Update to PRCF & DMS

District Meeting Education June 2022



Joshua Bergman (He/Him)

Outline



- 1.Why?
- 2. What informed changes?
- 3. Release schedule
- 4.Key changes to PRCF
- 5.Key changes to DMS
- 6.Resources
- 7. Questions/Comments

Why?



1. Improve quality of PRC data to assist with discussion and resolution.

2.Improve functionality of PRC Module in DMS.

What informed changes?



- <u>Feedback</u> from Locals/PRC Committee
 Reps/PRC Advisors.
- <u>Environmental scan</u> of other Union PRC/ Workload Report Forms
- <u>Literature review</u> on workload or quality of care measures.
- Qualitative analysis of subset of PRC Records by UBC Researchers

What informed changes?



- Quantitative review of PRC Data 2011-2020
- Focus Groups with Locals in June 2021
- <u>Legal Opinion</u> on Use of Evidence from PRCs.
- <u>Employer feedback</u> from AHS and Covenant Health.

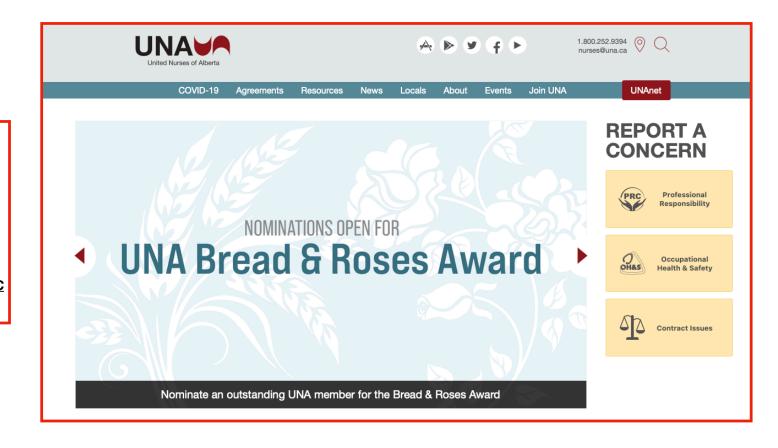
Release schedule

- Data migration immediately prior to launch.
- Go-live early July 2022.
- Electronic Manager Response Form Fall 2022
- Updated PRC reporting functionality later 2022.
- UNA app update later 2022.



Encourage Electronic Reporting

https://dms.una.ca/forms/prc





 Introductory wording - just culture.

New PRCF Submission

Cance

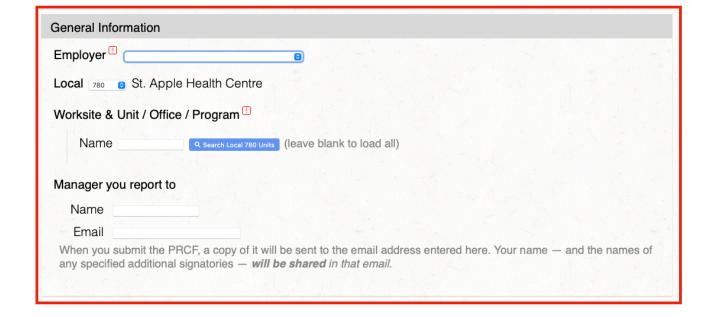
It is your Employer and UNA's expectation that any information reported anywhere on the PRCF will be handled within the context of a just culture and any article outlined in the Collective Agreement including no discrimination.

- A just culture means that reporting is conducted within a psychologically safe environment where everyone (Employees and Employer representatives) is treated with care, respect, and dignity.
- The purpose of sharing and discussing this information is for system reporting, learning, and improvement purposes and should not be used to place individual blame or for coaching and/or discipline.
- The Employer and Union have made a commitment to this process including the importance of upholding the principles of joint problem-solving, collaboration, and mutual respect during every discussion and step of this process.
- There shall be no discrimination, restriction or coercion exercised or practiced by either party in respect of an Employee
 or an Employer exercising any right conferred under the Collective Agreement, such as reporting concerns through the
 PRC process.

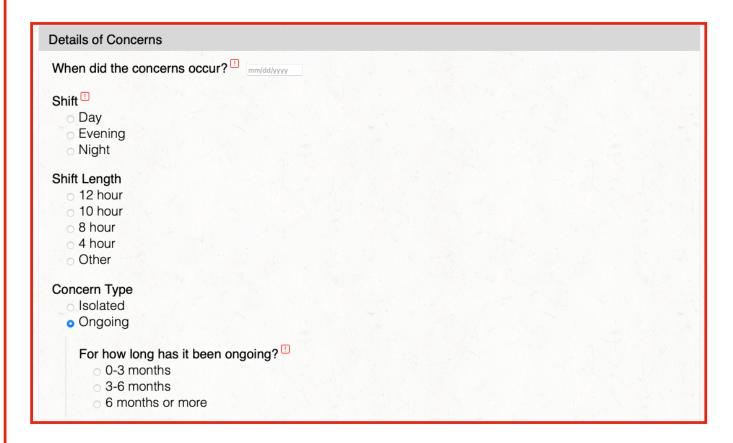
Items marked with " are required for final submission

Only the Local is required when saving as a draft.

 Ability to edit Employer and Local.



- Shift LengthConcern Type



- Number of staff on overtime (OT).
- Ability to specify "Other" designation.
- Number beds (care spaces) on unit.
- Number of clients on your caseload.
- N/A and Don't Know

| ng a factor for the concerns? | | | | | |
|-------------------------------------|----------------|----------|------------|-----------------|----------------|
| rtial | | | | | |
| | | | | | |
| mplete the following information f | or the shift w | here the | concerns | occurred as | applicable and |
| own. | or the oran | noro aro | 3011001110 | , occurred, ac | apphousic and |
| | RN/RPN | LPN | HCA | Other | Don't Know |
| Baseline (Regular) staffing | • | 0 | 0 | • | 0 |
| Number of staff actually working | • | • | • | • | |
| Number of staff on overtime (OT) | • | • | • | • | |
| | | | | | |
| | | | N/A | Don't Know | |
| Number of beds (care spaces) on u | nit | • | 0 | 0 | |
| Number of patients on unit | | • | 0 | .0 | |
| Number of overcapacity patients on | unit | • | 0 | 0 | |
| Number of patients/residents assign | ned to you | • | 0 1 | 0 | |
| | | | | N. San Carlotte | |

- Was mandatory OT utilized?
- Staffing shortage due to:
- Were attempts made to fill the staffing shortage?

o N/A

| Was mandatory OT utilized? The Employer is requiring (mandating) you to report to work when you are not scheduled finclude being mandated to stay past your scheduled shift. Yes No | or a shift. This could | |
|--|------------------------|--|
| O Don't know | | |
| | | |
| ○ N/A | | |
| | | |
| Staffing shortage due to | | |
| Sick call | | |
| Vacancy | | |
| Vacation | | |
| | | |
| Other | | |
| ODon't know | | |
| \circ N/A | | |
| | | |
| Were attempts made to fill the staffing shortage? | | |
| Yes | | |
| | | |
| ○ No | | |
| O Don't know | | |

 What actions or steps, if any, did you or others take to try to address the concern(s) and what was the time involved in taking these steps or actions?

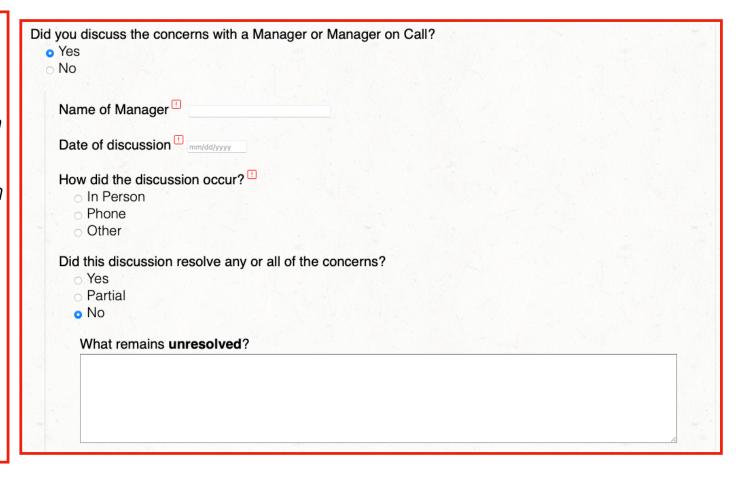
| Detailed Description of the concerns [1] | |
|--|---|
| (Be specific, describe the actual or potential impact to patient/resident/client care, do not use any patient/resident/client/staff identifying information, and describe the concern(s) using professional and respectful language.) | |
| | |
| | |
| | |
| What actions or steps, if any, did you or others take to try to address the concern(s) and what was the time involved in taking these steps or actions? | |
| (e.g. Notifying charge nurse/team lead, manager, physician for support; calling in extra staff; changing the patient/resident/client assignments; prioritizing care; missing breaks; staying late, etc.) | |
| | |
| | |
| | |
| | / |
| RLS/Incident Report № | |
| (The UNA PRCF does not replace the Employer's incident reporting form/system. RLS is a voluntary reporting system. You are under no obligation to indicate whether you filled out a RLS report on this form). | |

Introductory wording.

Discussion with Manager

- Your Employer and UNA jointly support the PRC process and as such Employees do not need the permission of a Manager to fill out a PRCF and may fill it out prior to the discussion with a Manager; however, the Collective Agreement states that a discussion must occur before the matter is discussed at the PRC Committee.
- This discussion should ideally be done by the Employee(s) identifying the concern; however, depending on the
 nature of the concern, availability or comfort of the Employee, the meeting may be between the Employee and
 Manager or UNA Local and Manager, or a meeting of the UNA Local, the Employee and Manager.
- The Manager may reach out to the Employee and/or Local to initiate this discussion, should they receive a PRCF before a discussion has occurred, reflecting the collaborative intent of this process.
- These discussions must take place within a just culture where everyone feels safe, encouraged, and enabled to
 openly discuss patient care quality and safety concerns; and where everyone is treated with care, compassion,
 respect, dignity, and without fear of or actual retribution for raising and discussing such concerns.

- Did you discuss the concerns with a Manager or Manager on Call?
- How did the discussion occur?
- Did this discussion resolve any or all of the concerns?
- What resolved the concerns?
- What remains unresolved?



• Why not?

Did you discuss the concerns with a Manager or Manager on Call?

Yes
No

Why not?

Sent email to Manager to notify and arrange discussion
Prefer the support of my UNA Local prior to the discussion
Other

Examples provided.

What is needed to prevent the concern(s) from occurring again? (Be specific and describe your recommendations using professional and respectful language. e.g. replace vacant shifts even at OT, augment staffing for increased workload/acuity, increase casual pool or add regularized relief positions, proactively review schedule to ensure appropriate skill mix of staff based on experience/ qualifications.)

| Contributing Factors | | 1 | |
|---|--|--|--|
| Please select the following categories that are c (check all that apply) | contributing factors to the concerns you are raising | | |
| Workload | ⊘ Definitions | | |
| □ Acuity | | | |
| □ Assistance with ADLs | | | |
| □ Wandering/Confusion | | | |
| □ Emotional Abuse/Violence | Inadequate Staffing | | |
| □ Physical Abuse/Violence | Inadequate Baseline (Regular) Staffing | | |
| □ Overcapacity | □RN | | |
| ☐ Heavy Assignment/Caseload | □ RPN | | |
| □ Admissions/Discharges | _ LPN | | |
| □ Non-Nursing Duties | □ HCA | | |
| □ Interruptions | □ Other | | |
| □ Other | Vacant Shift - Not Filled | | |
| | Replacement not approved | Other Inadequate Resources/Supports | |
| | □ At Straght Time | □ Policy/Procedure/Protocol | |
| | □ At OT | □ Supplies/Equipment | |
| | □ Unable to fill | ☐ Infection Prevention & Control | |
| | ☐ Administrative/Staffing Office Issues | Technology/Software | |
| | □ Inappropriate Replacement | □ Connect Care | |
| | □ Staff assigned on-call | □ Other | |
| | Inappropriate Skill Mix | □ Care Space | |
| | ☐ Inadequate Qualifications/Education | □ Orientation/Education | |
| | □ Inadequate Experience | □ Communication | |
| | □ No Charge RN/RPN or Team Lead | ☐ Reduction or Loss of Service/Program | |
| | Charge RN/RPN or Team Lead with Patient/Re | Security | |
| | □ Unregulated Health Care Provider | □ Peace Officer | |
| | ☐ Contracted/Agency Staff | □ Contracted Security | |
| | □ Inadequate Physician Coverage/Support | Other | |
| | □ Other | □ Other | |
| | | | |

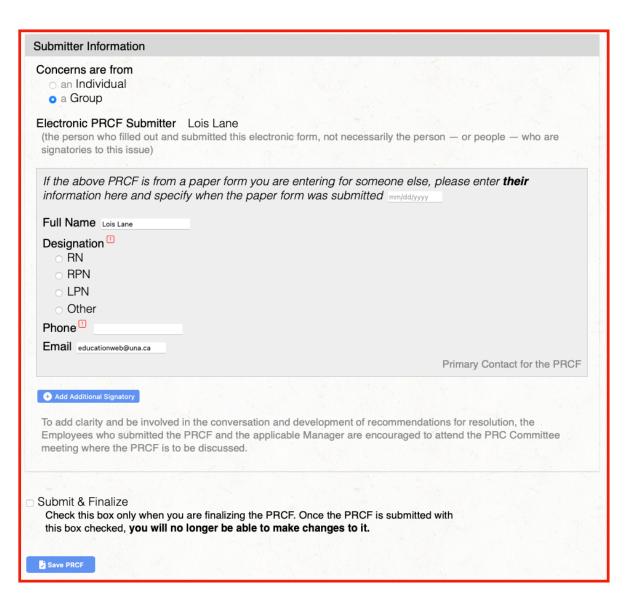
Impact on Patients/Residents/Clients & Staff Note: The information reported in this section will not be shared with your Manager/Employer as part of the PRCF you complete. It may be shared with your Employer as part of a summary report without any individually identifying information. Please select the following categories that describe the impact of the concerns on patients/residents/clients and staff (check all that apply) Patient/Resident/Client Delayed or Missed Care Comfort/talk with patients/ residents/clients Develop or update nursing care plans Develop or update RAIs Educating patients/residents/clients and families Oral hygiene Documentation of nursing care □ Patient/Resident/Client surveillance/ monitoring Changing of patient/resident/client position Mobilizing patient/resident/client Skin/peri/incontinence care Bath/shower □ Prepare patients/ residents/clients and families for discharge Medication administration Pain management Treatments and procedures ☐ Home Visit □ Follow-Up Phone Call □ Follow-Up Email Other delayed or missed care activities Close Call Adverse/Harmful Event Other

| Staff | |
|-------|--|
| | Missed breaks |
| | □ Requested OT |
| | □ Did Not Request OT |
| | Started early/stayed late |
| | Compromised Nursing Standards/Code of Ethics |
| | □ Moral Distress |
| | □ Fatigue/Burnout |
| | □ Fear/Anxiety |
| | □ Workplace Acquired Injury/Illness |
| | Other |
| | |

Note:

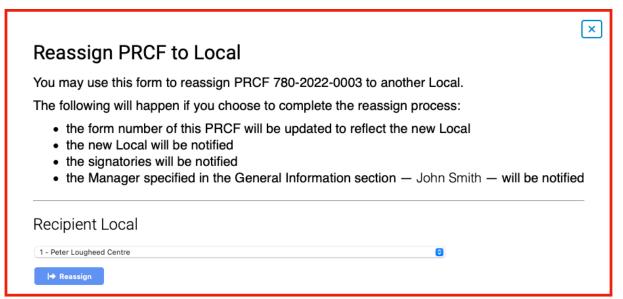
• The information reported in this section will not be shared with the Employer on an individual PRCF basis.

- Ability to submit PRCF on behalf of someone else.
- Ability to identify additional signatories to the PRCF.



 Ability to reassign PRCF to another Local.





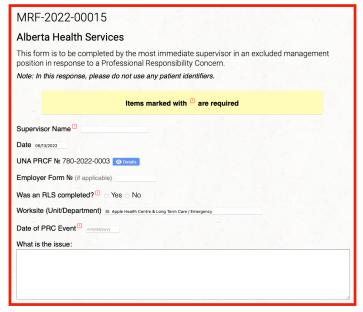
- Ability to reopen closed PRCFs.
- Ability to email different versions of the PRCF depending on the recipient.



| Enter the address to which you wish to send a copy of PRCF 780-2022-0001 |
|---|
| Recipient Address |
| Recipient Kind [1] |
| Selecting Manager as the Recipient Kind will cause certain potentially-sensitive information to be left out of the e-mailed copy of ths PRCF. |
| ✓ Send |

- Section to document Manager Response Forms (MRF).
- Electronic MRFs (sent to Employer for completion) will be enabled in Fall 2022.





| s this an isolated or recurring/ongoing issue? | A |
|--|------------|
| (Note approximate date issue brought to your attention, frequency, and brief overview of measures taken to date) | to address |
| io unio) | |
| | |
| | |
| | |
| | |
| | |
| Vas there an established procedure/process for dealing with this issue? One of the stable of the sta | |
| Vhat variables may have affected this situation? | |
| Staffing | |
| Sick Calls | |
| Skill Mix | |
| LOA | |
| Workload | |
| Other | |
| - Suici | |
| Comments/Description: | |
| | |
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| | |
| | |
| Specific response or action plan that was taken to address the event/issue: | |
| specific response of action plan that was taken to address the eventhissue. | |
| | |
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| | |
| | |
| | |
| This MRF will be recorded as having been entered electronically by Lois Lane. | |
| This will be recorded as having been entered electronically by Lois Lane. | |
| | |
| | |
| Once submitted, you will not be able to make further changes. | |
| Submit Response | |
| | |

- New PRCF Management Section.
- AHS Zone
- Ability to specify Primary Issue
- Ability to Link PRCFs in DMS to batch update Stages, Events, and Resolution & Closure Summary for a related group of PRCFs.



Link to Other PRCFs

Enter the form number of another PRCF to which you'd like to link PRCF 780-2022-0003. It can be another "standalone" PRCF or one that's already part of a linked group.

Important: when establishing the link, the information from one of the PRCFs will overwrite the values in the other PRCF for the following items, pulling the new values from the other form:

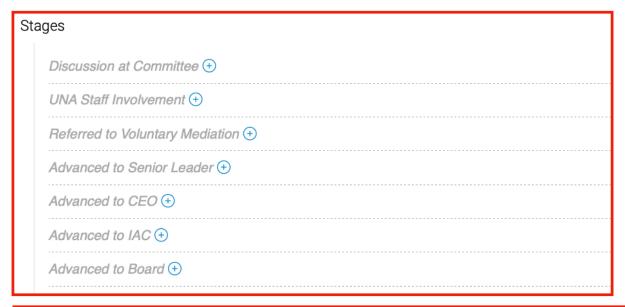
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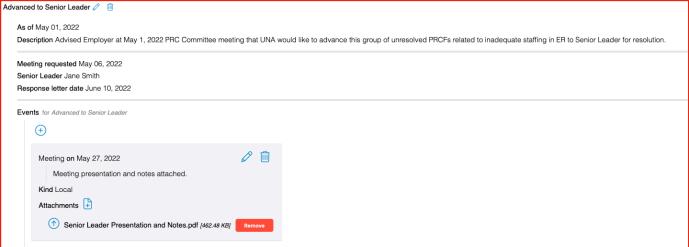
- Primary Issue
- Stages
- Events
- Resolution/Closure Summary

You will be given the opporunity to choose which form's data overwrites the other's.

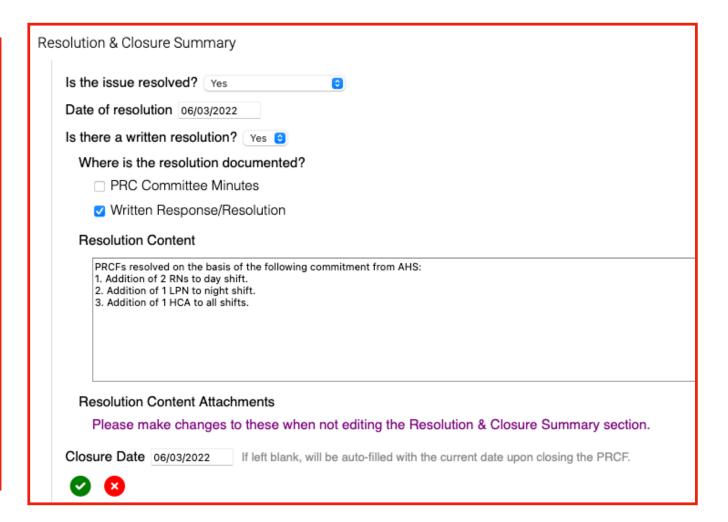


- Ability to document specific timelines and events for each *Stage* of PRC process.
- Will update across any linked PRCFs.

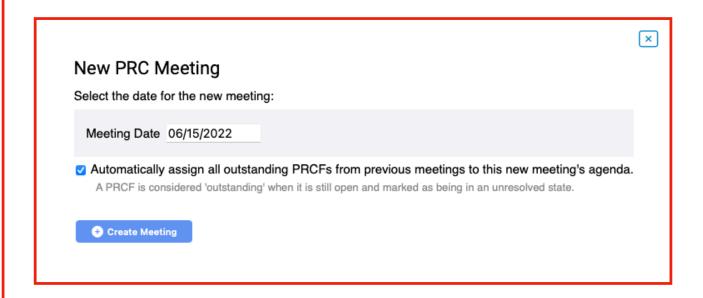




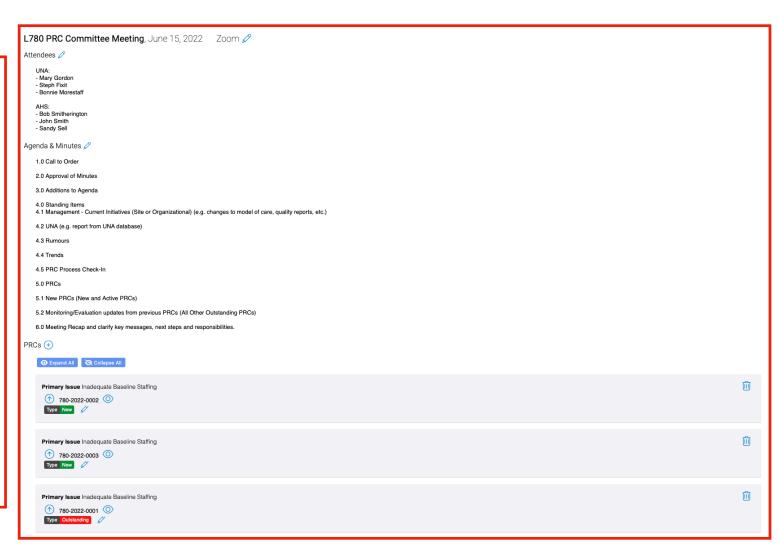
Expanded
 Resolution &
 Closure
 Summary section
 to better capture
 PRC resolutions
 for a PRCF or
 linked group of
 PRCFs.



- Updated PRC meetings functionality.
- Ability to create Agenda and document Minutes in DMS.
- Ability to assign PRCFs to an agenda and add all outstanding PRCFs from a previous meeting.



- Ability to autopopulate standard agenda items.
- PRCFs added to agenda can be labelled as New, Active, or Outstanding.
- Ability to discussion, actions, follow up, and next steps for each PRCF.



Resources

- Updated help guides at: https://
 help.una.ca/category/prc/
- Updated DMS Module Walkthrough at: <u>https://education.una.ca/courses/prc-management-dms/</u>
- Updated <u>Reporting a PRC Checklist</u> at: <u>https://www.una.ca/document/</u> <u>reportingaprc</u>



Where do I direct questions/ concerns?



- Process questions: E.g. How do I use the system? What or should I fill out or what does that mean? Why is that field there? —> Contact your assigned PRC Advisor
- <u>Technical questions/issues:</u> E.g. error messages, bugs, system/function not working —> **Contact Systems Support**

Summary



- New changes to PRCF and DMS will go live in early July 2022.
- Encourage members to report PRCFs electronically via UNA's website.
- Electronic MRF to be released in Fall 2022.
- UNA app to be updated later this year.



Acknowledgments

- Jeff Nouwen, Andrew Johnson, Laura Curley, UNA Systems
- PRC Steering Committee (EOs, UNA Management, PRC Advisors, Vanessa Ruth)
- Tara Forbes, Educator
- Kelly de Jong, Graphic Artist
- Local Exec and PRC Committee Reps



Questions/Comments

