



# The ABCs of QI:

## *Session 1: Introduction to Quality and Goal Setting*



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# Learning Objectives

## Learn, Understand, and Practice

1

**Model for  
Improvement  
methodology**

2

**Developing the  
SMART aim  
statement**

3

**Developing a  
project charter**



# **Introduction to QI and the Model for Improvement**



# QI Approaches

- **Model for Improvement (MFI)** – Simple and powerful, healthcare-specific framework for accelerating improvements.
- **Human-Centered Design** – Management framework that develops solutions to problems by involving the human perspective in all steps of the problem-solving process.
- **Six Sigma** – Project-based methodology for improving customer experience while reducing costs by perfecting processes or systems.
- **Lean** – Creates maximum value for patients by focusing on continuously streamlining and reducing waste (cost, time, defects) within process(es).



# How Do You Define QI?





# Quality Improvement Defined

“Quality improvement consists of systematic and continuous actions that lead to measurable improvement in health care services and the health status of targeted patient groups.”



Health Resources and Services Administration



# What is Quality Improvement?

## Theory or hypothesis

- Changes based on learning
- Cyclical process

## Regular, ongoing assessment and measurement system focus

- Quality is the default
- Reliability

## Reduction of variability

- Error, waste, workarounds
- Non-value added, redundant, and single-point of failure activities



# Why Quality Improvement?

“Improving quality is about making health care more safe, effective, patient centered, timely, efficient, and equitable.”



“From Quality Improvement Made Simple,” The Health Foundation Inspiring Improvement





# Why Focus on Quality Improvement?





“Improving our work is our work, not a distraction from our work!”

Citation- Advanced Access- PHC Barbara Boushon, RN, BSN 2019



# How Does Quality Improvement Work?



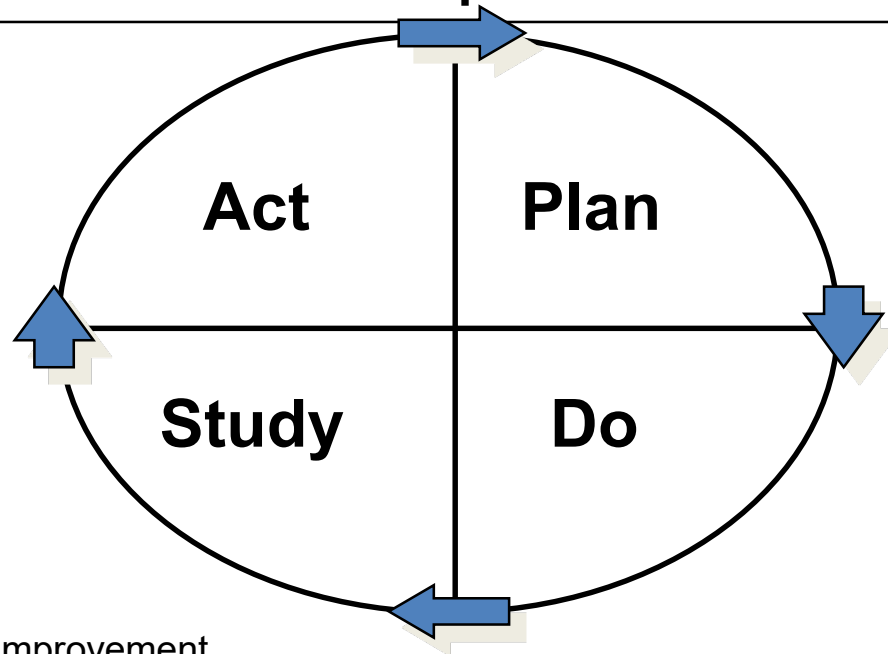


# Model for Improvement

**What are we trying to accomplish?**

**How will we know that a change is an improvement?**

**What changes can we make that will result in improvement?**



From Associates in Process Improvement.



# Three Key Questions

- What are we trying to accomplish? (Aim)
- How will we know that a change is an improvement? (Measure)
- What changes can we make that will result in an improvement? (Change)





# “Central Law of Improvement”



**“Every system is perfectly designed to deliver the results it produces.”**

Berwick, D. “A primer on leading the improvement of systems.” BMJ 1996;312:619-22.  
<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2350403/pdf/bmj00532-0035.pdf>

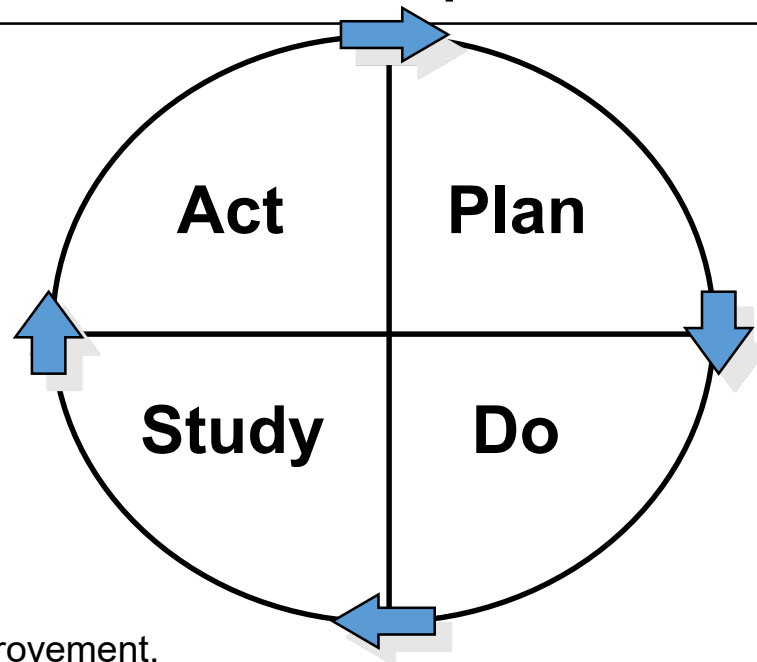


# Model for Improvement

**What are we trying to accomplish?**

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From Associates in Process Improvement.



# Model for Improvement

PDSA model is based on a scientific method made popular by Dr. W. E. Deming

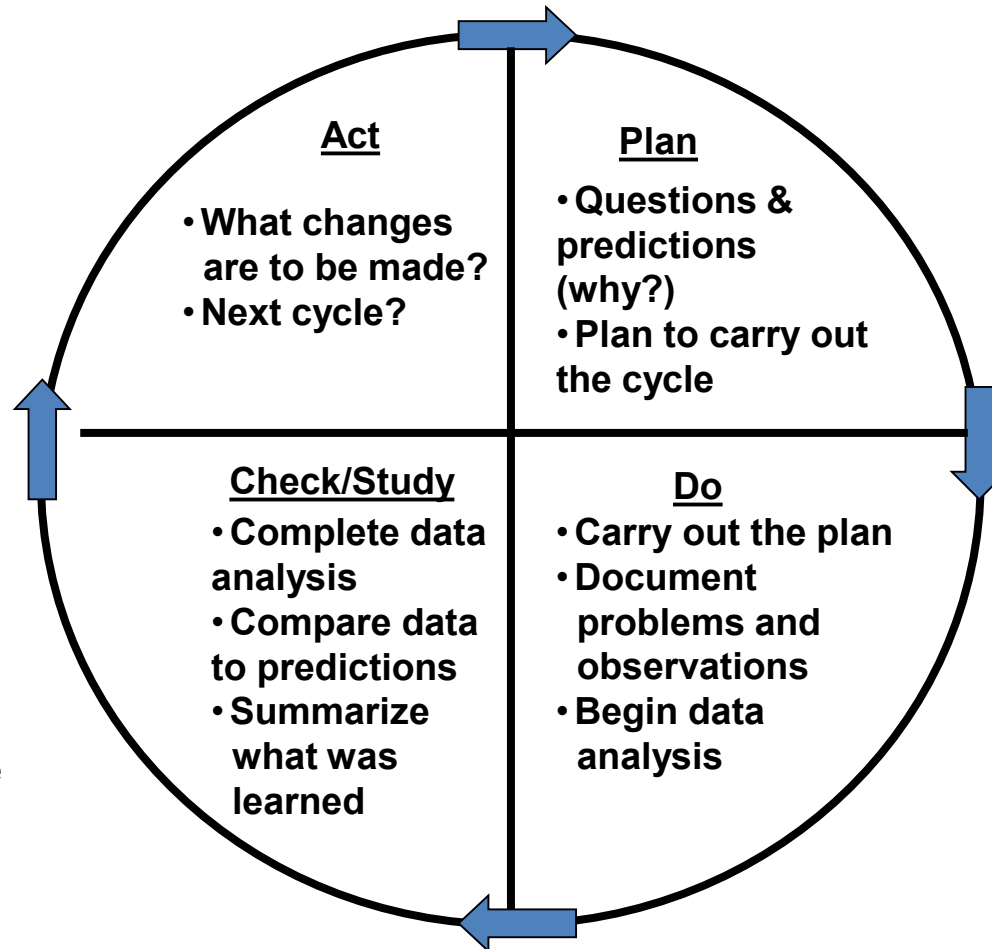
- The System of Profound Knowledge







# PDSA – Rapid Cycle Improvement



Adapted from the  
Institute for Healthcare  
Improvement  
Breakthrough Series  
College.



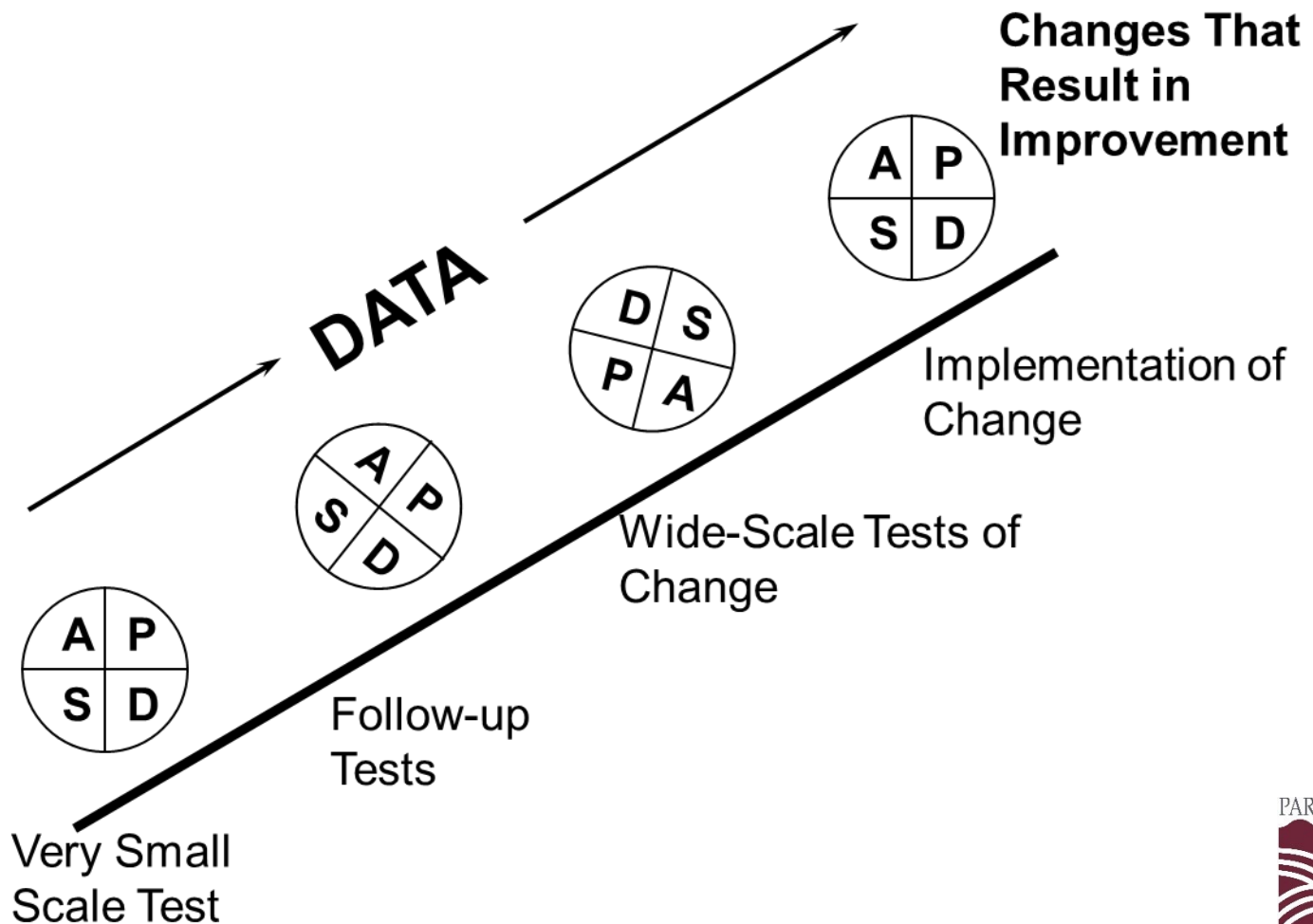
# Testing Changes

- Small scale tests = BIG changes
- Experimentation is required
- Small, rapid tests of change PDSA cycle



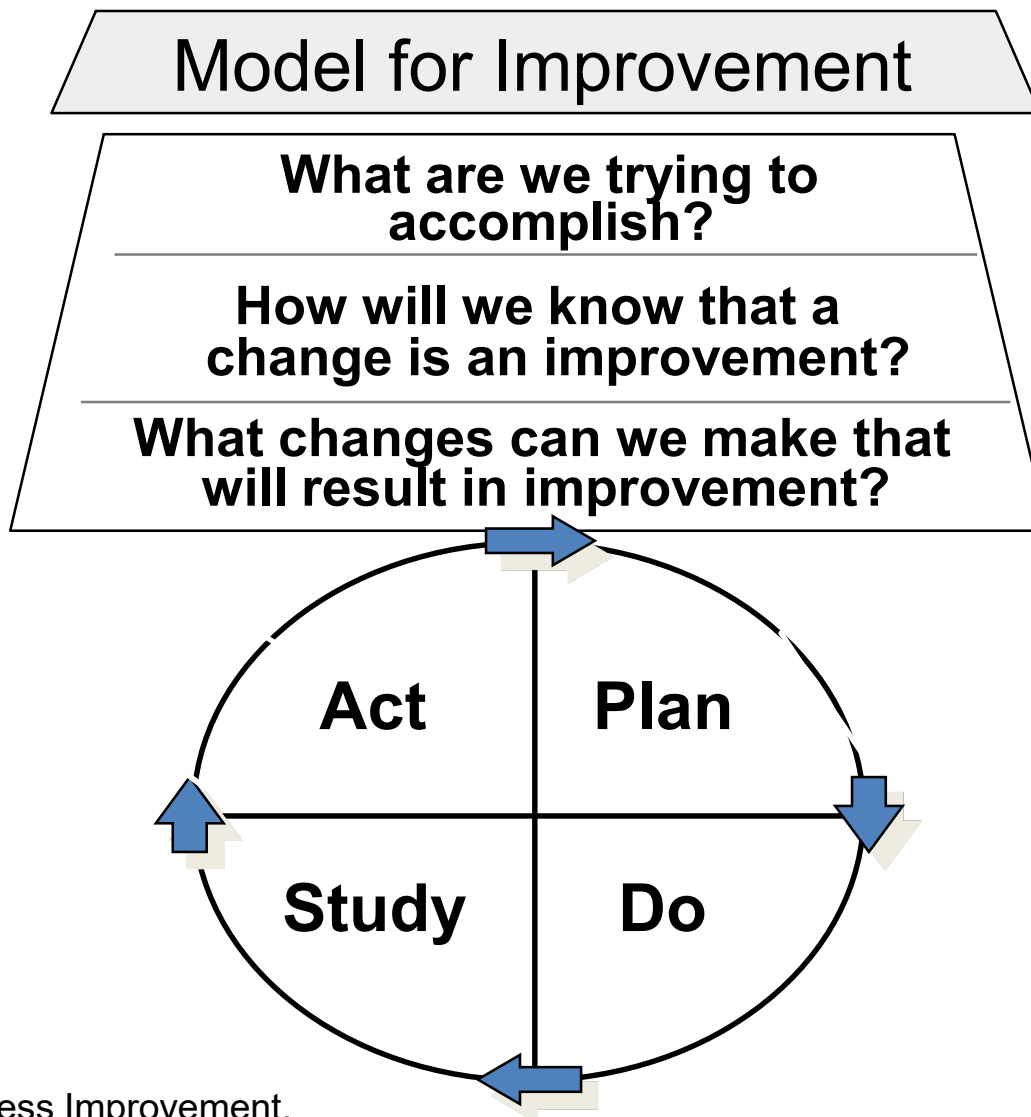


# Repeated Use of PDSA Cycle





# Review the Model for Improvement





# Never a Perfect Time



[LeanSixSigmaBelgium.com](http://LeanSixSigmaBelgium.com)



# Questions

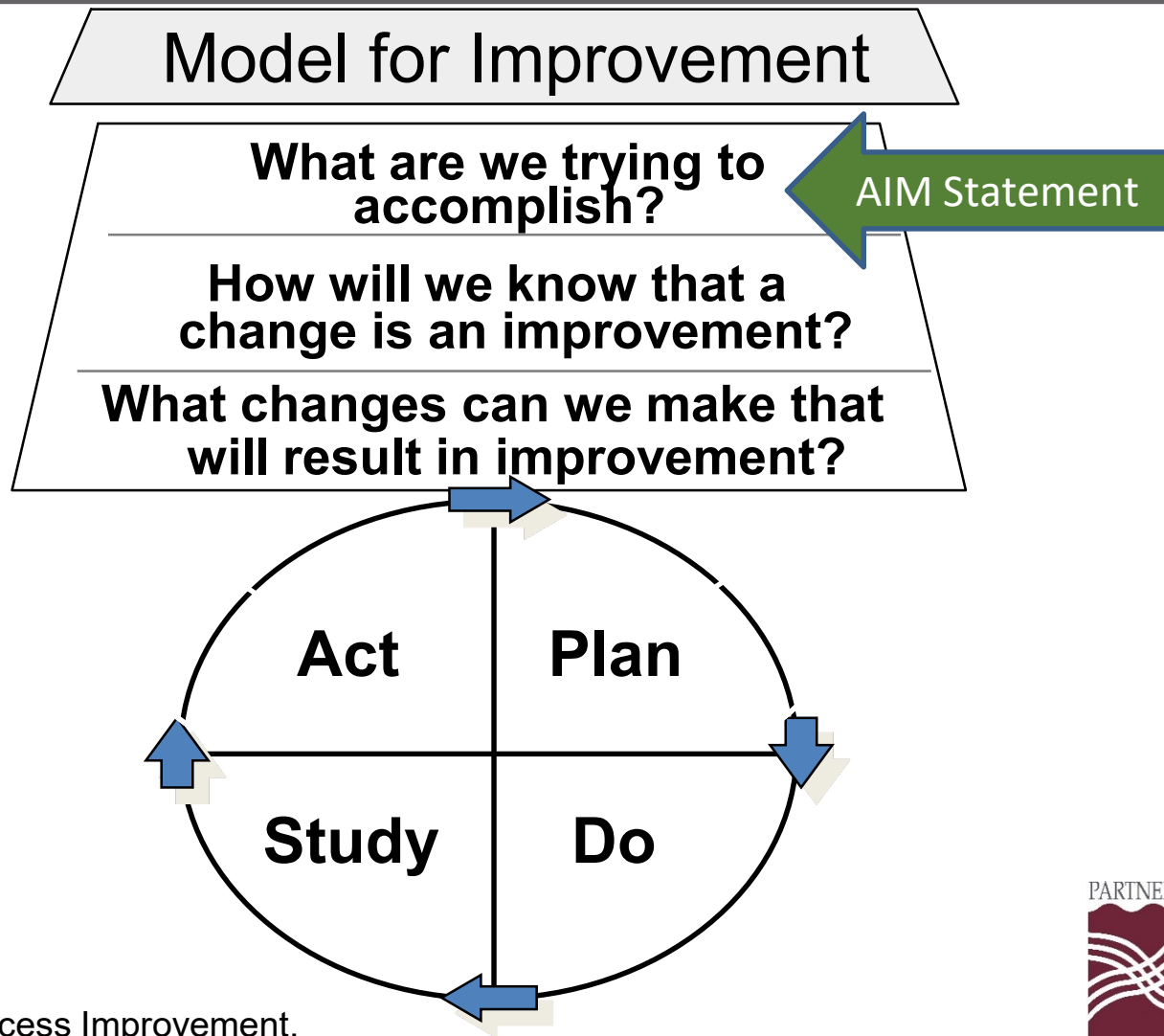




# **Creating Measurable Goals using SMART Aim Statements**



# Aim Statements within Model for Improvement



From Associates in Process Improvement.





# Why are Aim Statements Important?





# Why Aim Statements are Important

- Answers the question: “Why are we doing this?”
- Sets realistic vision for QI work
- Clearly states a purpose or direction
- Makes sure everyone is on the same page
  - Improvement team
  - Leadership





# SMART Characteristics

- Specific
- Measureable
- ~~Achievable~~ Ambitious
- Relevant
- Time-bound



# Aim Statement Format

- **We will** (reduce, decrease, increase, improve)
- **XXXXX** (area of improvement, i.e., diabetes management, cervical cancer screening rate, etc.)
- **From** (baseline) **to** (target goal)
- **By** (target date)



# Aim Statement Examples

- Partnership Clinic will increase cervical cancer screening from 40% to 65% by December 31, 20XX.
- Clinic ABC will reduce cycle time from 60 minutes to 45 minutes by October 31, 20XX.
- CA Clinic will increase the percentage of patients with Type II Diabetes whose HbA1c is  $< 8$  from 35% to 45% by November 30, 20XX.



# Assess the Aim – Example 1

Partnership Clinic will do a better job getting women in for their pap smears.

– Is it:

Specific?

Measureable?

Achievable/Ambitious?

Relevant?

Time-bound?



# Assess the Aim – Example 1

Partnership Clinic will do a better job getting women in for their pap smears.

**Revised Aim:** Partnership Clinic will increase our cervical cancer screening rate from 60% to 70% by December 31, 20XX.



## Assess the Aim – Example 2

To improve operational efficiency, Clinic ABC will reduce cycle time within three months.

- Is it:
- Specific?
- Measureable?
- Achievable/Ambitious?
- Relevant?
- Time-bound?





## Assess the Aim – Example 2

To improve operational efficiency, Clinic ABC will reduce cycle time within three months.

**Revised Aim:** ABC Clinic will reduce cycle time from 70 minutes to 50 minutes by January 31, 20XX.



## Assess the Aim – Example 3

Good Health Clinic will reduce the hospital all-cause 30-day readmission rate from 20% (baseline) to 15% by December 31, 20XX.

- Is it:
- Specific?
- Measureable?
- Achievable/Ambitious?
- Relevant?
- Time-bound?



# Aim Statements with Multiple Outcomes

Clinic A will improve care management of our patients with Type 2 Diabetes by December 31, 20XX, as evidenced by:

- Increasing the percentage of patients with HbA1c  $\leq$  8 from 52% to 55%
- Increasing the percentage of patients with BP < 140/90 from 40% to 60%



# The Aim Statement is a Collective Effort

Aim statements should not be written alone!  
Create/refine your aim statement with your team.

Use SMART criteria:

- Why is this aim important to our organization?
- When (exactly) can we accomplish this?
- Is that measurable?
- What do we mean by...?





# Factors that Influence Scope of the Aim Statement

- **Organizational priorities**
  - Strategic plan
  - Leadership support
- **Infrastructure**
  - Information technology
  - Ability to collect data
- **Resources**
  - Time
  - Staffing
  - Budget
- **External environment**
  - Regulatory requirements
  - Mandatory requirements



# Aim Statement Review

- Aim statements should meet the SMART criteria
- Aim statements should be developed with a team and should consider what factors might influence the scope



# Introduction to the Project Charter

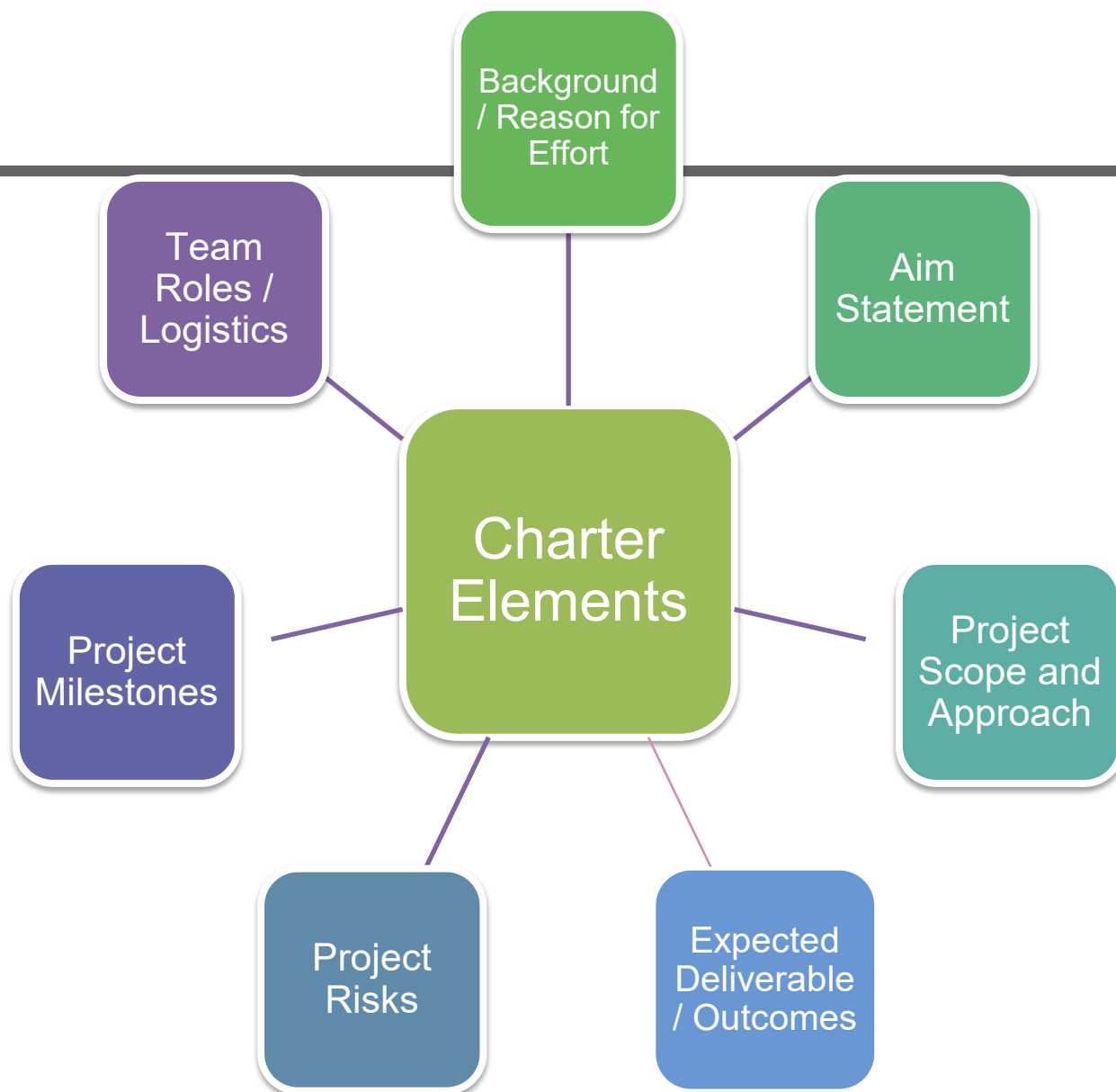


# Project Charter

- Provides direction and a sense of purpose
- Demonstrates the need to address the issue at hand
- Captures agreements on how the team will function









# What Are We Trying to Accomplish?

- Background/Reason for Effort
  - Why is it important and why now?
- Aim Statement
  - Documents desired outcome
  - SMART aim
- Project Scope and Approach
  - What are the parameters of your project?
  - What approach will you take to complete the objective?





# Project Deliverables

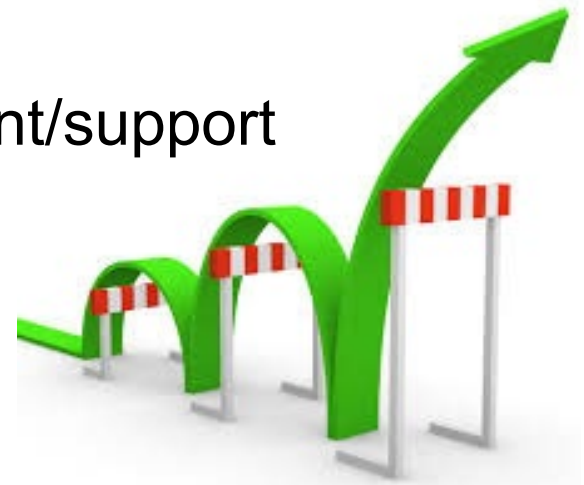
- Tangible or intangible good or service produced as a result of the project.
- Examples:
  - Reports
  - Documents - i.e., workflows, policies, and procedure
  - Improvement in a process or system





# Project Risks

- What could challenge the success of your project:
  - Scope of project
  - Change management
    - Staff response
    - Executive sponsor engagement/support
  - Stakeholder buy-in/support
  - Resources
    - Time, materials, staffing
  - Communication





# Project Milestones

- What specific points in the project lifecycle will measure your progress?
  - What will you celebrate?
  - What deliverables are due and when?





# Who Will Participate

- QI project team
  - Team of 2 vs. team of 7
  - Existing team vs. new team
  - Identifying roles to fill:
    - Sponsor/champion
    - Project lead(s)
    - Process expert(s)
    - Subject matter expert(s)





# Charter – Project Team

Name team members, roles, and responsibilities.

- **Sponsor** – Senior leader with formal authority and ownership for the process being improved
- **Champion** – Leads project identification and prioritization; generates the organizational support and resources to ensure project success
- **Project Lead** – Coordinates and facilitates meetings, provides change management skills and improvement tools and resources
- **Process Expert** – Front-line staff member familiar with day-to-day process being improved
- **Subject Matter Expert** – Provides expertise needed to improve process



# Team Logistics

- Develop team agreements:
  - Meeting frequency
  - Assign meeting roles
    - Note-taker
    - Facilitator
  - Establish ground rules





# Example Project Charter

Project Name	Cervical Cancer Screening (CCS)	Business Unit	ABC Clinic - Women's Health Unit C
Project Lead	Joe Smith	Executive Sponsor	Linda Cruz
<b>Background/Reason</b> <ul style="list-style-type: none"><li>• Cervical cancer is preventable through frequent screenings and appropriate interventions.</li><li>• Low-income/marginalized populations are less likely to complete cervical cancer screening and more likely to experience poor outcomes due to insufficient preventive care.</li><li>• The goal is to increase Pap smear rates in at-risk populations to decrease the risk of developing cervical cancer.</li><li>• These goals are aligned with Clinic ABC's organizational goals and Partnership's QIP goals.</li></ul>			
<b>AIM Statement</b> <ul style="list-style-type: none"><li>• ABC Clinic will increase cervical cancer screening rates in women ages 21-65 who were seen in the last 12 months from 63% to 70% by December 31<sup>st</sup>, 2020.</li></ul>		<b>Project Scope and Approach</b> <ul style="list-style-type: none"><li>• Women ages 21-65 with an intact cervix who have been seen at ABC clinic within the last 12 months (July 2019 – July 2020)</li></ul>	
<b>Expected Deliverables/Outcomes</b> <ul style="list-style-type: none"><li>• Determine opportunities in the system</li><li>• Create and test change ideas on a sample population</li><li>• To meet or exceed the goal of screening 70% of eligible women</li><li>• Decreased no-show rates, increased productivity, improved efficiency (i.e. minimize the number of inappropriately scheduled visits), improved documentation, financial incentives</li></ul>		<b>Assumptions/Risks</b> <ul style="list-style-type: none"><li>• Insufficient time/resources to implement outreach, staff buy-in/investment in the project, no-show rates, consistency of team implementation over time, sustainability, patient follow-up</li></ul>	



# Continued...Example Project Charter

Milestones (Timeline)			Dates		
Initiation			05-05-2020		
Planning			07-01-2020		
Testing			08-01-2020		
Implementation			05-01-2021		
Project Team Role & Responsibility (see legend below)					
Name	Title	Project Role	Name	Title	Project Role
Linda Cruz	COO	Sponsor	Emma Brown	Front Office	Process Expert
Lisa O'Leary	Director of Quality	Champion	Joe Smith	Back Office Supervisor	Project Lead
Dr. Wilson	Provider	Subject Matter Expert			
Jamie Moore	MA	Process Expert			
Alex White	MA	Process Expert			
Team Logistics (Meeting frequency, ground rules, etc.)					
Bi-weekly meeting, Tuesdays 10-11 am					
Ground Rules:					
Be present. Limit electronics. Respect what's said in the room. Follow through on action items.					

**Project Sponsor** – Senior leader with formal authority and ownership for the process being improved

**Champion** – Leads project identification and prioritization; generates the organizational support and resources to ensure project success

**Project Lead** – Ensures meetings are coordinated and team members are invited; facilitates team members through change process; ensures opportunities are available for team members to communicate with stakeholders/leaders

**Process Expert** – Front-line staff member familiar with the day-to-day process/system being improved

**Subject Matter Expert** – Provides information/expertise necessary to improve process/system



# Charter as a Living Document

- The charter is a “living” document:
  - Organizes the work
  - Provides documentation regarding agreements
  - Should be reviewed throughout the life of the project



# Questions





# Resources

## A Quick Guide to Starting Your Quality Improvement Projects

<http://www.partnershipphp.org/Providers/Quality/Pages/PIAcademyLandingPage.aspx>

- Resources
- Quick Guide to Starting Your Quality Improvement Projects





# ABC's of QI - Upcoming Sessions

## **Session 2: Using Data for Quality Improvement**

**Date:** Wednesday, May 25 **Time:** Noon - 1 p.m.

## **Session 3: How Do We Know That a Change is an Improvement**

**Date:** Wednesday, June 1 **Time:** Noon - 1 p.m.

## **Session 4: What Changes Can We Make That Will Result in Improvement**

**Date:** Wednesday, June 8 **Time:** Noon - 1 p.m.

## **Session 5: Testing Change Ideas - Plan-Do-Study-Act (PDSA)**

**Date:** Wednesday, June 22 **Time:** Noon - 1 p.m.



# Quality Improvement Trainings

## Accelerated Learning Education Program

These learning sessions will cover Partnership HealthPlan of California's Primary Care Provider Quality Incentive Program measures.

**Date:** June 7      **Time:** Noon - 1:15 p.m.

Pediatric Health - A Cluster of Services for 0 – 2 Year Olds

**Date:** July 12      **Time:** Noon - 1:15 p.m.

Pediatric Health - Child and Adolescent Well-Care Visits (3-17 years), Screenings, and Immunizations for Adolescents

## Using Lean and A3 Thinking to Manage Improvement Projects

This course will provide an introduction to Lean Thinking and how improvement teams can use the A3 tool to manage the full cycle of an improvement project from planning, monitoring, and sharing what you are learning.

**Date:** June 15      **Time:** Noon - 1:15 p.m.



# Quality Improvement Trainings

## On-Demand Courses

<http://www.partnershiphp.org/Providers/Quality/Pages/PIATopicWebinarsToolkits.aspx>

### Webinars



PHC provides resources and webinars to help our providers improve performance across a variety of clinical, operational and patient experience metrics.

[Click Here for On Demand Courses](#)

- Accelerated Learning
- PCP QIP High Performers - How'd They Do That?
- Project Management 101
- Tools for Prioritizing Quality Measures
- Understanding the Benefits Delivery System





# Evaluations

Please complete your evaluation. Your feedback is important to us!

**Evaluation**

<input checked="" type="checkbox"/>	OUTSTANDING
<input type="checkbox"/>	Excellent
<input type="checkbox"/>	Very Good
<input type="checkbox"/>	Average
<input type="checkbox"/>	Below Average





# Thank You!

## ABC's of QI Presenters:

**Flora Maiki** ([fmaiki@partnershiphp.org](mailto:fmaiki@partnershiphp.org))

**Andrea Harris** ([aharris@partnershiphp.org](mailto:aharris@partnershiphp.org))

**Amanda Kim** ([akim@partnershiphp.org](mailto:akim@partnershiphp.org))

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## QI/Performance Team:

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