



IT'S TIME!

HOW TO **FOCUS** ON QUALITY MEASUREMENT AND IMPROVEMENT

Health care is changing at a rapid pace, and it's important to focus on continuous quality improvement as a part of providing care every day.

For years, quality measurement has been seen as a means to drive change. New payment methodologies utilize quality reporting to “measure, report, and reward excellence in health care delivery.”

Quality measures are about more than meeting requirements and reporting results to CMS and the Joint Commission. Maintaining high performance on these measures is in the interest of quality of care and has an impact on patient outcomes, including readmissions and mortality. In a health care system with increasingly limited resources, it is important to shift resources from

quality measurement and reporting to quality improvement, which is the ultimate goal of measurement.

Primaris is helping health care professionals respond to this challenge with quality improvement methods, including the techniques of rapid-cycle quality improvement.

In addition to [TIME](#), the Primaris healthcare improvement model, we use the FOCUS Plan-Do-Study-Act (PDSA) model. It is a simple yet powerful tool for accelerating improvement, and it has been used successfully by hundreds of health care organizations in many countries to improve many different health care processes and outcomes.

Find a process to improve.

For many healthcare organizations, process measures may be a great place to focus first. Process measures assess the activities carried out by health care professionals to deliver services. These activities are often guided by evidence-based clinical guidelines and tied to patient outcomes. Select a process measure that needs improvement, conduct a small sample or quality check to understand current performance and where opportunities are to make improvements.

Organize the team and its resources.

At its core, QI is a team process. An effective team is key to achieving improvement. Identify the team members and resources across the organization required to improve the process. Even professionals not directly involved with collecting quality measures need a basic understanding of them, because collecting quality measures can affect the way health information is recorded and stored.

Clarify current knowledge about the process.

You need to see how things actually work versus how you think they work. Start by performing root cause analyses, interviewing frontline staff, and using the baseline data previously collected to compare against other providers, as well as external quality benchmarks. The goal is to improve facility performance and ultimately improve the quality of care patients receive.

Understand sources of process variation.

You can't improve a process until you fully understand how it works. Don't jump to conclusions. Create process maps and cause and effect diagrams. Using input from the team, brainstorm all possible ideas and causes for variation or fallouts.

Select an improvement or intervention.

Create the future state map of the ideal process and identify an improvement based on the root-cause analyses. Because change should be small and measurable, detail your starting point, goal for what you plan to accomplish, and how you will measure your progress.

When your FOCUS is clear...

It's time to Plan how you will implement the intervention.

It's time to Do. And, by do, we mean carry out the change, preferably on a small scale. Start small – one unit, one shift.

It's time to Study the process to see whether your intervention has made an improvement. Review charts and collect data for compliance. Did change meet goal? Revise process if necessary. Communicate any additional changes to the process, and continue to collect data to evaluate that improvement.

It's time to Act on what you have learned, which may mean implementing the change on a larger scale, starting over or tackling a new area of improvement.

There's no such thing as a static environment when it comes to healthcare, especially as it relates to value-based payments.

Dr. H. James Harrington has been involved in quality and performance improvement projects since the 1950s. He says, "Measurement is the first step that leads to control and eventually to improvement. If you can't measure something, you can't understand it. If you can't understand it, you can't control it. If you can't control it, you can't improve it."

Quite simply, what you measure is what you get. In such a dynamic environment, it's important for healthcare executives to ensure there is a structure in place to continually review and recheck how their organizations' performance matches to the latest priorities.

With limited resources and time, rapid-cycle improvement methodologies, such as FOCUS PDSA provide that structure.