

VASCULAR INTERVENTIONAL TEAM IMPROVE PROJECT

PROBLEM ANALYSIS(Root Causes):

- Unclear roles and responsibilities
- Process inefficiencies and wasteful tasks
- Inadequate communication between departments and staff
- Lack of staff accountability
- Lack of process and procedure standardization for patient workflow

REMEDY SELECTION:

- List of roles and responsibilities for all staff involved in patient workflow
- Eliminate waiting waste in VIR Registration waiting room and Prep & Recovery
- Eliminate duplication of tasks between departments
- Develop standardized processes and procedures for staff involved with patient workflow
- Standardized handoffs and “Attack Team” rounds with patients
- MDs review patient cases and needs prior to day of procedure
- Implementation of Nurse Manager, Prep and Recovery Charge Nurses and Radiology Manager
- Development of workflow performance dashboard (time stamps) for patient workflow
- Develop specific staff expectations and corrective action plan for non-compliance

PRELIMINARY RESULTS:

Vascular and Interventional Radiology (VIR) worked on the Performance Improvement project for 14 months. The VIR patient flow was analyzed by a process that evaluated every single step of the patients' pre, during and post procedures. Several improvements were made in the patients' flow, safety, in the documentation, in the procedure supplies, and in the restructuring of the way VIR operates. The improvements resulted in increased safety (lower complications related to procedures and moderate sedation, contrast use), reduction of operational costs, increased efficiency (no duplication of documentation, patients are spending less time in the hospital), and increased employee and patient satisfaction scores. Two objective variables (patient on time on the table and room utilization) were re-analyzed recently and remarkable improvement was shown in the streamlining of patient care in Vascular and Interventional Radiology.