



Illinois Health and Hospital Association

Quality Essential Skills Training (QuEST)

Session 1: The Model for Improvement

Support

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Agenda

1. Course Overview
2. The Model for Improvement (MFI)
3. Question 1 of the MFI
4. Next steps

Our Goal by the End of Session 4

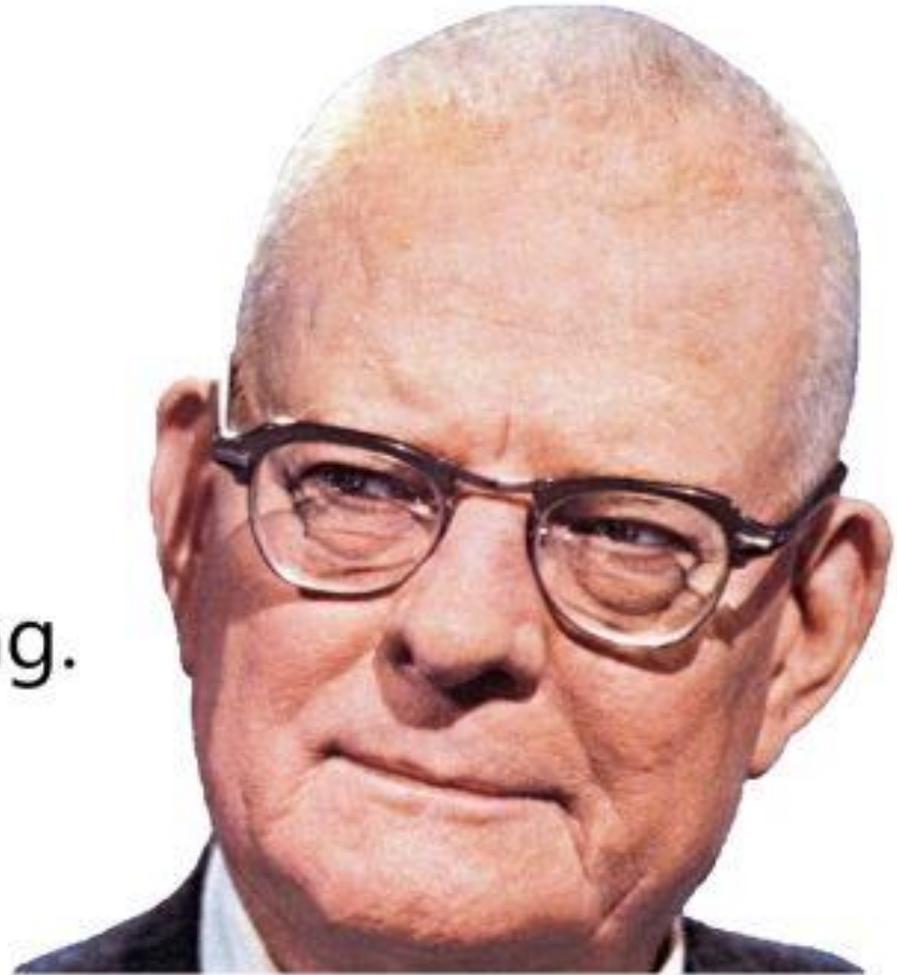
1. Have a full understanding of the Model for Improvement (MFI)
2. Be equipped with the knowledge to use the MFI, and the tools provided, to guide your quality improvement projects moving forward
3. Have a completed Project Charter form

Series Overview

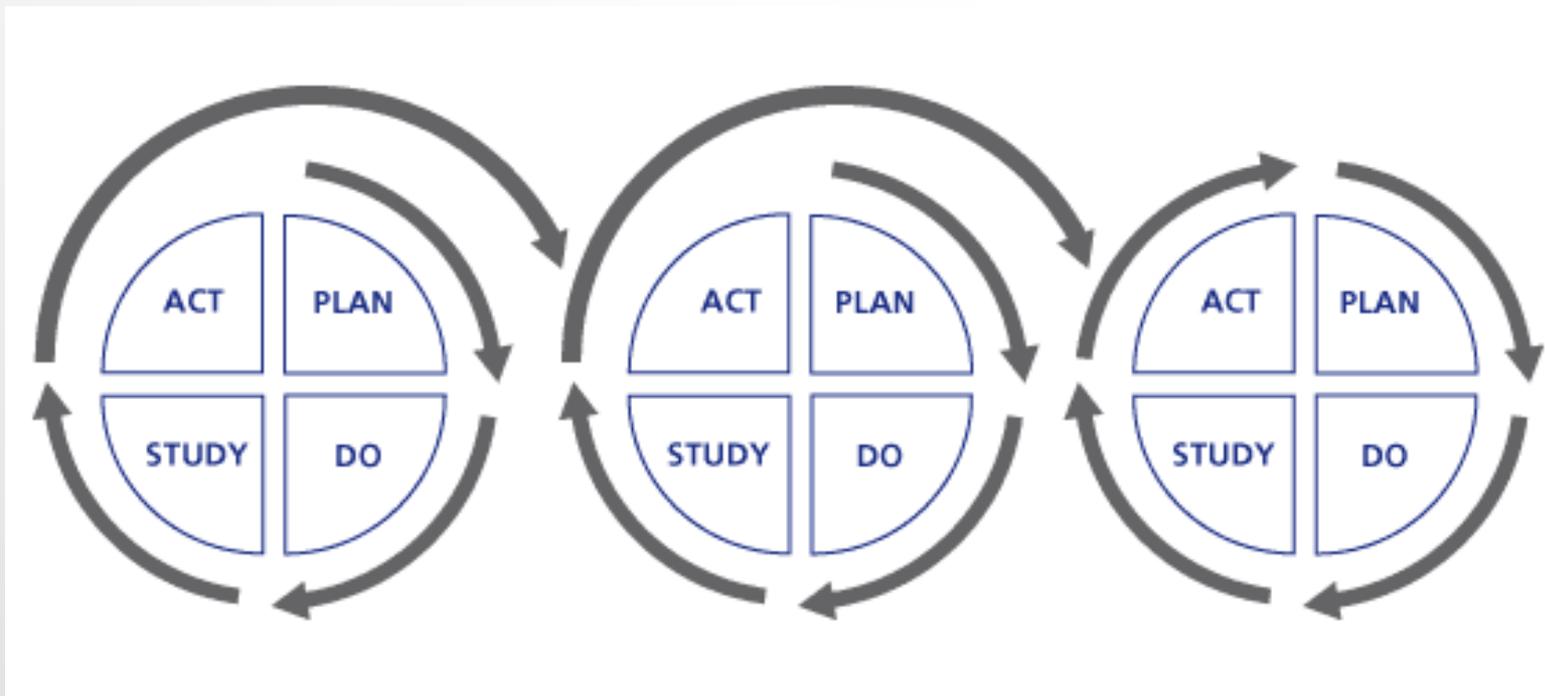
- ❖ Session 1: Focus on the MFI & Question 1 of the MFI
- ❖ Session 2: Focus on Data/Measurement & Question 2 of the MFI
- ❖ Session 3: Focus on Tests of Change & Question 3 of the MFI
- ❖ Session 4: Bringing it all together & Implementation

If you can't
describe what
you are doing
as a process,
you don't know
what you're doing.

William Edwards Deming



What change can we make that will result in improvement?



The Model for Improvement



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Approaching Improvement as Science

Scientific Method

- Systematic Observation
- Measurement
- Experiment
- Formulation, Testing, and Modification of Hypothesis



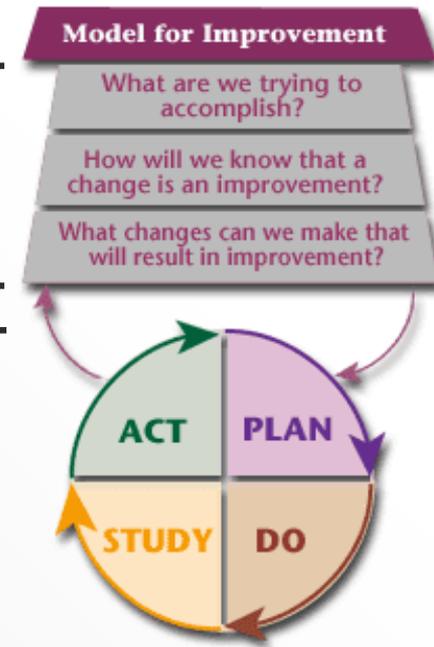
Science of Improvement

- Model for Improvement
 - Careful Planning
 - Observation
 - Thoughtful Reflection
 - Iterative Learning
- Measures Over Time
- Multiple Perspectives
- **Discipline to follow the Model**

An Overview of The Model for Improvement

- #1, the “Aim” or “Aim Statement”
- #2, measurement, plotted over time
- #3, CHANGE! What can we test?³ questions answered in any order
- PDSA, start small, “try before you buy”
- PDSA, to build KNOWLEDGE!

The
“scientific
method”
that is
preceded
by ...



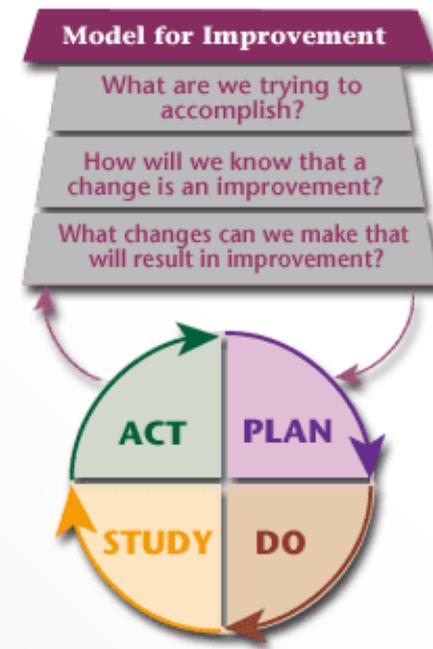
Langley, et al, The Improvement Guide, 2009

An Overview of The Model for Improvement

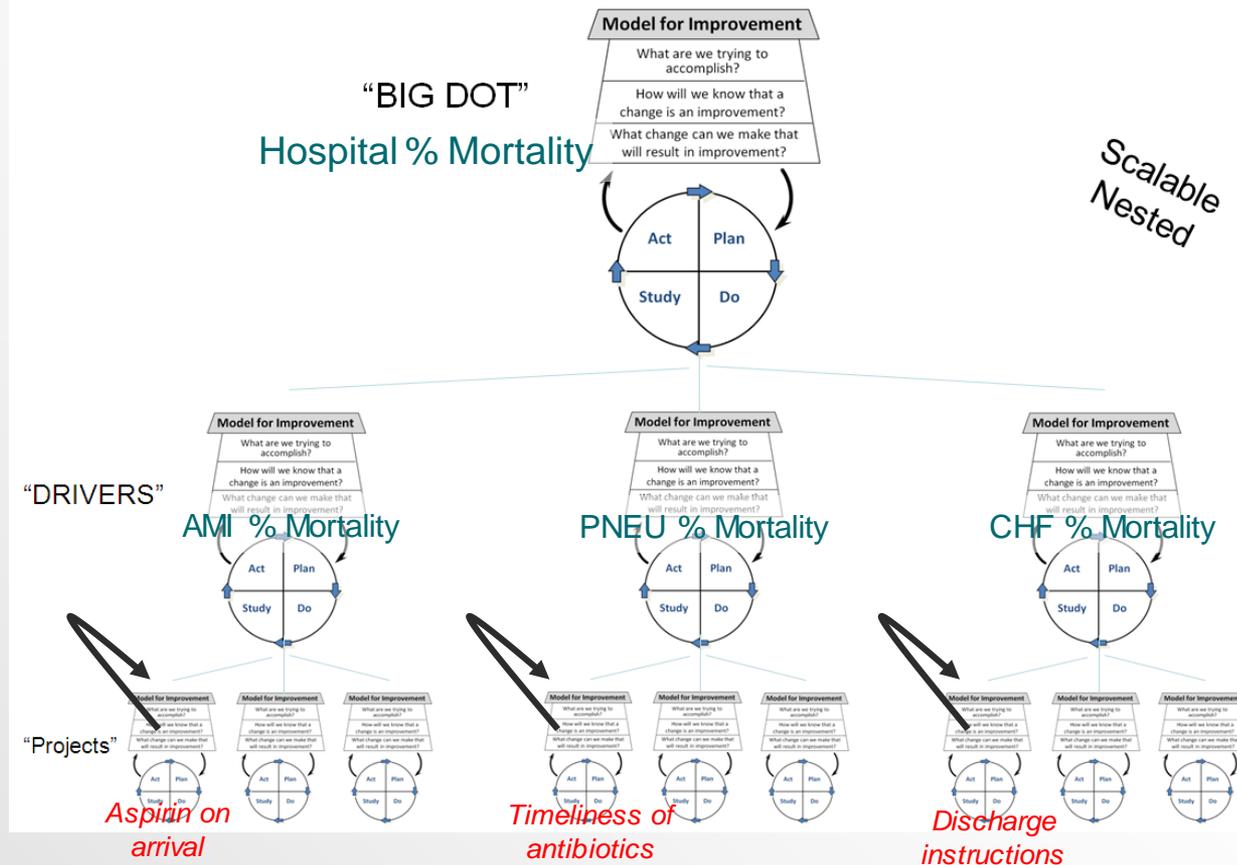
- #1, the “Aim” or “Aim Statement”
- #2, measurement, plotted over time
- #3, CHANGE! What can we test?
- PDSA, start small, “try before you buy”
- PDSA, to build KNOWLEDGE!
- PDSA, > cycles = > success

“The greatest indicator for the success of a project is the number of PDSA cycles that are run”

- Questions answered in any order
- Nested/Scalable



The model can be used at a macro and micro level



An Overview of The Model for Improvement

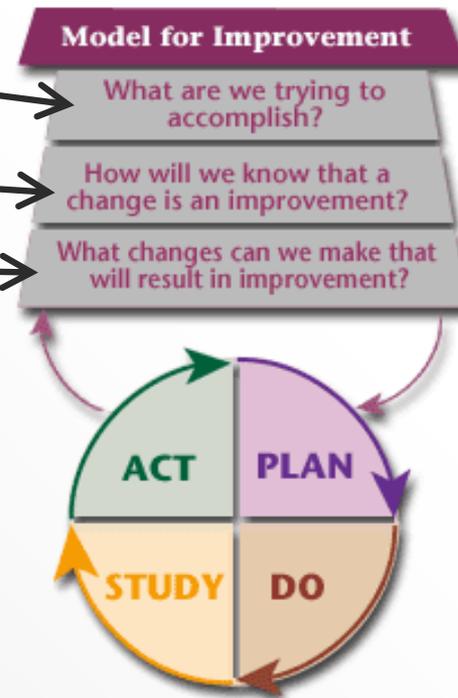
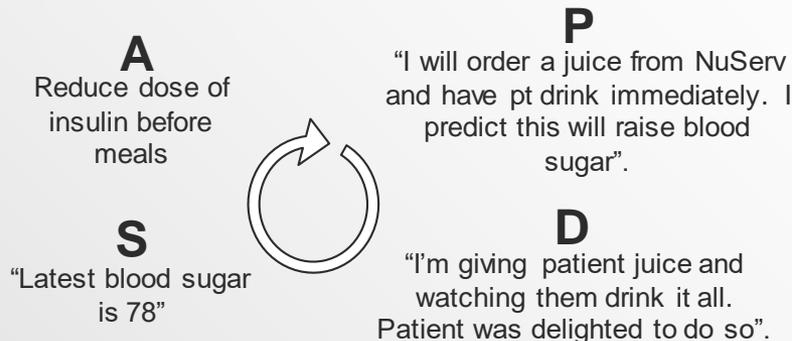
The Model for Improvement is the applied sciences, you use The Model ...

Nurse: “my patient is a newly diagnosed diabetic that is showing signs of confusion, is sweating a lot and complains of dizziness”

Nurse: “I need to get this blood sugar back in the normal range between 70 – 110, ASAP!”

Nurse: “Blood sugar was showing noise until the most recent measure, it was 40!”

Nurse: “patient needs sugar”

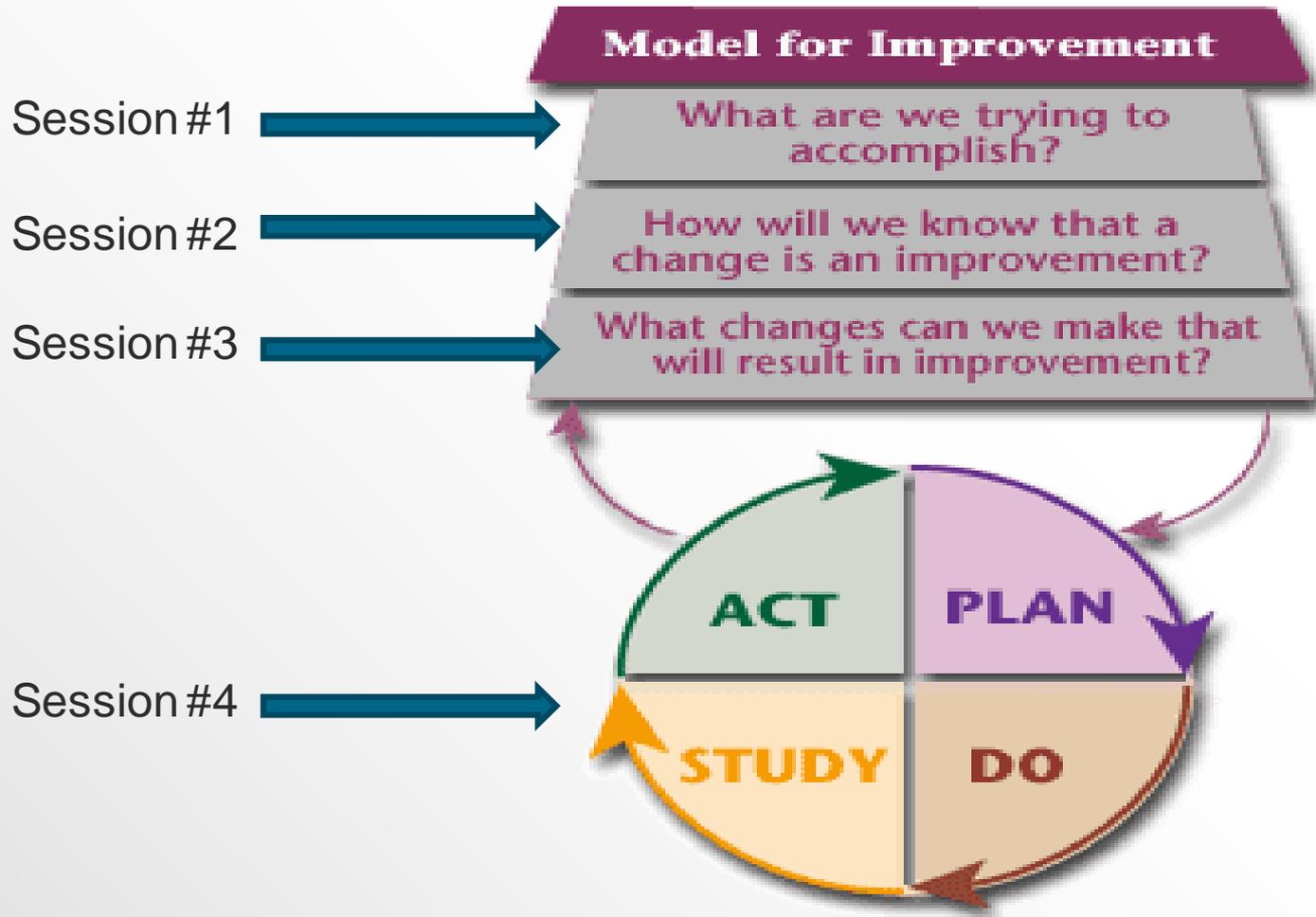


Our Journey through the QuEST Sessions



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The Model for Improvement



Our Toolbox

1. The Project Charter
2. The Run Chart Template
3. The Model for Improvement Form

The Project Charter

- A great method to run a project by and a great way to START a project!
- A “Charter” is a statement of work (SOW) that defines the “what” and “why”
- A Charter is a short document we use to build support for and scope out a project that supports the purpose of the project
- It is the first 3 questions of The Model along with a short narrative building a case for support
- Should be shared, built as a team

 GREAT LAKES PARTNERS FOR PATIENTS		
Model for Improvement Project Charter This project charter clarifies expectations among the team and establishes the project's aim, measures, scope, timeline and team members.		
QUESTION 1: WHAT ARE WE TRYING TO ACCOMPLISH?		
Aim Statement:		
QUESTION 2: HOW WILL WE KNOW THAT A CHANGE IS AN IMPROVEMENT?		
Outcome Measures	Current	Target
Process Measures	Current	Target
SCOPE		
In Scope:	Out of Scope:	
QUESTION 3: WHAT CHANGES CAN WE MAKE THAT WILL RESULT IN IMPROVEMENT		
Small Tests of Change	Date	
Project End Date:		
TEAM		
Executive Sponsors:		
Dyad Champions:		
Team Members		

The Model for Improvement Form

- This form will be the operational tool that your teams use during the project
- This will be filled out after your charter is complete and once your team starts initiating tests of change
- The MFI form helps to keep your team on task and tracking your small tests of change

PLAN – DO – STUDY – ACT PLANNING DOCUMENT

AIM Statement: *What are we trying to accomplish?*

Measures: *How will we know that a change is an improvement?* *How Much?* *By When?*

1.		
2.		

Tests of Change: *What change can we make that will result in improvement?*

PLAN <small>What changes are to be made?</small>	DO <small>What do we predict? Plan?</small>	STUDY <small>Document observations:</small>	ACT <small>What is next?</small>

DESIGN PLAN FOR SMALL TESTS OF CHANGE

Initiative: _____ Intervention: _____

Smallest Change: _____ Scope: _____ Total # of Staff Impacted: _____

Planned Testing Timeframe: _____ Total # of Staff to Test: _____

#	Test Description	Test Plan	Testers	Lesson(s) Learned	Decision	Adaptation
1					<input type="checkbox"/> Adapt <input type="checkbox"/> Adopt <input type="checkbox"/> Abandon	
2					<input type="checkbox"/> Adapt <input type="checkbox"/> Adopt <input type="checkbox"/> Abandon	
3					<input type="checkbox"/> Adapt <input type="checkbox"/> Adopt <input type="checkbox"/> Abandon	
4					<input type="checkbox"/> Adapt <input type="checkbox"/> Adopt <input type="checkbox"/> Abandon	
5					<input type="checkbox"/> Adapt <input type="checkbox"/> Adopt <input type="checkbox"/> Abandon	

 GREAT LAKES PARTNERS FOR PATIENTS

Model for Improvement Form

Model for Improvement



PLAN – DO – STUDY – ACT PLANNING DOCUMENT

AIM Statement: *What are we trying to accomplish?*
 Reduce readmissions of patients discharged to home to Med-Surg 4 achieving a 12% reduction by December 31, 2019

Measures: <i>How will we know that a change is an improvement?</i>	How Much?	By When?
1. A consistent phone script will be used for 100% of follow-up calls.	At least 90% of follow-up calls made between July 1 and Aug 31 will have a documentation of the standard script being followed.	August 31, 2016
2. Each patient discharged to home will receive a follow-up call within 72 hours of discharge	90% of patients discharged to home will have received a call from the discharging RN.	November 15, 2016

Tests of Change: *What change can we make that will result in improvement?*

PLAN What changes are to be made?	DO What do we predict? Plan?	STUDY Document observations:	ACT What is next?
1. Develop standardized phone script for discharge calls	Staff feedback is needed for new script. Pilot script on the unit and gather feedback.	60% of nurses have trialed and approved the new script.	Implement new script with all nurses making discharge calls.
2. Discharging RN will call patients, discharged to home, within 72 hours of discharge	Develop and trial a process that makes it easy for nurses to make these calls every time.		

Small Test Design Plan

Model for Improvement

What are we trying to accomplish?

How will we know that a change is an improvement?

What change can we make that will result in improvement?



DESIGN PLAN FOR SMALL TESTS OF CHANGE

Initiative: _____ Intervention: _____

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	Test Description	Test Plan	Testers	Lesson(s) Learned	Decision	Adaptation
1					<input type="checkbox"/> Adapt <input type="checkbox"/> Adopt <input type="checkbox"/> Abandon	
					<input type="checkbox"/> Adapt <input type="checkbox"/> Adopt <input type="checkbox"/> Abandon	
3					<input type="checkbox"/> Adapt <input type="checkbox"/> Adopt <input type="checkbox"/> Abandon	

Small Tests of Change

DESIGN PLAN FOR SMALL TESTS OF CHANGE

Initiative: Readmission reduction Intervention: Develop standardized phone script for discharge calls

Smallest Change: 1 RN Scope: All RN's on 4th Med Surg Total # of Staff Impacted: 40

Planned Testing Timeframe: August 1, 2016 to August 31, 2016 Total # of Staff to Test: 10

	Test Description	Test Plan	Testers	Lesson(s) Learned	Decision	Adaptation
1	Draft a new script and test with 2 patients each	Draft new script by 8/4 and test with two patients by 8/8	Sue, Alice and Mary	Medication question was confusing to patients	<input checked="" type="checkbox"/> Adapt <input type="checkbox"/> Adopt <input type="checkbox"/> Abandon	Reword the medication section and trial again
2	Test the revised script	Each person to make two calls the week of 8/11 using the revised script	Sue, Alice and Mary	Script works well and helps direct patient questions and follow-up	<input checked="" type="checkbox"/> Adapt <input type="checkbox"/> Adopt <input type="checkbox"/> Abandon	Test script next week with 5 additional nurses
3	Test script with 5 additional nurses	Each person to make two calls the week of 8/14	Sue, Alice, Mary, Tom, John, Jill, Beth, and Anne	Script works well	<input checked="" type="checkbox"/> Adapt <input type="checkbox"/> Adopt <input type="checkbox"/> Abandon	Add two more to the test and trial for one more week
4	Test script for one more week with 10 total nurses	Each person to make two calls the week of 8/21	Sue, Alice, Mary, Tom, John, Jill, Beth, Anne, Joe and Ginger	Test script for one more week with 10 total nurses, each make 2 calls	<input type="checkbox"/> Adapt <input checked="" type="checkbox"/> Adopt <input type="checkbox"/> Abandon	Script works well – implement with all staff
5					<input type="checkbox"/> Adapt	

Our Toolbox

1. The Project Charter
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Our Goal by the End of Session #4

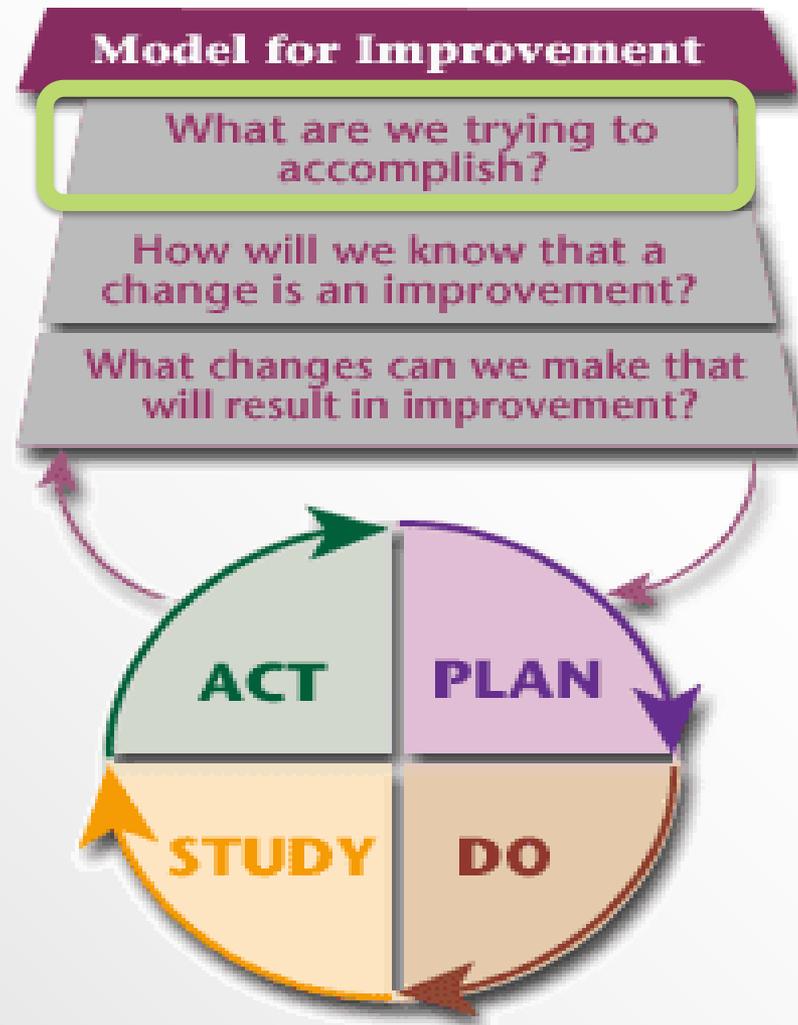
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Question 1: What are we trying to accomplish?



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The Model for Improvement



Developing an Aim Statement

- Aim
 - Verb: Point or direct at a target; have the intention of achieving.
 - Noun: A purpose or intention, a desired outcome.
- Having an aim is crucial to your success!

“A system is a network of interdependent components working together toward a common aim. Every system must have an aim. Without an aim that is clear to all, there is no system.”

-W. Edwards Deming, Out of the Crisis

Developing an Aim Statement



Explicit Aim

- Open, clear, unambiguous, precise, plain

Implicit Aim

- Understood, implied, unspoken, embedded, hidden

Essential Components of an Effective Aim Statement

- Setting the “Aim Statement”
- What is the “Aim” of the project?
- What are we trying to accomplish?
- And – does this “Aim” support the purpose of the organization/system?



Let's discuss the difference between:

Implicit vs. Explicit

Essential Components of an Effective Aim Statement

What are we trying to accomplish? What is the Aim?



7 people meeting...

**Implicit
Aim** { Understood
Implied
Unspoken
Embedded
Hidden

“We are going to reduce infections in our hospital by next year.”

Essential Components of an Effective Aim Statement



***An “implicit aim”
will usually results in
X versions of an aim
(x being number individuals)***

**Implicit
Aim** { Understood
Implied
Unspoken
Embedded
Hidden

- “We are trying for zero days for all patients”
- “We are going to reduce it for elderly patients”
- “We are going to reduce it by 10% by next week.”
- “I know we have to get something done by end of fiscal year.”
- “Why am I at this meeting, something to do with cath use?”
- “We are trying to reduce it by 50%, either the # days or # cath?”
- “What about this indicator over here? It is a better measure!”

This happens because people are inherently good and want to solve a problem!

Essential Components of an Effective Aim Statement



**Explicit
Aim** {
Open
Clear
Unambiguous
Precise
Plain

“We will reduce our Urinary Catheter Utilization Rate for inpatients from an average of .31 to .20 on 3 South by the end of FY20 with the guidance of our Nursing Quality Council and our CNO Linda Darling.”

Developing an Aim Statement

- Essential components of an aim statement:
 - Population
 - Goal
 - Time Expectation
 - Where
 - Guidance

We will reduce our urinary catheter utilization rate for inpatients from an average of 0.31 to 0.20 on 3 South by the end of FY2020 with the guidance of our Nursing Quality Council and our CNO, Linda Lee.

Developing an Aim Statement

- Essential components of an aim statement:
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*We will reduce our **urinary catheter utilization rate for inpatients** from an average of 0.31 to 0.20 on 3 South by the end of FY2020 with the guidance of our Nursing Quality Council and our CNO, Linda Lee.*

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Essential Components of an Effective Aim Statement



**Let's try again ...
... call them out!**

The essential components of a solid Aim Statement:

- **Population**
- **Goal**
- **Time Expectation**
- **Where**
- **Guidance**

We will increase the scores on the HCAHPS questions “During this hospital stay, how often did nurses listen carefully to you?” & “During this hospital stay, how often did nurses explain things in a way you could understand?” from the mid 70’s to at least 92% on 2N and 2S by March 2022 with the guidance of Pam Thomas, Clinical Nurse Leader.

Essential Components of an Effective Aim Statement



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Next Steps



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Our Goal by the End of Session 4

1. Have a full understanding of the Model for Improvement (MFI)
2. Be equipped with the knowledge to use the MFI, and the tools provided, to guide your quality improvement projects moving forward
3. Have a completed Project Charter form

Next Steps

- ❖ Session 1: Focus on the MFI & Question 1 of the MFI - *Complete*
- ❑ **Before beginning Session 2: Complete the aim statement and team section of the Project Charter**
- ❖ Session 2: Focus on Data/Measurement & Question 2 of the MFI
- ❖ Session 3: Focus on Tests of Change & Question 3 of the MFI
- ❖ Session 4: Bringing it all together & Implementation

Next Steps

1. Identify a quality improvement project for your organization
2. Using the Project Charter Document:
 - ❖ Develop the aim statement for your project
 - ❖ Complete the Team section of the document
3. Review the aim statement with team members to reach consensus
4. Bring your Project Charter to Session 2



Model for Improvement Project Charter

This project charter clarifies expectations among the team and establishes the project's aim, measures, scope, timeline and team members.

QUESTION 1: WHAT ARE WE TRYING TO ACCOMPLISH?		
Aim Statement:		
QUESTION 2: HOW WILL WE KNOW THAT A CHANGE IS AN IMPROVEMENT?		
Outcome Measures	Current	Target
Process Measures	Current	Target
SCOPE		
In Scope:	Out of Scope:	
QUESTION 3: WHAT CHANGES CAN WE MAKE THAT WILL RESULT IN IMPROVEMENT		
Small Tests of Change		Date
Project End Date:		
TEAM		
Executive Sponsors:		
Team Members		

Next Steps

If you have questions or would like feedback on what was covered during this session please email our IHA Team at:

IHAFlex@team-iha.org

Thank you!



Illinois Health and Hospital Association

Your trusted voice and resource

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