

Implementing Quality Improvement to Advance the Healthy Start Agenda



QI Peer Learning Network
(QIPLN)

January 20, 2016



Improving Performance
on Benchmarks

Healthy Start EPIC Center
QI Peer Learning Networks

QIPLN Webinar Objectives

1. Describe the importance of quality improvement and performance monitoring to Healthy Start programs
2. Understand the purpose and approach of the QIPLN
3. Review benchmarks and identify method for prioritizing one to target for improvement



QI Kickoff Poll

Has your Healthy Start program participated in a structured QI activity?

Why is it Important?

We need to know “what works, where and for whom”

- ✓ Demand for more efficient and effective systems of care.
- ✓ Resources continue to be reduced as costs and demand for services increase.
- ✓ Need to achieve better outcomes.

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"So, as you can see, customer satisfaction is up considerably since phasing out the complaint forms."

Importance of QI and PM

1 of the 5 HS Approaches

Increase Accountability through Quality Improvement, Performance Monitoring, and Evaluation: To conduct ongoing quality improvement, performance monitoring, and evaluation activities in order to identify best practices, demonstrate implementation of evidence-based practices, and report on results.

1 of 22 benchmarks

Increase the proportion of HS grantees who establish a quality improvement and performance monitoring process



What is the purpose of QI?

Systematic approach used to identify, prioritize and pursue opportunities to achieve the best outcomes for program participants.



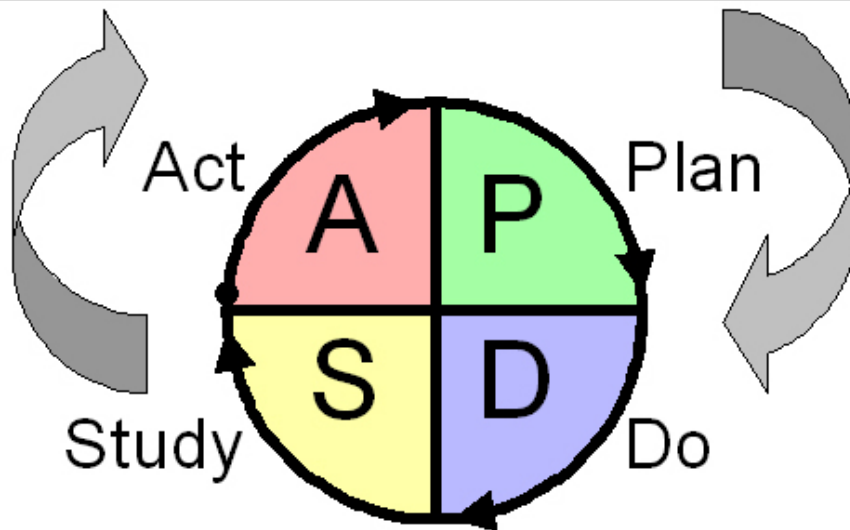
Introducing the Model for Improvement

Model for Improvement

AIM: What are we trying to accomplish?

MEASURES: How will we know if a change is an improvement?

CHANGE: What changes can we make that will result in improvement?



A continuous process that identifies problems, identifies solutions to those problems and regularly monitors the results to determine whether improvements have been made.

Program Improvement Cycle



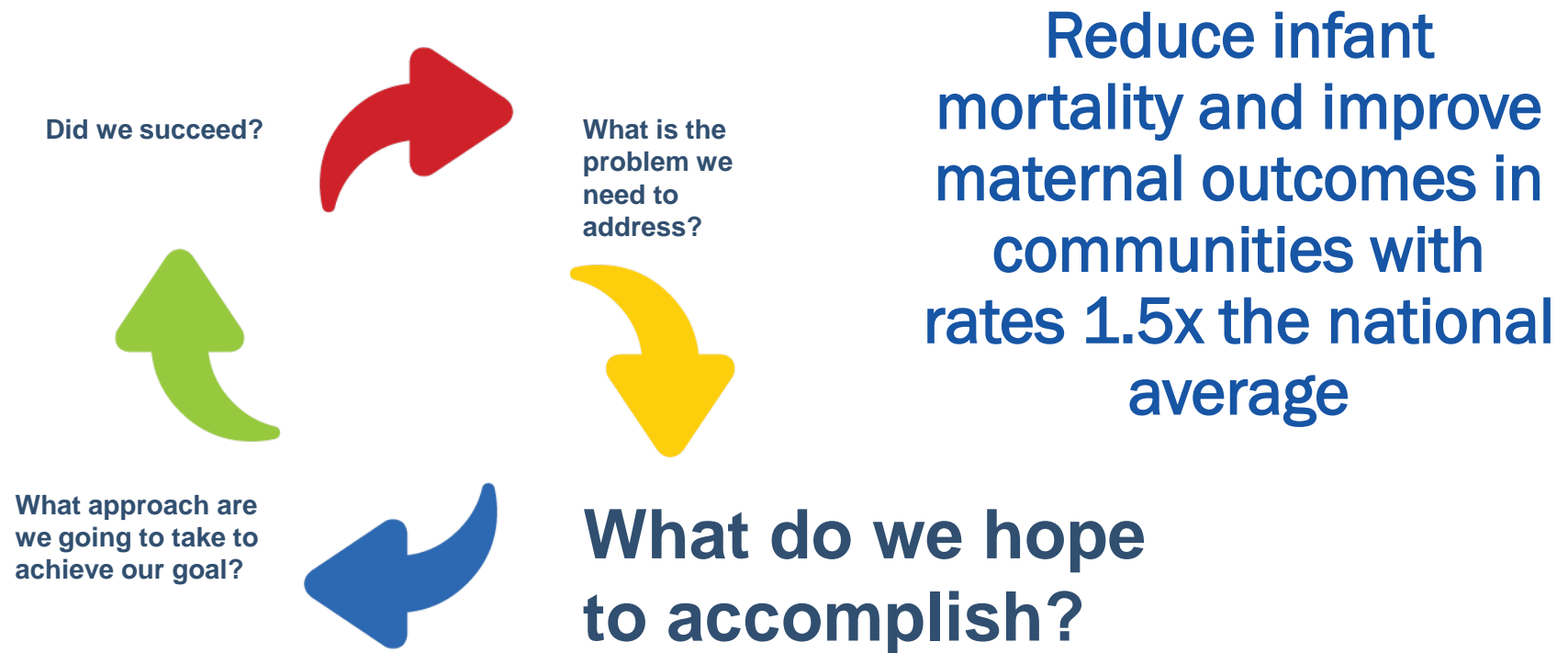
Program Improvement Cycle



Program Improvement Cycle



Program Improvement Cycle



Program Improvement Cycle



Program Improvement Cycle

Apply evidence based practices to address individual risks for poor health outcomes

Promote system-wide solutions to meet participant needs

What approach are we going to take to achieve our goal?

Did we succeed?

What is the problem we need to address?

What do we hope to accomplish?

Program Improvement Cycle

**Did we
succeed?**

What is the
problem we
need to
address?



What approach are we
going to take to achieve
our goal?



What do we
hope to
accomplish?



Program Improvement Cycle

**Achieve Healthy
Start participant
targets and
performance
benchmarks**

**Did we
succeed?**

What is the
problem we
need to
address?

What do we
hope to
accomplish?

What approach are we
going to take to achieve
our goal?



What is the QIPLN Initiative?

An initiative designed to support grantees in building a culture of QI and institutionalizing QI methods in routine business practices.

QI Peer Learning Network Goals

1. Increase knowledge, attitudes, skills, & practices around QI;
2. Contribute to MCHB's overarching goal to increase accountability through quality improvement, performance monitoring and evaluation;
3. Support HS grantees in adapting QI methods to achieve measured improvements; and
4. Improve performance on selected HS benchmark.

Logic Model

Resources

Activities

Outcomes

Impacts

Participants
HS Program
staff
Program
leadership
Community
Partners
EPIC Support

Convene a
QI Team

Identify the
Issue

Establish a
Baseline

Develop a QI
Plan

Implement
& Evaluate

Grantee

Improved
services

Client oriented
employees

Improved funding

Improved client
relations

Lower costs/costs
contained

Participants

Improved
services

Improved client
satisfaction

Expectations
meet/exceeded

Improved choices

Friendlier
atmosphere

Institutionalized QI
and Performance
Monitoring
processes

Achievement of
MCHB's overarching
goal of
implementing &
improving QI and
Evaluation

Improved
performance on HS
Benchmarks

QI PLN Overview

Number of PLNs: 6-7 each targeting a benchmark

Timeframe: Monthly calls between February – October, 2016

Expectations for Participation:

- Send 2 staff (QI Leads) to participate in monthly 1.5 hour QIPLN calls
- QI Leads to establish and facilitate on-site QI Team (5-6 people) to implement QI process between calls
- Develop QI Project Plan and test one PDSA cycle with intervention
- Own the QI process for sustainability




Who can be a QI Lead?


- Interested in QI and performance improvement
- Able to commit time to QIPLN Initiative – approx. 20-25 hours over a course of 9 months per QI Lead
- Prepared to:
 - Serve as QI lead and “liaison” between QIPLN and QI Team
 - Complete homework assignments with QI Team
 - Serve as trainer on the QI process to the overall agency and staff
 - Collaborate/share experiences with peers within the QIPLN
- Comfortable with data, data cleaning, aggregation and simple data analysis

QI Virtual Series

1. Establish QI Charter and Build QI Team



2. Establish Benchmark Baseline



3. Identify Root Causes




4. ID Solutions and Develop an AIM Statement

5. Develop a QI Plan



6-8. Pilot Test QI Plan



9. Present Results and Evaluate Impact

PDSA: Testing Change



AIM

State the overall goal you want to achieve

PLAN

What is happening now? What will happen if we try something different?

What is the change you plan to test?

Develop a plan (who is going to do what, by when, and where?)

List of tasks needed to set up this test of change	Person responsible	When to be done	Where to be done	Measure to determine success
1.				
2.				
3.				
4.				

DO

Let's try it!

Carry out your test. Document your data and observations:

STUDY

Did it work?

Analyze data. How do the results compare with your prediction and summarize knowledge gained:

ACT

Decide what to do.

Are you going to: Adopt? Abandon? Adapt? Next steps:

QI Project Plan

The QI Project Plan details the rationale and approach your QI Team has identified to improve performance on the selected benchmark. It provides a framework you can use for any QI activity.



Meet the EPIC Facilitators



Naomi Clemmons



Lea Ayers LaFave



Megan Hiltner



Debra Olesen



Katelyn Doré



Karuna Chibber



Jillian Maccini



How to Choose a Benchmark?

18 to choose from!

Review of HS Benchmarks



% with health insurance



% with well-woman visit

% with RLP

% with postpartum visit



% with a medical home



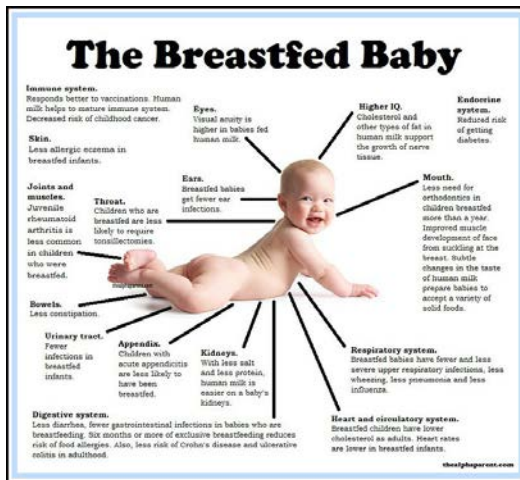
Review of HS Benchmarks



% infants sleep on back % infants breastfed at 6 mo



% abstain from smoking



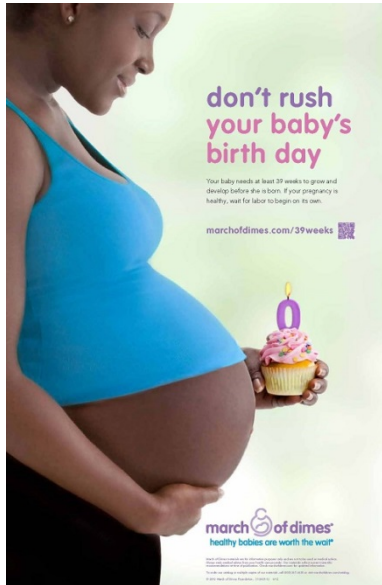
% infants ever breastfed % who conceive within 18 mos



Review of HS Benchmarks



% infants with
well-child visit



% with
EED

% screened
for depression
and referred



% receiving
follow-up
services



% with IPV
screening



Review of HS Benchmarks



% with male involvement during pregnancy



% with male involvement for infant 0-2 years

% who read daily to infant



Prioritization Matrix

What is it and how can it help me?

A prioritization matrix is a brainstorming tool that provides objective criteria for organizing options.

How to use this tool:

- Bring together HS staff with diverse roles and responsibilities.
- Review the list of benchmarks and agree on 5-6 to target.
- Rate each benchmark based on: 1) staff interest, 2) benefit to HS participants and 3) perceived difficulty to change.
- Choose benchmark with highest score.

Selecting a Benchmark

Rate Each Benchmark Using Scale Provided

List of 5-6 Possible Benchmarks	Provide 1 reason for including this benchmark among your options	Staff Interest (low – 1, medium – 2, high - 3)	Benefit to Participants (low – 1, medium – 2, high - 3)	Difficult to Change (low – 3, medium - 2, high - 1)	Rating (Interest x Benefit x Difficulty)
Increase % of participants with health insurance	No CAC on site so participants are referred for eligibility assistance.	2	2	2	8
Increase % of participants screened for IPV	No standardized process so not all participants are routinely screened.	3	2	3	18
Increase % of participants with post partum visit	No primary care on –site so must refer participants. Difficulty getting confirmation that visit occurred.	1	3	1	3

The benchmark with the highest score represents the benchmark that staff is interested in improving and they believe is both doable and likely to have the greatest positive impact on participants.

This benchmark may be the best place to start!

QI Poll

How likely is your HS program to join a QIPLN?

Next Steps

Every Healthy Start Program will receive an invitation to join a QIPLN.

Please select your top three benchmarks and identify 2 QI Leads.

6-7 QIPLNs will be established for the most frequently selected benchmarks.

Your 2 QI Leads will be assigned to one QIPLN in January and contacted to schedule your first QIPLN call in February.



First QIPLN Meeting

**QI LEADS SHOULD RESERVE
FEBRUARY 24 1:30-4 PM EST
FOR THE FIRST QIPLN CALL.**

**CALL-IN INFORMATION WILL BE
MAILED IN EARLY FEBRUARY.**



Resources/Further Reading

1. [Selecting Project Indicators](#)
2. [Social Determinants of Health- HealthyPeople](#)
3. [National Healthy Start. \(2011\). Saving Our Nation's Babies: The Impact of the Federal Healthy Start Initiative](#)
4. [Peter C. Smith, Elias Mossialos and Irene Papanicolas. \(2008\). Performance measurement for health system improvement: experiences, challenges and prospects](#)

Questions?

Contact the Healthy Start EPIC
Center at:

URL: www.healthystartepic.org

