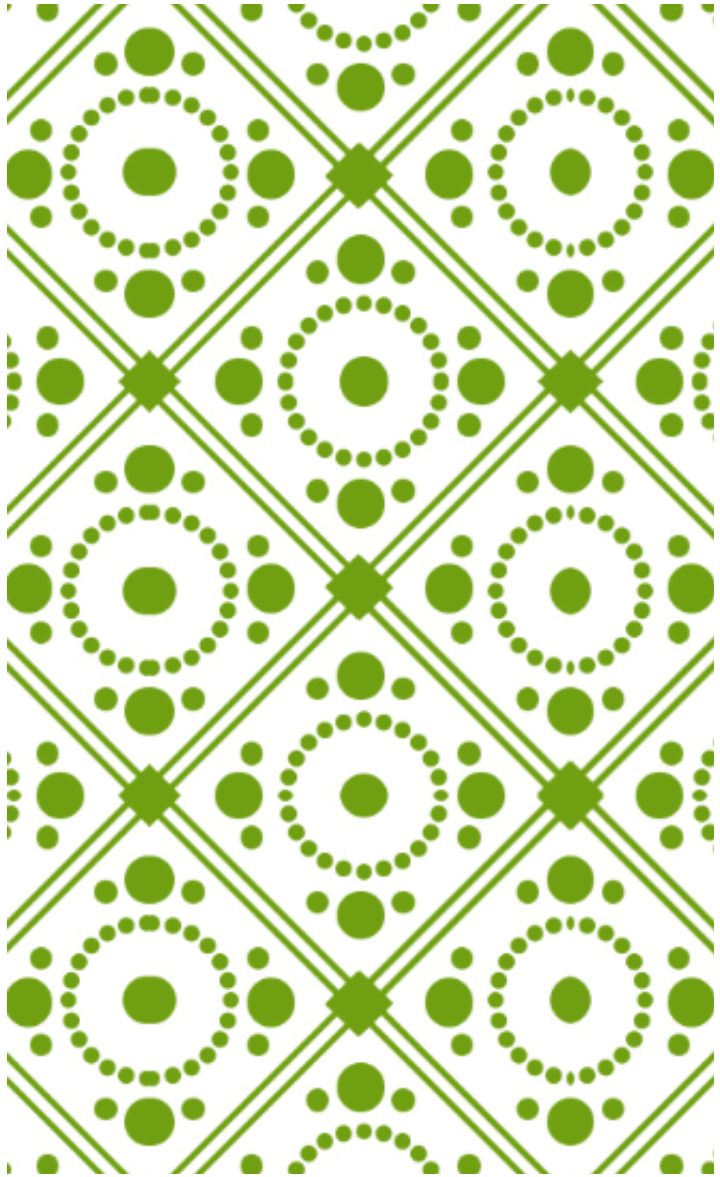


QUALITY 101

Susan Runyan, Runyan Health Care Quality Consulting

Quality Improvement

What does it mean?

Six Aims for Improvement of Health Care

The Institute of Medicine (now known as the National Academy of Medicine)

SAFE	**Avoid harm to patients, improves outcomes through error prevention, enhances diagnostic processes and assures continuous quality improvement**
EFFECTIVE	**Use evidence-based knowledge to limit overuse, underuse and misuse of testing services**
PATIENT-CENTERED	**Responsive to and respectful of patient preferences, needs and values**
TIMELY	**Reduce wait time for patients and healthcare providers so the next step in care is not delayed**
EFFICIENT	**Avoid waste of time, supplies, equipment, energy and ideas**
EQUITABLE	**No variance in quality due to patient characteristics such as gender, ethnicity, geographic location or socioeconomic status**

WHAT DOES THIS MEAN?

Quality improvement is the continuous study and adaptation of a healthcare organization's functions and processes to increase the likelihood of achieving desired outcomes.

Runyan
Health Care
Quality Consulting

DEFINING QUALITY IMPROVEMENT

- TQM (total quality management)
- CQI (continuous quality improvement)
- PI (performance or process improvement)
- Six sigma
- Lean
- Balanced scorecard
- Others?

Runyan
Health Care
Quality Consulting

Doing the right thing well

What is the right thing?

Evidence based practice

Regulatory guidelines

Standards of practice

What is well?

Benchmarking

DEFINING QUALITY IMPROVEMENT

QUALITY ASSURANCE VS. QUALITY IMPROVEMENT

	QA	QI
Model	Monitor and correct performance outliers	Processes/systems are in place that will affect performance today
Program Scope	Focused on organizational mistakes	Focused on outcomes and processes of organizational services
Population	Problem prone areas	High-risk, high-volume, problem prone areas
Data Collection	Retrospective data collection	Concurrent data collection Proactive risk reduction

Runyan
Health Care
Quality Consulting

QA and QI are Not the Same

Quality Assurance	Quality Improvement
Guarantees quality	Raises quality
Relies on inspection	Emphasizes prevention
Uses a reactive approach	Uses a proactive approach
Looks at compliance with standards	Improves the processes to meet standards
Requires a specific fix	Requires continuous efforts
Relies on individuals	Relies on teamwork
Examines criteria or requirements	Examines processes or outcomes
Asks, "Do we provide good services?"	Asks, "How can we provide better services?"

QA vs QI

FROM QA TO QI

QA	QI
Monitoring crash cart checks	Developing a code blue evaluation process: • Adequate number/type of staff response • Timeliness of team member response • Equipment availability/malfunction • ACLS guidelines followed? • Mock code blue drills

QA	QI
Monitoring radiology aprons for cracks	• Minimizing radiology wait times • Developing a “same day” mammography program • Developing a mammography registry and patient reminder system • Maintaining confidentiality in the waiting room

Foundations of Quality Improvement

- Customer focused
- Process oriented
- Data driven

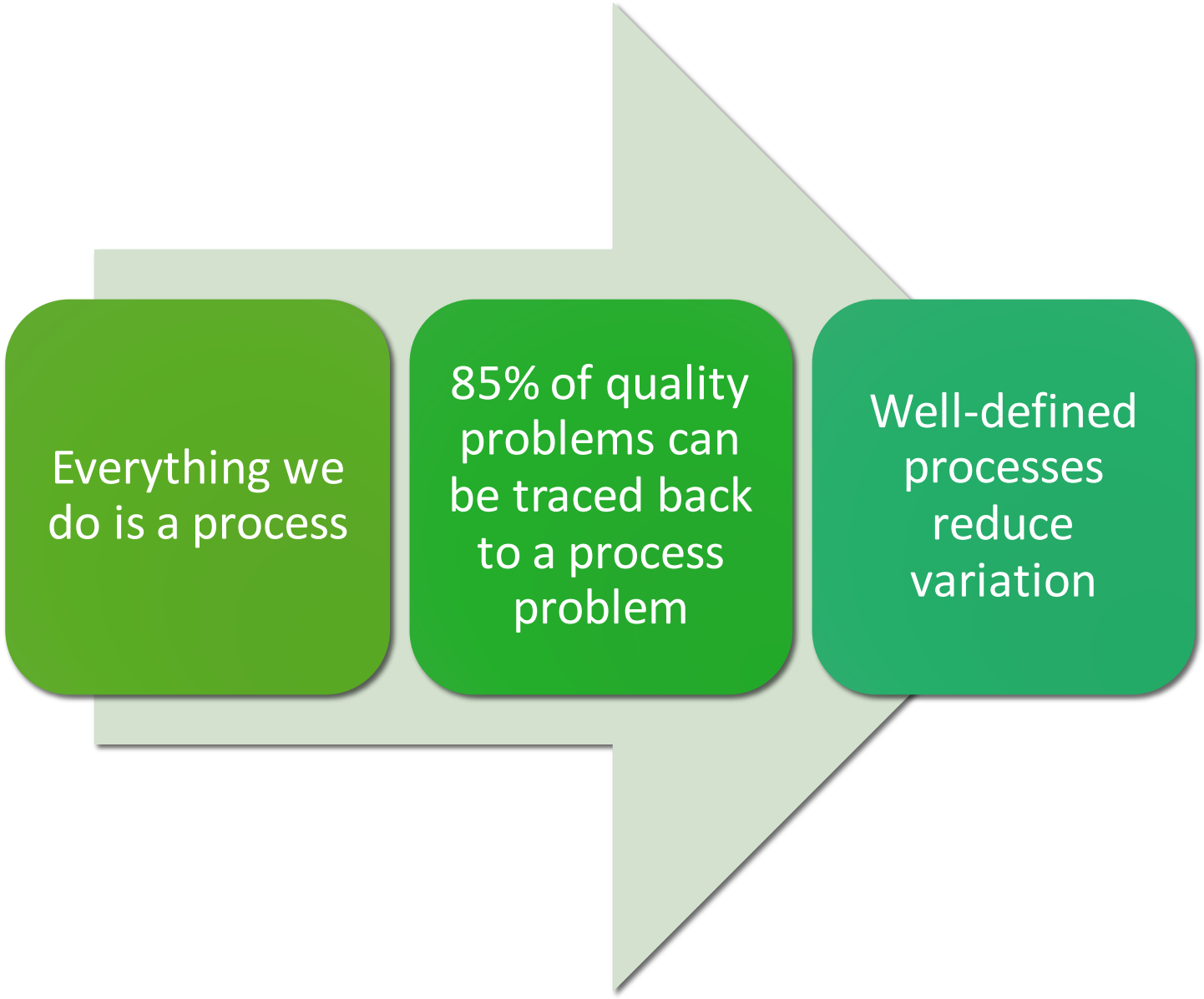
QI Foundation #1: Customer Focused

Who do we serve? Who are our customers? (consider both internal and external)

What does it take to delight our customers?

How can we help co-workers see how their work affects others in the process?

QI Foundation #2: Process Oriented



QI Foundation #3: Data Driven

- Keep data collection and measurement simple
- What data is currently collected that could be used?
- Is another unit/department already collecting the data?
- Can data be collected concurrently?
- Don’t use “gut” reactions only

Roundtable

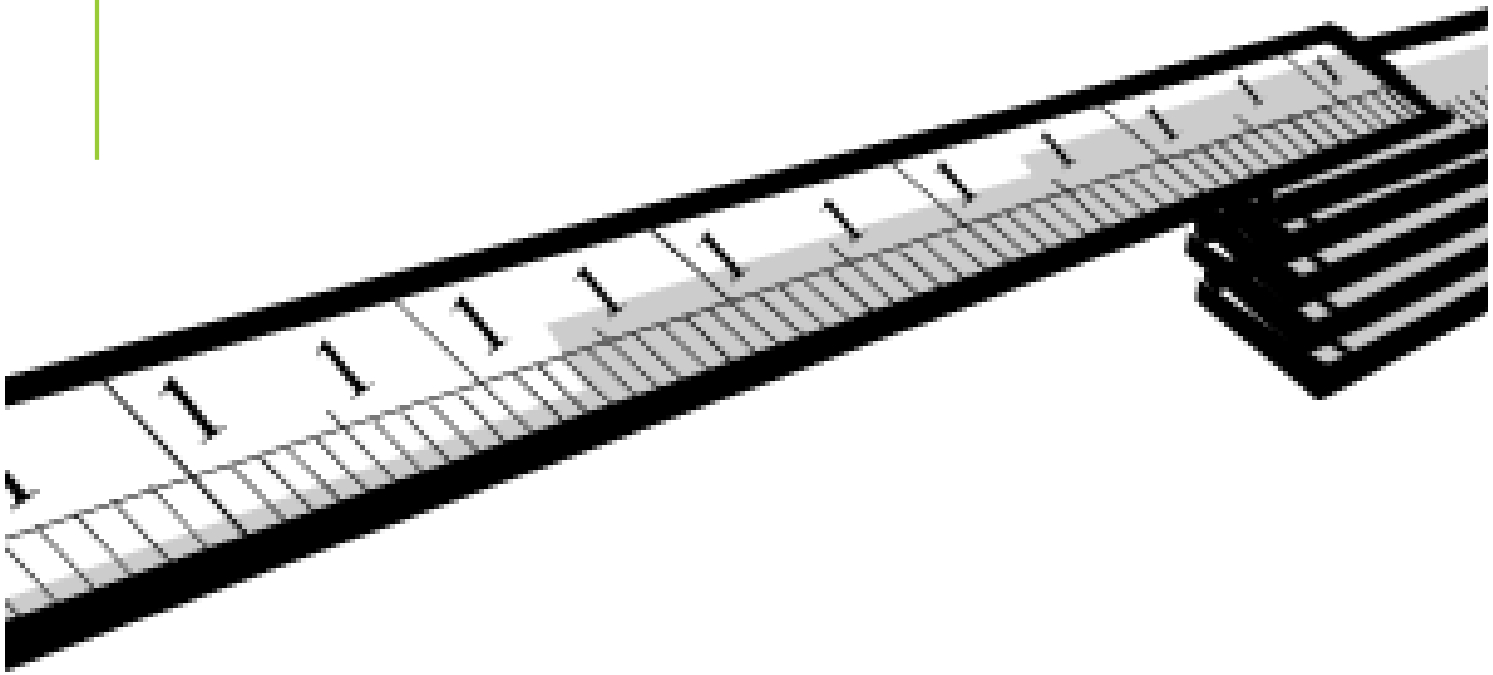
How Does Measurement Improve Quality?

By helping us:

- understand the variation that exists in a process
- monitor a process over time
- see the effect of a change in a process

By providing:

- a common reference point
- a more accurate basis for prediction



HOW WILL WE KNOW THAT A CHANGE IS AN IMPROVEMENT?

Measurement allows us to determine if change is improvement

MBQIP Measure:

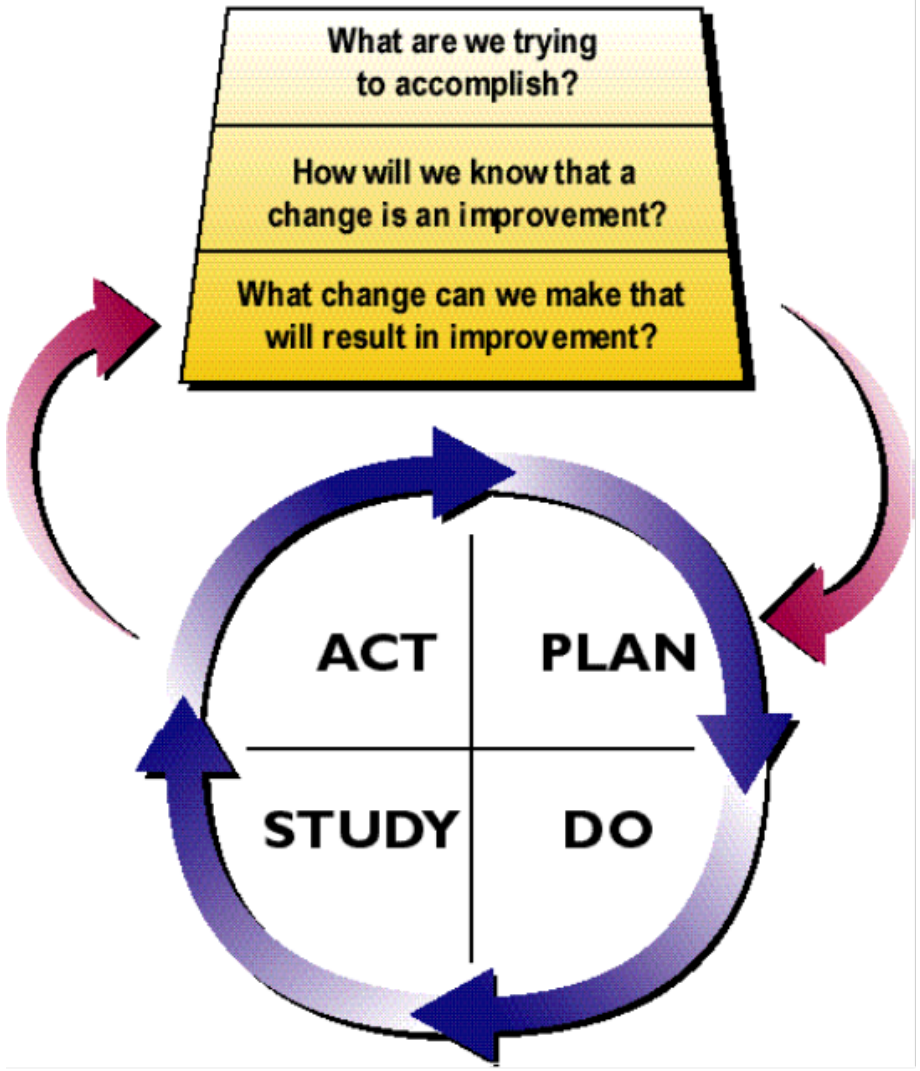
Median time to transfer to another facility for acute coronary intervention

Health Care Quality Consulting

UPSTREAM OR DOWNSTREAM

A leading measure is “upstream” in the process – can also be called a process measure

A lagging measure is “downstream” in the process – can also be called an outcome measure



QI Model for Improvement

Encourages learning by testing change on a small scale

- Pilot the change in one unit, with one physician, on one shift, etc.

Eliminates studying the problem to death

- Moves the team from contemplation to action

Minimizes data collection/data overload

Works well with "small numbers"

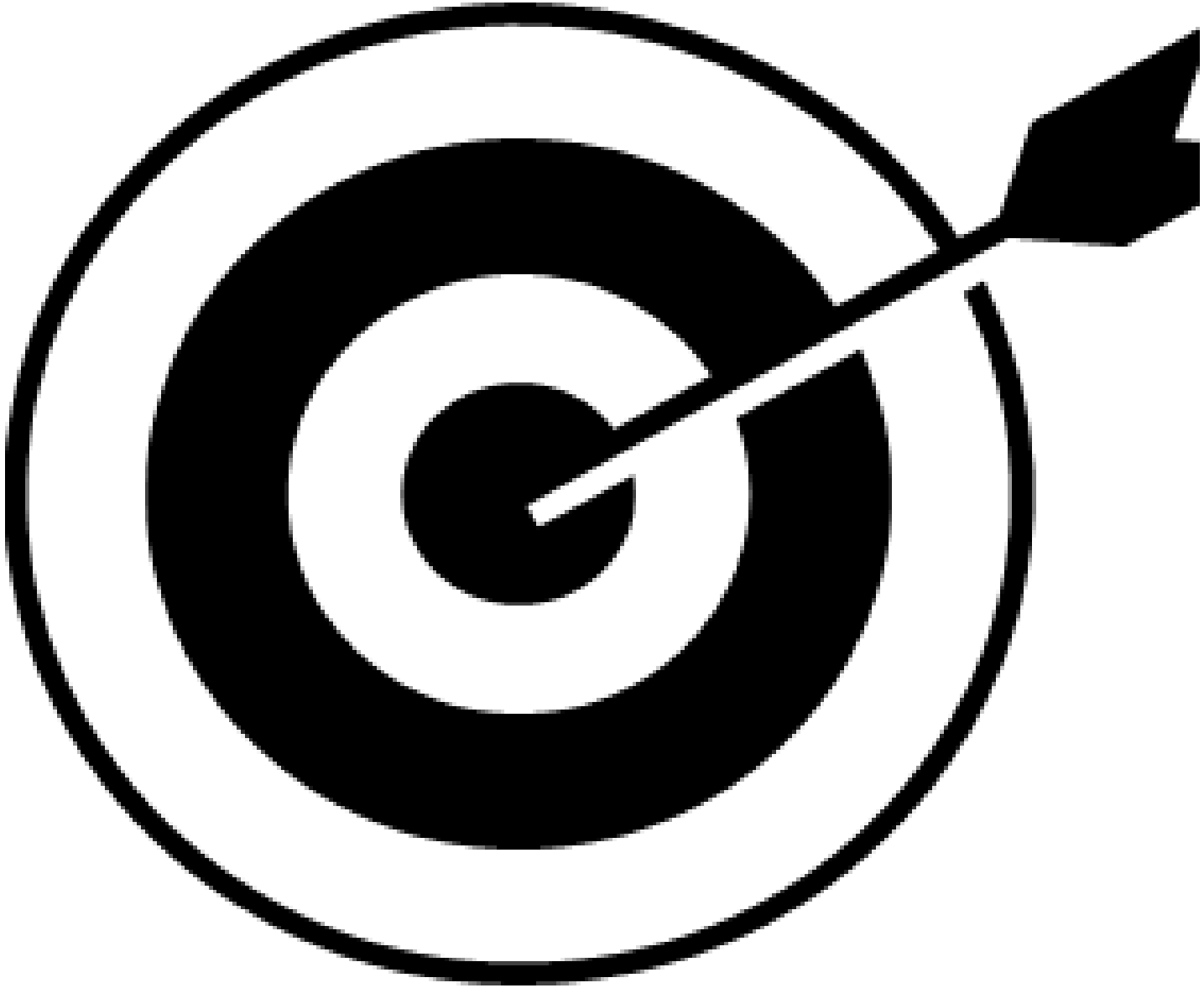
Uses three questions as a framework

Langley, G. J. (1996). *The improvement guide: a practical approach to enhancing organizational performance*. San Francisco: Jossey-Bass

What are we trying to accomplish?

Improvement begins with setting aims

- State aim clearly
  - Gain agreement from team
- Make aim measurable
  - Use a % goal
- Make aim achievable
  - Should be a “stretch”



Set goals and create a plan.

What changes can we make to achieve our aim?

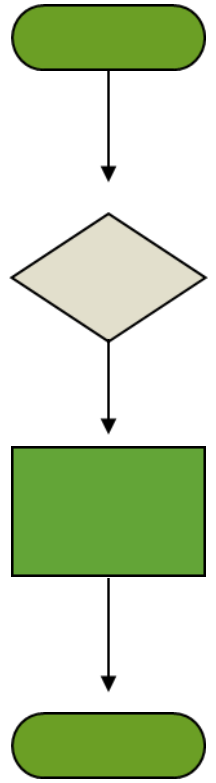
Follow the treatment path of a patient with acute myocardial infarction (AMI) from arrival in your emergency department to transfer:

EMS, Admissions, Respiratory, Radiology, Nursing, Physician, Pharmacy, EMS

What changes can we make to achieve our aim?

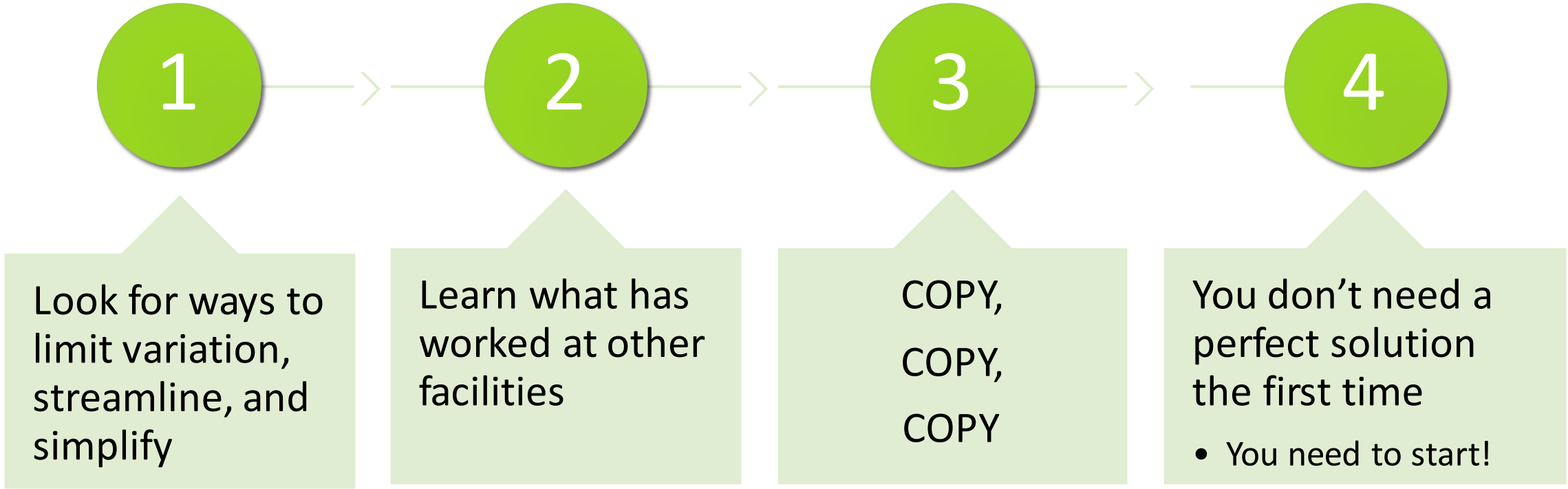
Understand how current process works

Flow chart the actual process -not what you want it to look like-but the reality



Look for:

- redundant tasks
- logical placement of tasks
- forgotten tasks
- delays
- missed opportunities
- continuity of care across units/disciplines and settings



What changes can we make to achieve our aim?

Implement and evaluate

Roundtable

Quality 101

Upcoming Sessions

Quality 101 Part 2:

- April 28 @ 1000

Open Office Hours – Networking time:

- May 26 @ 1000
- June 23 @ 1000
- July 28 @ 1000
- August 25 @ 1000
- September 22 @ 1000
- October 13 @ 1000

Questions?

Susan Runyan, MHCL, MICT
Runyan Health Care Quality Consulting
runyanhcquality@gmail.com
Phone: 620-222-8366