

Quality Improvement Community of Learning *QI: Who, What and Why*

May 25, 2023

3-4 PM ET



Welcome!

Thank you for joining the call! We will get started shortly.

- You may be muted upon entry to the call so please unmute yourself to talk
- We encourage you to listen, ask hard question, share information, speak your truth, stop blaming, and surface mistakes for learning.
 - Source: Beyond Measure: The Big Impact of Small Changes (2015)

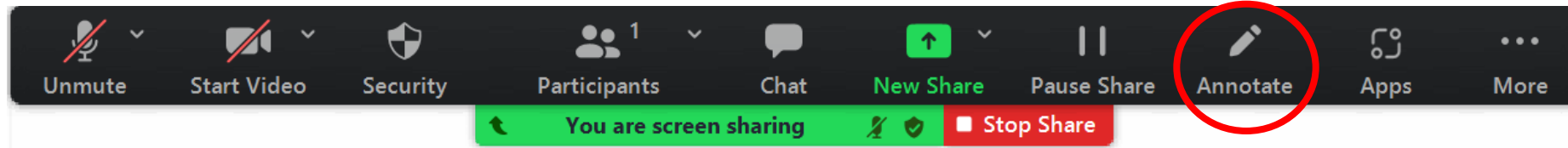


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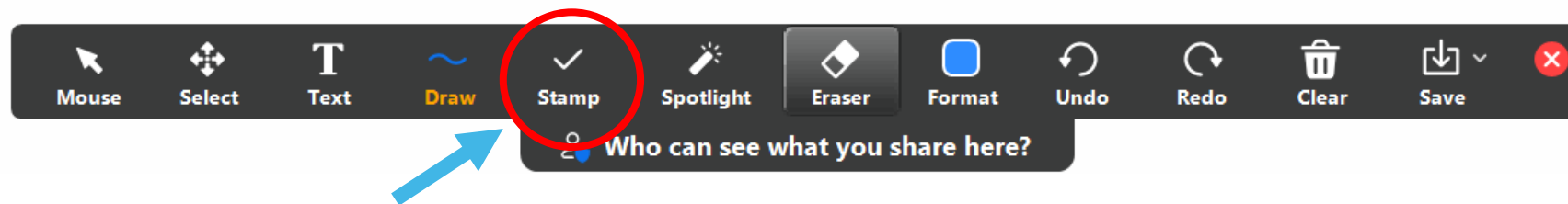
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Tell us where you're from!

- Take a moment to find the “annotate” button on your zoom tool bar



- Now, locate the “stamp” feature



- Pick your favorite stamp and let us know where you're joining from!





The NICHQ Team



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The faculty have nothing to disclose.



Objectives of the 4 QI Workshops

Support those new to quality improvement (QI) in:

- Laying a foundation for learning and improving
- Developing improvement capability for PQC, and other state or hospital-based teams
- Creating the environment for and leading quality improvement
- Applying QI principles to your existing projects



Discussion Questions

As we move through the workshop today, please consider and participate in discussing these questions:

- What lessons do you take away from the Red Bead Experiment?
- How are you integrating quality assurance (QA) and quality improvement (QI)?
- In what ways might you use your aim statement, for example – messaging leadership, inspiring action, facilitation of team interactions?



QI Community of Learning Overview

Session Title	Date and Time
Quality Improvement: What and Why? Foundations of Improvement	Thursday, May 25 th 2023 3:00 – 4:00 PM ET
Activating the How Using PDSA Cycles to Learn and Improve	Monday, June 12 th 2023 3:00 – 4:00 PM ET
Measurement for Improvement Collecting, Displaying, and Analyzing Data for Learning and Improvement	Monday, July 10 th 3:00 – 4:00 PM ET
Holding the Gains Sustaining Improvement and Cohort Learning	Monday, August 21 st 3:00 – 4:00 PM ET



Be sure to add all webinars to your calendar if you have not already done so!

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Agenda for Session 1

- Welcome & Introductions
- Quality Improvement Overview
- Models for Improvement
- Aim Statement Development
 - Creating the Case for Change and Assessing Readiness for Change
 - Assessing the gap
 - Writing an aim towards closing gap
- Leaving in action
- Q & A



Methods: What to Expect from this Community of Learning Series

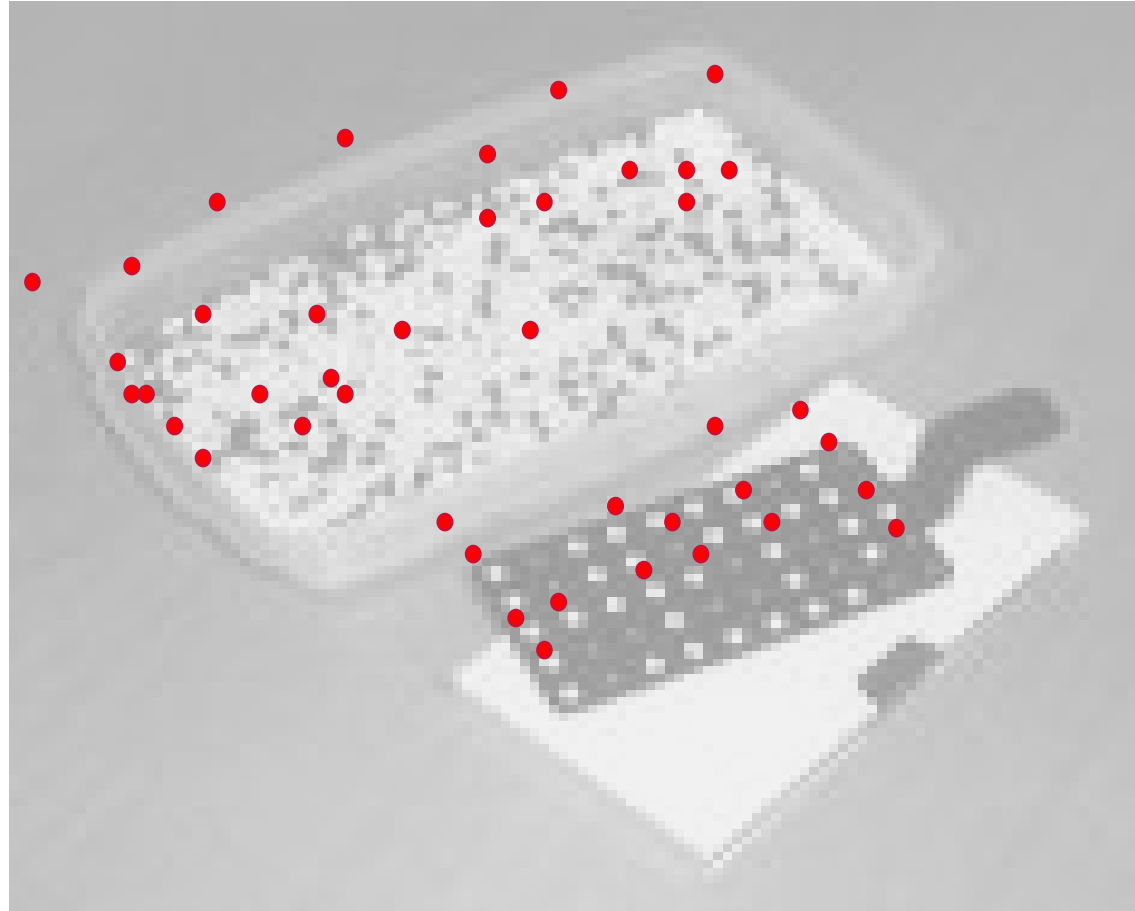
- Four Workshops
- Pre-work assignments for next workshop for action learning
- Document your improvement journey
- Targeted Coaching and Assistance calls



What is Quality Improvement?



Parable of the Red Beads



While watching The Red Bead Experiment

- What do you notice about the enthusiasm of the workers?
- What, if anything, does the manager do to make a difference in worker performance?
- How effective is the system for collecting and sharing data?
- What, if any, changes does management take to make a difference in reducing the number of defects?
- How are the workers encouraged to make improvements or changes to the process?
- Can you think of a time when you may have been a worker or manager inside of a “red bead experiment”? If so, what did it feel like?



IHI Quality Improvement Games: The Red Bead Experiment – YouTube



Underlying Principles of Quality Improvement

- Focus on systems
 - Systems not people—optimize the system
 - Systems are complex—break them down into processes
 - Equity is critical
 - Patient (customer) voice is vital
 - Leadership support is key (administrative and clinical)
 - Teams are critical to the work
- Frequent, ongoing measurement drives learning and action
- Improvement requires change. Changes are designed iteratively, through testing ideas, by using Plan-Do-Study-Act cycles
- People are key. Human factors matter both for the care team and those we serve!

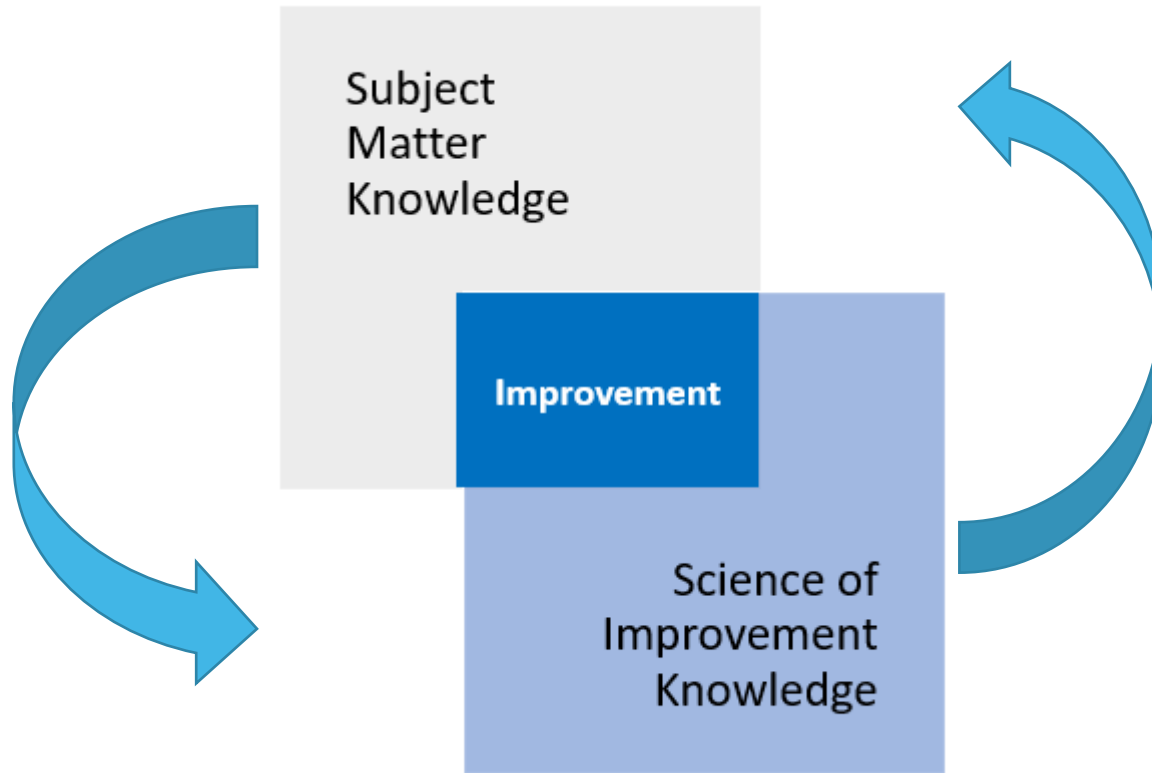


Adapted from slides by Don Goldmann, IHI Chief Medical and Scientific Officer; Institute for Healthcare Improvement

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Knowledge for Improvement



QI brings together subject matter knowledge and science of improvement knowledge in creative ways to develop effective changes that make things better.

The Improvement Guide, p. 76



QI is an Applied Science

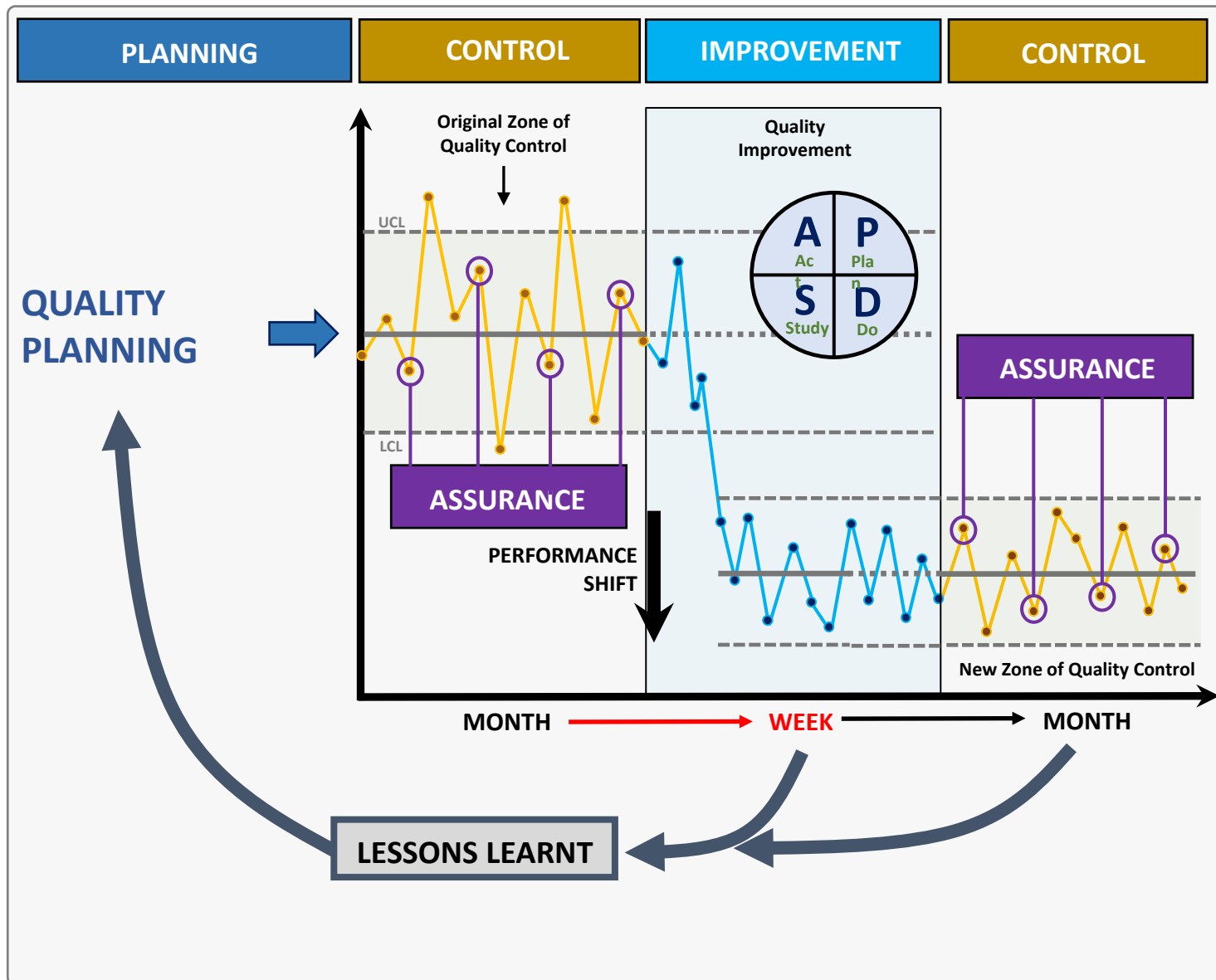
Applied science is a discipline of science that uses existing scientific knowledge and in healthcare - medical evidence to develop practical applications of technology or inventions.

- Aim Bundles are scientific basis for improving maternal care

QI happens in the **real world** where things are most often **complex** and **messy**.



[adapted from https://en.wikipedia.org/wiki/Applied_science](https://en.wikipedia.org/wiki/Applied_science)



ASSURANCE

Identify the needs of the customer/ the population

Develop a plan to meet the needs of the customer/ the population

Put in place structures and processes to manage the service and then scale up



East London

NHS Foundation Trust

SBD

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Shared with permissions of Bob Lloyd, VP IHI

Coaching People Toward a New Paradigm

	Quality Assurance	Quality (Performance) Improvement
Why?	Accreditation Satisfy regulator needs A program	To excel—get better and better Exceed all customers' needs (including regulators) A practice—way of life
Attitude	An add-on, required program	A management approach---necessary to be able to function at very best
Focus	Reactive--inspect and repair People – corrective action Ignore variation	Proactive—best practice & testing forward Process and system improvement Understand variation
Scope	Selected departments	Organization wide-across processes and departments
How	Audits Monitoring and Record reviews	Empowered workforce, that looks at data overtime Built into culture, way of thinking and doing

Adapted from John S. Dowd, Consultant in Continual Improvement by Sue Butts Dion and Phyllis M. Virgil



Fundamental to improvement to achieve results

- The **will**, desire and motivation to improve.
- Better **ideas** to achieve results.
- The ability to **execute** and carry out the work to make it happen.



Source: IHI White Paper 2007, *Executing for System Level Results*, Tom Nolan

- Rank these 3 items in order of difficulty

1 – easiest to do

2 – more difficult to do

3 – most difficult of all

A) Will

B) Ideas

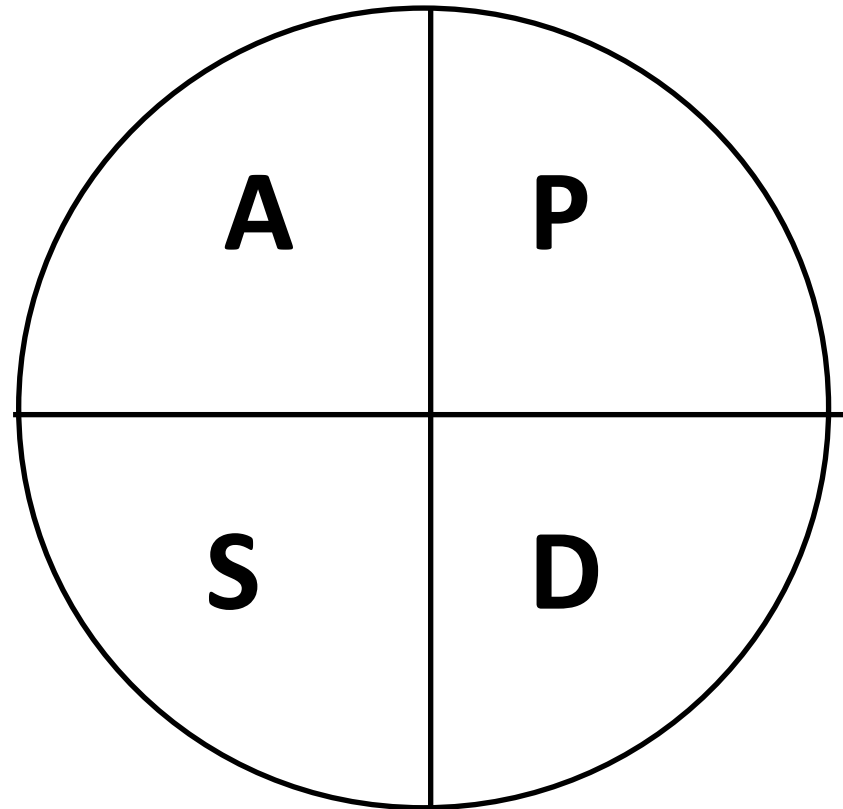
C) Execution



Models of Improvement

Many improvement frameworks to assist with change & improvement. Fundamental to all is PDCA

- Six Sigma (DMAIC)
- Lean
- TJC- 10 Step
- TJC - PDMAI
- Turning Point
- ADDIE Model
- FOCUS PDCA
- Model For Improvement (MFI)



Teams Need a Method to Execute and Accelerate Improvement

Model for Improvement



Identify Aim - what, how good, by when, for whom, where, why

Measure data over time using run or control charts

Generate ideas using logical, conceptual, creative thinking

Cycle of Improvement

Rapid Testing

Think BIG

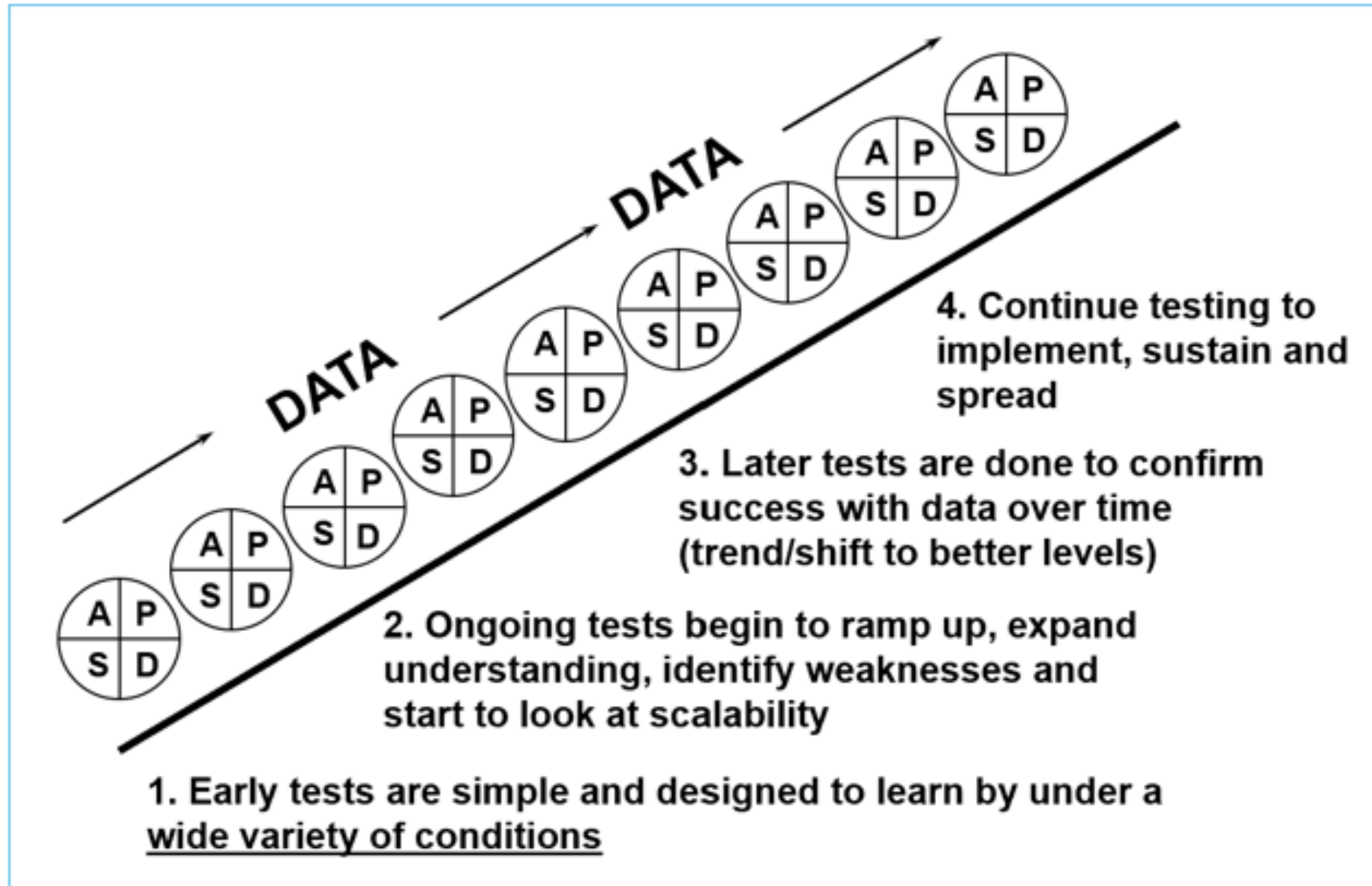
Start SMALL



Source: Langley, et al, The Improvement Guide, 2009

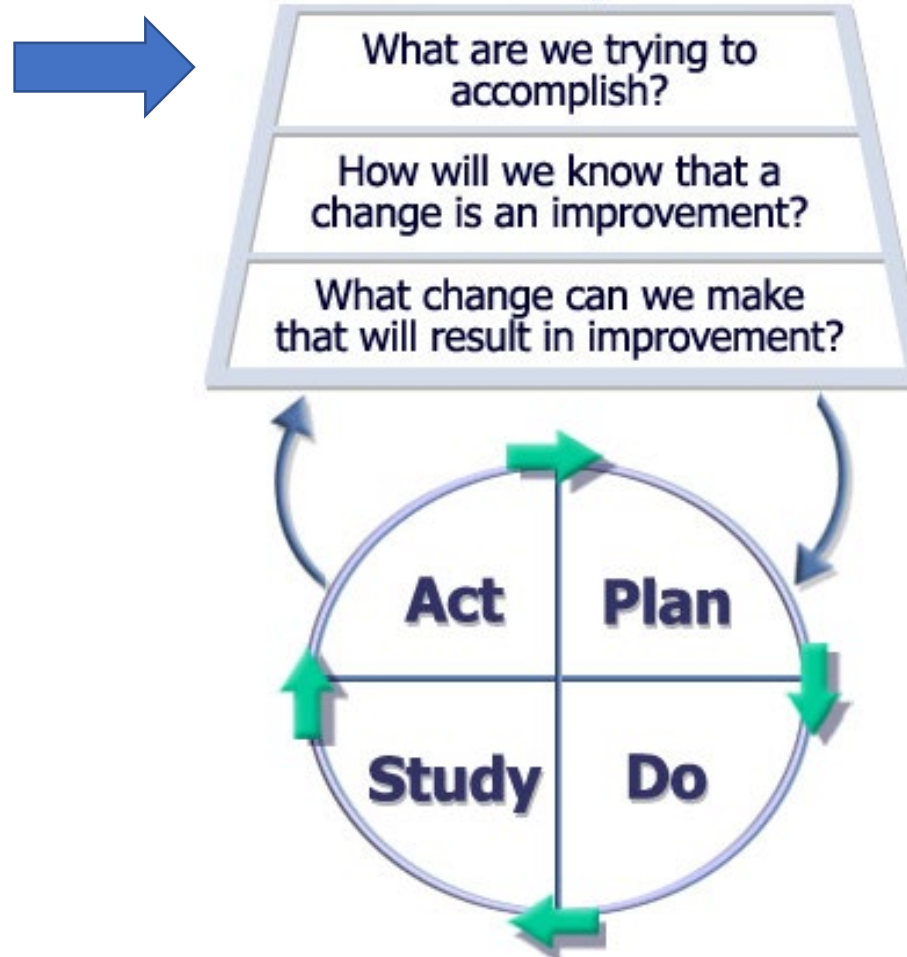
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Robust Testing Using PDSA Cycles



Model for Improvement

- Assess current state
- Identify the problem including equity gaps
- Consider analysis tools like fish bone diagrams, pareto charts, flow charts
- Identify what matters most
- Use baseline data
- Design project and bring together a diverse team. Include those with lived experience



Source: Langley, et al, The Improvement Guide, 2009



Building an Aim Statement

Start with

- What are we trying to accomplish? What do we want to do?
- By when?
- How much improvement; stated so we can measure it?
- For whom, e.g., all birthing people, or birthing people where equity gaps exist



Photo by [Jamie Street](#) on [Unsplash](#)



Thinking back to the Red Bead Experiment

- What was the aim?
- How clear was the aim?
- Did the staff share the benefit of the aim?
- How were the goals set? Were they attainable in the given system?
- How was the aim used as the "true North"
- How did heart fit in?



The Role of an Aim Statement

The aim statement is:

- Not just a vague statement
- But a clear commitment to achieve a measured improvement
 - In a specific *system/process*
 - With a definite *timeline*
 - And including numeric *goals*

“Hope” is *not*
a plan

“Soon” is
not a time

“Some” is *not*
a number



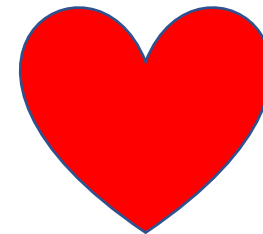
Four Parts to an Aim Statement

- What do you intend to accomplish?
- For whom?
- By how much?
- By when?



Example Aim Statement

By Valentine's Day 2024, we intend to reduce harm from severe maternal hypertension by increasing the number of birthing people with acute-onset severe hypertension that persists for 15 minutes treated within 60 minutes to 95% or higher.



Collaborate with birthing people who have lived experience and create an aim statement that is written in the first person

- I would like my care team to monitor my blood pressure no matter where I am in my care journey – If I have high blood pressure, I want you to check it and validate the reading and take some action before it gets worse. Please teach me how to manage my blood pressure and what to watch out for after I leave the hospital. Help me not have a stroke.



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Aims are important components of an improvement charter: for any type of improvement project

Hospital Project Charter

Background

Aim

Family of Measures

Theory of Change

Team composition

PQC Project Charter

Background

Aim

Family of Measures

Theory of change

Hospital team composition

Offer and Obligation of PQC

Benefits of participation

Obligation of participating teams

- Leadership
- Reporting and participation in project



Assignment for action learning



- Using the worksheet, write an aim statement for a future project you are dreaming about or for a personal improvement project.
 - If you are attending as a team (e.g., participants from the same system or from the same PQC) you can choose to do this collaboratively.
- Include:
 - What you want to improve
 - For whom
 - By when
 - Write a concrete measurable goal(s)
 - Remember to consider



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Next steps:

- Submit your completed aim statement and team worksheet by Wednesday, June 7th, 2023
- Mark calendar for next workshops
 - Monday, June 12th 3:00 – 4:00 PM ET
- If you have not done so already, register for all QI COL sessions and download them to our calendar:
<https://nichq.zoom.us/meeting/register/tJMtf-2vrjlvHNeOQsssPR1jeVR-E2PVgn8z>





Resources

- [NICHQ QI 101](#)
- [NICHQ QI 102](#)
- How to Improve, IHI Website [How to Improve | IHI - Institute for Healthcare Improvement](#)



Reminder: TA Sessions

- Sign up for a TA session at this link:
- Complete this TA request form to set up a session with Jane or Sue when you're ready! One person from your state, if joining as a state, should fill this out.





Session Evaluation