



Building a Quality Improvement Culture

From PDSAs and Projects to a Learning Organization Focused on Performance

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Introductions

- Your name
- Your organization and who you serve
- Organization's Goldilocks level with QI
 - Too Cold = Think we are behind other clinics
 - Just Right = Doing it, going well, key to success
 - Too Hot = Did it/doing it, not going well for us



Model for Improvement

What are we trying to accomplish?

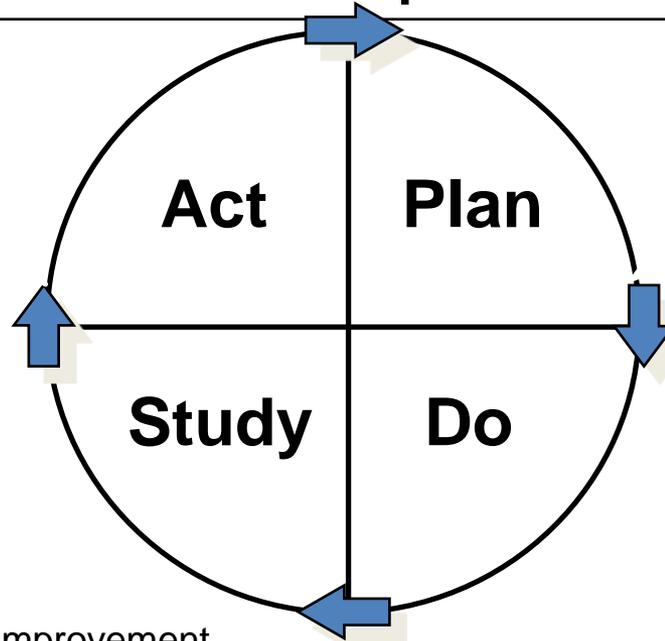
AIM

How will we know that a change is an improvement?

MEASURES

What changes can we make that will result in improvement?

CHANGES



**RAPID
TEST**

**OF
CHANGES**

From Associates in Process Improvement.

**Change is
necessary.**

**Change
is hard.**

**Health
care is
complex.**

**YOU
ARE
HERE.**

**People are
complicated.**

Discussion

What do we take from the Model for Improvement to everyday work?

Where QI projects have had lasting impact, what actions or systems allowed that to happen?

QI project ↔ Culture of quality

- Start small.
- Create successes. Seeing is believing.
- Motivational management expedites everyone.
- Create a clear path.
- Listening leaders: input from everyone, decide as group. Everyone gets to be smart.
- Move forward together.
- Be systematic. Standardize what works.
- Build a learning organization.

What NOT to do

- Limit people to their task list.
- Manage by fear and finger-pointing.
- Allow conflict to get/stay personal.
- Defer creativity, waste people's brain power.
- Have boring meetings.
- Wish for a whole different group of patients.



The virtuous cycle



Culture of quality and the virtuous cycle

Four ways to get there

1. Teaming
2. Walk the walk: Improvement is personal
3. Make it safe to change: Project planning
4. Plan communication: Elephants & Riders
5. After the project: Sustain and Spread



Teaming (as a verb)

Active process to create interdependent teams who ...

- **Form and reform quickly,**
- **Rely on each others' expertise,**
- **Get smarter over time,**
- **Provide the engine of organizational learning.**

How to do Teaming

- Create psychological safety
- Focus on the problem and allow for new solutions to arise from staff
- Get out their way (no siloes by role, e.g.)
- Expect people to recreate their work
- Hold people accountable as teams



Walk the walk.

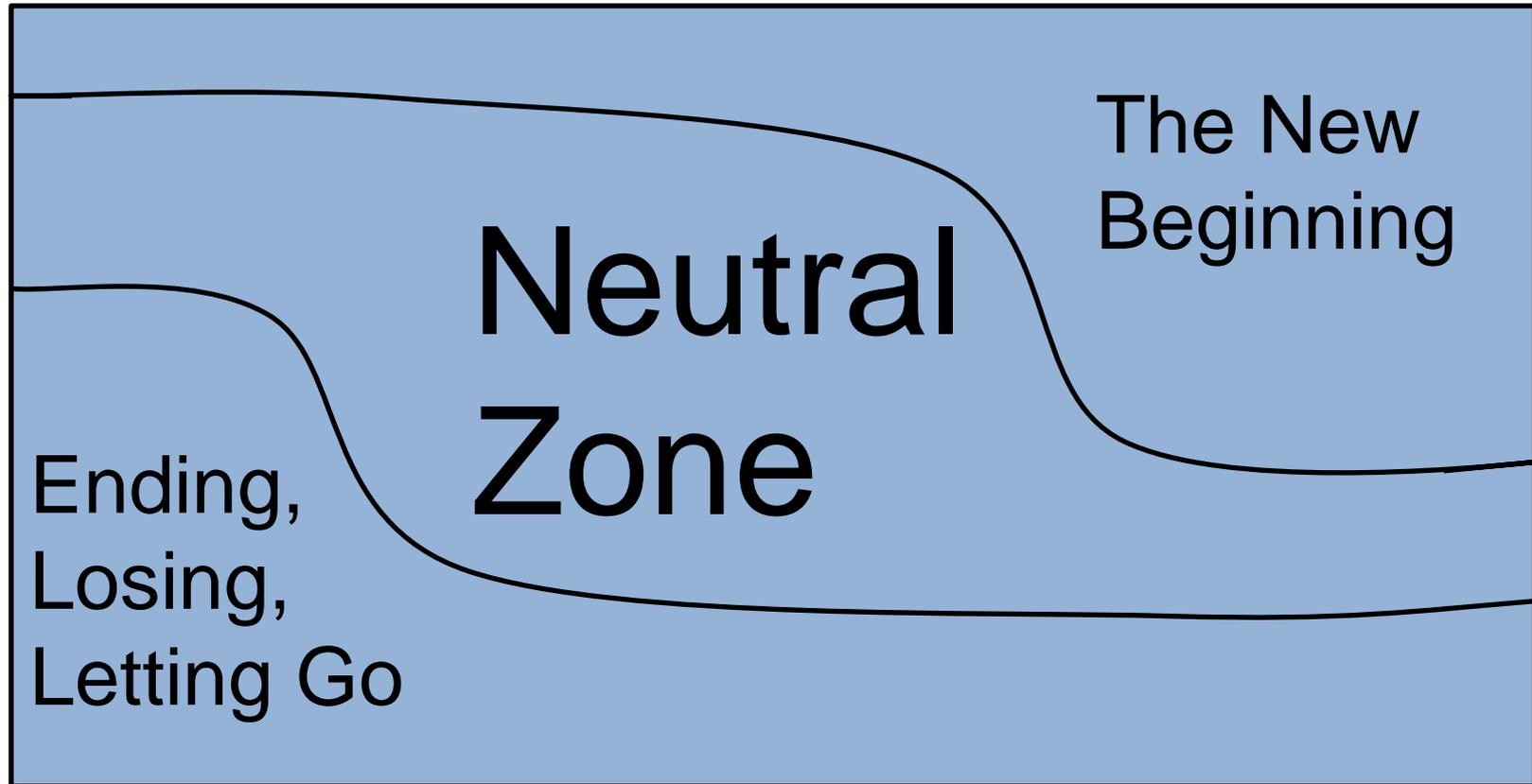
Be obviously imperfect.

Improve yourself in public.

Hunter's scorecard

Goal	Measure	Score/Week					
		2-23	3-2	3-9	3-16	3-23	3-30
Meet all deadlines	Look back each Friday	Yes	No, - 1				
Class development	3 hours/week on 1 or more modules	0/3	x/3	x/3	x/3	x/3	x/3
Exercise	Yoga or Run 4x/week	2/4					
Healthy eating	2 pieces fresh fruit per day.	6/7					
Fiction Writing	5 hrs/week	2/5	2/5 as of Thurs				

Transitions have 3 Stages



Make it safe to change, with right team, clear expectations

- Pick the right team members
- Use a **project charter** to set expectations
- Hold regular meetings, even just 20 min
- Have difficult conversations as needed
- Use a standard agenda for project meetings
- Post measures publicly
- Celebrate successes



**Plan your communication
to engage partners in change.**

Commitment = Clarity + Buy-in

Speak to Elephants and Riders.



Rider

Elephant

Path





Make the Path for the Elephant

- Direct the Rider.
 - Find the bright spots.
 - Point to the destination.
- Motivate the Elephant.
 - Find the feeling (+/-).
 - Build identity.
 - Shrink the change.
 - Build a growth mindset.
- Shape the Path.





Make the Path for the Elephant

Clarity dissolves resistance.

Commitment = Clarity + Buy-in



4. After the project ...

Sustain

Spread

Sustain project gains

- Get clear on key changes
- Hardwire most important measures
- Monitor these metrics, set minimum threshold
- Hardwire the key changes
 - P&P, job descriptions, supervision, perf. reviews
 - Communication for culture of quality

Goal: New normal (not just successful project)

Big Ideas

Change Theory, Thinker

Elephants and riders

Switch: How to Change Things when Change is Hard; Dan and Chip Heath (from Jonathan Haidt)

Establish the gap.

Motivational Interviewing; Miller and Rollnick

Improve yourself in public.

Quality is Personal; Harry Roberts

Be specific about the changes.

Spread of better practice; Sarah Fraser

It's the transition.

Transitions and Managing Transitions; William Bridges

Help everyone change when it's right for them.

Adoption Curve; Everett Rogers

Set loose the mad scientists.

Model for Improvement; Lloyd, Moen, et al.



What is Quality Improvement?



What is Quality Improvement?

- **Change at system (team/org) level**
 - Work at the frontline level
 - By multi-disciplinary staff teams
- Regular, ongoing assessment and measurement
- Reduction of variability
- **Process** focus, not individual as good/bad

Examples: improve health of people with diabetes, increase % women breastfeeding, decrease injuries

How do we do things better?



What is Quality Assurance?

“The planned and systematic activities put in place to ensure that (quality) requirements for a product or service will be fulfilled.”

- Ensure that requirements, guidelines, regulations met
- Uses inspection (vs. regular measurement)
- Also known as quality control
- Examples:
 - Health code for restaurants
 - Licensing of providers
 - Audits of clinical facilities

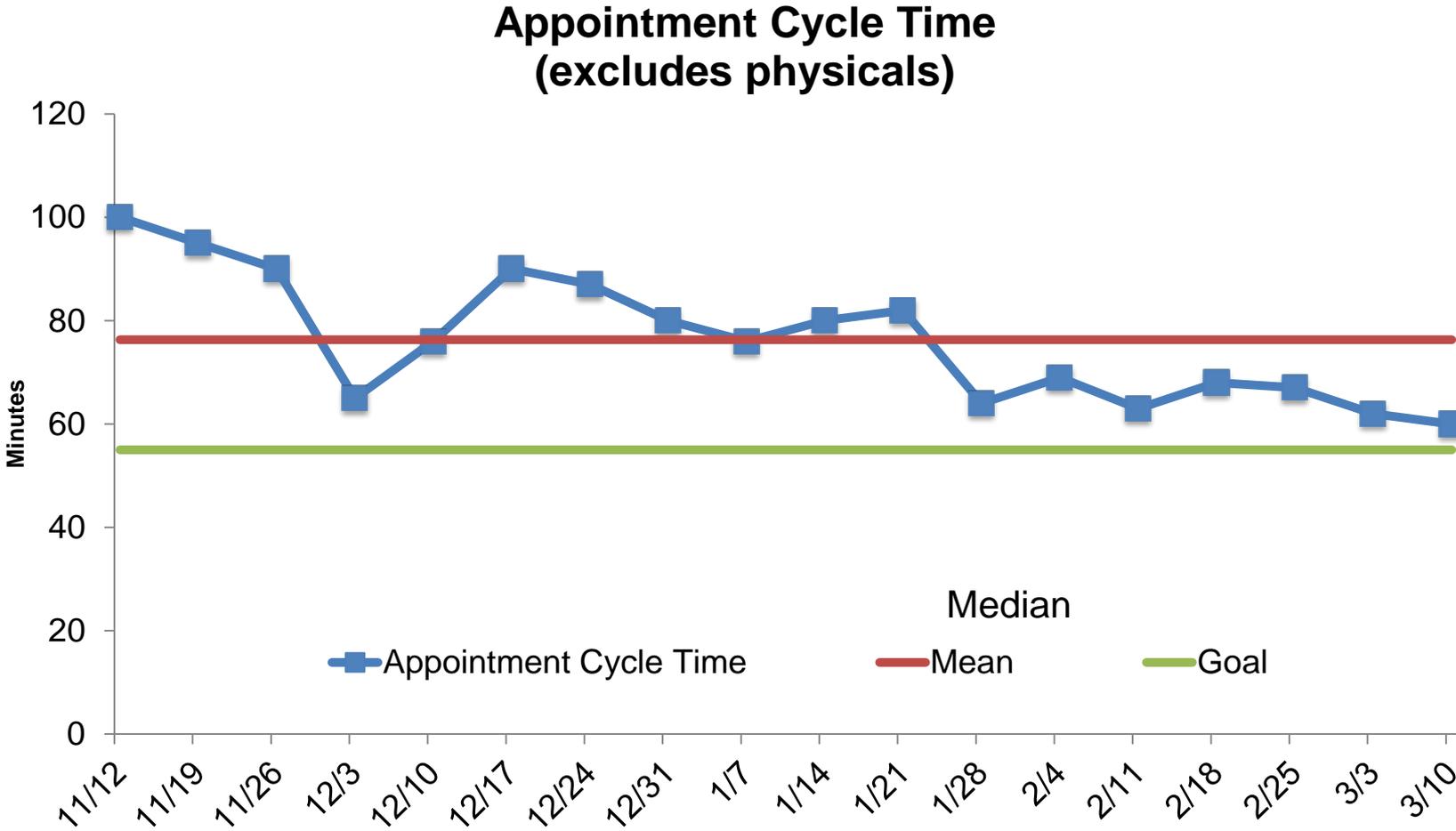
Are we (you) doing things right?

**Every system
is perfectly designed
to give the results that it gets.**

Aim Statement Formula

By {When}, Increase/ decrease
{What} for {Whom} from
{What it is now} to {What you
want it to be}.

Why measure frequently? To monitor your process



Run Charts

- **Display ordered sequence of data and provide running record over time**
- **Can be used for any data that are sequenced over time (trending)**
- **Require no statistics**
- **Visually illustrate progress toward goal**

Adapted from, *NHS Scotland Tutorial Guide on Statistical Process Control.*

<http://www.indicators.scot.nhs.uk/SPC/SPC.html>



Understanding Variation

- **All sets of data demonstrate variation.**
- **Two types of variation**
 - Random/common cause (*NOT special; regular*)
 - Special cause (*something going on*)

Adapted from, *NHS Scotland Tutorial Guide on Statistical Process Control*.
<http://www.indicators.scot.nhs.uk/SPC/SPC.html>

Example of PDSA

Aim: Increase childhood health literacy in new parents.
Change being tested: Raffle to improve class attendance

Plan: Shiloh will text moms with news of 2 \$50 Safeway cards being given away at class #2 in three days. We predict that more moms will come to class #2 than came to #1.

Do: Shiloh has mobile numbers for 8 of 10 moms. She sends text. One reply said “who is this?” Two others responded with excitement. No other replies. At Class #2, 7 of 10 moms came, including one who didn’t get text.

Study: 7 of 10 was better than 5 of 10 at first class. One mom said she didn’t want class eating up her data plan.

Act: Do another PDSA with texting simple reminder, no raffle prize for attendance.

Not PDSA, but new practice: Ask all moms to confirm their cell # at each class.



Final note about experts

**“He who reads 100 poets
sounds like 100 poets.**

**He who reads 1000 poets
sounds like himself.”**

- Aphorism from China



Reading list

- Leading change
- Quality improvement, Model for Improvement
- Productivity and time management
- Management skills for supervisors

Keep the conversation going.

Get contact info from others here
(make a date, start a peer group)

and

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