



Quality Management and Quality Improvement Programs

Subtopic V



Quality Management and Quality Improvement Programs

Learning Objectives

The learner will

- be aware of the Quality Improvement/Management tools and methodologies available to support the advancement of quality and safety
- know the requirements related to quality improvement plans mandated by the ECFAA.
- understand the differences between quality assurance and quality improvement
- be able to employ strategies for improvement in the work setting
- have the skills to engage in the development, implementation and evaluation of a Quality Improvement Plan.



Total Quality Management

Deming's Principles for Improving Quality

A Summary

- Constancy of purpose
 - Towards improvement
 - Improve Constantly
- Focus on Leadership
 - Leadership for change
- Reduce focus on inspection
- Team orientation
 - Break down barriers and focus on collaboration
- Vigorous Program of Education and Self-Improvement
 - Training on the job. (just in-time learning)
 - Health Care constantly changing
- Philosophy
 - Pride, transformation is everybody's job
 - Rewarding and acknowledging improvement and innovation



What Differentiates Quality Improvement Approaches from Quality Assurance

Quality Assurance

- Compliance against defined standards/protocols
 - re-enforcement of what is (targets and averages)
 - Strategies focused on changing procedures, education etc.
 - Focus on meeting existing standard
 - Defensive
- Quality Improvement
 - moves the average higher for outcomes of a process
 - Proactive
 - May still include changes to protocols and education
 - Focus is on improvement
 - Preventive



What Differentiates Quality Improvement Approaches from Quality Assurance

Quality Assurance Processes

- Based on established standards:
 - Chart Reviews
 - Documentation
 - Care plans
- Data collection and tracking against existing benchmarks/targets
 - medication errors
 - Incident reports
 - Infection control
 - Mortality rounds
 - Length of stay
 - Patient complaints



How can improvement opportunities be identified?

Quality Improvement

- Views the data through a different lens
- Risk analysis
 - History of incidents
 - Considers root cause and the factors that contributed to the incident
 - Asks: If these factors (processes and structures) are changed will this lead to improvement, prevention?
 - Considers the experience of patients and families
 - Risk registers (Health Quality Ontario,(HQO), Institute of Safe Medication Practice(ISMP))
 - Reviews the experience of others
 - Value of reporting and sharing

Quality Improvement in Healthcare

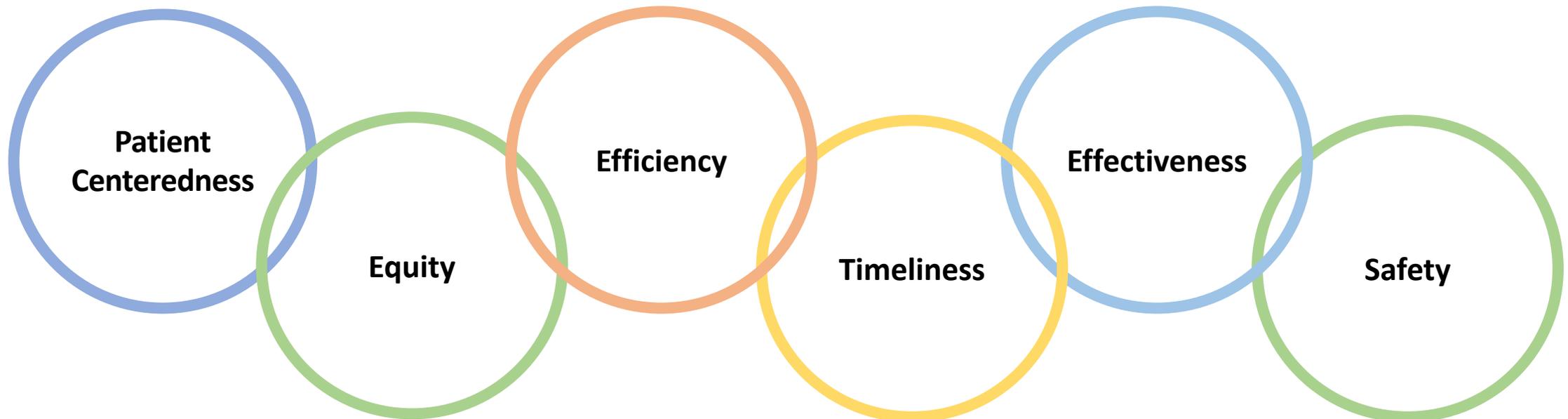
DocMikeEvans

Within the module you will be asked to watch this video which provides a summary of the evolution of Quality Improvement (QI) and an overview of the QI process, providing examples that demonstrate the value of commitment to improvement, systems thinking, innovation and change. Links to the work of the Institute of Health Care Improvement (IHI) and the role of Health Quality Ontario (HQO) in providing support and resources to facilitate this important work are provided.



Dimensions of Quality in Health Care

- Identified in the report, *Across the Quality Chasm: A new Health System for the 21st Century*. (IHI)
- Provide a tool or framework to analyze the attributes or characteristics in quality. They are aimed at achieving the best outcomes of care for the patient and the system.
- Though they may vary in certain settings, those proposed by The Institute for Health Care Improvement are the most common dimensions of quality in health care are:



Defining Quality: Aiming for a Better Health Care System

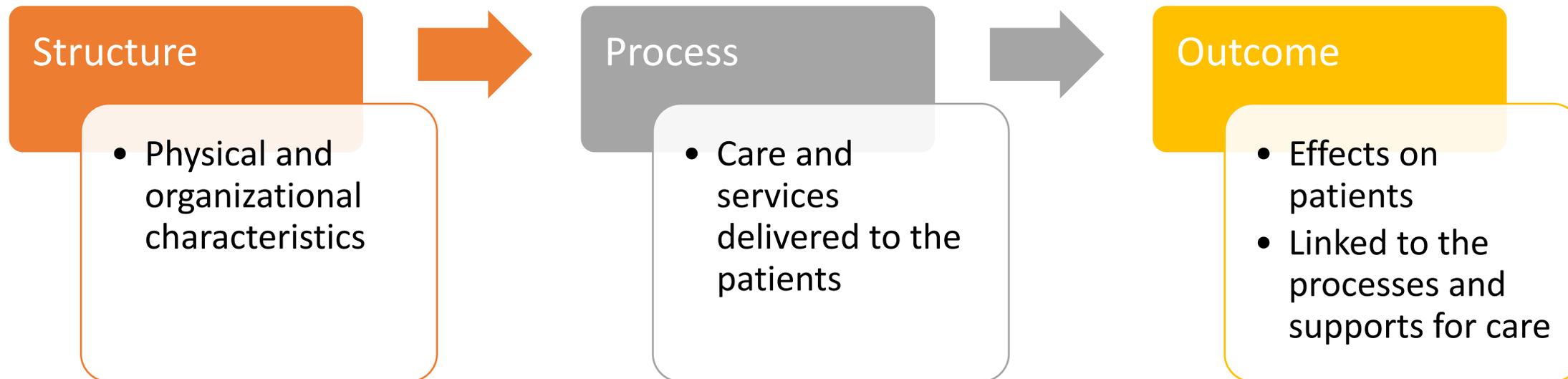
Don Berwick



Within the module you will be asked to watch this video produced by the Institute of Health Care Improvement. In this video, Don Berwick provides an overview of the 6 dimensions of quality. Review the video and reflect on the two reflective questions posed at the end.



Donabedian Structure Process and Outcome





Donabedian Structure Process and Outcome

Structure

- Appropriate staffing levels and mix of staff
- Ratios of full-time to part time staff
- Clinical information systems
- Unit dose medication systems
- Transition to practice
- Health Work Environment
 - (<https://rnao.ca/bpg/guidelines/hwe-guidelines>)



Process

- Handover
- Care planning
- Patient rounds
- Huddles
- Evidence based practice
 - Best practices guidelines (<https://rnao.ca/bpg/guidelines>)



Outcome

- Effects on patients
- Linked to the structures and processes of care

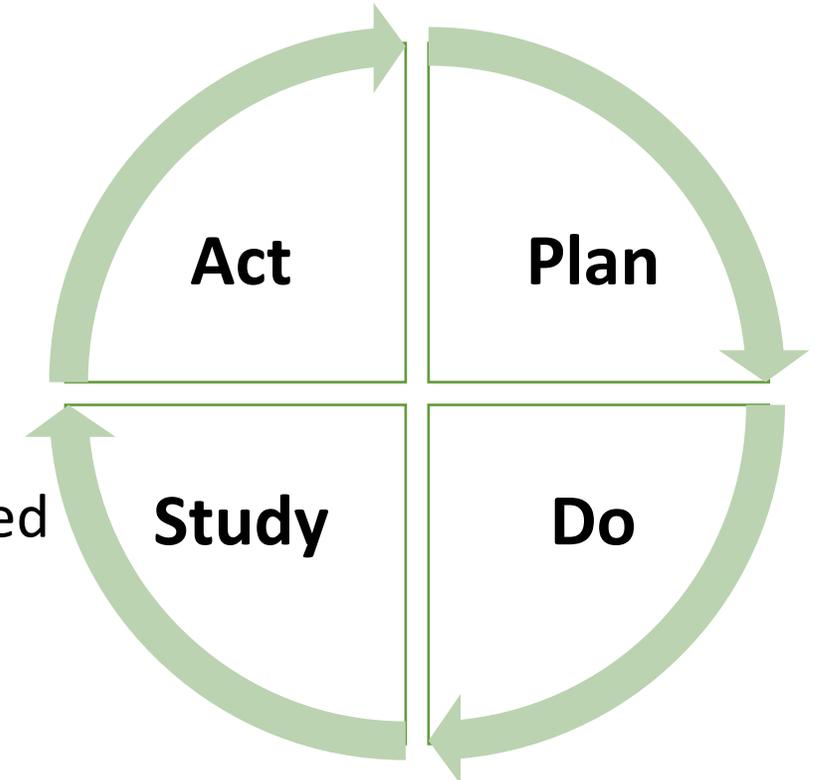


Models for Quality Improvement

Plan Do Study Act

(<https://deming.org/explore/pdsa/>)

- A rapid cycle, systematic method for improvement or for introducing and testing a change
- May be repeated over and over until the desired outcome is reached
- Similar to the Nursing Process (Scientific Method)?

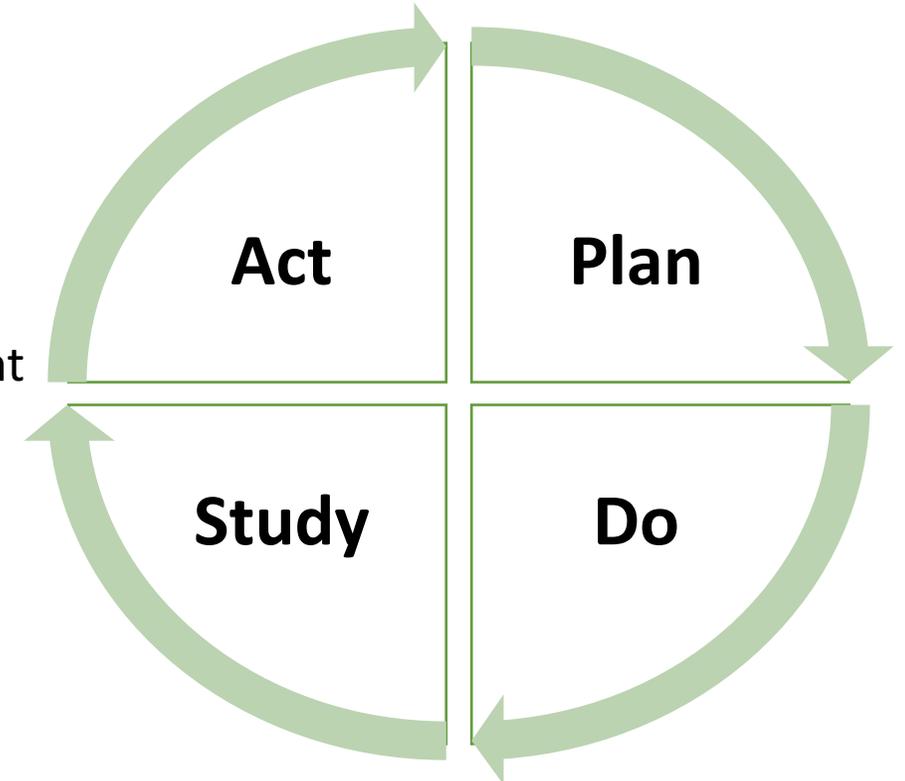




Models for Quality Improvement

Plan

- Mobilize a team
- Determine
 - what is to be accomplished
 - how the change will be recognized as an improvement
 - what change might lead to this improvement
- Examine current process
 - process mapping
 - Donabedian's structure/process/outcome model
- Analyze causes and alternatives





Creating an Aim/Goal for an Improvement Initiative

S

Specific

M

Measurable

A

Achievable

R

Relevant

T

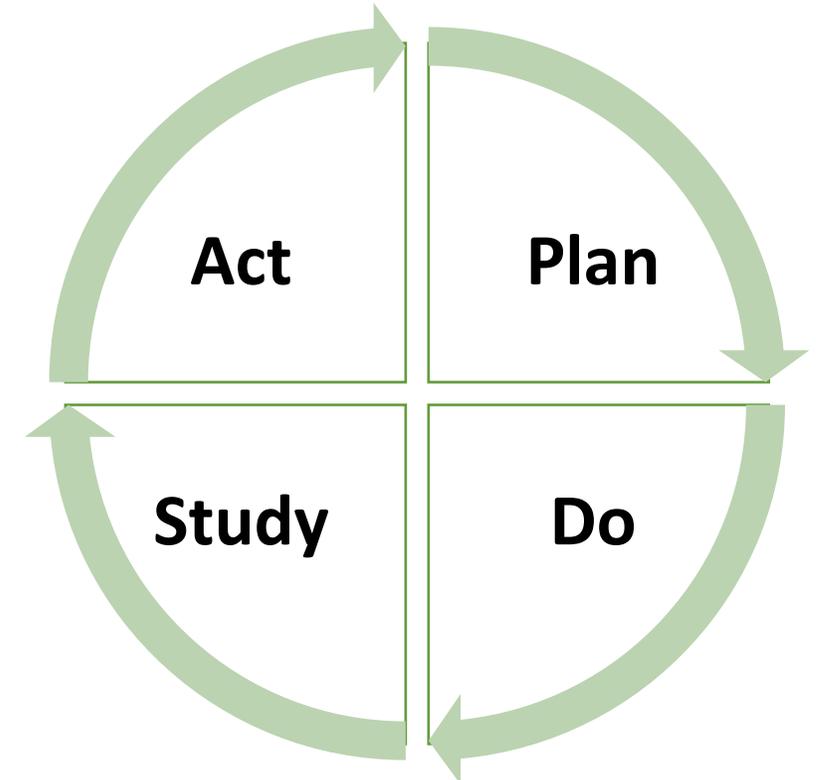
Time-Based



Models for Quality Improvement

Do

- Implement plan
- Collect data



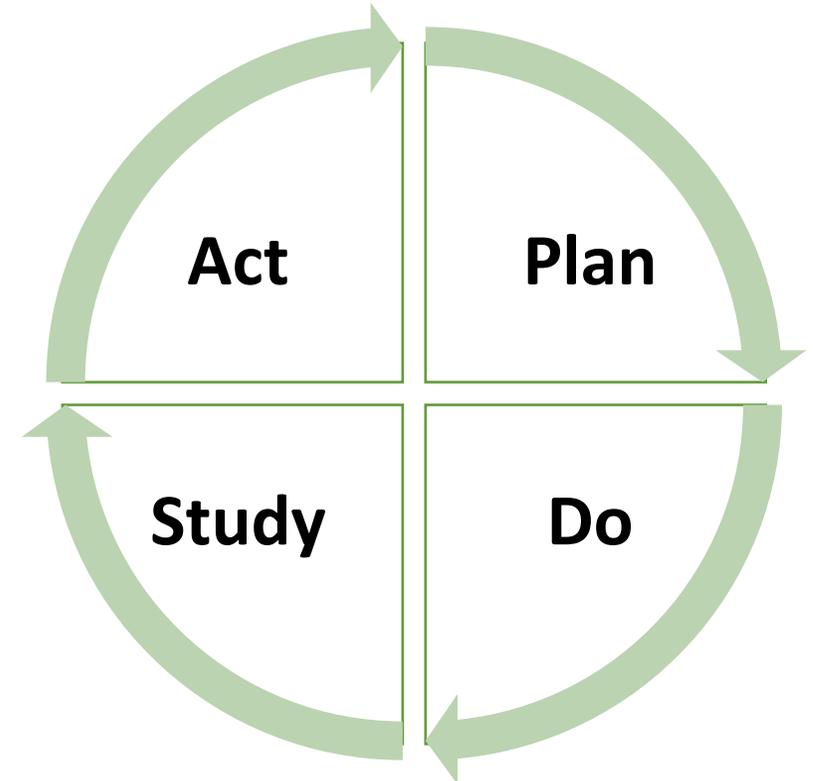


Models for Quality Improvement

Study

Review the aim statement, analyze the data collected and ask

- Did the plan result in an improvement?
- Was this strategy worth the investment?
- Were there trends in the right direction?
- Were there unintended consequences?



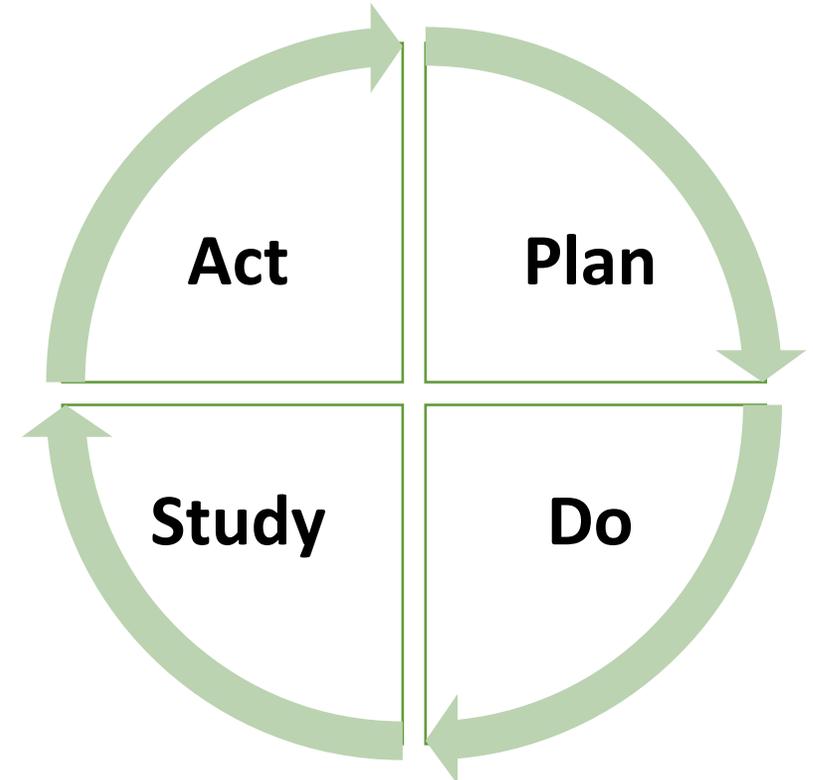


Models for Quality Improvement

Act

Was plan successful?

- **yes**
 - Standardized the intervention
 - Expand to other areas
- **no**
 - Start over



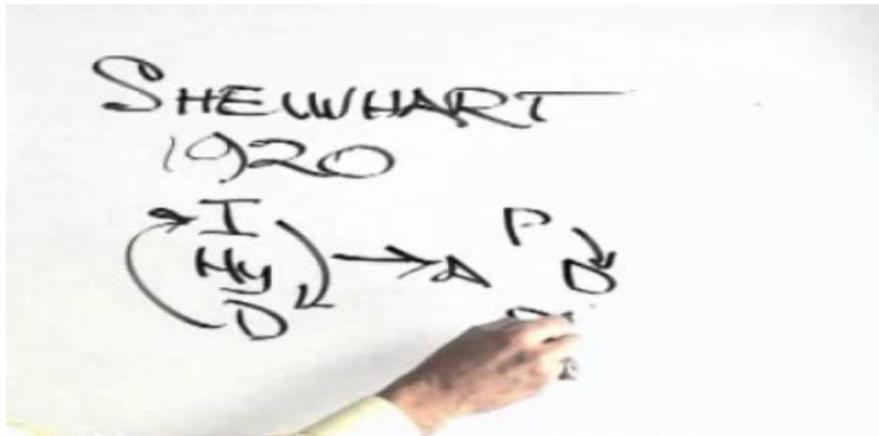


Key Performance Indicators

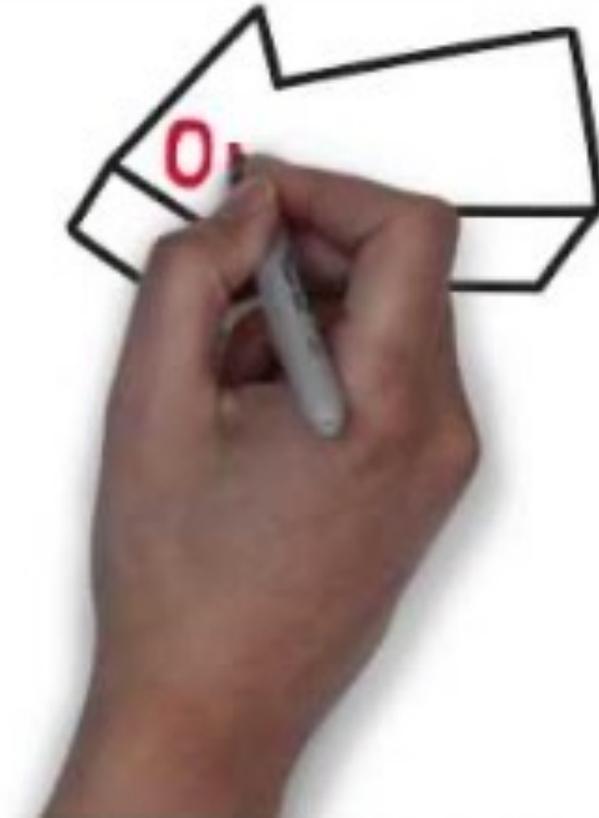
- Key performance indicators (KPIs) are quantifiable measurable factors that help ensure that objectives are being met or exceeded
- Measure performance against an agreed goal and target
- Demonstrate the direction the organization is going, measures progress
- Derived from the dimensions of quality
- Examples in health care:
 - Pain management: **Effectiveness**
 - Full-time/part time ratios (*continuity of care, sustainable workforce*) : **Patient Centredness, Safety**
 - Error rates: **Safety**

Whiteboard: PDSA in Everyday Life

This video provides an illustration of the PDSA Cycle.



Measurement and Evaluation



This video describes the role of QI measurement and explains the difference between data for improvement, data for accountability and data for research and provides a summary of the principles guiding measurement in Quality.

Other Models for Quality Improvement

Six Sigma

- An organizational-wide effort that requires expert resources to facilitate the process

“**Six Sigma** focuses on reducing process variation and enhancing process control, whereas **lean** drives out waste (non-value added processes and procedures) and promotes work standardization and flow. The distinction between Six Sigma and lean has blurred, with the term "lean Six Sigma" being used more and more often because process improvement requires aspects of both approaches to attain positive results.” <https://asq.org/quality-resources/six-sigma>



Quality Management Programs

- “**Quality improvement** is a structured approach to evaluating the performance of systems and processes, then determining needed improvements in both functional and operational areas. Successful efforts rely on the routine collection and analysis of data. “
- “**A quality improvement plan** describes an ongoing, or continuous, process through which an organization’s stakeholders can monitor and evaluate initiatives and results.”
 - Data driven
 - Focuses on processes, not people
 - Engages people (the team) in the process
 - Focus on testing small, incremental improvements



Broader system accountability Excellent Care for All Act (ECFAA)

The legislation requires that hospitals :

- establish quality committees that report on quality-related issues
- put annual quality improvement plans in place and make these available to the public
- link executive compensation to the achievement of targets set out in the quality improvement plan
- put patient satisfaction surveys in place
- conduct staff surveys
- develop a declaration of values following public consultation, if such a document is not currently in place
- establish a patient relations process to address and improve the patient experience.



Broader system accountability

Health Quality Ontario

- HQO was established by the Excellent Care for All Act (ECFAA) to:
 - monitor and report to the people of Ontario on,
 - access to publicly funded health services,
 - health human resources in publicly funded health services,
 - consumer and population health status, and
 - health system outcomes;
- to support continuous quality improvement;
- to promote health care that is supported by the best available scientific evidence by,
 - making recommendations to health care organizations and other entities on standards of care in the health system, based on or respecting clinical practice guidelines and protocols, and
 - making recommendations, based on evidence, concerning the Government of Ontario's provision of funding for health care services and medical devices.



Quality Improvement Plans

This series of videos from Ontario Health provide an overview of how Quality Improvement Plans are designed. These videos also support organizations in the development of their plans which are required by legislation to be submitted on an annual basis.



Summary

- Numerous resources are available to assist health professionals in advancing quality and ensuring safety in the health care.
- The ECFAA mandates organizations in the health care sector to ensure strategies for quality and patient safety are in understand the differences between quality assurance and quality improvement.
- A number of quality improvement models have been designed to facilitate continuous quality improvement.
- Nurses and members of the interprofessional team are accountable for the delivery of quality safe care and should have the skills to contribute to quality and safety at different levels within organizations.