

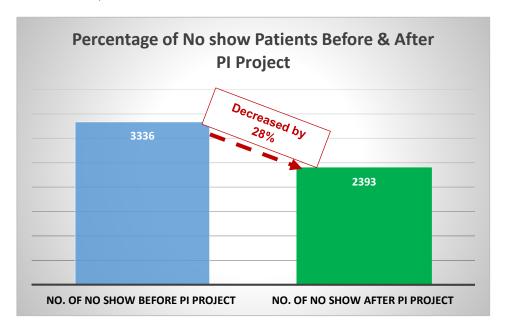
All Committed to Improve 2018 Performance Improvement Project Charter

Strategic Priority: SP2- KFSH&RC Experience

Project Name		
Reduce "No Show" Patients in Protoco	ol Clinics	
Site		Department
Riyadh		Protocol Services
Project Status	Project Start Date	e Project End Date
Completed	06-03-2018	10-08-2018
Recently, Protocol Administration noticed that the number of no show patients has increased reaching		Aims: What will the project achieve? To decrease the percentage of no show patients in protocol clinics from 24% in Q1 2018 to 18% by end of October 2018, and sustain it for 5 months.
Benefits/Impact: What is the improve (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.	ement outcome?	Quality Domain: Which of the domains of healthcare quality does this project support? (Select only one) Efficient
Measures: Performance metrics to be Percentage of no show patient's. Interventions: Overview of key steps		Targets: Expected outcomes 18%

- Call patients a day before their hospital appointment.
- Check if the patient did the required procedures before the appointment such as MRI, Blood test, etc.
- Utilize the slot of no show patients.

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) Khalid Al Shalhoub Names

(persons involved in project) Turki Al Shammary Khalaf Alla Elamin