



Strategic Priority: **SP4- Community Affairs**

Project Name

Transition of Care (TOC) – Discharge from Pediatric Oncology Services

Site

Riyadh

Department

Pediatric Hematology / Oncology

Project Status

Completed

Project Start Date

01-01-2018

Project End Date

12-31-2018

Problem: Why the project was needed?

International guidelines on long-term follow-up of oncology and post-transplant patients encourages transition of care from tertiary care / treating facilities to referral facilities through standardized long-term follow-up guidelines and subject to the departments JACIE accreditation; we proposed this PI project to be able to discharge off-therapy oncology and post Stem Cell Transplant (SCT) patients who are > 14 years of age and not requiring KFSHRC tertiary care to referral centers while utilizing health outreach model to track and monitor treatment related long-term toxicities.

Aims: What will the project achieve?

To increase discharge of Pediatric Oncology and Post-Stem Cell Transplant Patients by 8% from the baseline by December 31st, 2018 and to sustain the same practice for another six months.

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)
to increase the acceptance new oncology cases and decreasing their waiting time

Quality Domain: Which of the domains of healthcare quality does this project support?
(Select only one)

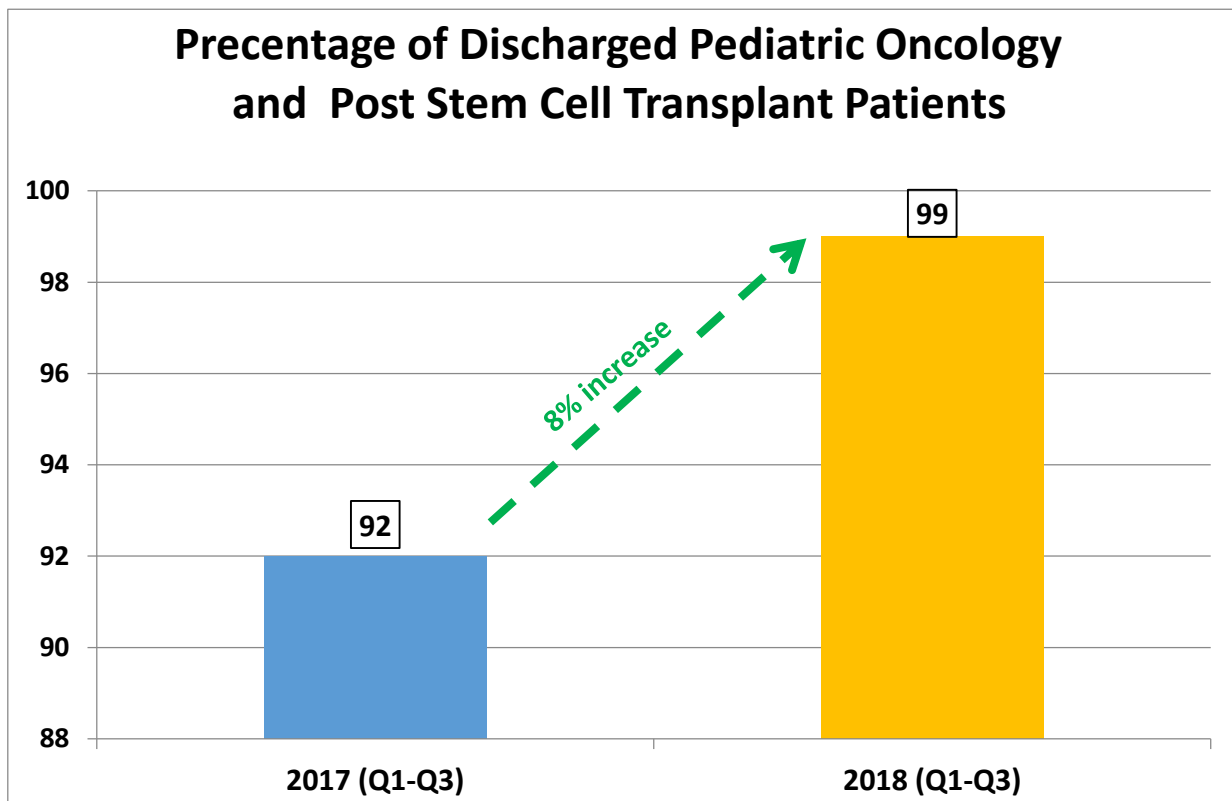
Patient Centred

Measures: Performance metrics to be evaluated	Targets: Expected outcomes
% Discharged Pediatric Oncology and Stem-Cell Transplant Patients.	8%

Interventions: Overview of key steps/work completed

- Create list of patients who are **Above 14 years of age and are off-therapy for ≥ 5 years** in collaboration with the Clinical Nurse Coordinators (CNC) to identify patients for potential discharge from the service.
- request from primary physician to dictate an update detailed medical report which should include the cumulative anthracycline dose if applicable and common recommended long-treatment, follow-up guidelines (Echo, TSH, T4, PFT... etc.)
- Develop Long-term follow-up guidelines based on international standards (Children's Oncology Group) subject to chemotherapy regimen used for referral centers to follow and adapt timely assessments including but not limited to cardiac toxicity, endocrine disorders etc.
- Communicate with the referring hospital and MOH Ehalati team to initiate the reverse transfer of the identified patients to their region, the project was started with Asir, Jazan & Al-Madinah region as adult hematologists/ oncologists agreed to follow-up.
- arranged and scheduled their appointments for patients who did not have clinic appointments in the near future (pertaining to their long term follow-up schedules) by CNC through virtual.

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)

Ali AlAhmari, MD

Team Members

Names

(persons involved in project)

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