2017 Performance Improvement Report

STRATEGIC PRIORITY

1. Develop world-leading healthcare and research

|  |  |  |  |
| --- | --- | --- | --- |
| **Project Name** | | | |
| Multimodal Preparation for Pediatric Premedication | | | |
| **Site** | | **Department** | |
| Choose an item. | | Click or tap here to enter text. | |
|  | | | |
| **Project Status** | **Project Start Date** | | **Project End Date** |
| Choose an item. | Click or tap to enter a date. | | Click or tap to enter a date. |

|  |  |
| --- | --- |
| **Problem:** Why the project was needed?  Minimizing Psychological, Trauma for children undergoing Anesthesia, and Surgery  preparation before anesthesia is important.  Sedative premedication is essential for achieving a good preparation. Less than 1% of Paediatric patients at KFSHRC receive premedication, which is significantly lower than international benchmark data of 65%.  As we also do not offer parents to accompany their children inside OR, the anxiety level among paediatric patients here is empirically perceived much more frequent and worse than in similar hospitals in the west. | **Aims:** What will the project achieve?  To increase the Premedication preparation (%) of pediatric patients in preparation for surgery at least 50% from the baseline before the end of 2017 |
| **Benefits/Impact:** What is the improvement outcome?  *(check all that apply)*  Contained or reduced costs  Improved productivity  Improved work process  Improved cycle time  Increased customer satisfaction  Other (please explain)  Click or tap here to enter text. | **Quality Domain:** Which of the domains of healthcare quality does this project support?  *(Select only one)*  Patient Centred |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| |  |  | | --- | --- | | **Measures:** Performance metrics to be evaluated | **Targets:** Expected outcomes | | Premedication preparation (%) | At least 50% from the baseline | |
| **Interventions:** Overview of key steps/work completed   * Development of guideline for paediatric pre-medication in Pre Anaesthesia Clinic (PAC) and day surgical clinic (DSU). * Development of standardised information package for all paediatric patients and families. * Provision of In-service lectures to Medical and Nursing staff. * Decrease the numbers of obstacles like: * · No Pyxis machine available in DSU * · Precedex medication to be made available in anaesthesia OMNICELL machine inside OR * Development of flow chart and guidelines to support the new process |
| **Results:** Insert relevant graphs and charts to illustrate improvement pre and post project  *(insert relevant graphs, data, charts, etc.)* |

|  |  |
| --- | --- |
| **Project Lead** | **Team Members** |
| **Name**  *(person accountable for project)* | **Names**  *(persons involved in project)* |
| Dr. Lars Engborg, Consultant, Anesthesiology Dpt | * Dr. Peter Kimme, Chairman Anesthesiology Dept * Dr. Badar Al-Hasni Fellow, Anesthesiology Dept * Fadi Fares, Head Nurse DSU / PAC, Peri-operatinve Nursing * Rami AlFaqi, Clinical Assistant, Peri-operative Nursing * Mohamad Danache SN DSU, Peri-operative Nursing * Basma Harayin, SN DSU, Peri-operative Nursing * Marisabel Pawley, SN DSU, Peri-operative Nursing |