

## 2018 Performance Improvement Report STRATEGIC PRIORITY I

Medical Research and Academic excellence

## **Project Name**

Reduce Turn Around Time in Endoscopy

Site		Department
Jeddah		Endoscopy Unit
Project Status	Project Start Date	Project End Date
Completed	06-28-2018	10-28-2018
Problem: Why the project was needed? Our Baseline data from April showed that 40 cases of Diagnostic Colonoscopy had done but 20 patients out of 40 spend more than 2 ½ hours from the time of checkin, to the time of check- out from procedure room which is equivalent to 50% .Reducing the turnaround time will improve the efficiency and will create more slots so we		Aims: What will the project achieve? To increase the percentage of diagnostic colonoscopy done within 2 ½ hours from 50% to 75% or more by the end of October 2018
can accommodate more pa Benefits/Impact: What is the		<b>Quality Domain:</b> Which of the domains of healthcare quality does this project support?

□ Contained or reduced costs

- ☐ Improved cycle time
- ☐ Other (please explain)
  Click or tap here to enter text.

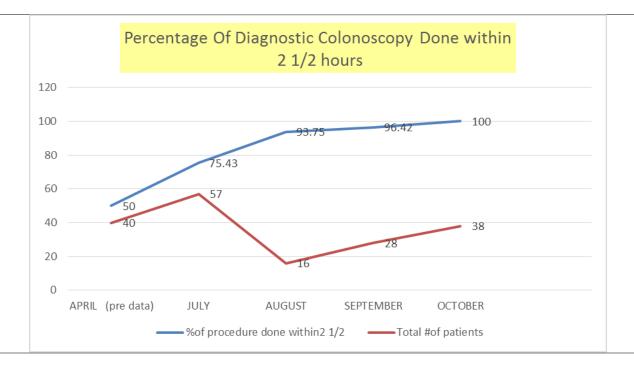
Efficient

## Interventions: Overview of key steps/work completed

- Staff awareness and education were given to increase staff knowledge For example: In service was giving for the staff about time management, Educate the Staff to push patient for colonoscopy on Time without any delay, Solve language Barrier by Educate the Staff.
- The time was monitored from patient's arrival to check in.
- Equipment layout of the Unit, Some of Equipment was transfer to minimize the time and delay of turn over-Changing of Endorsement sheet and make it clear was helped the staff for any delay for the turn over
- Complete the Consent for sedation and General Consent in the Out Patient Clinic prior to admission to minimize delaying of procedure by the Physician to sign the consent in Endoscopy.
- Patient and family education pre procedure By the staff So the patient will be able to understand the instructions before preparing for the procedure without any delay

## **Results:**

As shown in the graph below, from 50% of Patient's diagnostic procedure completed more than 2  $\frac{1}{2}$  hour on the month of April, to 100% of Patient Procedure completed in less than 2  $\frac{1}{2}$  hour at the end of October 2018.



Project Lead	Team Members
Name	Names
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