



Project Name

Improving clinical dietitians' reassessments documentation compliance rate.

Site

Jeddah

Department

Clinical Nutrition Services

Project Status

Completed

Project Start Date

01-04-2018

Project End Date

30-09-2018

Problem: Why the project was needed?

The department started auditing the dietitians' reassessments compliance rate, it was low 39.1% compliance. Dietitians' reassessments compliance is a requirements by CABHI & JCI accreditation. Also it's a requirement by the current IPP "Initial assessment and reassessment of patients in clinical nutrition services & to meet the medical records committee standards.

Aims: What will the project achieve?

To improve reassessments rate compliance by the dietitians from 39.1 – 90 % by September 2018.

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)
Click or tap here to enter text.

Quality Domain: Which of the domains of healthcare quality does this project support?

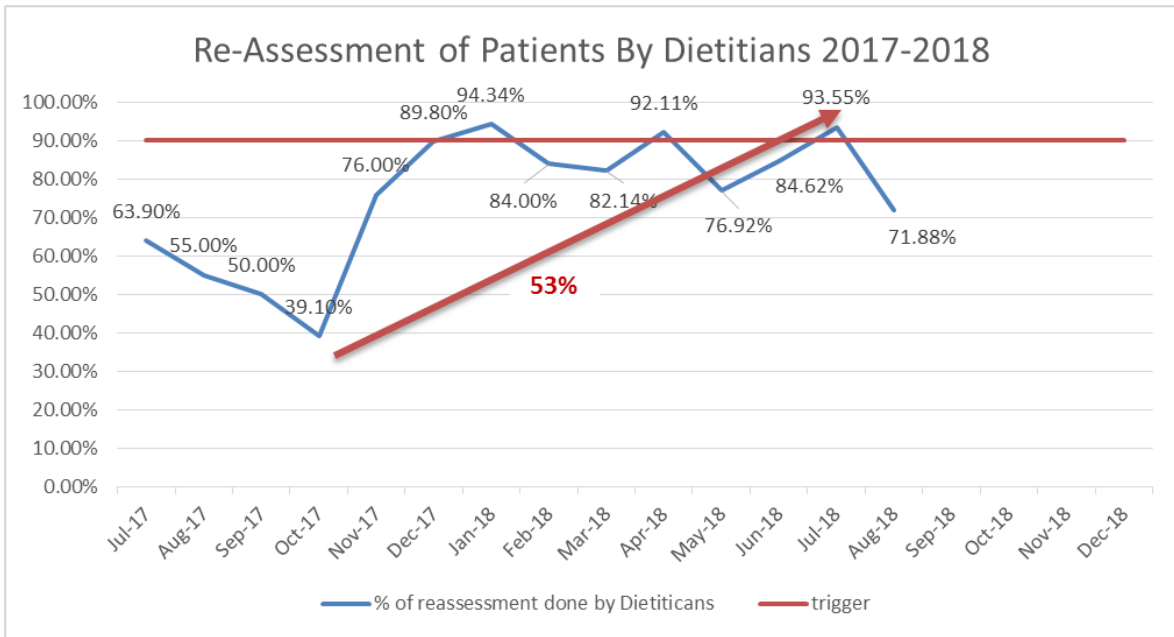
(Select only one)

Efficient

Interventions: Overview of key steps/work completed

- IPP "Initial assessment and reassessment of patients in clinical nutrition services" is now updated to "referral Criteria for nutrition assessment and follow up for inpatients", changes made to include that reassessment to be documented in the plan based on the patient clinical condition.
- IPP Updated to include that the dietitians will include the expected reassessment date.
- Education in-services showing importance of reassessment compliance done by Senior Dietitian.
- Live daily audits were done to monitor documentation & reassessments compliance & the dietitians were called to remind them to reassess their patients.
- Outpatients clinics for Adult dietitians has been reduced to 2 clinics /week instead of 3 clinics / week allowing dietitians to have more times for inpatients.
- Reassessment rate is now one of the key performance indicators (KPIs) for the clinical nutrition services department.

Results: Insert relevant graphs and charts to illustrate improvement pre and post project
 (insert relevant graphs, data, charts, etc.)



Project Lead **Team Members**

Name
 (person accountable for project)
 Nadia Aslam

Names
 (persons involved in project)
 Samer Dardas (QM Facilitator)
 Shaza Agou
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