|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **QIE Process:** | | | | **QIE Date**: | | | | | | **QIE Ref Id:** | | |
| **Team:** | | | | **Care Group /Corporate Service:** | | | | | | | | |
| **Process** **Summary**: | | | | **TAKT** **Time**: (include calculation) | | | | | | | | |
| **Workshop Leader**: | | **Sponsor**: | | | | | | **QI Coach:** | | | | |
| **Team** **Leader**: | | **Process Owner**: | | | | | | **Admin Support:** | | | | |
|  | **Metric** (units of measurement) | | **Baseline**  (see calculation descriptions on last sheet) | | **Target**  (aim for zero defects) | **Report Out**  (tested on the event) | **30 days mm/dd/yy** | | **60 days mm/dd/yy** | | **90 days mm/dd/yy** | **12 months mm/dd/yy** |
| **1** | **Lead Time** (specify unit of time) | |  | |  |  |  | |  | |  |  |
| **2** | **Work in Process (WIP)** (units observed in the process) | |  | |  |  |  | |  | |  |  |
| **3** | **Quality** (defects) (%) | |  | |  |  |  | |  | |  |  |
| **4** | **Quality defects identified through Staff Questionnaire** | |  | |  |  |  | |  | |  |  |
| **5** | **Quality defects identified through patient/customer feedback** | |  | |  |  |  | |  | |  |  |
| **6** | **5S** (levels 1 – 4) where appropriate Level 2 as a minimum by 90 days | |  | |  |  |  | |  | | Level 2 to be achieved |  |
| **7** | **Staff Engagement** (Q12) | |  | |  |  |  | |  | |  |  |
| **8** | **Huddle Board** as a minimum by 90 days to be evaluated via survey at 12 months | |  | |  |  |  | |  | | Board to be in place | Staff Survey to be completed |
| **9** | **Inventory** (Cost Reduction £s) | |  | |  |  |  | |  | |  |  |
| **10** | **Set-up Reduction** (minutes) | |  | |  |  |  | |  | |  |  |
| **11** | **Staff Walking Distance** (specify unit of distance) | |  | |  |  |  | |  | |  |  |
| **12** | **Travel Distance** (materials, patients or equipment) (specify unit of distance ) | |  | |  |  |  | |  | |  |  |
| **13** | **Efficiency Gain** (Cost Reduction, Productivity, System Efficiencies)  There should be an indication on how gain is related to other targets. | |  | |  |  |  | |  | |  |  |
| **14** | **Standard Work In Process (SWIP)** (lead time/takt time) | |  | |  |  |  | |  | |  |  |
| **15** | **Space** (Sq m) | |  | |  |  |  | |  | |  |  |
| **16** | **Newspaper Actions** | |  | |  |  |  | |  | |  |  |
| **17** | **Sustainability (**Triple bottom line**)**   1. **Environmental** 2. **Social** 3. **Financial** | |  | |  |  |  | |  | |  |  |

**Instructions for use**

* Please delete any targets rows that will not be used during the event. (Do not shade them out)
* The Sponsor of the event is responsible for defining and confirming any targets.

**Reference Information:**

**How Baseline Measurements have been calculated (To be completed by WSL/TL/PO):**

|  |  |  |  |
| --- | --- | --- | --- |
| **1** | **Lead Time** (specify unit of time) ***Lead Time is measured in seconds, minutes, hours or days as appropriate to the process being studied***  *For example: Measuring the time from registration of referral to clinical appointment booked* | | |
| **2** | **Work in Process (WIP)** (units observed in the process) ***Work-in-Process is measured in units in the process and the baseline is observed (e.g. test results, messages, charts, patients, documents). Do not include a target WIP on the target sheet.*** | | |
| **3** | **Quality** (defects) (%) ***Quality defects should always clarify the baseline information position (10 defect pencils out of 100 pencils made)*** | | |
| **4** | **Quality defects identified through Staff Questionnaire *Quality defects highlighted by staff through survey at baseline and after 90 days*** | | |
| **5** | **Quality defects identified through patient/customer feedback *Quality defects highlighted by patients/ customers of the process through survey at baseline and after 90 days*** | | |
| **6** | **5S** (levels 1 – 4) ***5S is measured using the 5S audit tool for physical areas or virtual areas\*. This should be measured prior to and post the 5S activity.*** | \*Example of using 5S for a: drive (virtual space): Sort – determine criteria for what stays on the drive and what should be purged or archived  1. Simplify – agree on nomenclature and organization structure for the files that will be retained on the f:drive, organize the files in agreed upon structure 2. Sweep – determine how often the f:drive will be swept, what is entailed in the sweep, and who is responsible 3. Standardise – document all previous agreements and when they will be revisited 4. Self-discipline – what method will the group use to continue to improve upon their 5S work | |
| **7** | **Staff Engagement** (Q12) ***Staff engagement score is measured using the Q12 survey at baseline and after 90 days (note team surveyed)*** | | |
| **8** | **Huddle Boards *Indicate where huddle board is located, when standard work for huddling is in place, provide photo of board to QI Team and survey of staff engagement post-huddle board introduction*** | | |
| **9** | **Inventory** (Cost Reduction £s) ***e.g.*** ***Inventory is measured as a £ amount of supplies on the shelf waiting to be used*** | | |
| **10** | **Set-up Reduction** (minutes) ***Set-up reduction is measured in seconds or minutes as appropriate. Target should state if it is internal or external set up*** | | |
| **11** | **Staff Walking Distance** (specify unit of distance) ***Staff walking distance is usually measured in metres or miles.*** | | |
| **12** | **Travel Distance** (materials, patients or equipment) (specify unit of distance ) ***Travel distance should be measured in kilometres, metres or centimetres as appropriate*** | | |
| **13** | **Efficiency Gain** (Cost Reduction, Productivity, System Efficiencies) ***There should be an indication on how the gain is related to other targets and an explanation should be provided in the remarks box about how this gain will be realised or released.*** | | |
| **14** | **Standard Work In Process (SWIP) *Standard Work-in-Process is calculated with the formula lead time/takt time. The target for SWIP should be based on your target lead time.*** | | |
| **15** | **Space** (Sq m) ***Space is measured in square metres utilised in the process.*** | | |
| **16** | **Newspaper Actions - *How many actions have been created? Target will be to complete all and baseline will be 0.*** | | |
| **17** | **Sustainability (**Triple bottom line**)**   1. **Environmental** 2. **Social** 3. **Financial** | | \*Example actions to support the Sustainability triple bottom line: Environmental – Actions related to material recycling Energy saved due to improvements in conservation and efficiency  Commitment to reduce the effects of greenhouse gas emissions  Waste management Social – Social initiatives in the community Development actions to responsible consumption  Training of the workforce Financial – Procurement costs saved in purchasing new equipment and supplies Reduction in waste disposal  Reduced printing costs  Saving in travel time and costs |