

2018 Performance Improvement Report STRATEGIC PRIORITY I

Medical Research and Academic excellence

Project Name

To decrease the number of hemolyzid, contaminated and clotted blood samples taken by 40%

| Site | | Department |
|--|---|---|
| Jeddah | | 24h-Adm unit |
| Project Status | Project Start Date | Project End Date |
| Completed | 03-01-2018 | 08-31-2018 |
| Problem: Why the project was needed The 24h-Adm Unit has had a total of 55 2017 until March 2018 of hemolyzid,, contaminated samples reported by QIS reason in order to improve practice and costs and prevent delay in patient care was initiated | 5 from March lotted and 5 system, for this d reduce hospital | Aims: What will the project achieve? The project will focus on improving clinical practice in order reduce the number of hemolyzid, clotted and contaminated blood samples by 40% |
| Benefits/Impact: What is the improver (check all that apply) ☐ Contained or reduced costs ☑ Improved productivity ☐ Improved work process ☐ Improved cycle time | ment outcome? | Quality Domain: Which of the domains of healthcare quality does this project support? (Select only one) Effective |

Interventions: Overview of key steps/work completed

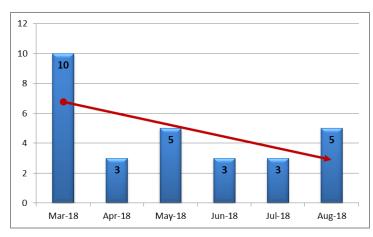
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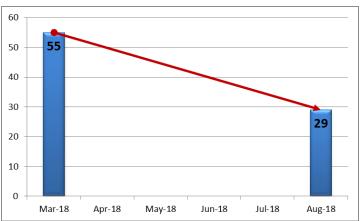
- A task team was formulated to review clinical practice in the unit with regard to taking of blood samples and the governance of same by procedure and hospital IPP.
- The team conducted in-services with the collaboration of the laboratory to re-educate and correct current practice
- It was ensured that all relevant equipment and collection consumables were readily available in the unit.
- Clinical audits were conducted to ensure compliance with standard collection ordinances.
- Staff were counseled and individual evaluations were done to ensure compliance with accepted standards
 of collection
- This enabled the nursing team reduce the number of hemolyzid, clotted and contaminated samples over a
 period of time, thereby saving costs to the organization and expediting patient care by preventing the delays
 that re-sampling would have incurred

Results:

52.7% improvement in the number of hemolyzid,, contaminated and clotted samples as per QIS reporting system for 24 Hour Admission Unit from beginning of March 2018 till end of August 2018

Number of samples by month





| Project Lead Name | Team Members Names |
|-------------------|--------------------|
| KHALED ABUZER | RAKSHA PARSOO |

NUR ZAILIS MUNIRA SIDEK MONISHA VINCENT ITARIZA A'AMANU BARBRA VAN VUREN SARFINAZ HANBAZAZA NOUR AL- ATTAS