

# All Committed to Improve 2018 Performance Improvement Project Charter

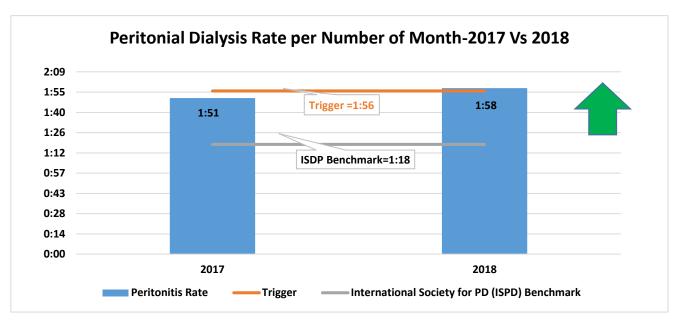
Strategic Priority: SP2- KFSH&RC Experience

Project Name		
Promoting Safe Technique For Peritoneal Dialysis Patients		
Site		Department
Riyadh		Peritoneal Dialysis
Project Status	Project Start Date	Project End Date
Completed	02-01-2018	12-31-2018
Problem: Why the project was needed?		Aims: What will the project achieve?
Peritonitis rate is one of the world wide selected Quality Indicators for peritoneal dialysis patient safety. KFSHRC 2017 peritonitis rate was good compared to the international benchmark; however, new peritoneal dialysis patients are always presenting challenges to keep up with the low peritonitis rate.		To decrease the peritonitis rate for adult peritoneal dialysis patients from 1:51 in 2017 at least 10% (1:56) by December 2018.
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) Safe
Measures: Performance metrics to b	e evaluated	Targets: Expected outcomes
Adult Peritonitis rate		1.56

## Interventions: Overview of key steps/work completed

- Review the Peritonitis Rate quarterly and discuss the result in collaborative meeting and put action plan.
- Do revalidation of patient skills after one month from the original training and after every episode of peritonitis.
- Make the Fundamental Peritoneal Dialysis course mandatory for all peritoneal dialysis staff nurses.
- Develop a peritonitis tracking sheet to:
  - i. Identify the root causes of infection and select the proper intervention accordingly.
  - ii. Track repetitive episodes of peritonitis.

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



### **Project Lead**

#### Name

(person accountable for project)

Dr. Sermin Saadeh, MD, Pediatric Department

#### **Team Members**

Names (persons involved in project)

Maha AlWahsh, AHN, HD, PD, DAS Nisreen Hannoun, PD, CNC Abdullah Bohassan, PD, Acting CNC Wafika Fouda, SN1, PD Jay Ann Chua, SN1, PD Aseel Aljuwaier, SN1, PD Sheila Ravacio, SN1, PD Aljohara aldossari, interpreter, PD