2017 Performance Improvement Report

STRATEGIC PRIORITY

3. Improve efficiency and decision-making

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| **Project Name** | | | |
| Prevention Patient Falls in Radiation Therapy | | | |
| **Site** | | **Department** | |
| Riyadh | | Oncology /Liver Nursing – Radiation Therapy | |
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| **Project Status** | **Project Start Date** | | **Project End Date** |
| Completed | 02-28-2017 | | 09-30-2017 |

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| **Problem:** Why the project was needed?  Radiation Therapy provides curative and palliative radiation treatment for pediatric and adult population.  Falls are common complications among people with cancer, regardless of age and condition. People with cancer who fall are often more at risk of serious injury than others.  Being one of the nursing-sensitive indicator, fall prevention should be everyone’s responsibility.  Some of the contributing factors to fall included certain medications, low blood counts, low blood pressure and muscle weakness & fatigue.  Three (3) incidences of falls in 3Q 2016 and one (1) incidence in 4Q 2016 were reported through the Safety Reporting System which alerted the staff nurses in Radiation Therapy to take it as an opportunity for improvement. | **Aims:** What will the project achieve?  To decrease the incidence of patient’s falls in Radiation therapy to be below the NDNQI benchmark by third quarter 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** |

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| |  |  | | --- | --- | | **Measures:** Performance metrics to be evaluated | **Targets:** Expected outcomes | | Falls Per 1000 Patient Visits | Below the NDNQI Benchmark | |
| **Interventions:** Overview of key steps/work completed   * Formulation of a taskforce group including nurses and radiation therapists. * In services were provided on Policies of adult and pediatric fall risk assessment, prevention and management for staff members. * Distribution of Fall prevention leaflets to ambulatory patients. * Dissemination of simple tips to avoid falls by clinic staff nurse through the group teaching held twice a week in all radiation patient waiting areas. * Re-enforce the compliance to Fall Assessment screening in ICIS for adult and pediatric patients * Designing of safety belts to secure patients placed on the exam table in collaboration with upholstery department at KFSH&RC to be used inside clinics and radiation treatment machines * Hourly waiting area rounds to check on patients. |
| **Results:** Insert relevant graphs and charts to illustrate improvement pre and post project  *(insert relevant graphs, data, charts, etc.)* |

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| **Project Lead** | **Team Members** |
| **Name**  *(person accountable for project)* | **Names**  *(persons involved in project)* |
| Eman Megahd Julie Paulin Pickford | Rexi George  Safaa Morsy  Mini Thayyil  Divia Velalagan |