

# 2018 Performance Improvement Report

# STRATEGIC PRIORITY 2

KFSH&RC experience

	Name	

Completed

Improve KFSHRC-J Patient and Visitor Experiences

Site	Departm	nent		
Jeddah		Nursing Affairs/Registration, Appointments & Admission Services.		
Project Status	Project Start Date	Project End Date		

01-01-2018

#### Problem: Why the project was needed?

Patient experience has become one of the main strategic goals for the organization as "Patient Centric" is one of our core values.

The project was focused on improving the experiences for the patients, visitor and staff in related to information, directions and solving problems.

The idea to utilize the main gate area has been initiated to establish the "Information Desk" to be the front line services to greet, assist and direct patients, relatives and visitors with any related information or inquires to reduce time and to facilitate the workflow.

<b>Benefits/Impact:</b>	What	is	the	improvement	outcome?
(check all that annly)					

- □ Contained or reduced costs
- ☐ Improved productivity
- $\hfill \square$  Improved work process
- ☐ Improved cycle time
- ☐ Other (please explain)
  - Click or tap here to enter text.

#### Aims: What will the project achieve?

In view of the recent observed repeated questions and inquiries from patients and visitors to hospital staff about the directions of hospital's departments and clinics, this project was chosen to Improve KFSHRC-J Patient and Visitor Experiences and ensure provide the best practice guidance to KFSHRC-Jeddah patients and visitors in the most efficient manner.

03-29-2018

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

**Patient Centred** 

#### Interventions: Overview of key steps/work completed

- Task force has been created in collaboration with Admission and Registration Department and Security Department to identify the roles of each department.
- Follow up meetings were conducted biweekly to observe and identify the issues and areas to improve.
- Setting up the Information Desk with two PCs along with ICIS linked printer and two phone lines to facilitate the workflow and to make sure all patient, visitors get served during the day and visiting hours.
- A data base has been created for the Information Desk to collect and log all customers' inquiries.
- Areas for improvement have been identifies and actions were taken place towards a better Patient Experience outcome.

#### **Results:**

There was no previous data as the Information Desk was just established.

During (7) months period (February –August 2018), over 28500 customers were served with remarkable positive feedback.

Type of Clarification	Feb	Mar	Apr	May	Jun	Jul	Aug
Activate	28	4	4	3	3	12	24
Admission Office	75	108	121	109	69	121	94
Appreciation	173	8	6	4	6	1	0
ATA	130	37	45	31	16	41	22
Blood Bank	271	367	484	421	223	376	402
Clinics Direction	590	589	712	548	336	527	454
Eligibility	226	186	208	154	118	216	158
Hospital Statement	61	70	116	104	39	78	82
Inpatient	391	427	652	516	247	558	347
Complain	20	3	19	10	7	12	24
Laboratory	158	110	139	132	86	134	93
Mini Market / Gift Shop	51	48	21	18	22	20	37
Mortician	19	9	8	9	7	3	4
Pharmacy	126	169	168	169	121	151	141
Prayer Room	106	102	122	84	77	119	81
Radiology	116	99	135	115	66	96	79
Restroom	133	123	125	92	37	164	123
Sehaty Application	127	33	52	51	23	87	27
Wards Directions	629	1117	1065	732	309	546	441
Medical Record	163	161	180	158	88	185	125
West Building	37	63	61	36	22	61	21
South Building	40	67	67	61	31	82	50
EMS	19	142	127	135	82	135	99
Received Calls	0	0	23	8	19	44	42
Others	689	536	740	606	401	356	277



# **Project Lead**

## Name

Ghada Al Sarraf

### **Team Members**

## Names

Samer Dardas (QM facilitator)

Rana Shata

Bandar Rashwan

Saeed Aftan

Ghadeer Katib

Hani Badokhon

Mansour Al Hindi

Abdullah Asseri