Quality Improvement Projects: Guide for QI Project Development

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Getting started…

- Selection of your quality improvement project (who, what, when, where, how, and why)
- Assembling your quality improvement team
The Model for Improvement
(The QI Roadmap)

- Development of the AIM of the project
- What MEASURES will you use?
- What changes or IDEAS can you make that will result in quality improvement?

TEST = Plan – Do – Study – Act

(learning and improving)

- Sustainable change ideas
Selecting a QI Project

Choosing the right project is paramount and should focus on improving efficiency within your setting.

**Identify:** a) gaps between goals and actual performance, b) does staff/patients/clients think it is important, and c) can it be done on a small scale with results in 3 months?

**Consider:** a) early wins, b) contain a “WOW Factor”, and c) is there resistance?
QI Team selection... (4 to 8 person team)

**QI Team Leader** – the person that has authority to make and implement new changes

**QI Expert** – familiar with QI methods and understands the process “get things done” person

**Local Experts** – “front line” staff that works in the area needing improvement that understands the process and procedures and how to change them.
Outside Perspective – the individuals not directly involved in the process and provide “fresh eyes” to the process. They ask, “why”

QI Project Manager – usually the QI Team Leader or Local Expert that organizes and manages the project. They help with timelines, monitoring progress on tasks, and facilitate meetings
Aim Statement  (what are we trying to accomplish?)

The AIM Statement guides and focuses the team’s efforts ...........

Specific
Measurable
Achievable
Relevant
Time bound
AIM Statement

What = Identifying the problem needing fixed
   (Improve, reduce, or increase)
Why important? (“so what” - “why bother”)
Who is the project focused on?
When will it be completed – develop a timeline by month, day, year
AIM Statement (cont.)

How: what methods you will use at a high level (lean methodology, bright futures toolkit etc.)

Measurable goals:

Short term process and outcome goals such as reducing wait times or increasing customer satisfaction scores by 70%

Consist of 4-6 goals

Goals = SMART objectives / stretch goals

Update the team on the AIM Statement
Measures ... (how we know if changes are improved)

**Outcome** – the ultimate results you are trying to achieve (wait time in clinics, time to schedule an appointment, etc.)

**Process** – what you do to achieve the outcome (number of forms to complete, number of steps the patient takes during their appointment)

**Balancing** - what could be “messed up” while trying to improve the process (time spent with provider, patient satisfaction, etc.)
Identify change ideas...

First……know your current process and how it work. Plan to do a walk through where the actual work is done. Observe the process. You must know where you are before you can determine where you are going with the project.

Document each step of the process

Record the time it takes to complete each step

Record the time from start to finish for the process

Record any wait times between each step

Document any / all waste seen in the process (defects, overproduction, waiting, non-value-added processing, transportation, inventory, motion, employee underutilization.
When the team identifies waste, create a visual list that is dependent on the aim statement and goals. (spaghetti diagrams, functional charts, and time bar charts)

This process allows for visualization of the process and where the flow is interrupted / stopped and highlights ways to improve the process.
When the flow has been analyzed, review the current process through the eyes of the client and begin categorizing each activity within the process of ”lean thinking”:

Value added (what is necessary and are at the right time / cost

Non-value added – but necessary (activities that MUST be performed but not considered of value to the patient/client)

What activities are non-value added (patient sees as unnecessary and are not willing to pay for such as waiting to be seen by a nurse)

Consider a Pareto chart or fishbone diagram identifying the “root cause” of the problems identified.
Pareto chart / Fishbone diagram

Organizes data
Identifies areas to focus improvements on
Helps identify the “root cause” of problems uncovered
Sift through the list of change ideas
Prioritize based on the largest benefits for the organization (“biggest bang for the dollars”)
Consider using PACE charts, multi-voting, or a selection matrix to help prioritization
Test change ideas...

Test, test, test, and test yet again! Remember to consider staff resistance, uncertainty, and potential unintended consequences of a change.

Test changes on small scale (one person, one form, one provider, etc. and under different circumstances)

TEST, MODIFY, and RE-TEST ..........

Remember:

Plan – Do - Study – Act!!!
Plan – Do – Study – Act Cycle

Test on small scale

Scale down time period for testing (instead of a month, think of weeks or days, etc.)

Include feedback from clients/staff with changes

Involve all stakeholders and inform staff affected by changes

Test with a “user friendly audience”

Identify ways to collect data to see if works then tweak

Learn from success……..and learn from failures

Test over a variety of conditions/circumstances
Sustaining / Spreading Improvements

When changes are tested and improve the process, hardwire into the agency/process

Involve:

Senior leaders
Ownership
Staff
Patients

Communicate improvements to allow for accountability

Continuously measure – “snapshot”
Team considerations ...

Identify change idea and develop a case for use
Ensure change supported by senior management
Identify “changers / team players” for change
Identify communication processes (who does what)
Identify how to measure change
Identify and document lessons learned........
Questions...

Institute for Healthcare Improvement, NC Center for Public Health Quality, NC Charlotte Area Health Education Center, and NC State University Industrial Extension Service.