

## All Committed to Improve 2018 Performance Improvement Project Charter

Strategic Priority: SP2- KFSH&RC Experience

I O as in I December of	
I O I D	
Dental Clinic- Medical-Surgical Department	
roject End Date	
8-31-2018	
Aims: What will the project achieve?	
w of dental clearance for patients in 6 to 6% by Q3 2018	
ich of the domains of healthcare ect support?	
- N,0	

## Interventions: Overview of key steps/work completed

Measures: Performance metrics to be evaluated

Develop Business card information.

% No show patients

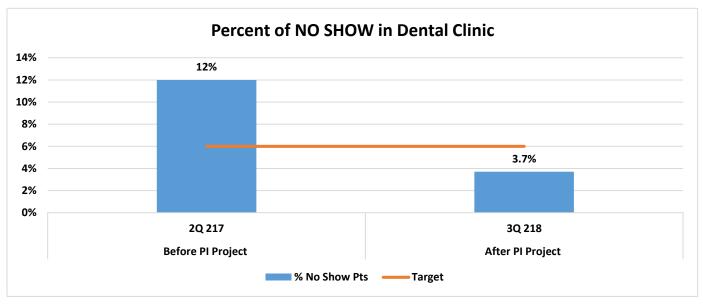
 Ensure that contains Business card information all contact information to remind patient/relative to call if unable to come.

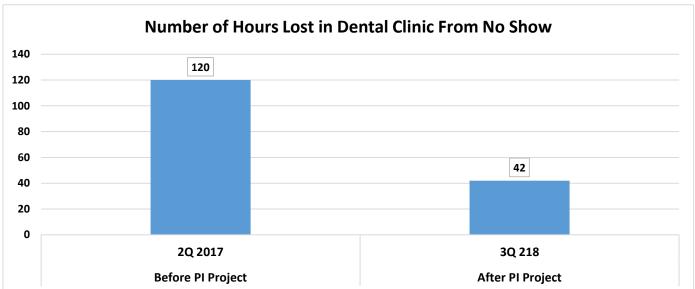
6%

Targets: Expected outcomes

Results: Insert relevant graphs and charts to illustrate improvement pre and post project (insert relevant graphs, data, charts, etc.)

- ♣ Before applying this intervention, Pre-statistical evidence showed:
  - Total No. of No Show Q 2-2017 = 114 (12%). Lost time in hours was 120
- After applying this intervention, Post-statistical evidence showed:
  - Total No. of No Show Q 3-2018 = 39 (3.7%). Lost time in hours has dropped to 42





The time gained from the lost hours was used to serve other patients in order to increase dental clinic capacity and to improve patient experience

## Project Lead Team Members Name (person accountable for project) Names (persons involved in project)

Ala Ahmad ID # 67547 - AHN

Nurasni Zainudin ID# 1501926 - SNI
Sohayla Altbaili ID# 94846 - SNI
Mouayad Mohtar ID# 96961 - SNI