

2018 Performance Improvement Report

STRATEGIC PRIORITY 2

KFSH&RC experience

Project Name

Improve patient satisfaction related to raising concern "During this hospital stay, did providers or other hospital staff tell you how to report if you had any concerns about mistakes in your child's health care"

ite Department

Jeddah 1 North (Pediatrics)

Project Status	Project Start Date	Project End Date
Completed	02-07-2018	09-30-2018

Problem: Why the project was needed?

During the 2nd and 3rd quarter of 2017 patient satisfaction rate related to "During this hospital stay, did providers or other hospital staff tell you how to report if you had any concerns about mistakes in your child's health care "was 52% which was below the US bench mark of 85%".

Benefits/Impact: What is the improvement outcome? *(check all that apply)*

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

Aims: What will the project achieve?

To improve patient satisfaction rate related to "During this hospital stay, did providers or other hospital staff tell you how to report if you had any concerns about mistakes in your child's health care" from 52% in 2017 to 85% as per US benchmark by end of Sep 2018.

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

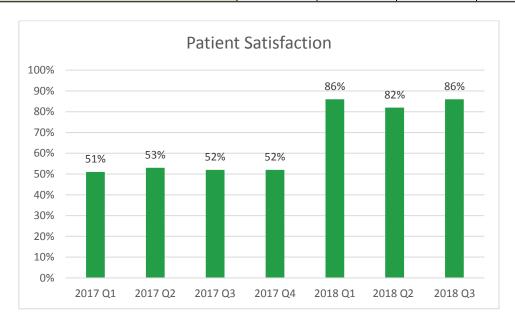
Patient Centred

Interventions: Overview of key steps/work completed:

- Gathered information and clarification for the queries on the current process due to the transformation from HCAHPS to PRESS GANEY (types of patient satisfaction surveys)
- Reviewed APP, coordinated with Patient Affairs Dept. and the Quality Dept. to know the administrative policy of how to manage the patient complains.
- Reviewed the sitter instructions form.
- Conducted continuous meetings to follow up the action plan and review the results.
- Educational in-services presented to 1North staff to be oriented on the (PI) project and the implementation process & progress of the (PI) project.
- PI project campaign done through posters.
- Formulated audit form.
- Posted information and instruction notes inside the patient's rooms.
- Patient's rounds on daily basis to assure the instructions and information are delivered to the patients and sitters.
- Continued audit and random check after completion of the (PI) project date.
- Delegated tasks to assure the consistent teamwork.
- Educational in-service presented to the staff to continue implement the process to keep improve the patient satisfaction results for quarter 4.
- Reward the team and the staff for the good outcomes.

Results:

Question	1North 2017 Quarterly Results			
	Q1	Q2	Q3	Q4
"During this hospital stay, did providers or other hospital staff tell you how to report if	51%	53%	52%	52%
you had any concerns about mistakes in your child's health care"	1North 2018 Quarterly Results			
	Q1	Q2	Q3	Q4
	86%	82%	86%	-



Project Lead

Name

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Team Members

Names

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