



# QI 101: Introduction to Health Care Improvement

Ryerson Open School Chapter Wednesday, October 28th, 2020



# Objectives - What will we learn today?

#### 3 Lessons

1. Describe common challenges in health care systems.

2. Understand the 6 dimensions of health care and their aims

3. Introduction to Improvement Science





# Lesson 1 Health and Health Care Today



#### The Paradox

#### A Broken System that Produces Miracles?

Elimination of Several Infectious Diseases

Advanced HIV Drugs

Cures for Hep C

Reduced Hospitalization and Mortality





# Advancements and Complications

#### Challenges in an advanced health care system

Providers are becoming more specialized

Disease burden is shifting towards chronic conditions.

Demand for personalized care.

Demand for complicated procedures and expensive treatments.





#### Facts and Stats from Across the World

#### **Cost of Care is Independent of Culture and Politics**

Avg per capita spending among 34 members countries increased by 70+% between 2000 and 2010 (OECD).

#### **High Cost Not Associated with Quality of Care**

US spends more than 2x as much as other developed nations yet is still ranked 11th in quality. \$9892 per patient in the US vs. \$4753 in the CAN (Johns Hopkins School of Public Health, 2019). \*Only \$11 per person in low income countries

#### **Best Care Practices Are Not Good Enough**

50% people not receiving recommended care.



# Facts: Disparities in Health and Healthcare

#### Statistics from the WHO, 2015

Risk of maternal death - 1/11 in **Afghanistan** vs. 1/17,800 in **Ireland** 

~80 percent of noncommunicable diseases are in **low- and middle-income countries** 

In **Japan**, life expectancy at birth is more than 80 years; in several **African** countries, it's fewer than 50 years.



# The Takeaway

#### Money is not enough

These issues require systemic change







#### **International Efforts**

In 2012, the UN urged nations to shift towards universal access to affordable and quality health care. Since, no single model can fit all nations, countries are encouraged to learn from one another.

#### Some key examples

**Denmark** - Primary care medical records are connected to a national network. All practices can share records easily.

India - Telemedicine network 24 urban hospitals to 800 centres. Reaching the impoverished at little cost

**Germany -** Mandatory health insurance. Limiting out of pocket to 2% of income, and 1% for sicker patients



1. In regard to health disparities around the world, which of the following statements is most true?

- Inequitable medical care is the primary driver of health disparities.
- Where a child is born significantly affects his or her life expectancy.
- The root causes of health disparities are complex.
- Where a child is born significantly affects his or her life expectancy AND The root causes of health disparities are complex



1. In regard to health disparities around the world, which of the following statements is most true?

**Answer:** Where a child is born significantly affects his or her life expectancy **AND** The root causes of health disparities are complex.



2. Which of the following is a trend in health care across industrialized nations?

- Providers are becoming more specialized
- The disease burden is shifting toward acute conditions.
- There is growing demand for complicated procedures.
- Providers are becoming more specialized AND There is growing demand for complicated procedures



# 2. Which of the following is a trend in health care across industrialized nations?

**Answer:** providers are becoming more specialized and there is a growing demand for complicated procedures



# Lesson 2

The Institute of Medicine's Aims for Improvement



### The Six Aims for Improvement...

**SAFE**: Refers to the safety of the care being delivered

**TIMELY:** Refers to reducing waiting times and delays

**EFFECTIVE**: Refers to providing appropriate care based on science

**EFFICIENT**: Refers to avoiding being wasteful (equipment, energy, ideas, supplies)

**EQUITABLE:** Refers to providing equal quality of care, regardless of personal characteristics

**PATIENT-CENTERED:** Refers to care that is focused on the patient



#### Aim # 1: Safety

# Refers to the safety of the care being delivered

- Seems to be an obvious point but...
- In reality, 1 in 10 hospital patients harmed while receiving care
- Better communication and structure of care are major challenges

- The Scottish Patient Safety Programme (SPSP)
  - Goal to reduce mortality rate by 15% across Scotland



#### Aim # 2: Timely

- Delays hurt patients and caregivers
- According to CDC, avg wait time in US for emergency department is 1 hour
- Longer in others, CIH reported 1 in 10 patients in Canada >8 hours

- Margret Marquart Catholic Hospital (Kpando, Ghana)
  - Shocked by mortality rate of children under five
    - Due to delays in seeking care and delays with clinicians in providing it
    - Community education, Triage/fast-tracking, blood bank readiness



# Aim # 3: Effective

Refers to providing appropriate care based on science

- The care has to be based on evidence
- Science that says what can help and what can harm
- Often, patients don't get recommended care or get unnecessary care
- New England Journal of Medicine study found that only half of care is US is evidence based

- Claxton-Hepburn Medical Center (Ogdensburg, NY)
  - Prevent pressure ulcers by forming a team to research prevention strategies (new technology)



# Aim # 4: Efficient

- Refers to avoiding being wasteful (equipment, energy, ideas, supplies)

- A 2012 study by Dr. Donald Berwick and RAND analyst Andrew D. Hackbarth estimated 20% of US health spending is towards 6 categories: Failures of care delivery, failures of care coordination, overtreatment, Administrative complexity, Pricing failures and Fraud and Abuse

- National Health System (NHS) England
- The Productive Series



# Aim # 5: Equitable

Refers to providing equal quality of care, regardless of personal characteristics

- Studies show quality of care varies based on personal characteristic
- Ex. China (difference between urban and rural patients)

- HealthPartners (Minnesota, US)
- Goal to reduce health disparities
- Pink Ticket Mammography



#### Aim # 6: Patient-Centered

Refers to care that is focused on the patient

- Studies show physicians listen to patients concerns for 20 seconds before interrupting
- Patients frequently complain of lack of customer service in healthcare
- Victor Montori (MD, professor Mayo Clinic) describes the lack of physicianpatient interaction

- Mayoclinic
- A way to place information in the hands of patients



- 1. Which of the following improvement efforts is the best example of increasing the effectiveness of care?
  - Shortening wait times at a clinic by allowing patients to self-register on a computer in the waiting room
  - Improving the percent of clinic patients achieving their goal blood pressure by instituting a series of reminders for providers about evidence-based processes
  - Decreasing adverse drug events by having a pharmacist on rounds in the intensive care unit
  - Instituting quarterly focus groups of patients seen in the emergency department to better identify patient concerns



1. Which of the following improvement efforts is the best example of increasing the effectiveness of care?

ANSWER: Improving the percent of clinic patients achieving their goal blood pressure by instituting a series of reminders about evidence based processes



2. Michael S., a 49-year-old factory worker, goes to the hospital after developing chest pain at work. Physicians quickly diagnose him with an acute myocardial infarction (heart attack), and he has successful surgery to open his blocked coronary artery. While he is recovering in the hospital, he contracts an infection that could have been prevented through better infection control practices in the hospital.

Which of the IOM aims has this hospital failed to meet?

•	Timely
	Safe
•	Effective
•	Equitable



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Which of the IOM aims has this hospital failed to meet?

ANSWER: Safe



# Lesson 3

**Changing Systems with the Science of Improvement** 



### Understanding Systems

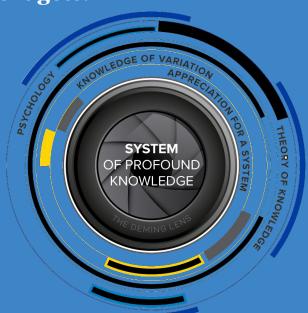
#### Lesson 1 - Why? Lesson 2 - What? Lesson 3 - How?

"Every system is perfectly designed to get the results it gets."

#### **US Healthcare System**

1999 - 98,000 inpatient deaths per year due to errors.

2013 - cost more /capita than any other industrialized nation





# Applied Science vs Pure Science

- Walter Shewhart regarding pure science and applied science: Lets use penicillin as an example
- Pure Science (Fleming's discovery of antibiotics) and Applied Science (Put the antibiotics to use, such as making it available to everyone and prescribing in controlled manner)

Which do you think is more challenging to accomplish?

In order to close the gap between what we know and the application of it:

- Mass produce and distribute medications
- Patients make appointments to get medications
- Providers well informed of these medications
- Providers can safely deliver them
- Patients can take medications as instructed



### The Lens of Profound Knowledge

"Whenever you make a change, each change will affect other parts of your system."
-WE Demings

Example, leaving half an hour early for work.

- Traffic is worse
- Coworkers you pick up on the way aren't ready
- Road blockage
- Your significant other doesn't like being woken up earlier

**Demings developed System of Profound Knowledge** 





# Four Aspects of Systems Thinking

#### 1. Appreciation of a system

- A system is a network of interdependent components that work together to try and accomplish the goal of the system (The aim that everyone gains, but not having others lose out)

#### 2. Understanding Variation

- There are two types of variation:
  - Intrinsic and typical (common causes)
  - Result of unusual event, outside of typical operation (special cases)

To make improvements, you be able to tell the difference between the two



# Four Aspects of Systems Thinking

#### 3. Theory of Knowledge

Knowledge is based on theory, and that theories need to be developed, applied, and tested in order to advance knowledge in a systematic fashion.

#### 4. Psychology (Human Behaviour)

People are fundamentally different, with varied strengths, beliefs, and motivations. Because people are fundamental components of the systems in which they work, all these human factors will affect systems outcomes.



# Lens of Profound Knowledge in Healthcare

**Problem -** 'At any time, 1.4 Million people suffer from Hospital Acquired Infection'

**Solution** - Simple hand hygiene.

**Problem -** Only 50% compliance rate! Why?!

Appreciation of a system

Hospital

NICU Surgery PT

Administration

Understanding Variation

Gather data

Average compliance?

Stratify with the systems

Theory of Knowledge

Scientific theories on hygiene

**Public theories on germs** 

Psychology

What people believe

How they will act based on this belief



1. Transcendental Nursing Home is working on decreasing its rates of catheter–associated urinary tract infections (UTIs) among its residents. While reviewing data, the improvement team notices that the UTI rate on Floor 3 is half that of the rest of the floors. They decide to visit the unit and find out what it is doing differently.

After speaking with caregivers on Floor 3, the improvement team discovers that there is a particularly dedicated head nurse on the unit whose mother died after a catheter-associated UTI. This nurse orients all new providers and also provides feedback when she sees that catheters are being placed unnecessarily in patients.

Which component of Deming's System of Profound Knowledge do this nurse's actions best represent?

- Appreciation of a system
- Psychology (human behavior)
- Theory of knowledge
- Understanding variation



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ANSWER: Psychology (human behaviour)



**2.** Which of these is a question particularly associated with the "theory of knowledge" component in Deming's System of Profound Knowledge?

- What is the variation in results trying to tell you about the system?
- What are your predictions about the system's performance?
- What motivates people to act as they do?
- What is the whole system that you're trying to manage?



**2.** Which of these is a question particularly associated with the "theory of knowledge" component in Deming's System of Profound Knowledge?

ANSWER: what are your predictions about the system's performance



# Group Discussion!

What have been your experiences with the quality of healthcare systems? It could be anywhere in the world, online, newspapers, etc. Do you know of any creative and innovative ways these healthcare systems are trying to improve quality of healthcare delivery (think about 6 aims, 4 aspects of systems thinking? You can compare and contrast if you wish. What do you like about them? Do you think they could do better?