

Quality Training Program

Project Title: Reduction of patient waiting time from the appointment with the oncologist to the administration to the intravenous treatment.

Presenter's Name: Rosa López/Elena Brozos

Institution: Hospital Clínico Universitario de Santiago de Compostela - Servicio de Oncología

Date: 8th- April- 2019

Problem Statement

The appointment of patients for the administration of chemotherapy in Day Hospital results in long waiting times that imply a worsening in their quality of life

113 minutes

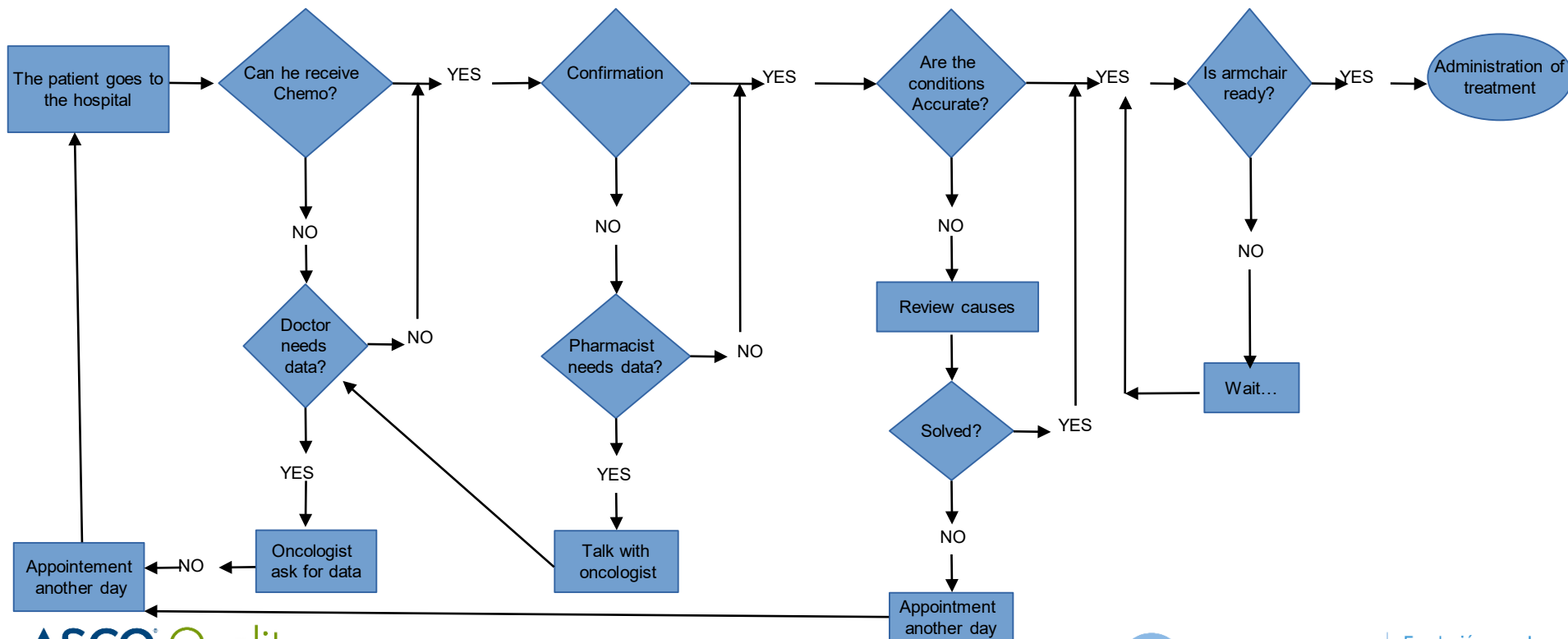
Process Map

1° step: ONCOLOGIST
(Prescription)

2° step: PHARMACY
(Supervision)

3° step: CABIN
(Preparation)

4° step: NURSES
(Administration)



Institutional Overview

The indication of the administration of intravenous chemotherapy requires assessment by the oncologist and pharmacist, and the preparation of the drugs under safe conditions.

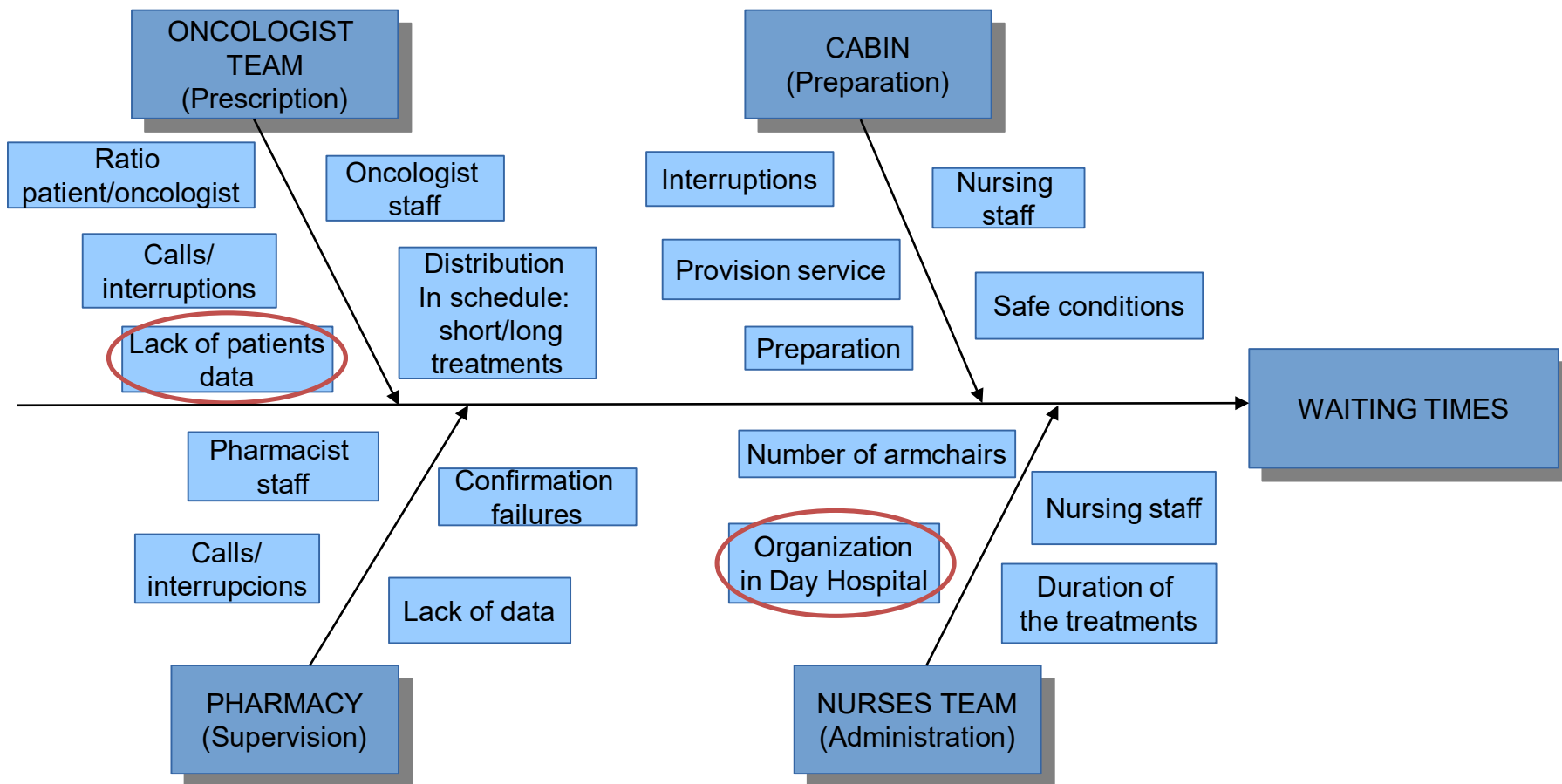


Team Members

Team member, role/discipline:

- Rafael López → Head of Medical Oncology Department (Leader)
- Elena Brozos → Consultant of Medical Oncology Department
- Beatriz Bernárdez → Pharmacist of Medical Oncology Department
- Nieves Mayo → Nursing supervisor of Day Hospital
- Rosa López → Clinical Trial Coordinator of Medical Oncology Department
- José Novo → Statistic Department

Cause & Effect Diagram



Diagnostic Data

We have detected a long waiting time for patients from the prescription of the intravenous treatment by the oncologist to its administration at the Day Hospital. This affects our patients' dissatisfaction.

Aim Statement

Our goal is to reduce the waiting time by 20% from the appointment with the oncologist to the administration of the treatment.

91 minutes

6 months

Measures

- **Measure:** Time from the oncologist visit to the administration of the treatment.
- **Patient population:** Patients under intravenous treatment
- **Calculation methodology:** Waiting time of the patients (mean)
- **Data source:** Statistical Program
- **Data collection frequency:** October and November 2018
- **Data quality:** Surveys done to patients (limitation, n=19)

Baseline Data

A statistical analysis of the waiting time of the patients who received intravenous treatments in October and November 2018 was carried out.

- Mean of daily treatments: 62
- Mean of the waiting time per patient: **113 min**
 - 13% of the patients wait 0-30 min
 - 12% of the patients wait 31-60 min
 - 18% of the patients wait 61-90 min
 - 20% of the patients wait 91-120 min
 - 37% of the patients wait more than 2h

Possible solutions (Brainstorming)

- Keep a limited number of the patients every day
- Balance the number of short/long treatments
- Analysis the day before
- Chemotherapy the next day
- Reorganization of Day Hospital

Prioritized List of Changes (Priority/Pay –Off Matrix)

Impact	High	Analysis the day before	Chemotherapy the next day Reorganize the Day Hospital
	Low		Homogenize schedules
		Easy	Difficult

PDSA Plan (Test of Change)

Date of PDSA Cycle	Description of Intervention	Results	Action Steps

Materials Developed (optional)

INFORMATION SHEET DELIVERED BY NURSES



Change Data

Conclusions

Next Steps/Plan for Sustainability

Name, credentials, job title
Name, credentials, job title

Entity

Project Title

AIM: Should be SMART (specific, measurable, attainable, relevant and time bound)

INTERVENTION: Should be described in such a way that someone not familiar with the project has a clear understanding of what you did...changes you tested.

-
-
-

TEAM: Be sure to include both the department and names. If too many names to list, list just the departments represented

- Department 1: names
- Department 2: names
- Department 3: names

PROJECT SPONSORS:

-
-

RESULTS: Should be related to your AIM statement. Be sure to title the graph, identify the SPC chart used, label the x & y axis, include a legend

Graph title

Insert graph

CONCLUSIONS: Should summarize the data in the results section, state whether or not the AIM was met. Conclusions are different than lessons learned.

-
-
-

NEXT STEPS: Describe additional plans for tests of change, how the intervention will be incorporated into standard workflow, etc

-
-
-