HRET HIIN Virtual Event
Foundations for Change Fellowship

Wednesday, January 18 | Call #1 | 11:00-12:00 p.m., CT
Welcome and Introductions

Mallory Bender, Program Manager, HRET
AHA/HRET Hospital Improvement Innovation Network (HIIN)
QI Fellowship Foundation for Change Session #1
Online Live Webinar
January 18, 2017

The planners and faculty of the HRET HIIN “QI Fellowship Foundations for Change Session #1” webinar have indicated no relevant financial relationships to disclose in regard to the content of this presentation.

Summary Disclosure & Accreditation Statement

This activity has been planned and implemented in accordance with the accreditation requirements and policies of the Accreditation Council for Continuing Medical education through the joint providership of the American Board of Quality Assurance and Utilization Review Physicians, Inc. (ABQAURP) and Health Research & Education Trust (HRET). ABQAURP is accredited by the ACCME to provide continuing medical education for physicians.

The American Board of Quality Assurance and Utilization Review Physicians, Inc. designates this live activity for a maximum of 1.0 AMA PRA Category 1 Credits™. Physicians should only claim credit commensurate with the extent of their participation in the activity.

ABQAURP is an approved to provide continuing education for nurses. This activity is designated for 1.0 Nursing Contact Hours through the Florida Board of Nursing, Provider # 50-94.
<table>
<thead>
<tr>
<th>Time</th>
<th>Session Title</th>
<th>Presenter(s)</th>
</tr>
</thead>
<tbody>
<tr>
<td>11:00-11:10</td>
<td>Welcome and Introduction</td>
<td>Mallory Bender, Program Manager, HRET</td>
</tr>
<tr>
<td></td>
<td>Why Are We Here?</td>
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<tr>
<td></td>
<td>Who Is Here?</td>
<td></td>
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<tr>
<td></td>
<td>Agenda</td>
<td></td>
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<tr>
<td></td>
<td>Criteria for Completing Fellowship</td>
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<tr>
<td>11:10-11:30</td>
<td>Introduction to Fellowship</td>
<td>Kathy Duncan, Lauren Macy, Institute for Healthcare Improvement</td>
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<tr>
<td></td>
<td>Who Is Participating?</td>
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<tr>
<td></td>
<td>Curriculum Overview</td>
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<td></td>
<td>How Is This Going to Work?</td>
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<tr>
<td>11:30-11:50</td>
<td>The Case for Improvement</td>
<td>Kathy Duncan, Institute for Healthcare Improvement</td>
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<td>Improvement Is Not Simple</td>
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<td>Model for Improvement</td>
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<tr>
<td>11:50-11:55</td>
<td>Action Items</td>
<td>Kathy Duncan, Institute for Healthcare Improvement</td>
</tr>
<tr>
<td>11:55-12:00</td>
<td>Bring It Home</td>
<td>Mallory Bender, Program Manager, HRET</td>
</tr>
</tbody>
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Welcome

• HRET, in partnership with the Institute for Healthcare Improvement (IHI), is pleased to introduce the Quality Improvement (QI) Fellowship:

**Foundations for Change**

• The Fellowship is designed to **equip** frontline leaders and change agents with the **knowledge** and **skills** needed to effectively **engage in improvement** efforts in their organization.
## >300 People in the Fellowship!

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<th>State/Meta</th>
<th>Count</th>
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<td>Alabama</td>
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<tr>
<td>Dallas-Fort Worth</td>
<td>4</td>
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<td>Florida</td>
<td>54</td>
</tr>
<tr>
<td>Foundation for Health Communities</td>
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<td>Georgia</td>
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<td>Great Plains QIN</td>
<td>4</td>
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<td>Health Quality Innovators</td>
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<td>Idaho</td>
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<td>Wyoming</td>
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<td>West Virginia</td>
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HRET Staff

Steve Reinhart, MBA - Director, Clinical Quality
Steve directs the internal HRET team and partners in support of the HIIN project, focusing on operational logistics and support for the state hospital associations. Steve has been working in healthcare for over 20 years in the areas of quality improvement (QI), operations, and outcomes research. Prior to joining HRET, Steve was part of the Performance Improvement team at Northwestern Memorial Healthcare. While at Northwestern, he focused on QI projects in the areas of patient falls, surgical-site infections, and VTE. Steve also led the QI component of the Illinois Surgical Quality Improvement Collaborative (ISQIC). Steve has a Master of Business Administration from Keller Graduate School of Management and a Bachelor of Science in Industrial and Operations Engineering from the University of Michigan. Steve also has a Green Belt certificate in Lean Six Sigma from Purdue University and was a founding member of the International Society for Pharmacoeconomics and Outcomes Research (ISPOR).

Mallory Bender, MA, LCSW - Program Manager
Mallory assists state partner administrations in their operations and clinical quality improvement. Mallory is a licensed clinical social worker (LCSW) and previously worked as a medical social worker in an acute hospital setting, which entailed extensive experience in patient and family engagement and safe discharge planning. Mallory holds a Master of Arts degree in Social Work from The University of Chicago, and a Bachelor of Arts degree from The University of Washington.

Natalie Graves, MPH - Senior Program Manager
Natalie supports education and partner relationships for the HR HIIN team. Working with content experts, she leads development of the HIIN team’s educational strategy related to the harm to: and the fellowship programs. Prior to joining HRET in 2012, Natalie worked at the University of Michigan School of Public Health on evaluation of a state-wide pay-for-performance initiative. She has
Introductions

**Saranya Loehrer, MD, MPH**, is the Head of the North America Region for the Institute for Healthcare Improvement (IHI). She leads the development and execution of IHI’s strategic priorities in North America to ensure IHI continues to serve as a trusted partner to anyone, anywhere working to improve health and health care profoundly for the better.

**Kathy D. Duncan, RN** is a Director for the Institute for Healthcare Improvement (IHI) where she oversees the development and execution of multiple areas of safety and quality improvement related content.

**Lauren H. Macy** is a Senior Project Manager and Improvement Advisor for the Institute for Healthcare Improvement (IHI) working in Africa and North America to build the Quality Improvement capacity of frontline health providers to drive change in their organizations.
Objectives for Today

• Lay the foundation for learning improvement strategies from faculty and each other
• Review of expectations and completion criteria
• Provide orientation to the Learning Management System (LMS) platform, course materials and assignments
• Introduce the Model for Improvement
We Are Glad You Are Here!

- What role do you currently play in your organization?
<table>
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<tr>
<th>Highlights from 2016 Fellowship Projects</th>
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<tr>
<td><strong>Quality and Infection Prevention staff conducted observations in the OR suite to determine compliance with Surgical bundles - Olathe Health System</strong></td>
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<td><strong>SIRS Screens, MD notification, Laboratory Alert and Triage process improved</strong> to comply with 6 hour sepsis bundle – Coast Plaza Hospital</td>
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<td><strong>Screened pre-op neurosurgery patients for MRSA at consult visit. Patients cleansed with CHG 3 days prior to surgery and nares swabbed with betadine on day of surgery – Kaiser Sunnyside Medical Center</strong></td>
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<tr>
<td><strong>32% Decrease in Severe Sepsis and Septic Shock Mortality rate – Lovelace Women’s Hospital</strong></td>
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<td><strong>Added F/u discharge call to include an additional call 14 days post discharge.</strong> Monroe County</td>
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<td><strong>49% Decrease in Urinary Catheter Usage in all Med-Surgical patients – Field Health System</strong></td>
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<td><strong>Development of “walk in the patient’s shoes’ simulation for all staff. 40% reduction in all cause falls – Health Central</strong></td>
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<td><strong>Tested Early warning ‘risk of sepsis’ predictive tool – Orlando Health</strong></td>
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<tr>
<td><strong>Introduced IV Acetaminophen, decreased Opioid Usage and ADE Naloxone rate – Labette Health</strong></td>
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</tbody>
</table>
Thank you for taking the time to answer the questions in the applications. We learned a lot about your current assets and opportunities for improvement and learning. Your valuable feedback has been incorporated into the design of the Fellowship in order to best meet your needs.
Why Do You Want to Participate?

New Role

Improve Skills

Networking

Leadership

Engagement

Desire a Quality Role

First Training

Project Management

Communication

Tools
Which Area Are You Hoping to Focus Your Improvement Efforts on During the Fellowship?
What are you hoping to improve as a result of your participation in the Fellowship?
How Are We Going to Work Together?

• Scheduled calls *(bi-weekly through March then monthly)*
  – Action period discussion
  – Scheduled content
  – Action period assignment

• Active participation – We need you!
  – Chat in questions, examples, comments, encouragements
  – Occasional polling
  – Consider participating on live calls with a colleague/group
<table>
<thead>
<tr>
<th>January 18 – The Case for Improvement</th>
<th>May 10 – Multiple Cycles, Multiple Tests</th>
</tr>
</thead>
<tbody>
<tr>
<td>February 1- Take your Aim – What are we trying to accomplish?</td>
<td>June 14 – Manage Time and Attention</td>
</tr>
<tr>
<td>February 15- What Changes can we make that will result in Improvement?</td>
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<tr>
<td>March 1 – Map Your Course</td>
<td>August 9 – Treasure Chest: Shadowing a Patient</td>
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<td>March 15 – How will we know that a change is an Improvement?</td>
<td>September 13 – Sustaining Improvement</td>
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<td>March 29 – Empower Teams to Engage in Improvement</td>
<td>October 11 – Identify and Spread Improvement</td>
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<td>April 12 – Know Yourself, Know Others</td>
<td>November 8 - Celebration</td>
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</tbody>
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Let’s Check In!

• There will be two virtual “Check Ins” in mid-March and late July, with the objective to:
  – Give you additional feedback on your project
  – Give the faculty feedback on areas to focus next

• “Check Ins” include:
  – Project Summary update (aim statement, change ideas, PDSAs, data, etc.)
  – Participation in the discussion group
  – Self-assessment submission

• This is a PDSA for us!
Action Period Assignments (Between Calls)

- Mix of IHI Open School courses, articles to read, surveys/assessments to complete, and actions to take around your QI project
- Reinforce QI content taught on the call
- Extend learning beyond the call times
- Practice what you are learning
- Build your Project Summary; move towards achievement of your aim!
Criteria for Completion of Fellowship

• Complete specific IHI Open School courses
  – This will be tracked
• Participate in one of the “Check In” discussion groups (either mid-March or late July)
• Participate in 10/14 Fellowship webinars
• Submit a Project Summary by October 15th
  – Template to be shared
IHI Open School

- **Mission:** To advance health care improvement and patient safety competencies in the next generation of health professionals worldwide

- **Started in 2008,** offering 6 online courses in quality and safety, has since grown to 32 online courses

- **More than 35 CE contact hours** for nurses, physicians, and pharmacists
  
  *Provided by ANCC, ACCME, and ACPE*
  
  *(CPHQ and MOC credits also available)*

- **Over 450,000** participants have completed a course

- **Over 500** universities and **over 500** health care organizations have used the courses in their training
Full Course Catalog

Improvement Capability
QI 101: Introduction to Health Care Improvement
QI 102: How to Improve with the Model for Improvement
QI 103: Testing and Measuring Changes with PDSA Cycles
QI 104: Interpreting Data: Run Charts, Control Charts, and other Measurement Tools
QI 105: Leading Quality Improvement
QI 201: Planning for Spread: From Local Improvements to System-Wide Change
QI 202: Achieving Breakthrough Quality, Access, and Affordability
QI 301: Guide to the IHI Open School Quality Improvement Practicum

Person- and Family-Centered Care
PFC 101: Introduction to Person- and Family-Centered Care
PFC 102: Dignity and Respect
PFC 201: A Guide to Shadowing: Seeing Care through the Eyes of Patients and Families
PFC 202: Having the Conversation: Basic Skills for Conversations about End-of-Life Care

Triple Aim for Populations
TA 101: Introduction to the Triple Aim for Populations
TA 102: Improving Health Equity
TA 103: Quality, Cost, and Value in Health Care

Patient Safety
PS 101: Introduction to Patient Safety
PS 102: From Error to Harm
PS 103: Human Factors and Safety
PS 104: Teamwork and Communication in a Culture of Safety
PS 105: Responding to Adverse Events
PS 201: Root Cause and Systems Analysis
PS 202: Building a Culture of Safety
PS 203: Partnering to Heal: Teaming Up Against Healthcare-Associated Infections
PS 204: Preventing Pressure Ulcers

Graduate Medical Education
GME 201: Why Engage Trainees in Quality and Safety?
GME 203: The Faculty Role: Understanding & Modeling Fundamentals of Quality & Safety
GME 204: The Role of Didactic Learning in Quality Improvement
GME 205: A Roadmap for Facilitating Experiential Learning in Quality Improvement
GME 206: Aligning Graduate Medical Education with Organizational Quality & Safety Goals
GME 207: Faculty Advisor Guide to the IHI Open School Quality Improvement Practicum

Leadership
L 101: Introduction to Health Care Leadership

100 = Introductory concepts for all health care audiences
200 = Intermediate concepts and specialized topic areas
300 = Project-based learning
How Do I Get Started?

• Step 1: Login to the IHI.org website
  – www.IHI.org/Login

• Step 2: Join the group subscription
  – www.IHI.org/EnterPasscode
  – Enter group passcode D32A5044

• Step 3: Visit HRET’s course site
  – www.IHI.org/HRETALF
  – Select any course to begin
  – Use this link each time you return to the courses
  – TIP: Check the suggested curriculum each time you visit (next slide)
Suggested Curriculum

- **www.IHI.org/HRETALF**
- Click the page icon in the top-right corner to see the suggested curriculum
- Two tracks
  - Foundations for Change
  - Accelerating Improvement

<table>
<thead>
<tr>
<th>Date</th>
<th>Topic</th>
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<tbody>
<tr>
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<tr>
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<td>Accomplish?</td>
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<td><strong>QI 102 Lesson 2 Setting an Aim</strong></td>
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<td><strong>QI 105 Lesson 1 The Four Phases of a QI Project</strong></td>
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<td><strong>PS104: Teamwork and Communication in a Culture of Safety</strong></td>
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The Case for Improvement

Kathy D. Duncan, RN
Director
Institute for Healthcare Improvement
“We have learned to live in a world of mistakes and defective products as if they were necessary to life. It is time to adopt a new philosophy in America.”

W Edwards Deming
1900-1993
The Case for Improvement

- Often improvement methods in health care are highly dependent on vigilance and hard work.

- Our continued focus on benchmarked outcomes tends to exaggerate the reliability within health care hence giving both clinicians and leadership a false sense of security.

- Our system of clinical autonomy creates and allows wide performance margins.
The Ultimate Case for Quality......
“It is not enough to do your best; you must know what to do, and then do your best”

- W. Edwards Deming
“Everyone in healthcare really has two jobs when they come to work every day: to do their work and to improve it.”

Paul Batalden, MD
Senior IHI Fellow
Fundamental Questions 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)?
Model for Improvement

“All improvement will require change, but not all change will result in improvement!”

Shewhart- Deming Cycle

Act  Plan

Study  Do
Aims + Measures + Tests of Change

When you combine the 3 questions with the PDSA cycle, you get…

...the Model for Improvement

Why this Model for Improvement

- Universally applicable
- Highly accessible
- Facilitates use of teamwork
- Provides framework for application of statistical tools and methods
- Encourages planning to be based on theory
- Emphasizes learning through doing
- Empowers people to act

Do You Have an Example of a PDSA Cycle You Have Done?
Repeated Use of the PDSA Cycle

Hunches  Theories  Ideas

Changes That Result in Improvement

Why Do Multiple Cycles?

- Increase degree of belief
- Determine which of several proposed changes lead to improvement
- Decide how to adapt a change to the environment
- Evaluate cost implications and possible side effects of change
- Give people a chance to experience the change prior to implementation

Repeated Use of the PDSA Cycle

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?

Hunches
Theories
Ideas

Very Small Scale Test

Follow-up Tests

Wide-Scale Tests of Change

Implementation of Change

Spread

Changes That Result in Improvement

Sequential building of knowledge under a wide range of conditions

American Hospital Association

HRET
“Mere talk about quality accomplishes little. It is necessary to go into action.”

W. E. Deming, *Out of the Crisis*, p.4
Action Items for Action Period

• **Seek** leadership approval/support

• **Complete** [QI 102, Lesson 1](#) of the IHI Open School course for an overview of the Model for Improvement

• **Watch** [this](#) video: An Illustrated Look at Quality Improvement in Health Care

• **Complete** the self-assessment and submit
### How to Access My Assignments?

- [www.IHI.org/HRETALF](http://www.IHI.org/HRETALF)

  - Click the page icon in the top-right corner to see the suggested curriculum
  - Two tracks
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Continuing Education Credits

• Launch the evaluation link in the bottom left hand corner of your screen.

• If viewing as a group, each viewer will need to submit separately through the CE link
THANK YOU!