

# VASCULAR INTERVENTIONAL TEAM IMPROVE PROJECT



## PROJECT TEAM

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## PROJECT OBJECTIVE

Improve patient flow through Vascular Interventional.

**PROBLEM IDENTIFICATION:** In the Main Hospital and ART IR Departments, the average percentage of patients who were tabled at their scheduled procedure time is 20% for December FY13. This has resulted in patient dissatisfaction, patient delays, and increased staff overtime. The goal is to increase the percentage of patients who are tabled at their scheduled time from 20% to 90%.

## MEASURE THE IMPACT (Metric(s) and Goal):

- % of Patients tabled at their scheduled procedure time (Baseline=20%)(Goal=90%)
- % Room Utilization Rate for all IR beds (MH and ART) monthly (Baseline=55%) (Goal=85%)
- Time from patient arrival to patient tabled (Baseline=179 min.) (Goal=120 min.)
- Time from patient arrival in Prep to patient discharge from Prep (Baseline=294 min.) (Goal= 220 min.)
- Lead time for Patients arrival to discharge (Baseline = 332 min.) (Goal = 249 min.)