# Sustainability & Spread

AFPA Webinar

October 8, 2014

Janiece Gray, Founding Partner, DTA Associates, Inc.

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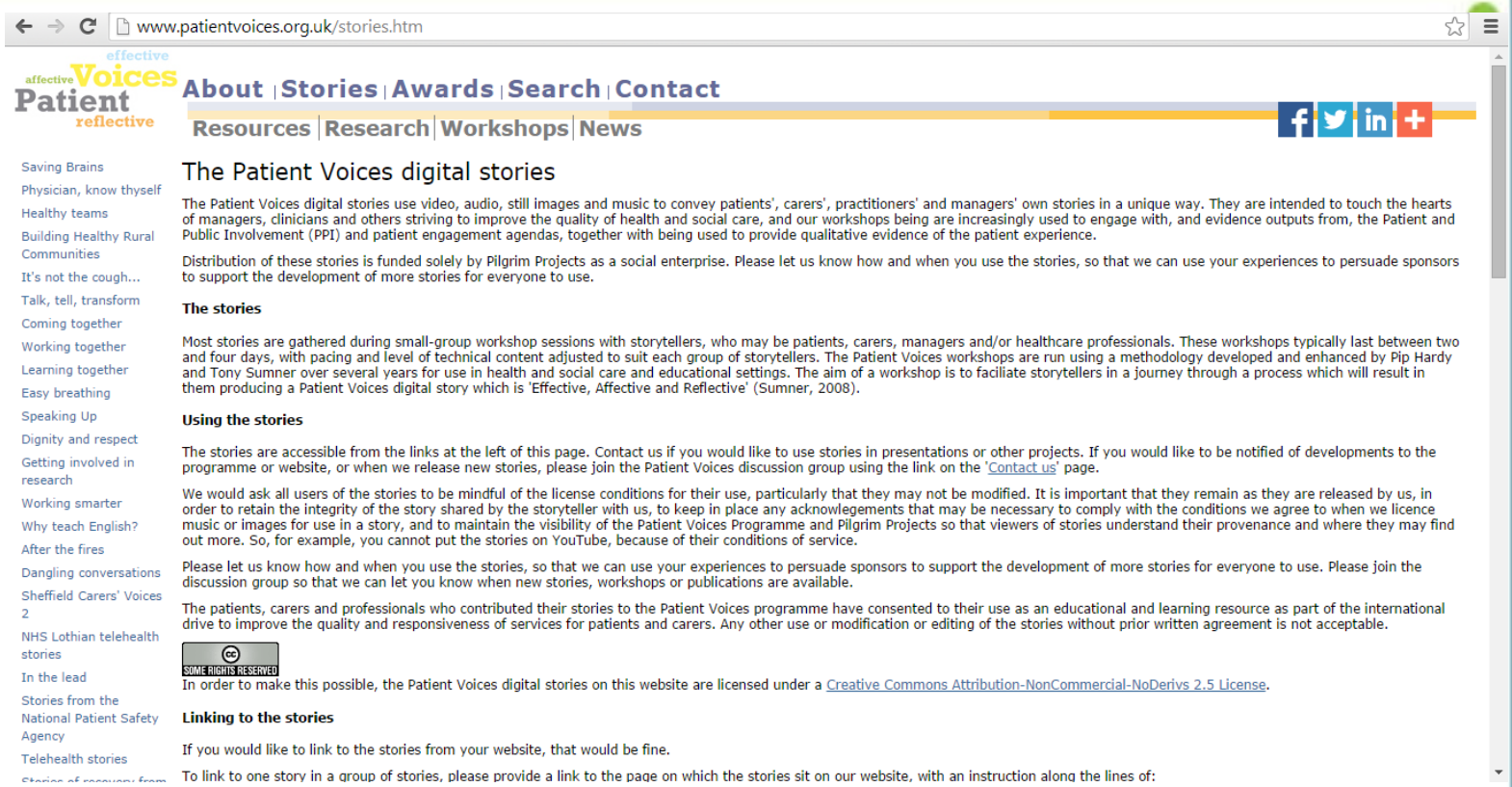
# Patient Voices




http://www.patientvoices.org.uk/stories.htm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# Measure Stage in Review

- Types of Measures
  - Quantitative, Qualitative, or both!
  - Outcome, Process & Balancing

- Data & measurement pitfalls to avoid
  - Lack of clarity
  - Too many – focus on the few
  - Waiting on technology
  - Directional at best

- Excellent case study
  - Marie Elivert & Queens

Define

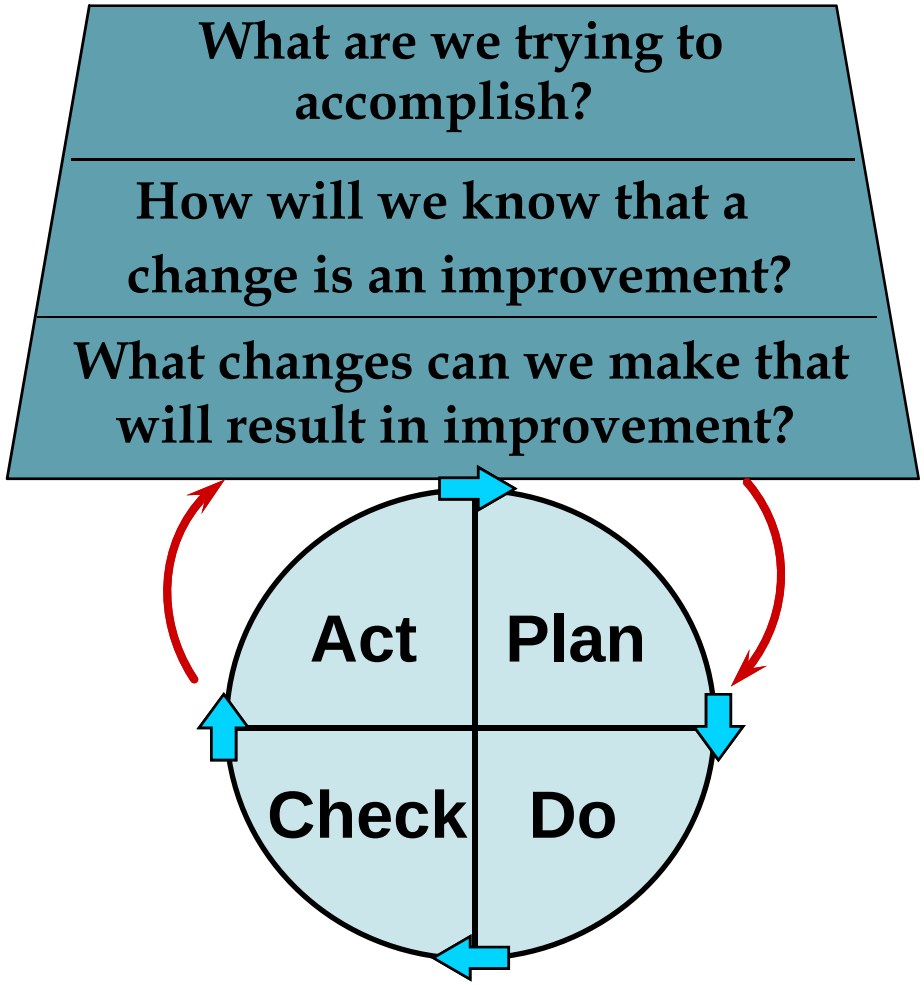
Measure

Analyze

Improve

Control

# Improvement & Testing a Change




**When you combine the 3 questions with the…**

**PDCA cycle, you get…**

***The Model for Improvement***

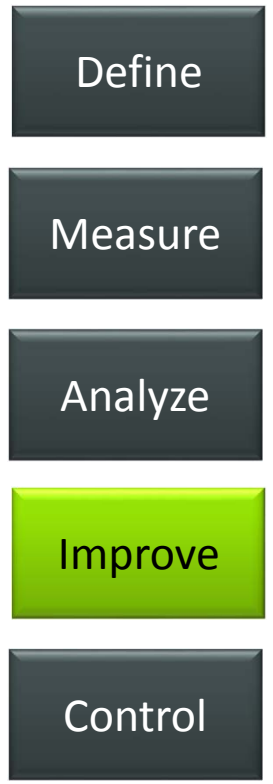
- Define
- Measure
- Analyze
- Improve
- Control

*Source: Institute for Healthcare Improvement*

G. Langley, et al *The Improvement Guide.* Jossey-Bass Publishers, San Francisco, 1996,.

# Step 1: Plan

- Plan the test or observation, including a plan for collecting data
  - State the objective of the test
  - Make predictions about what will happen and why
- Develop a plan to test the change:
  - Who?
  - What?
  - When?
  - Where?
  - What data need to be collected?




*Source: Institute for Healthcare Improvement*

# Step 2: Do

- Try out the test on a small scale
  - Carry out the test
- Document problems and unexpected observations
- Begin analysis of the data

Define

Measure

Analyze

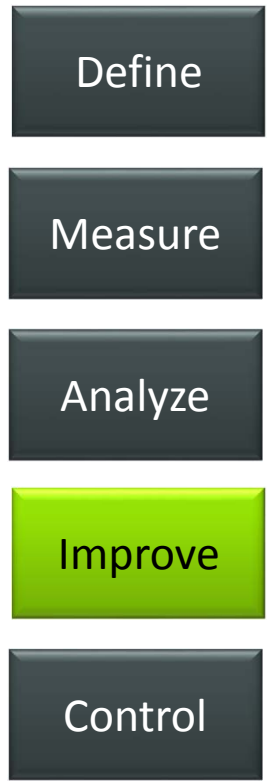
Improve

Control

*Source: Institute for Healthcare Improvement*

# Step 3: Check/Study

- Set aside time to analyze the data and study the results
  - Complete the analysis of the data
- Compare the data to your predictions
- Summarize and reflect on what was learned




*Source: Institute for Healthcare Improvement*

# Step 4: Act

- Refine the change, based on what was learned from the test
  - Determine what modifications should be made
- Prepare a plan for the next test

*Source: Institute for Healthcare Improvement*

# Tips for Testing Changes

- Stay a cycle ahead
- Scale down the scope of tests
  - Pick easy changes to try initially
  - Don't tackle world hunger
- Pick willing volunteers
  - Work with those who want to work with you!
  - Be aware of what else is going on in the organization, unit, area
- Avoid the need for complete consensus, buy-in, or political solutions
  - Watch for technical slowdowns
- Don't reinvent the wheel!
- Reflect on the results of every change
- Be prepared to end the test of a change

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Define

Measure

Analyze

Improve

Control

*Source: Institute for Healthcare Improvement*

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CENTERS OF CARE
Nassau University Medical Center
A. Holly Patterson Extended Care Facility
Family Health Centers
Elmont • Westbury • Hempstead • Roosevelt

# 2013-14 America's Essential Hospitals Fellowship

*Kathy Skarka, RN; Venkatesh Sasthakonar, MD; and Amgad Makaryus, MD*

AMERICA'S ESSENTIAL HOSPITALS
*Access and Quality for All*

The Fellows Program brings leaders together to look unflinchingly at the enormous challenges in health care and gives them the tools necessary to meet those challenges on behalf of our most vulnerable populations. The program is designed to build leadership capacity so that more organizations are equipped to take on the difficult work of cultural change.

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# 2013 FELLOWS PROJECT : LEADING HIGH PERFORMING ORGANIZATIONS

## NuHealth, Nassau University Medical Center

## Improving Patient Perception of Nurse and Physician Communication through Team Stepps Methodology

*Kathy Skarka RN, Venkatesh Sasthakonar MD and Amgad N. Makaryus MD*

AMERICA'S ESSENTIAL HOSPITALS

NuHealth Together through life. Nassau University Medical Center

### Problem and Project Goal

**Problem:** Communication between caregivers and patients is poor as evidenced by 65% of patients reported on HCAHPS survey that doctors and nurses "always" communicated well. Poor HCAHPS s scores have a negative impact on reimbursement through the Value Based Purchasing process.

**Goal:** Improve our HCAHPs scores for patients reporting "doctors and nurses always communicate well" from 65% to 75% by August 2014

### Project Design and Progress

Implement **Team Stepps** (**T**eam **S**trategies **t**o **E**nhance **P**erformance and **P**atient **S**afety)

**The main areas of focus** include:

Creating high performing teams that effectively use people, resources, and information to achieve desired outcomes

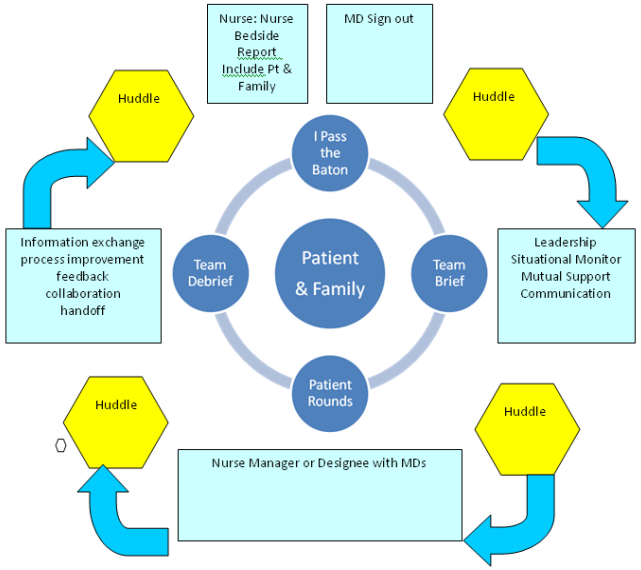
Increasing team awareness and clarifying roles, responsibilities, and outcomes

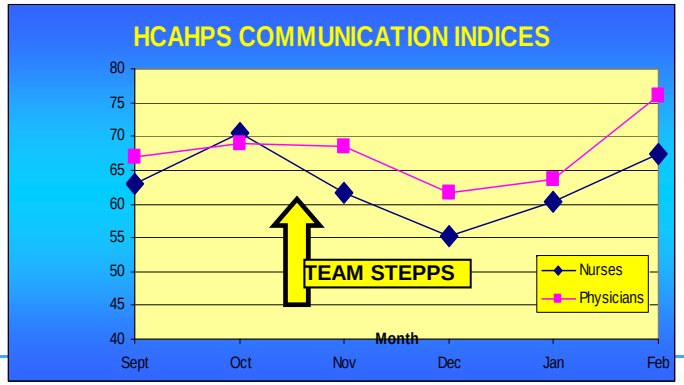
Resolving conflict and improving information-sharing

- Developed algorithm and training module week of 7/29/13
- Began nurse training on pilot units on 8/5/13
- Train Surgery Physicians 8/7
- Trained Medicine Physicians 8/13/13
- Implemented Team Stepps on pilot units (9th floor and 11th floor) on 8/19/13
- Implemented Team Stepps on remaining 3 med-surg floors **mid November 2013**

### Outcomes

**As of February 2014, HCAHPS scores reveal that 71.6% of patients perceive that doctors and nurses "always" communicate well.**




### Leadership Lessons

**Challenges**

- Other Organization priorities/ PI initiatives concurrently taking place
- Keeping up the momentum
- Getting people to buy in
- Ability to reinforce continuously
- Changes in Leadership
- Loss of Sponsor

**Successes**

- Positive feedback regarding increased communication during morning briefs.
- Promotes improvement of team dynamics which translates to better patient care
- Improvement in publically reported HCAHPs scores that ties into Value Based Purchasing financial reimbursement thus leading toward financial stability

### Next Steps

- Roll out Team Stepps throughout all divisions.
- Training in Critical Care Division began January 2014. Implementation of Team Stepps in Critical care areas on 3/18/14.
- To begin training in Perinatal /Peds in April
- Will **monitor HCAHPs scores** on an ongoing basis and discuss at Nursing and Physician leadership forums

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HCAHPS
Hospital Consumer Assessment of Healthcare Providers and Systems

Hospital Compare
Medicare.gov
The Official U.S. Government Site for Medicare

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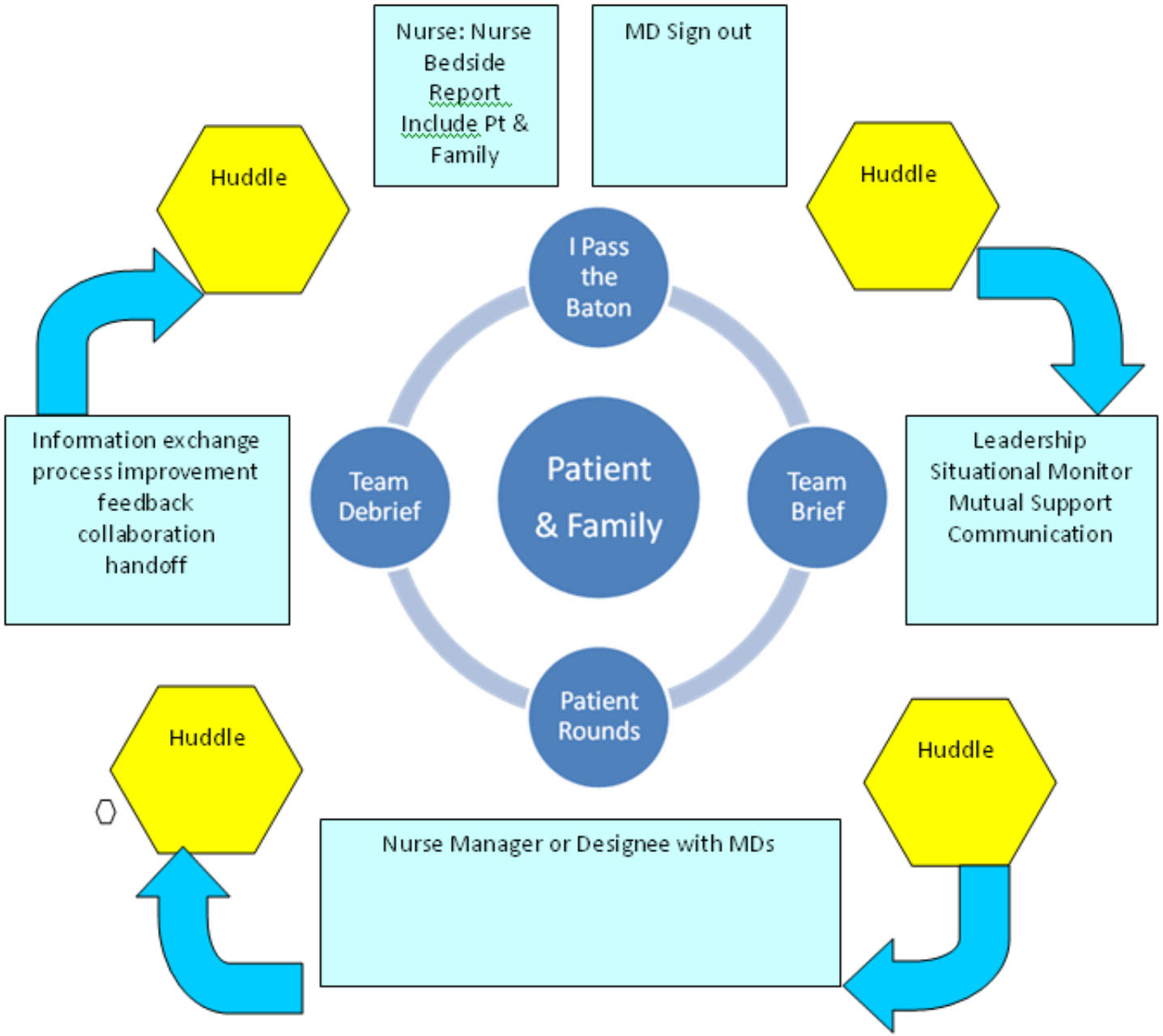


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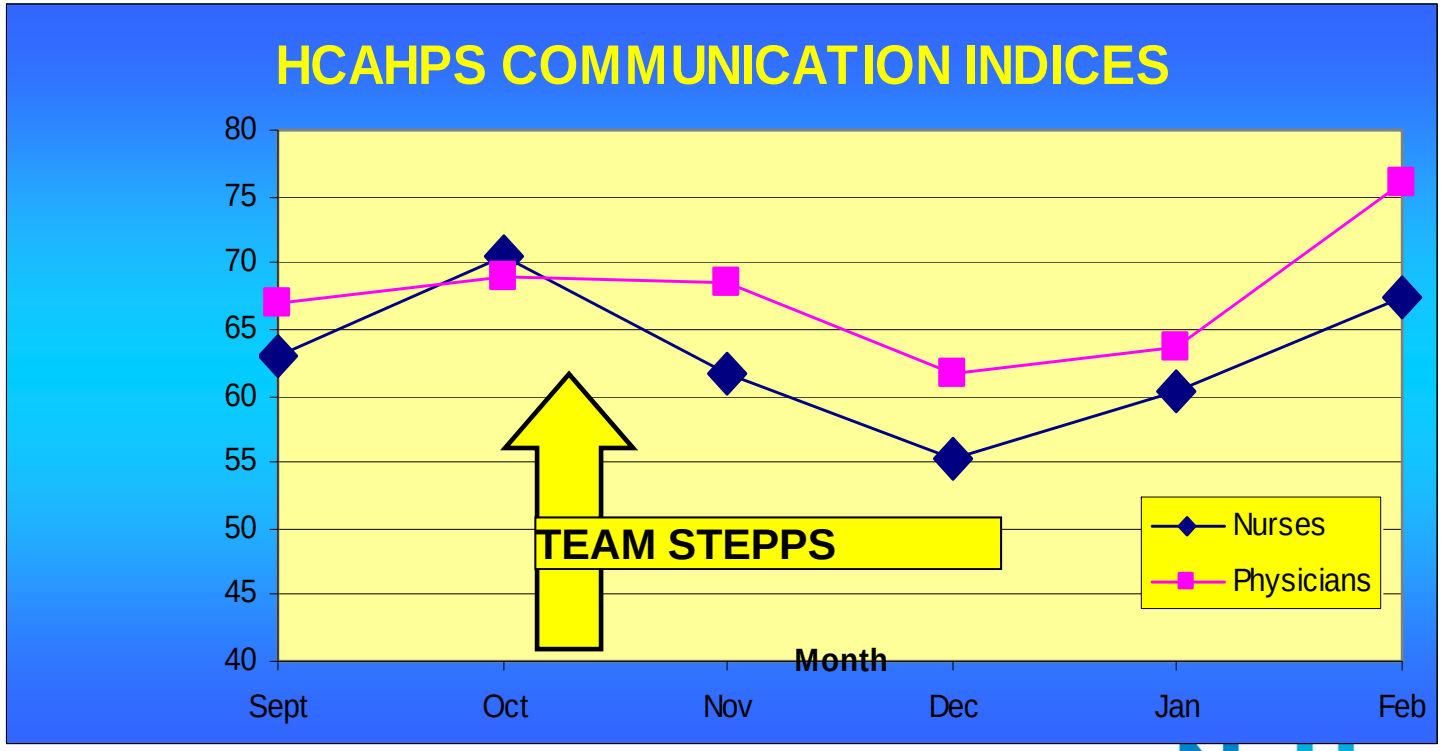


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# Current Status

- Rolling out Team Stepps throughout all divisions.
- Implementation of Team Stepps in Critical care areas began on 3/18/14.
- Began training in Perinatal /Peds in April and implemented on 7/21/14
- Began training in Emergency Department in May and implemented in July
- Currently training Behavioral Health division

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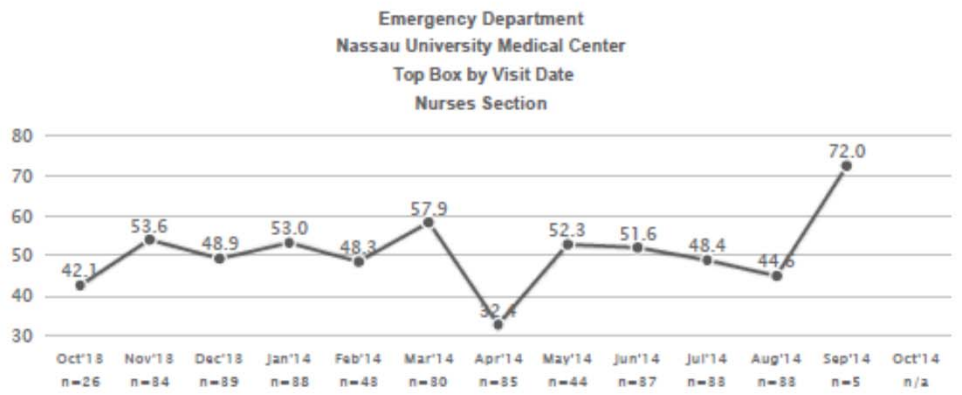
# ED Nurses/Doctor Report

**Satisfaction Timeframe: Monthly**

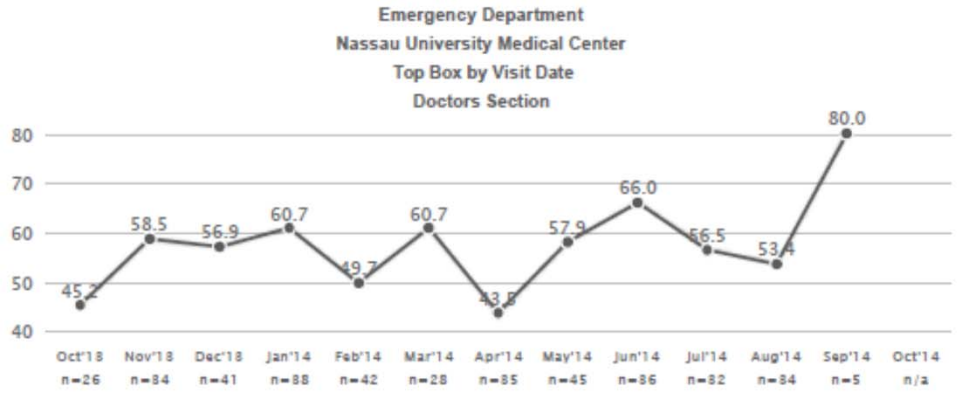
## Nurses Section




### Improvement Resources

- Key Behaviors for Patient Encounters
- Nurses Courtesy
- Nurses Concern for Privacy
- Script: Privacy
- Emergency Department Solutions Starter

## Doctors Section




### Improvement Resources

- Key Behaviors for Patient Encounters
- Doctors Courtesy
- Doctors Concern for Comfort
- Sit Down to Share
- Emergency Department Solutions Starter

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# Implementing the Change

*Testing a change:*

- Three nurses on different shifts use a new medication reconciliation and order form.

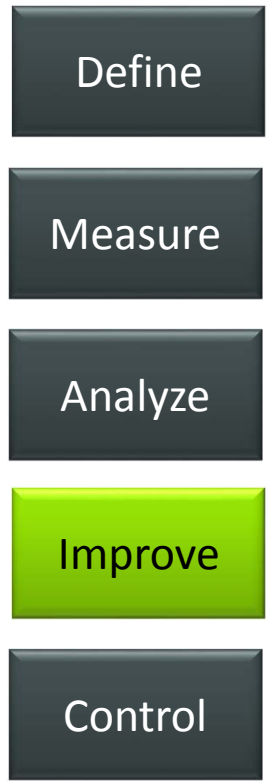
*Implementing a change:*

- All 30 nurses on the pilot unit begin using the new medication reconciliation and order form.

*Source: Institute for Healthcare Improvement*

# Develop an Implementation Plan

- Outline the steps needed for implementation
  - What
  - Who
  - When
  - Where
  - Why
- Consider who needs to be involved in communication
- Identify potential obstacles and barriers




*Source: Institute for Healthcare Improvement*

# Implement the Solution

- Consider a full implementation, key service lines or an expanded pilot
- Discuss progress and identify problems with team
- Use Gantt chart to track progress
- Data analysis
  - Is your data collection plan getting you what you need?
  - Tools for monitoring results (control charts)
- Meet with sponsor to make sure you are on track
- Make improvements as you go
  - Start new PDSA cycle if needed

*Source: Institute for Healthcare Improvement*

# Spreading the Word – Be Prepared

- Traverse the Trajectory on the Path to Performance
  - "Don't Shoot!"
  - "My patients are different"
  - "Show me the data!"
  - "Tell me what my patients say!"
  - "Fine, just tell me what to do!"

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# Looking Ahead

- At our December webinar – we'd like to feature several teams and hear about their learnings and progress through this cohort
- If you'd like to volunteer – please contact Janiece Gray at janiece.gray@dtaassociates.com


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# Questions?

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# Going Further

- IHI Open School Resources
  - QI 102: The Model for Improvement: Your Engine for Change
    - Lesson 4– Developing Changes
    - Lesson 5 – Testing Changes
  - QI 104: The Life Cycle of a Quality Improvement Project
    - Lesson 2 - Spreading Changes
  - QI 202: Quality Improvement in Action: Stories from the Field
    - Lesson 2 – Strategies to Sustain Your Quality Improvement Journey

- For further reading on the case study presented today visit:
  - http://www.ahrq.gov/policymakers/case-studies/201412.html


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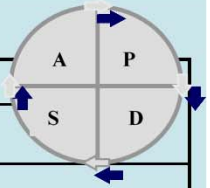
DTA ASSOCIATES

**MODEL FOR IMPROVEMENT**

# PDSA Planning Worksheet

**Team Name:** __ _____




**PLAN:**
Describe the change you are testing and state the question you want this test to answer:
What do you predict the result will be?

What measure will you use to learn if this test is successful or has promise?
AIM Statement:

Plan for change or test: who, what, when, where
**WHO:**
**WHAT:**
**WHEN:**
**WHERE:**
Data collection plan: who, what, when, where

**DO:** Report what happened after you carried out the test. Describe observations, findings, problems encountered, and special circumstances.

**STUDY:** Compare results from this completed test to your predictions. What did you learn? Any surprises?

**ACT:** Modifications or refinements for the next cycle; what will you do next?