

Quality Improvement Basics: Introduction to Quality Improvement Transcript

Slide 1 Objectives

After completing this module, participants will be able to

- Define quality improvement in health care.
- Discuss the purpose of quality improvement in health care.
- Describe four foundational elements of quality improvement.

Slide 2 Health Care Quality Defined

First, let's get grounded in what we mean by quality. The definition introduced in the seminal Institute of Medicine report, *Crossing the Quality Chasm* released in 2001, is still widely used today. "The degree to which health care services for individuals and populations increase the likelihood of desired health outcomes and are consistent with current professional knowledge." That same report introduced the six dimensions of health care quality that are still used in the health care quality framework today.

You can remember with the mnemonic STEEEP, with an extra E. STEEP stands for Safe, timely, effective, efficient, equitable, and patient-centered. Together, these are true north when it comes to health care quality.

Slide 3 It's the System, NOT the People

When we work in quality, we focus on systems – we know that people behave in ways that the systems they work in guide them, whether that's to the right thing or not. In other words, people in health care almost always show up with the intent to do the right thing and to help patients heal and be healthy, yet systems sometimes get in their way.

We remind ourselves that every system is perfectly designed to produce exactly the results it produces.

Slide 4 We're Human

Despite our best intentions, because we're human, we're fallible. We often get so focused on the task at hand that we lose the context, which can produce errors and harm. I'm sure the folks in these photos were thinking, "I really need to get this task accomplished." But look at the risks they put themselves in...we humans tend to do this, and I'm sure you can think of your own personal examples.

Slide 5 Definition of QI in Health Care

In health care, quality improvement, or QI, can be defined as a structured organizational process for involving personnel in planning and executing a continuous flow of improvements to provide quality health care that meets or exceeds customer expectations.

Slide 6 What does quality improvement help us accomplish?

Quality helps us achieve the goal of doing the right thing and doing it 'well'...in patient care, making sure that the right care is provided to patients every time.

Determining what that ‘right thing’ is includes basing our care on evidenced-based practices or tested change solutions when evidence-based practices are not established, adhering to necessary regulatory guidelines and professional standards of care and practice.

Quality improvement is a method – using science and supporting tools -- to help us incorporate these ‘right things’ into practice and create consistent, repeatable, dependable, and ever improving processes.

Quality tools help us determine what ‘doing well’ is by benchmarking our performance against external standards and internal prior performance through the use of data, measurement and data-driven decision making. A focus on quality has us continually asking how are we doing over time? How do we compare to our peers?

Slide 7 QI Helps Bridge the Gap

Here you can see a representation of the care gap we are aiming to close with Quality Improvement science, culture, and tools. We identify opportunities for improvement where there is a gap between what we know from research and best practices, and how we actually deliver care. In health care, we are continually learning new and better ways to improve the health of the population and delivery of care to individuals. However, there is almost always a delay in translating that knowledge into practice. Closing that gap is an essential role of quality improvement.

Slide 8 Quality is Everyone’s Responsibility

For many organizations, and for quality managers in particular, the key to success is understanding, and helping others to understand *why* things are being done the way they are. Leaders must help everyone in the company to connect the dots, – that is, to understand the cause-and-effect relationship between quality management (policies, processes, etc.) and quality itself (achieving desired results). When that connection is made, quality truly becomes everybody’s job. Quality is not a program or a project; it is not the responsibility of one individual or even those assigned to the Quality Department.

It is important to instill principles of quality at all levels, helping everyone in the organization — every employee, executive, service user, caregiver, and consultant— feel driven to achieve excellence.

Your organization will make meaningful and sustainable quality improvements when people at every level of the organization feel a shared desire to make systems, processes, and outcomes better every day.

Slide 9 Quality is a way of thinking about work.

A story is often told to highlight this point which may be true, or partly true. In 1969 when the US was planning a trip to the moon, the major TV networks had crews stationed at NASA headquarters in Houston, Texas, to cover the launch. One day the reporters and camera crews had some downtime while waiting for NASA officials to arrive at the press room.

As they passed the time milling about the halls, someone noticed a janitor coming toward them with a mop and thought, “Well, nothing else to do, why don’t we film some ‘B’ footage to have on hand.” A reporter happened to have a microphone handy, so he said to the approaching janitor: “So, what’s your job at NASA?” As the story goes, the fellow paused, leaned on his mop, looked thoughtfully into the camera, and said, “My job is to help us get to the moon.”

Quality is a way of thinking about work, how you approach work every day.

Slide 10 What do you need to know and do?

What do you need to know and do as a health care organization member and/or leader?

First, it is important for you to know some of the basics about quality improvement so that you have familiarity with the concepts and language. These include the foundations of QI and a structured improvement model, such as the Model for Improvement – one part of which is Plan Do Study Act or PDSA cycles.

You may be in a position to lead or support QI efforts with your teams. If you have areas of responsibility as a leader, either formally or informally, the tone you set and the actions you take to model what you want and need your staff and clinicians to do matters. When you are in a leadership role, people listen carefully and watch you carefully. Throughout this course, we will talk more about your leadership role in establishing and sustaining a culture of quality.

Slide 11 Foundations of QI

QI has four foundational elements: being customer focused, process and system oriented, valuing quality as a team effort, and being data driven.

Quality Improvement should be customer focused...although defining “customer” can be a bit difficult in health care in that the person paying is not necessarily the person who appears at your door seeking or needing your services. In health care, the patient, at least an insured patient, pays some as a premium, co-pay, or deductible, but the bulk of their care is paid for by an insurer such as a health plan, Medicare, or Medicaid. This means you have multiple different customers you are paying attention to, and they might at best have different goals and at worst, conflicting goals. The work and care delivered in a health care organization is ultimately a series of tasks occurring within a system that is designed to yield a desired result or an outcome. As we said before, every system is perfectly designed to produce exactly the results it produces. One of the gurus of quality, Dr. William Deming, tells us that 85% or more of quality problems can be traced back to a process or system problem. QI helps us to step back and determine where those missteps are occurring, understand why they are occurring and take steps to help staff avoid those.

Third, quality is a team sport. It requires participation from the people involved in a process – those who care about the process. Not only are strong leadership roles critical to guiding and managing our team efforts, we also need clinicians, direct care staff and other subject matter experts who understand the step by step details of the process we are trying to improve. Everyone that is involved or affected by steps in the process should be involved or represented in evaluating and planning for improvements to that process. Their individual knowledge, wisdom, and experience are incredibly valuable and can lead to better team decision making – in fact, staff at all levels and in any part of your organization know exactly what is happening, how their processes really work...or don't...where the problems lie (or the workarounds are) and where opportunities for improvement exist. If processes aren't working well, always pay attention to how the system is impacting performance (for example, culture, resources, equipment, staffing).

Lastly, quality improvement is based on reliable and accurate data...which is essential for decision making. We need an accurate, data-driven picture of how things are working in our organization. The data helps us to focus our actions in the right places and helps us determine if changes are working as intended to lead to improvement. Many health care workers are working in a resource constrained environment, so you want your time and energy, and that of your staff, focused on the smart and strategic things. Reliance on data doesn't require that we add complexity or volume to the data we collect. We always encourage an initial approach of ‘start where you are and use what

you have' when it comes to data collection. You'll want to coach your team not to rely only on their 'gut feeling' to understand a process. Instincts are important, but by taking a 'trust but verify' approach, you can let the data you collect and measures you use reveal the truth about any process you're seeking to improve.

Individuals in health care organizations had to create new processes on the fly at the start of the pandemic when suddenly seeing severely ill covid patients. For example, in hospitals, what new protocols and standards did you implement? How did you determine when to triage and transfer and when to care for someone in your hospital? What was your process when there was no place to transfer? What was your process for securing PPE? And what was your process if no new PPE was available? All these new processes were suddenly at the fore, and if your hospital has a strong foundation in quality, you may have been more resilient amidst the chaos of the pandemic.

Slide 12 Quality Models and Frameworks

Let's talk about quality models and frameworks. There are many approaches to quality management and improvement you may be familiar with— Model for Improvement, Lean, Six Sigma, Baldrige, High Reliability Organizations, and models such as Agile Implementation that draw key lessons from dissemination and implementation science, and more.

While their methodologies vary, a few core concepts are consistent across them.

Improvement models and frameworks:

- Draw upon multiple disciplines, for example, change management, psychology, behavioral economics, systems and human factors engineering.
- Are leadership driven and involve staff at all levels and across disciplines in order to achieve sustainable and meaningful improvement?
- Include a systematic approach for change – with understanding of and attention to how change happens. The systematic approach includes identifying and prioritizing areas to address, establishing aims, and identifying and implementing interventions.
- Include ongoing measurement and evaluation of progress. both qualitative and quantitative data are gathered and analyzed to understand if changes are implemented as intended and driving the desired outcome, or if plans need to be revised.

There is not a right or wrong QI model or framework for your organization, and really, any model's effectiveness is all in the execution of it. That said, we delve into a bit more detail on the model for improvement in a subsequent module. The Model for Improvement is grounded in the scientific method.

Slide 13 QA and QI

Many of you may be familiar with quality assurance. It can be helpful to compare quality assurance and quality improvement, as shown in this table.

Both are essential to health care and health care organizations, and they are complementary -- you might think of them as two sides of the same coin. They differ by the characteristics described here – essentially, quality assurance is about consistently meeting standards, and quality improvement is about continually raising the bar. QI builds on QA.

For example, hospitals are committed to and working on antibiotic stewardship. There are seven core elements of antibiotic stewardship for hospitals -- Hospital Leadership Commitment, Accountability, Pharmacy Expertise, Action, Tracking and Reporting, and Education. If you work in a hospital, you likely have a process in place to assess compliance with the seven core elements,

including retrospective chart review on antibiotic prescribing. This compliance check and retrospective review is quality assurance. However, when you then identify one or more of the core elements that you want to improve, perhaps even setting a goal above and beyond what the CDC guidelines are, you engage in quality improvement as you raise the bar on performance.

Slide 14 In Summary

In summary:

- In health care, quality improvement is defined as a structured organizational process for involving personnel in planning and executing a continuous flow of improvements to provide quality health care that meets or exceeds customer expectations.
- Quality helps us achieve the goal of doing the right thing and doing it ‘well’...in patient care, making sure that the right care is provided to patients every time. Quality improvement is a method – using science and supporting tools -- to help us incorporate these ‘right things’ into practice and create consistent, repeatable, dependable, and ever improving processes.
- Four foundational elements of QI include: being customer focused, being process and system oriented, valuing and implementing quality as a team effort, and making data driven decisions.