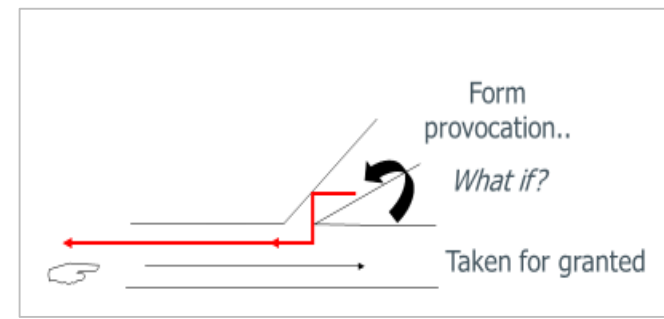


# Provocation Tools



**Reversal**



**Exaggeration**



**Distortion**



**Wishful  
thinking**



**Escape**

# ELFT Safety Culture Bundle

**Broset  
Violence  
Checklist**

**Safety Cross**

**Safety Huddles**

**Safety  
discussion in  
community  
meetings**

# Use **SSKIN** to manage & prevent pressure damage

<b>S</b> Surface	Comfortable Gentle Soft Mattress type can relieve pressure areas	Check cushions. Some don't relieve pressure	<b>NO PRESSURE</b> Check equipment integrity	Use specialist equipment when needed
<b>S</b> Skin inspection	Dry/cracked skin = moisturise & hydrate Oedematous skin = consider elevation Consider nutrition for wound healing Appropriate dressing for open wounds Early inspection = early detection	Inspection everyday Keeps pressure ulcers away Ask: Do you have pain over pressure areas?	Swelling Hot & cold areas Blister Hard skin Red or raw light shinned purple patches dark skin	Check vulnerable areas - BEST SHOT Buttocks Elbows Sacrum Trochanter (hips) Spine/shoulders Heels Occipital area (back of head) Toes
<b>K</b> Keep moving	Walking relieves pressure Encourage movement! Sitting up helps Get dressed	If at risk or you have a Pressure ulcer -> 2 hour turns helps blood flow helps relieve pressure	Correct sitting & lying positions Educate how often to move Slide sheets control table seat movement	Keep on the go with flo Florence the Flamingo (FLogo) Relieve pressure
<b>I</b> Incontinence/moisture	Barrier creams seal out wetness	Water Pressure Skin breaker Prevent moist weakened vulnerable skin	Barrier protection & soothing Soft Deodorising - fresh Antibacterial - kills germs	Prevent cracks Love your Skin Emollients prevent skin dehydration
<b>N</b> Nutrition/hydration	Healthy diet speeds up healing process Monitor food & fluid intake - consider Dietician	1. Height, weight & BMI 2. % unplanned weight loss 3. Establish acute disease effect 4. Malnutrition score Complete MUST nutritional assessment	Over weight Less mobile Pressure Deep skin folds Skin redness	Under weight Thin skin abrasions Bony areas prominent Poor nutrition

## The Sepsis Six



1. Give high-flow oxygen via non-rebreather bag
2. Take blood cultures and consider source control
3. Give IV antibiotics according to local protocol
4. Start IV fluid resuscitation Hartmann's or equivalent
5. Check lactate
6. Monitor hourly urine output consider catheterisation

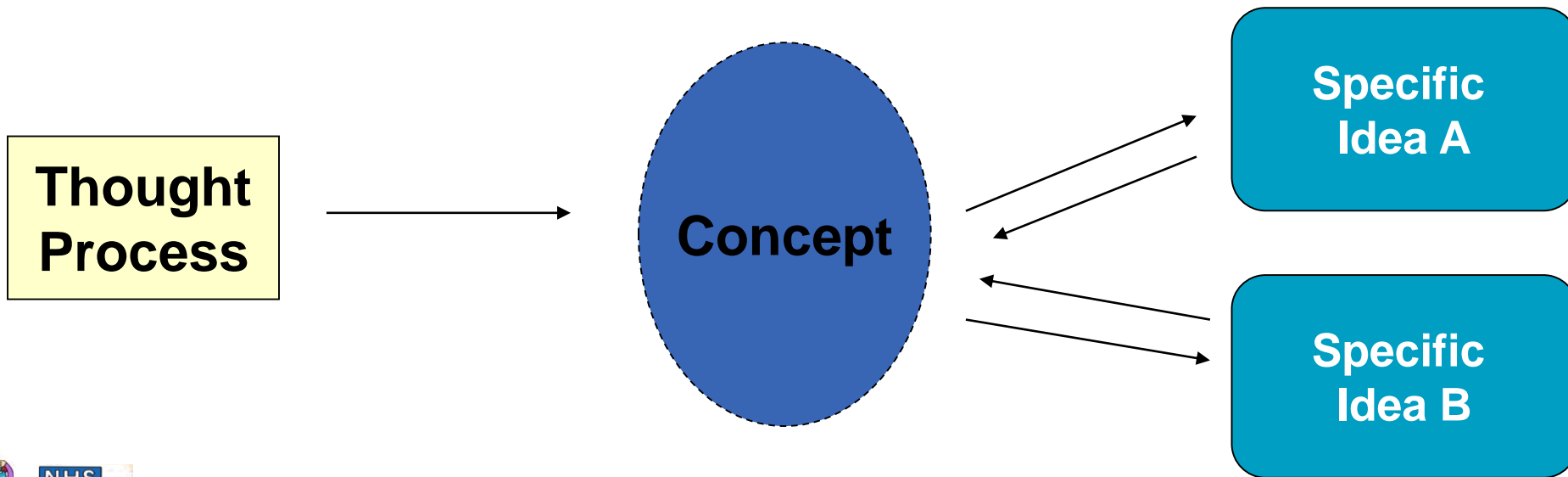
**within one hour**  
...plus Critical Care support



# Using Change Concepts

**Change Concept:** a general notion or approach to change that has been found to be useful in developing specific ideas for changes that lead to improvement.

**Concept**  
An opportunity to create a new connection



# Change Concepts – here are a few

Improve  
workflow

Enhance  
relationships

Manage time

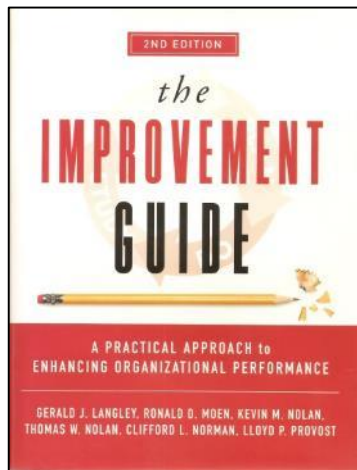
Manage  
variation

Design the  
system to  
avoid mistakes



# Change Concepts

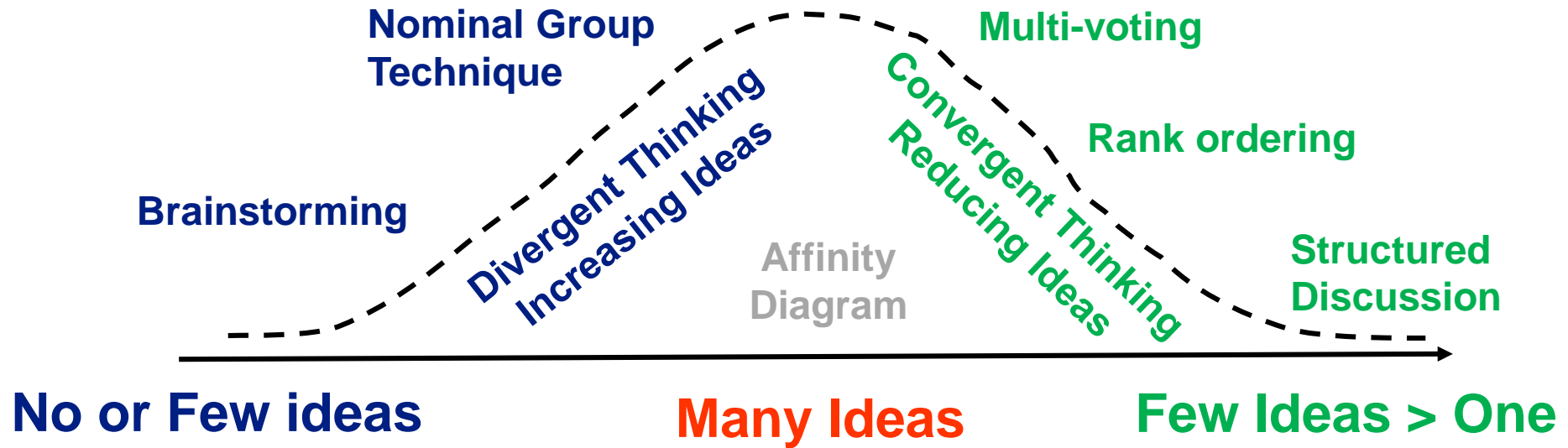
The *Improvement Guide* contains 72 change concepts can be used to create ideas for testing.



1. Eliminate things that are not used
2. Eliminate multiple entry
3. Reduce or eliminate overkill
4. Reduce controls on the system
5. Recycle or reuse
6. Use substitution
7. Reduce classifications
8. Remove intermediaries
9. Match the amount to the need
10. Use sampling
11. Change targets or set points
12. Synchronize
13. Schedule into multiple processes
14. Minimize handoffs
15. Move steps in the process close together
16. Find and remove bottlenecks
17. Use automation
18. Smooth workflow
19. Do tasks in parallel
20. Consider people as in the same system
21. Use multiple processing units
22. Adjust to peak demand
23. Match inventory to predicted demand
24. Use pull systems
25. Reduce choice of features
26. Reduce multiple brands of the same item
27. Give people access to information
28. Use proper measurements
29. Take care of basics
30. Reduce demotivating aspects of the pay system
31. Conduct training
32. Implement cross-training
33. Invest more resources in improvement
34. Focus on core process and purpose
35. Share risks
36. Emphasize natural and logical consequences
37. Develop alliances and cooperative relationships
38. Listen to customers
39. Coach the customer to use a product/service
40. Focus on the outcome to a customer
41. Use a coordinator
42. Reach agreement on expectations
43. Outsource for "free"
44. Optimize level of inspection
45. Work with suppliers
46. Reduce setup or startup time
47. Set up timing to use discounts
48. Optimize maintenance
49. Extend specialist's time
50. Reduce wait time
51. Standardization (create a formal process)
52. Stop tampering
53. Develop operation definitions
54. Improve predictions
55. Develop contingency plans
56. Sort product into grades
57. Desensitize
58. Exploit variation
59. Use reminders
60. Use differentiation
61. Use constraints
62. Use affordances
63. Mass customize
64. Offer product/service anytime
65. Offer product/service anyplace
66. Emphasize intangibles
67. Influence or take advantage of fashion trends
68. Reduce the number of components
69. Disguise defects or problems
70. Differentiate product using quality dimensions
71. Change the order of process steps
72. Manage uncertainty, not tasks

# Divergent and Convergent Thinking

Adapted from Executive Learning Inc. Team Training Materials.



# Provocation Exercise – Part 1

Select one of the provocations below and develop a **what if** statement around an issue you face

E.G “what if, patients did their own dialysis

**Reversal** – going in the reverse or opposite direction from the normal direction or order (get admitted after person is in a bed)

**Exaggeration** – suggesting a measurement that lies outside the normal range (TFG: Placement into foster care takes over 6 months to accomplish / Provocation: Placement takes less than 1 day)

**Distortion** – Take normal arrangements (relationships and time sequences) and mix-up the normal to create the provocation (students give tests to teachers, TV selects what you watch)

**Wishful thinking** – stating an “impossible” fantasy (it is easy to park at the hospital, pencil writes by itself)

**Escape** – list things that are taken for granted about the situation or process, then drop/cancel/do away with it (GP surgeries have waiting rooms)



# References

- Langley GL, Moen R, Nolan KM, Nolan TW, Norman CL, Provost LP. *The Improvement Guide: A Practical Approach to Enhancing Organizational Performance* (2nd edition). San Francisco: Jossey-Bass Publishers; 2009 pages 112-114
- De Bono, E. *Six Thinking Hats*. London: Penguin Random House UK, 2000.