2017 Performance Improvement Report

STRATEGIC PRIORITY

 5. Promote external relations and funding

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| **Project Name** |
| To Reduce Percentage of Missed Calls Received From Infertility Patients in ART Clinic. |
| **Site** | **Department** |
| Jeddah | ART Unit |
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| **Project Status** | **Project Start Date** | **Project End Date**  |
| Completed | 04-01-2017 | 10-01-2017 |

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| **Problem:** Why the project was needed?ART unit has identified an area for improvement regarding missed calls, received from infertility patients these calls are crucial in the treatment cycle of our patients and affect patient satisfaction and patient outcomes. The unit received many complaints regarding unanswered phone calls. Upon investigation it was found that 60 % of external calls were unanswered. | **Aims:** What will the project achieve?To reduce percentage of missed calls from 60% to 0 %, by October 2017. |
| **Benefits/Impact:** What is the improvement outcome?*(check all that apply)*[ ]  Contained or reduced costs[x]  Improved productivity[ ]  Improved work process[ ]  Improved cycle time[x]  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)***Efficient** |

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| **Measures:** Performance metrics to be evaluated | **Targets:** Expected outcomes |
| 1. Percentage of missed calls in ART clinic
 | 1. 0%
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| **Interventions:** Overview of key steps/work completed* The Team Leader communicated with Riyadh IVF Clinic and enquired which system they were using and if they are facing the same problems as us with external missed calls. They informed us about their IVF calling system.
* Telecommunications and HITA met with us and an answering machine was installed to standardize the process of the scheduling system, when patient calls on the first day of cycle a voice recording will ask her to leave the following information: MRN, Patient Name, Mobile number, age and day of cycle.
* The ART unit consultant was involved in setting up the voice message and what information the patients must leave.
* An instruction leaflet was designed to explain to patient how to use the new IVF calling system.
* We contacted the Ambulatory Care Representative from Appointment and Registration Department to change the patient instructions on the patient’s appointment slip with clear instructions regarding the new process.
* A nurse will be assigned to listen to messages at beginning of shift and near end of day to retrieve messages from the system and to record data on a log sheet. This is cost effective as someone doesn’t have to only answer calls all day and staffs can be utilized for other duties.
* A log sheet was created for the nurse to record the retrieved patient information.
* In-services were given to all staff to create awareness of the new IVF calling system.
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| **Results:** Insert relevant graphs and charts to illustrate improvement pre and post project*(insert relevant graphs, data, charts, etc.)* As shown in the Graph from April to August, percentage of external missed calls varies between (60% -78 %) Less missed calls were noticed in June and July (10% and 15%) respectively due to decreased Patient load in Ramadan and Physician being on leave. Moreover, after the implementation phase of the project, in September (0%) calls were missed and the desired goal was achieved. |

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| **Project Lead** | **Team Members** |
| **Name** *(person accountable for project)* | **Names***(persons involved in project)* |
| Amilie Ann Elumir | Mariam Hussein  |
|  | Fagmah Stemmet |
|  | Hanin Abduljabbar |
|  | Ohoud Nazmi  |
|  | Alaa Al-Khamri  |
|  | Michelle Briedenhann  |
|  | Perla Gane  |
|  | Elenita Garcia  |
|  | Hashem Musawa  |
|  | Talal Saleh Ali  |
|  | Sameer Khan  |
|  | Azoof Al Fraikh |
|  | Noreen Shan |