Montana Quality & Patient Safety Fellowship 2021

Kickoff Meeting



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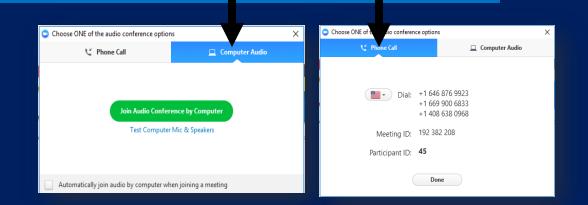
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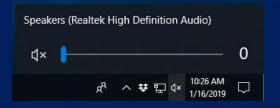
Zoom Platform Quick Reference

When you click on the zoom link:

- You will have to choose one of the audio conference options: Phone or Computer
- If you are experiencing a bad audio connection through your computer, try dialing in to the phone line.
- If you are experiencing an echo and dialed in over the phone, mute your computer speakers.

If you didn't see the phone numbers to dial in Click on the Join Audio icon

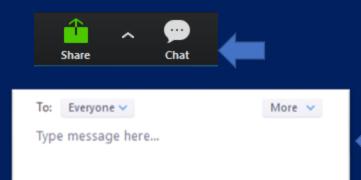








Zoom Platform Quick Reference



You can use the "Chat" feature to enter a question. Click the Chat to open the in-meeting chat.

You can type in the message box to enter your question or unmute your phone to ask a question.

Please mute your phones during the presentation



Goals for the Program

- Develop a foundational understanding of core concepts related to health care quality and patient safety
- Hone necessary skills required to lead health care quality and patient safety projects
- Apply skills to a SMALL quality improvement project from start to finish



Performance Improvement Project

Complete your project plan prior to April webinar

 Set up coaching calls between April and May with Kim and Barb

Complete project report prior to July webinar



Performance Improvement Project Planning

Improvement Project Worksheet



AIM Statement: What do you want to accomplish?

Remember, your AIM statement should be specific, time sensitive, and measurable. It much in the statement.

My project AIM:

Complete what / by when / by how and upload to April we binar Changes to Test: What kind of process changes might lead to an improvement? What SMALL change will you test to see if you are on the right track? What are some of the drivers that might support the improvement you are seeking?

(For example, if the AIM is to lose 10 pounds by the end of the calendar year, what types of changes would support reaching the goal? A specific amount of exercise for a specific number of days per week? A specific change in diet?)

Change I would like to test:



ownload the IHI Quality Essentials Toolkit at: http://www.ihi.org/resources/Pages/Tools/Quality-Improvement-Essentials-Toolkit.aspx

Selecting an Improvement Project

BIG IDEAS HAVE SMALL BEGINNINGS

www.minnamay.com

Selecting an Improvement Project – A Little Detective Work for You First

- How do we compare to others in this area?
- What has been reported?
- What small step could be taken towards improvement?
- Are others interested/engaged in this topic?
- Who needs to be engaged for this to be successful?





Introduction to Health Care Improvement and The Model for Improvement

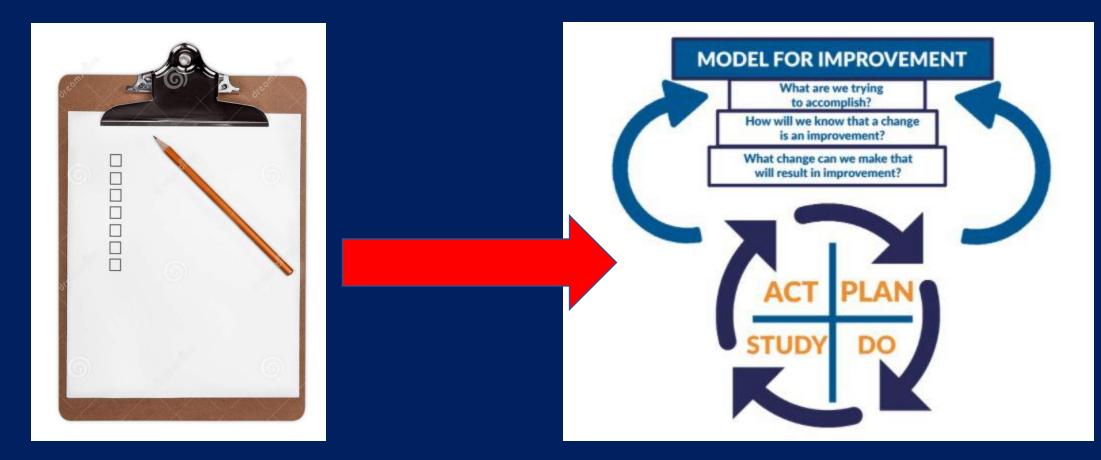


Health Care is Increasingly Complex



- How do we provide care that is safe in the face of complexity?
- How do we address disparities in access to care and health outcomes?
- How do we put our patients and families at the center of the care team?

History of the Quality Improvement Movement







Walter Shewhart joins the inspection team at Western Electric and starts to rethink quality control

1918



working with Shewhart at Western Electric and learns about quality control 1950's Deming works in Japan following WWII to improve manufacturing. PDSA cycle is developed 1996 Avedis Donabedian formulates the Structure – Process – Outcomes model of quality evaluation.



1924 Joseph Juran begins working at Western Electric and eventually becomes head of industrial engineering and focuses on production defects.

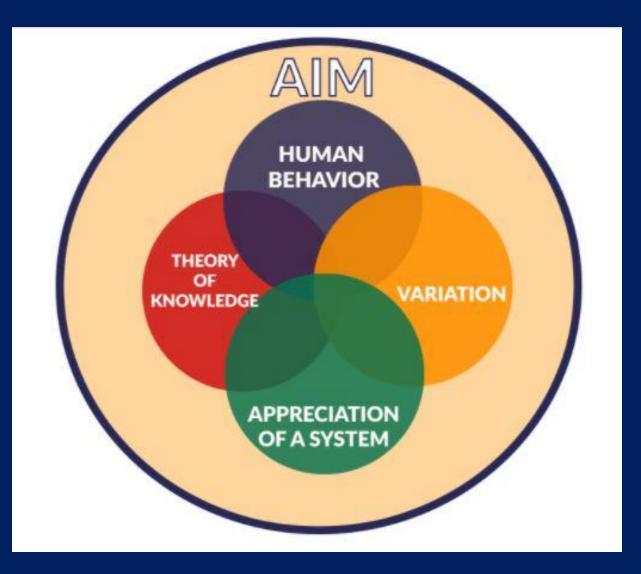
1939 Deming and Shewhart publish a scientific process for prevention of defects called specification – production – inspection Later known as the Shewhart Cycle 1993 Deming writes *The New Economics* which details the System of Profound Knowledge Acc Plan Study Do

What are we trying to accompl

Associates in Process Improvement develop the Model for Improvement



Deming's System of Profound Knowledge





Improvement as a Change Management Exercise

While all changes do not lead to improvement, all improvement requires change.



How Do We?

- Decide to make a change
- Identify what needs to change
- Make a change
- Decide if the change resulted in improvement
- Be assured the change can be reliably sustained



Decide to Make the Change

In God We Trust, All Others Must Bring Data

- Internal data
- External data
- Publicly reported data
- Anecdotal data

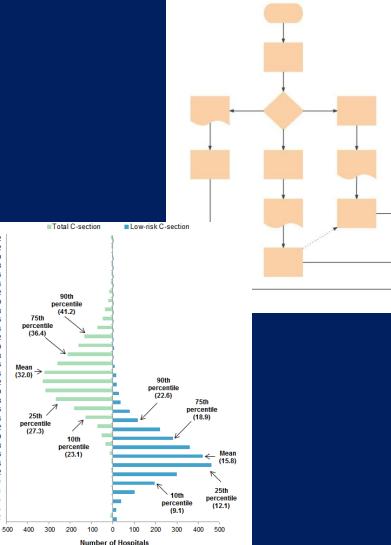




Identifying What Needs to Change

- Talk to the experts Go to the Gemba
- Benchmark performance
- Prioritization
- Flowcharting current processes





≥62 60 to <62 58 to <60 56 to <58 54 to <56

52 to <54 50 to <52

48 to <50

46 to <48

44 to <46

42 to <44

40 to <42

38 to <40 36 to <38 34 to <36 32 to <34

30 to <32

28 to <30

26 to <28

24 to <26

22 to <24

20 to <22

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16 to <18

14 to <16

12 to <14 10 to <12 8 to <10 6 to <8

4 to < 6

2 to <4

0 to <2

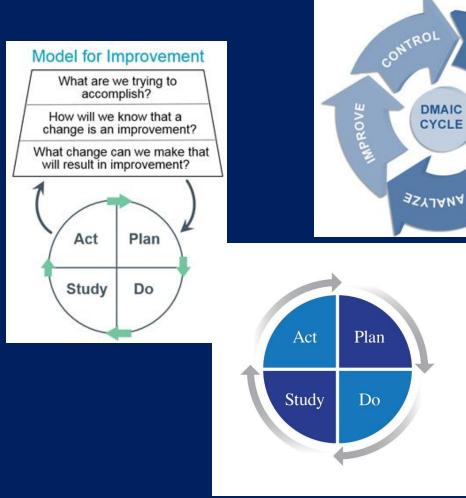
Rate

Hospital-Level C-Section 100 Total or Low-Risk Do

Many Methods – Same Goals

DERINE

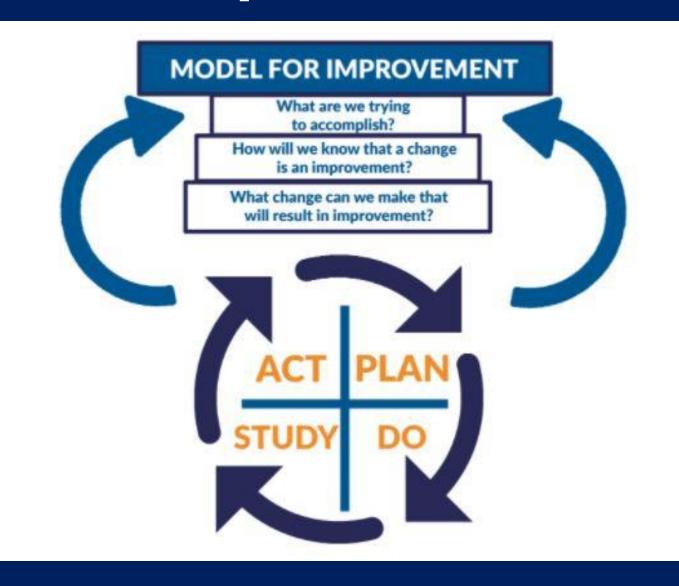
MEASU



DMAIC
Model for Improvement
PDSA cycles



The Model for Improvement





Step 1: What Are We Trying to Accomplish?

AIM Statement





What Makes an Effective AIM Statement?





Step 2: How Will We Know That a Change is an Improvement?

Measurement





What Should We Measure?

- **Outcome** what do we want to have happen?
 - Mortality rate
 - Adverse event rate
 - Infection rate
 - Usually, the goal of outcome measures is to be as low as possible
- **Process** how well are we completing the recommended steps in the protocol?
 - Hand hygiene compliance
 - Hourly rounding
 - Surgical time out
 - Usually, the goal of process measures is to be as high as possible
- **Balancing** did our work to prevent one type of occurrence accidently cause another type of unwanted occurrence?
 - Patient falls rates compared to restraint usage rates
 - Antibiotic utilization compared to *C.difficile* rates
 - Our CAUTI rates went down (less catheters) but our falls with injury went up

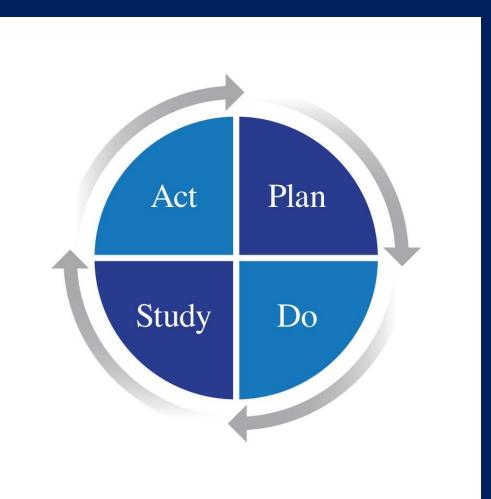


Data for Quality vs Data for Research



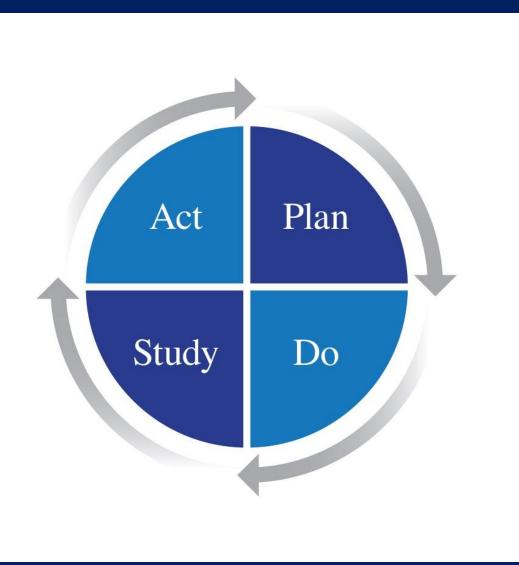


Step 3: What Change Can We Make That Will Result in Improvement?

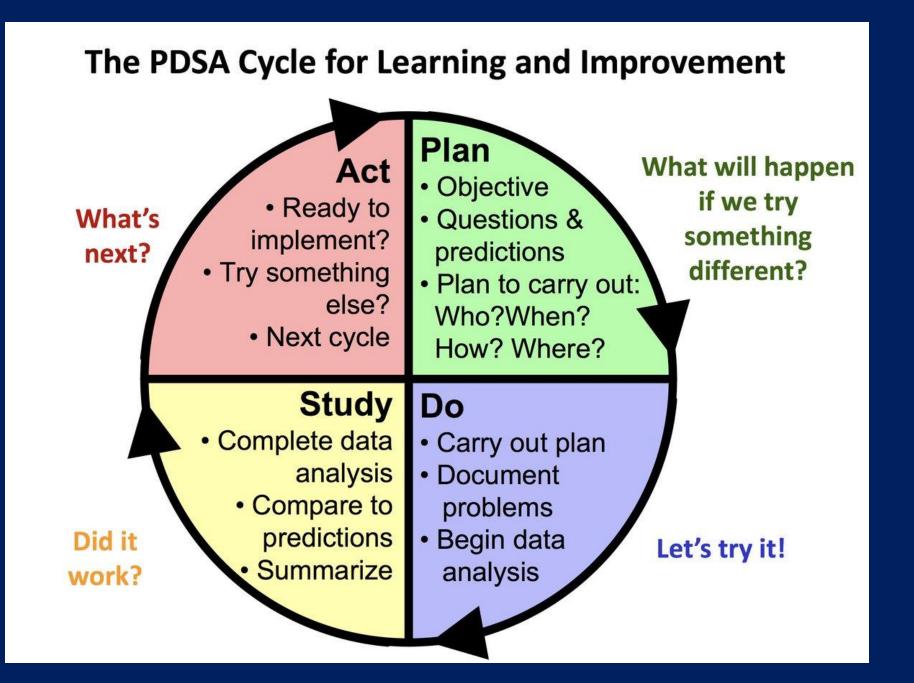




PDSA Cycle

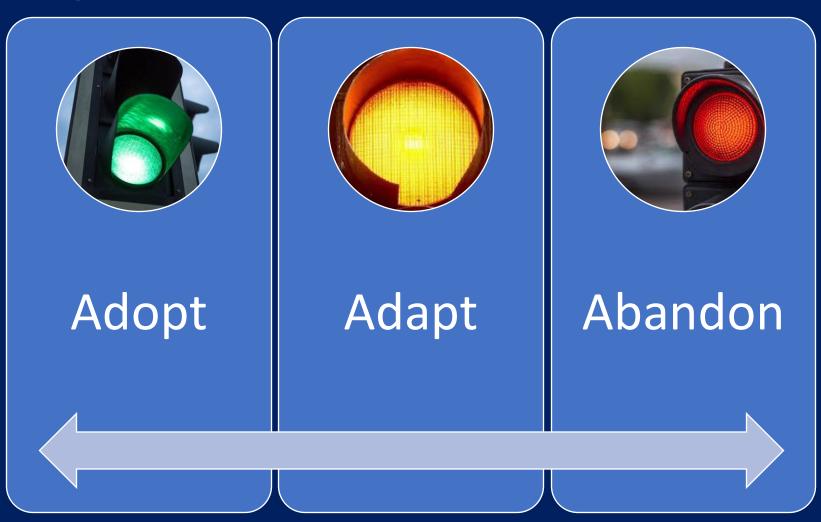






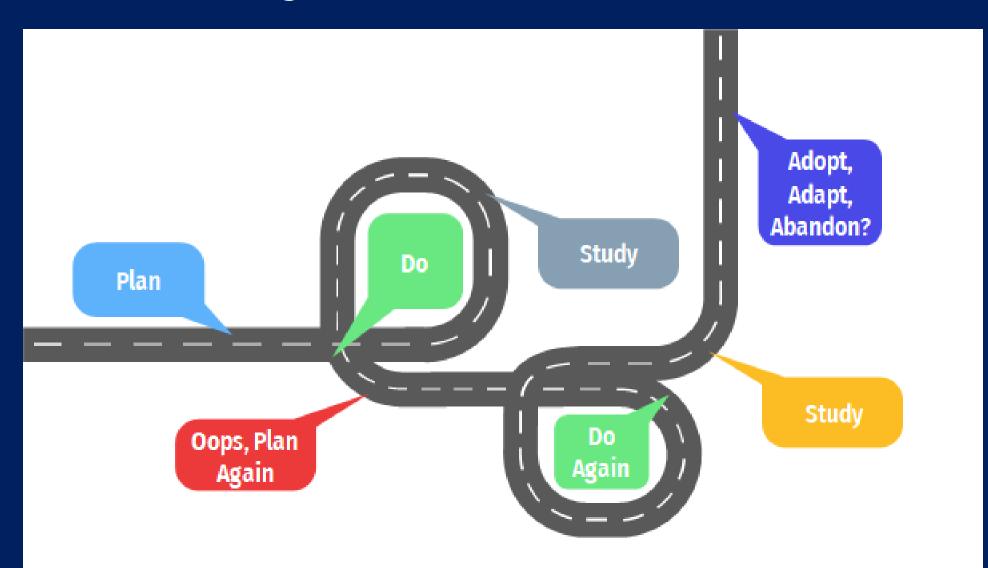


PDSA Cycle





PDSA Reality





How Do We Assure the Change Can Be Reliably Sustained?

System design • Human factors focus Design of tests and spread of adoption • Champions / Frontline Workforce - Engaging the right people





Polling Question #1

Have you selected a Performance Improvement project for the Fellowship?

- 1. No, and I have no idea yet what I want to do
- 2. No, but I have a good idea about what I want to do
- 3. Yes, but now I think my plan idea might be too big
- 4. Yes, but I need to include/engage a few key people to be successful
- 5. Yes, and I already have a team ready to work together



Discussion

- What would you like to improve in your department?
- Who needs to be engaged for the project to be successful?
- How might you use the Model for Improvement in your department?





Contact Information for Coaching

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