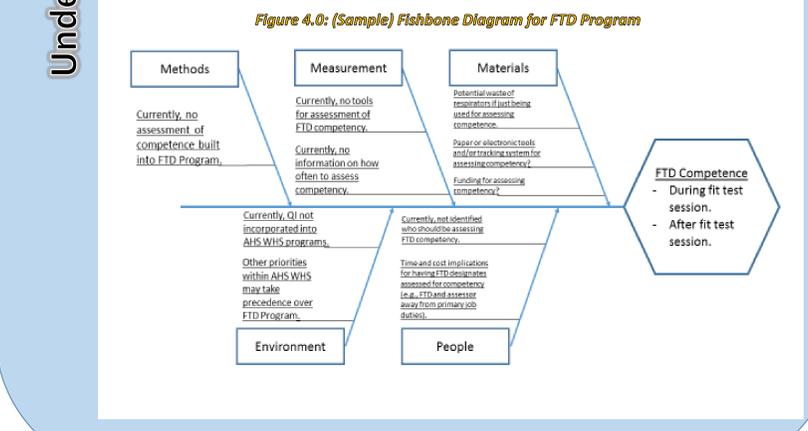


Figure 4.0: (Sample) Fishbone Diagram for FTD Program

Applying the AIW Methodology and EPIQ Tools to the FTD Program (Continued):

Table 2.0: (Sample) Project Stakeholder Analysis

| Stakeholder | Relationship to project | | Position | | What we need from them | | Communication strategy | | | | | | | |
|---|-------------------------|-----------------------|------------------|----------|------------------------|-----------------------------|----------------------------|--------------------------|------|--------------|---------------------|--------------------------|------------------------------|---------------------------------|
| | Has decision authority | Can influence outcome | Will be affected | Resistor | Supporter | Approval for implementation | Resource (people, funding) | Subject matter expertise | Data | Post support | Meet with regularly | Invite to learn meetings | Send copy of meeting minutes | Speak with informally as needed |
| AHS WHS FTD Program (Advisors and Managers) | x | x | | | x | | | x | x | | x | | | |
| FTDs | | x | x | x | | | | | | x | | | x | |
| Etc. | | | | | | | | | | | | | | |

Table 2.0: (Sample) Project Stakeholder Analysis

Table 3.0: (Sample) Communication Plan

| Timing | Message Content | Audience | Method | Responsibility |
|--|--|---|--------------------------------|--|
| Prior to QI cycle 1 (first use of competence assessment tool). | Reason for implementing intervention. | AHS WHS Senior Leadership, Managers (Departments, Sites etc.) FTDs. | Face to face. Electronic memo. | AHS WHS FTD Program (Advisors and Managers). |
| After last QI cycle. | Proposed changes to current standard practice. | AHS WHS Senior Leadership, Managers (Departments, Sites etc.) FTDs. | Face to face. Electronic memo. | AHS WHS FTD Program (Advisors and Managers). |
| Etc. | | | | |

Table 3.0: (Sample) Communication Plan

Act to Improve

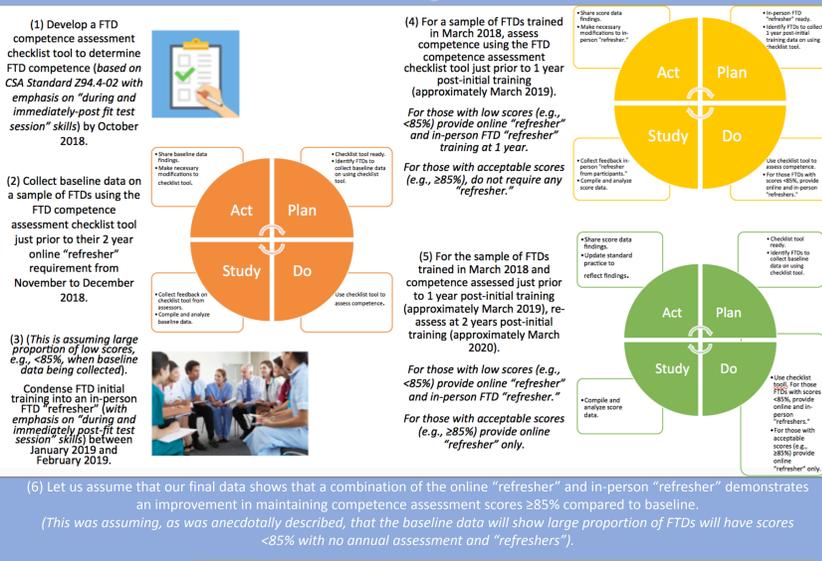


Table 4.0: (Sample) Sustainability Plan

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| Key sustainability factor | Completed | In progress | Not started | Responsibility |
|--|-----------|-------------|-------------|---|
| Process owner identified | x | | | AHS WHS FTD Program (Advisors and Managers) |
| Impacted groups involved in change process | | x | | AHS WHS FTD Program (Advisors and Managers) |
| Etc. | | | | |

Impact and Next Steps:

- Thus far, this work has culminated in a presentation to AHS WHS Leadership and the production of a report (including a discussion on "Sharing Learning").
- Increased awareness and receptiveness to integrating QI into Programs and practices.
- Additional recommendations: identifying Programs that are interested, in or would benefit from, QI work; supporting a members of Program teams to pursue AIW certification etc.

