

Rapid Cycle Quality Improvement (RCQI): What Do Grantees Need to Know?

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Key Elements of Quality

- Will: to do what it takes to change to a new/improved system
- Ideas: on which to base the design of the new/improved system
- Execution: of the ideas (know-how)

Have You Heard of...

- Total Quality Management
- Continuous Quality Improvement
- Six Sigma DMAIC
- Lean
- The Model for Improvement
- Others?

Quality Improvement

vs.

Quality Assurance

- Systems focused
- Fallibility Recognized
- Teamwork
- Errors seen as opportunities for learning

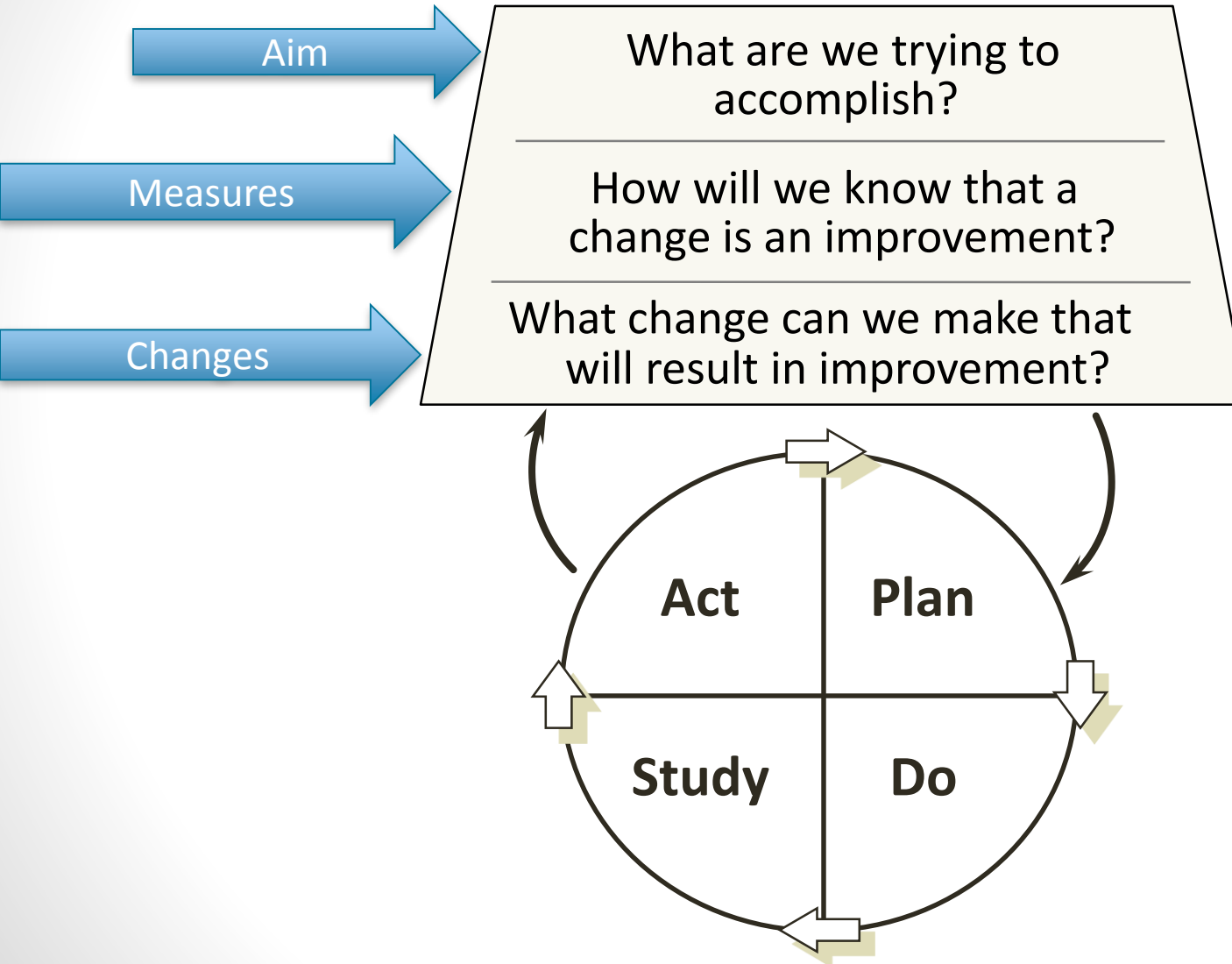
- Individual Focused
- Perfection Myth
- Solo practitioner
- Errors punished



“Every system is
perfectly designed
to get the results
it gets”

~Paul Bataldin

Model for Improvement



What are we trying to
accomplish?

Aim Statement

- What will you do
- How much will you improve
- For Who
- By When

Smart Goal

Create S.M.A.R.T. Goals



Example – Advanced Nursing edu.

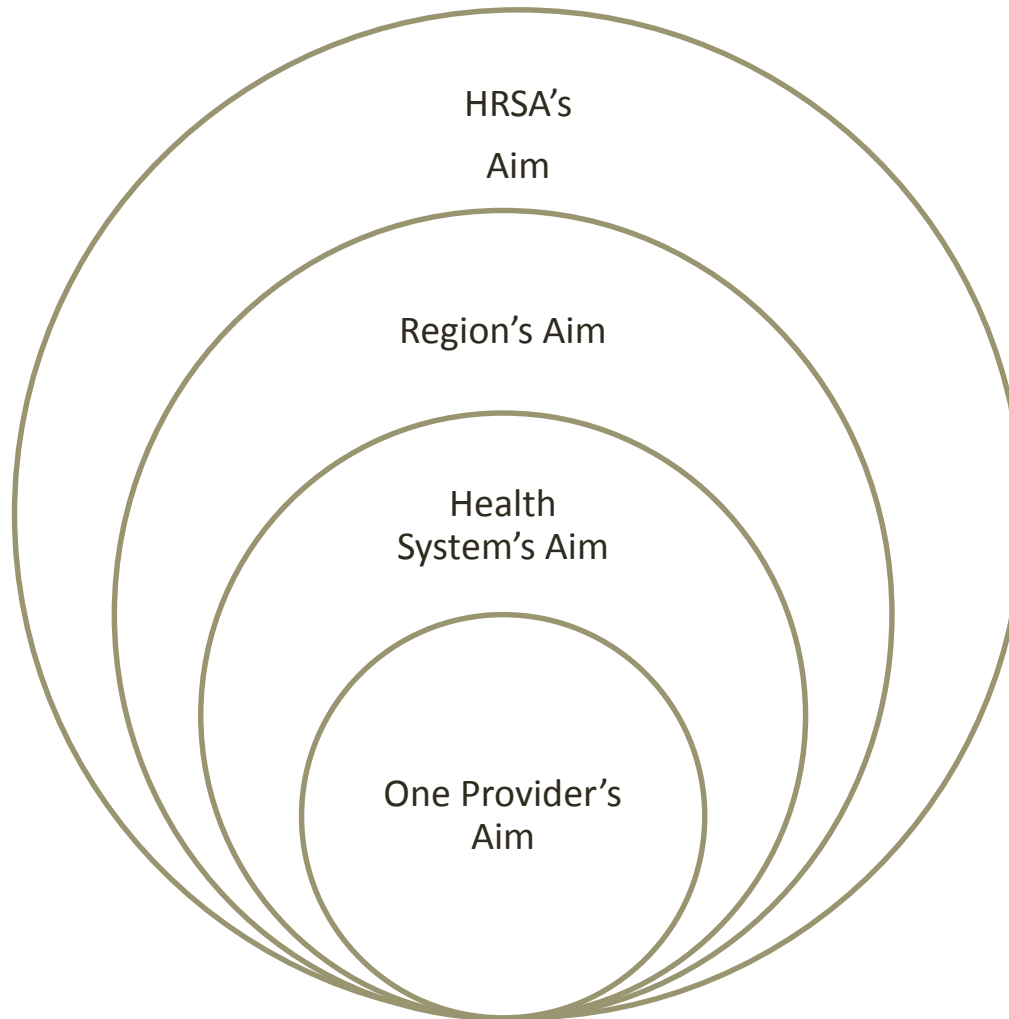
- By June 2016, XYZ University will ensure that 100% of clinical preceptors are prepared to facilitate a positive clinical experience for students. All preceptors will undergo an annual clinical competency evaluation and will score at least 90% competency in four domains:
 - Student evaluation
 - Goal setting
 - Teaching strategies
 - Demonstration of organized knowledge”

Example – Geriatric Workforce

By June 2017, improve primary care engagement in the early identification of Alzheimer's disease and related dementias (ADRD) so that:

- At least 90% of patients 75 years of age or older are assessed for ADRD at least once per year
- 90% or more of those identified with ADRD have education provided directly to the primary caregiver

The Aim – A Simple and Powerful Tool



**How Will We Know if a
Change is an Improvement?**

How Do We Know That a Change is an Improvement?

- Quality Improvement is about changing and improving care provided
- It is not about measurement.
- However

Measurement Assumptions

- The purpose of measurement in QI is for learning not judgment
- All measures have limitations, but the limitations do not negate their value
- Measures are one voice of the system. Hearing the voice of the system gives us information on how to act within the system
- Measures tell a story; goals give a reference point

Performance Measurement in 3 Worlds

Aspect	Improvement	Accountability	Research
Aim	Improve care	Compare, reassure, spur change	New knowledge
Methods Test Observable	Yes	N/A. Evaluate current performance	Test blind or controlled
Bias	Accept stable bias	Adjust data to reduce bias	Design to eliminate
Sample Size	Just enough data, small sequential samples	N/A. Report 100%	Just in case data
Hypothesis Flexible	Yes. Revised as learn and test	No hypothesis	Fixed hypothesis
How to determine improvement	Run or Shewhart charts	No focus on change	Hypothesis, Statistical tests: F-test, t-test, chi square, p value
Testing Strategy	Small sequential tests	No tests	1 large test
Data confidential	Data used only by those involved in improvement	No subjects. Data is for public	Subjects protected

Measures

- Outcome
- Process
- Balancing



A Closer Look

Process Measures

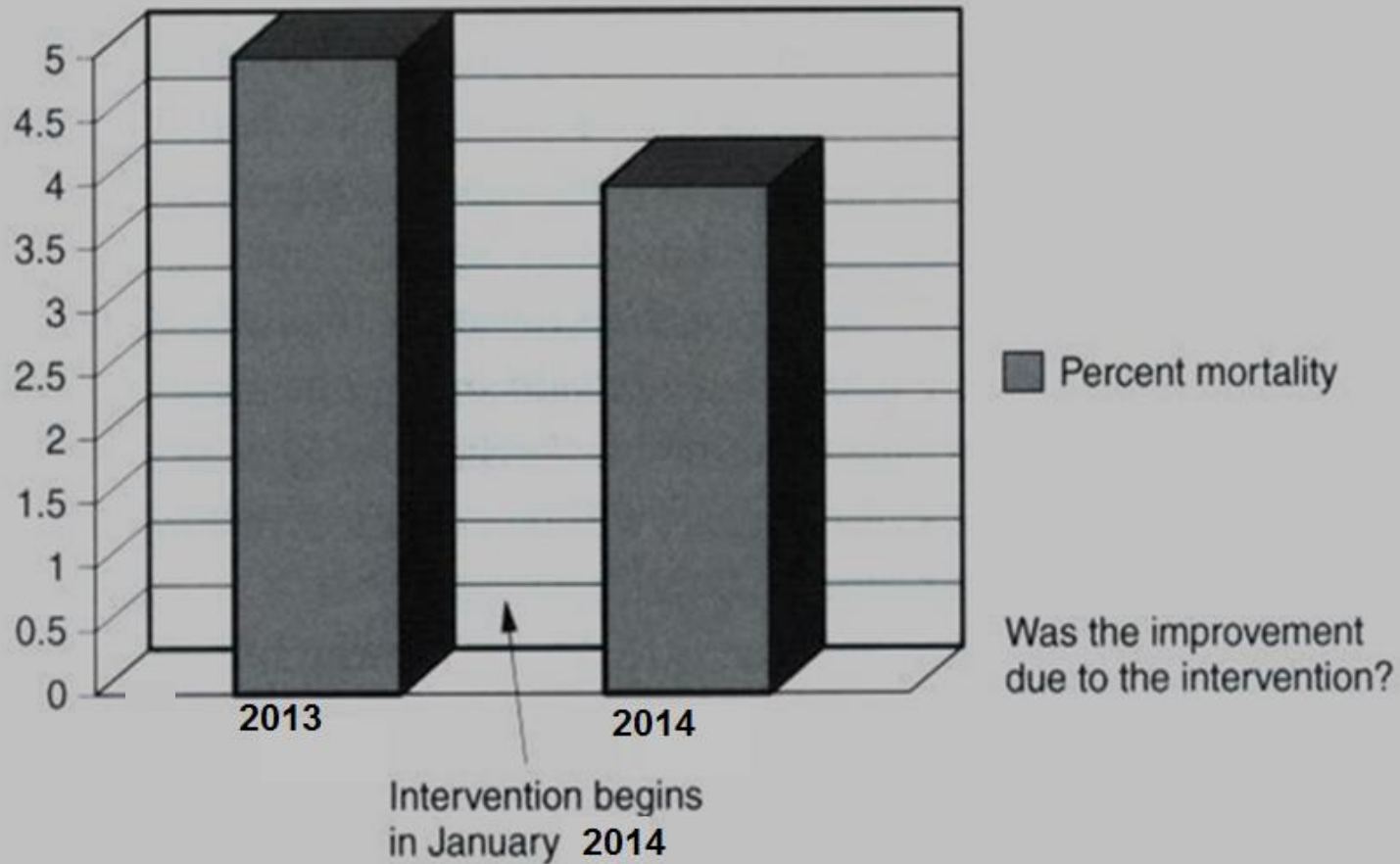
- Data collection may be time limited
- Are within your control
- Are linked to your ideas (changes)
- Are a means to the ends – not the ends

Outcome Measures

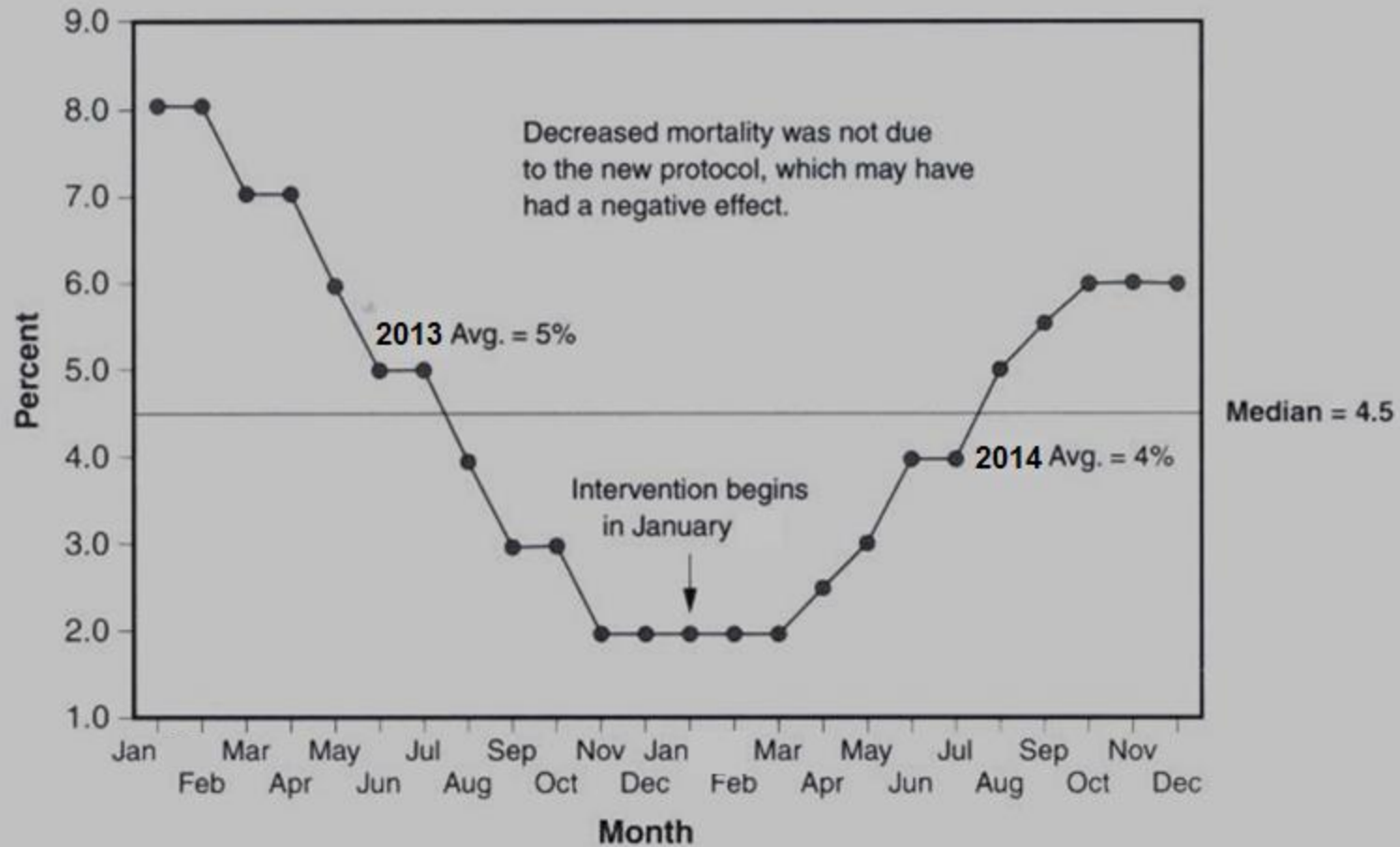
- Are patient focused
- Reflect how care is experienced differently by a family
- Sometimes take time to “move the marker”
- Are in your aim!

How we display our data
influences how we use our
data

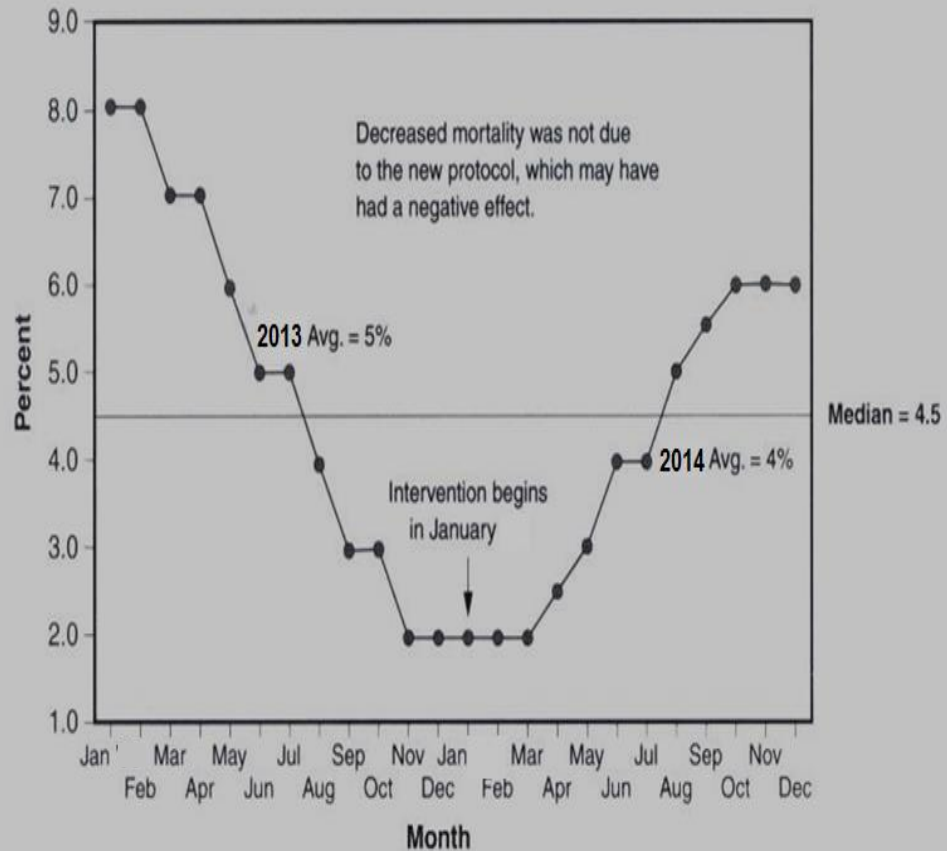
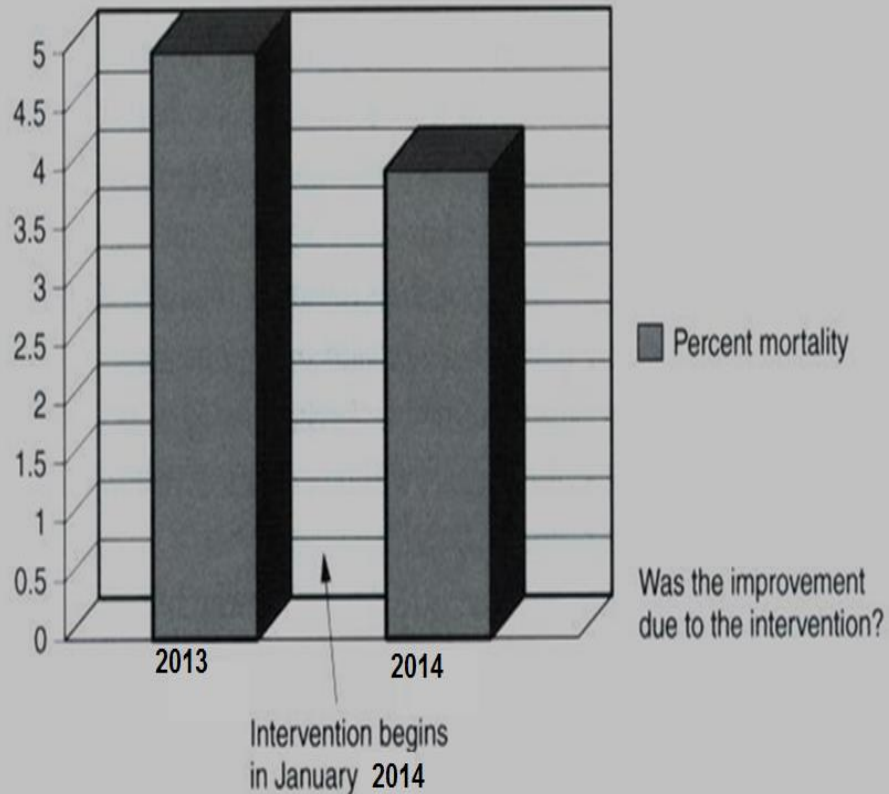
Aggregate Statistics

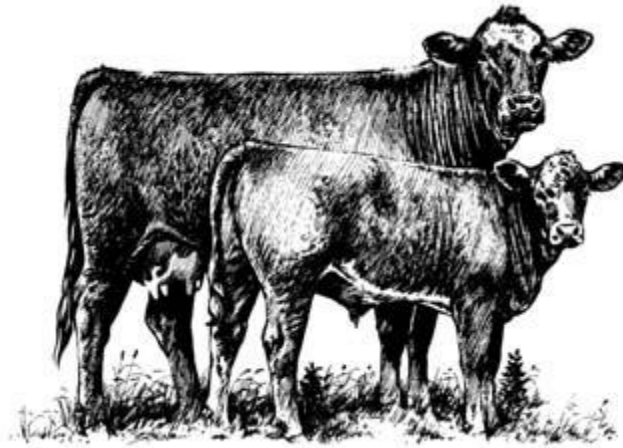


Time Ordered Statistics



Aggregate vs. Time Ordered





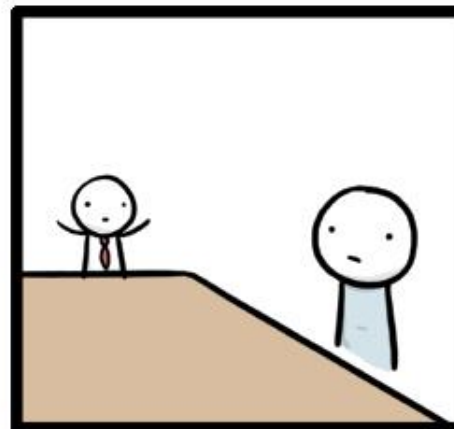
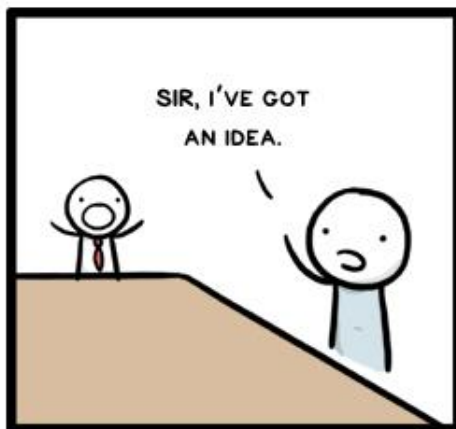
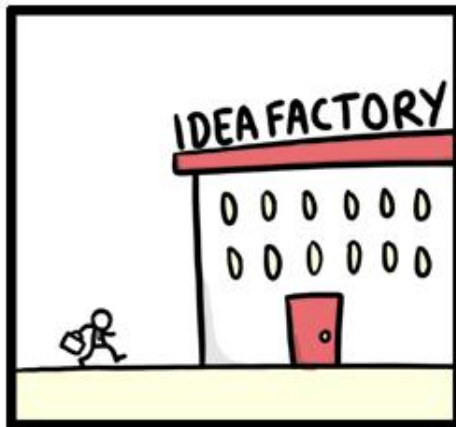
“You can’t fatten a cow by weighing it”

Palestinian Proverb



What Changes can we make
that will result in
improvement?

Ideas

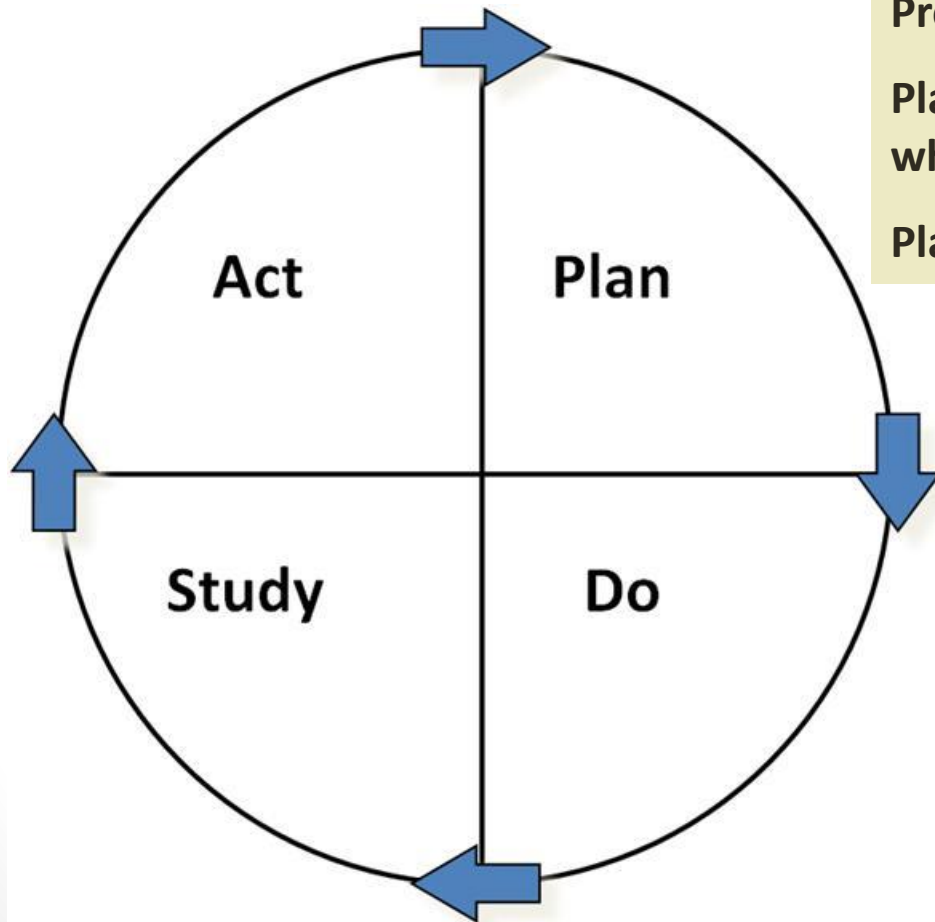


Why we PDSA

- Fast – We have a short attention span
- Low risk – no harm option
- Try everything
- Create confidence
- Learn how to adapt
- Evaluate side-effects
- Build momentum
- Decrease resistance
- Make REAL improvement



Learning with the PDSA cycle: Plan



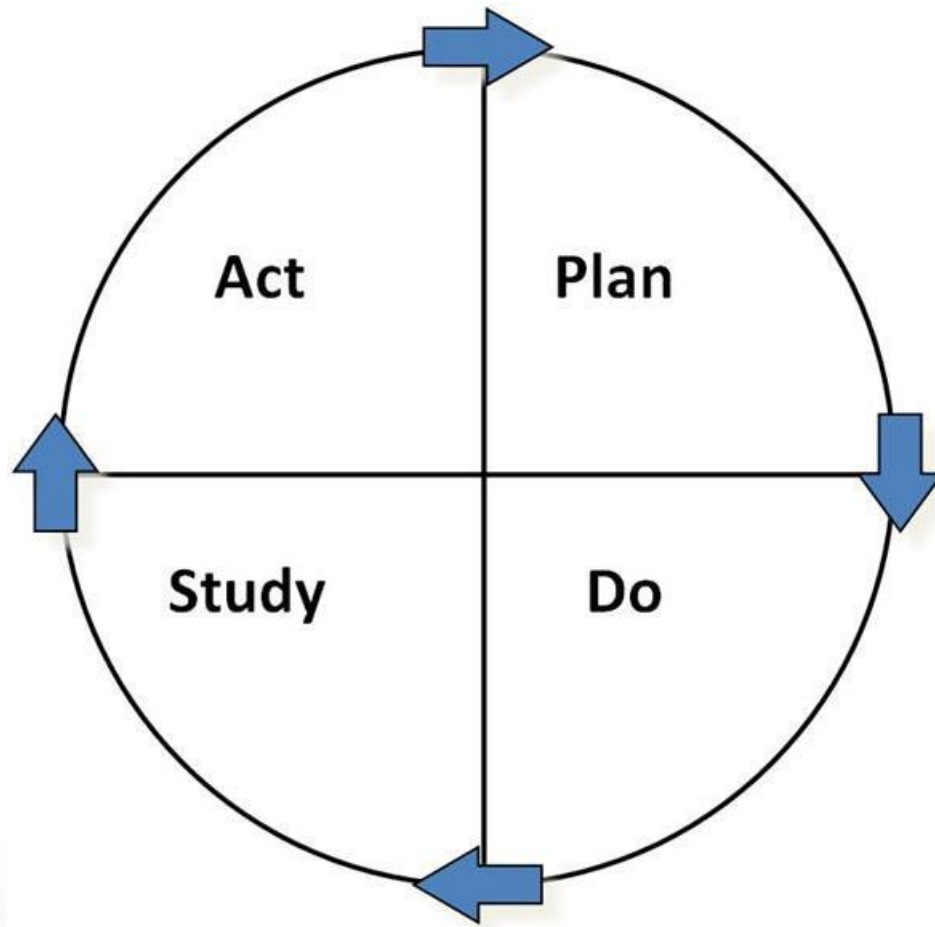
PLAN

Prediction If ____ Then ____

Plan to carry out the test (who, what, when?)

Plan for data collection

Learning with the PDSA cycle: Do



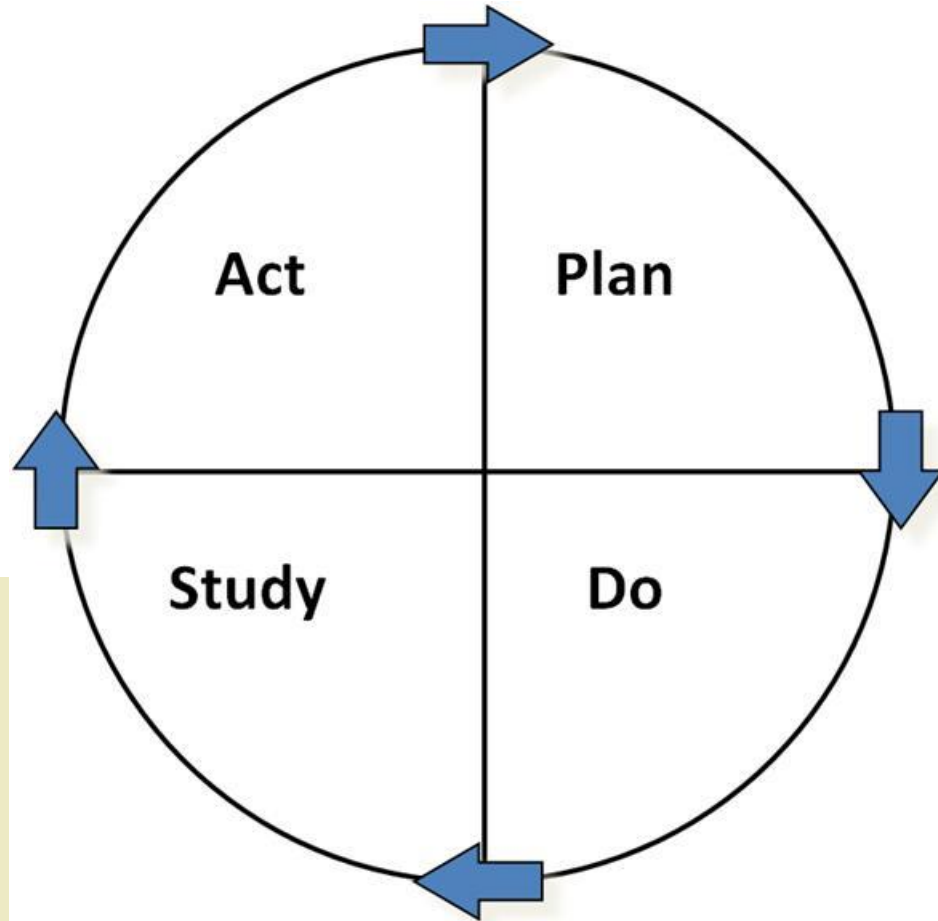
DO

Carry out the plan

Document observations –
successes/unexpected issues

Begin analysis of data

Learning with the PDSA cycle: Study



STUDY

Compare to prediction

What did you learn

What was unexpected

What about the data

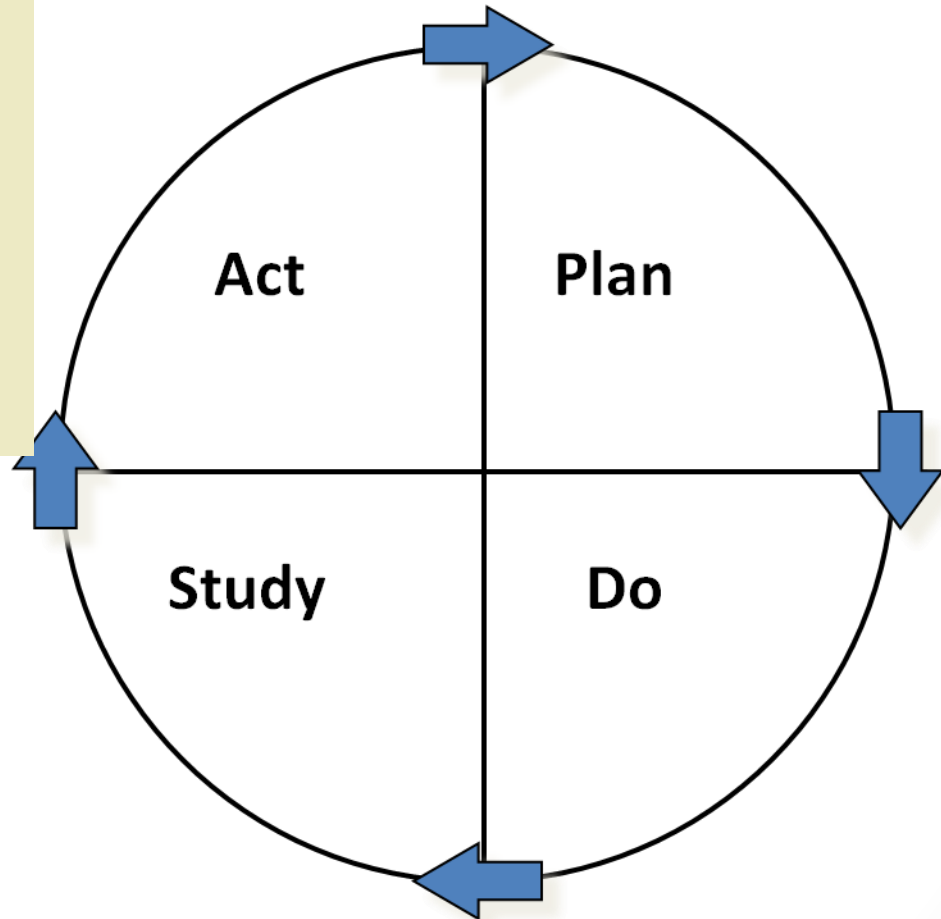
Learning with the PDSA cycle: Act

ACT

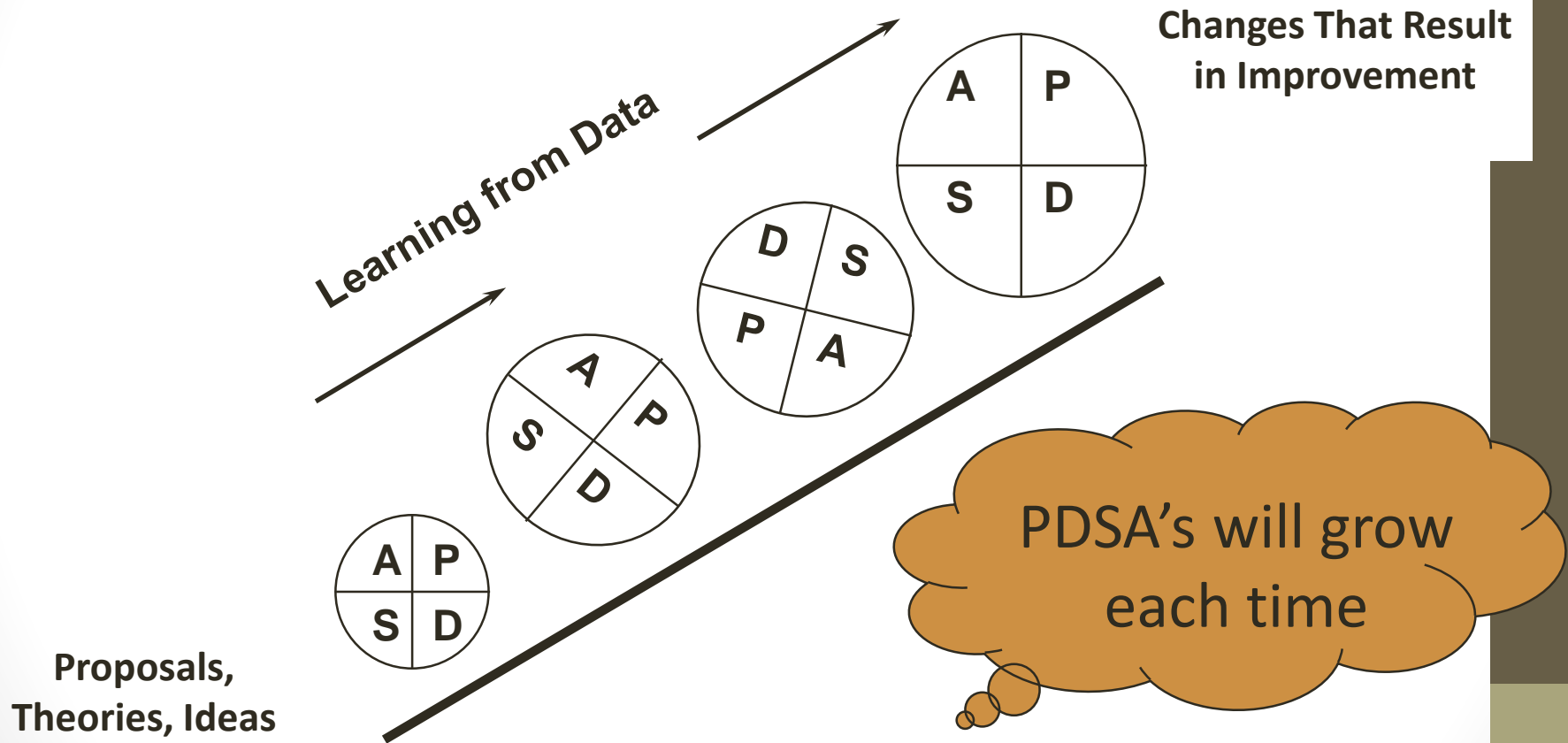
Select an action based on the results of the test:

- Adopt
- Adapt
- Abandon

If appropriate, plan next test



Use of the PDSA Cycle



Common Hang Ups

- Starting too big
- Decision by committee
- Implementing too quickly
- Decisions without data
- Spreading too quickly
- Tasking not testing
- Talking not doing

Simple yet balanced

