Tribal Accreditation Learning Community

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APRIL 15, 2019
TOPIC:

EFFECTIVE QI MEASURES

TALC Webinar Protocols



- The meeting will be recorded.
- ▶ Please keep your phones on mute to minimize background noise.
- ▶ Use the chat box anytime or the phone line for questions during the Q&A
- Feel free to ask questions of other people on the line as well
- ► A post webinar evaluation survey will pop up when you leave the meeting, please fill that out



QI is a "defined improvement process" and "measurable improvements"

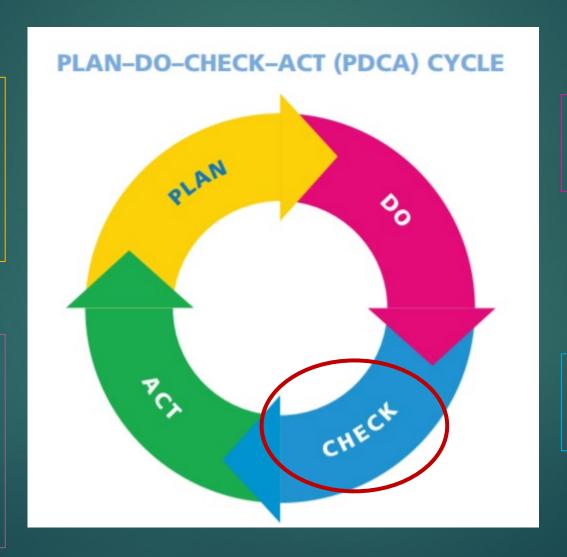
General structure: collecting baseline data, implementing an intervention, and collecting and analyzing post-intervention data to measure how much improvement has been attained



QI Models: PDCA

- Investigate problem
- Baseline data
- Determine root of problem
- Develop potential solutions

- Act upon what has been learned:
- Continue intervention
- Adapt and retest
- Abandon and return to plan



- Implement solutions
- Collect data
- "Testing" stage

 Compare pre and post data to see if there was improvement

QI Measures Overview

- Measurement is a critical part of testing and implementing improvement projects
 - Measures are how we can know changes are actually leading to improvement

Evaluation

- Process evaluation= are program activities implemented as intended?
 - Ex. Increased dispersion of healthy eating handout
- ▶ Outcome evaluation = measures short term changes
 - ► Ex. Increased healthy eating behaviors
- Impact evaluation = long term changes for ultimate goal
 - Ex. Lower rates of diabetes

Best Practices for Evaluation

- ► Step 1: Engage stakeholders.
- ▶ Step 2: Understand the program.
- ▶ Step 3: Focus on evaluation design.
- ▶ Step 4: Gather credible evidence.

-Adapted from Framework for Program Evaluation in Public Health

Best Practices for Evaluation

- □ Information Needs Satisfied
 - Identified impact, how much information is collected, value in this evaluation
- Evaluation is viable and non-disruptive
- Evaluation is ethical
- ☐ Findings will be accurate.

-Adapted from Framework for Program Evaluation in Public Health

Choosing Effective Measures-Outcome

- ▶ What is the goal of the QI project?
 - ▶Increased efficiency, increased effectiveness, or both?
- ▶ What information will the measure give you?
- What are the processes and activities that have an impact on the outcomes?

Additional Questions about your Ql Measures- Outcome

- ▶ Is the outcome relevant?
- ▶ Does it reflect the intent of QI project (is the problem being addressed)?
- ▶ Is the outcome achievable (resources, timeline)?
- ▶ Is the outcome measurable?
- ▶ Is there a way to collect the data?

Defining the Measure

- 1. Name of measure
- 2. Type of measure (evaluation type)
- 3. Why is the measure needed for the project?
- 4. Data collection and sampling method
- 5. How will data be displayed?
- 6. Is baseline data available?
- 7. What is the goal or target?
- 8. Source

Adapted from HQ Ontario

National Indian

Health Board

Choosing Effective Measures

- ► Are we measuring what we need?
 - Ex. Schools implemented QI process to increase healthy lunch. They substitute fruits and veggies for high calorie items. How can they measure this?

Choosing Effective Measures

- QI Measures may not be the best choice if...
 - ► They are looking at staff issues, not process- QI project is to fix a process
 - ► They are addressing a project without baseline data or with baseline data that does not indicate a problem
 - ▶ If they are measuring a problem when there is already a clear solution

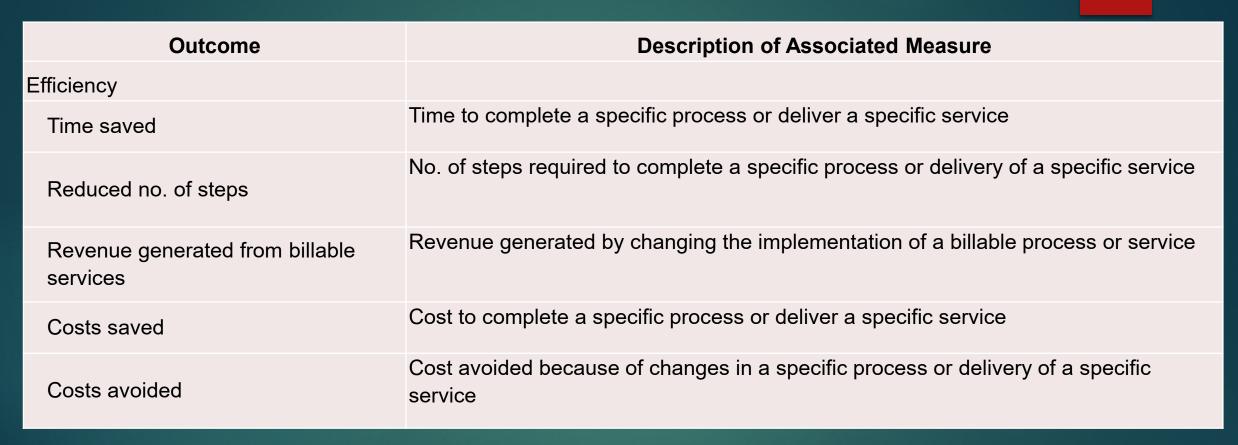


TABLE 1—
Efficiency and Effectiveness Outcomes in the Quality Improvement Measurement Framework



Associated Outcome	Example Measure	
Quantitative		
Efficiency		
Time saved	No. of days from award letter to contract start date	
Costs saved	Cost per unit of pharmaceuticals wasted in 4 Public Health Center pilot sites	
Reduced steps in process	No. of steps in accessing the most recent data from (state-based) information technology system	
Revenue generated from billable services	Revenue generated by reducing the no. of preventable denials for claims submitted for clinical service by health department	
Costs avoided	Cost of processing applications by the Environment Unit (through move from paper to online processing)	

Outcome	Description of Associated Measure
Increased customer or staff satisfaction	Percentage of customers or staff who report being satisfied or extremely satisfied with a specific service or process
Increased reach to a target population	Percentage of target population that has been offered, received, or completed a specific public health service or program
Dissemination of information, products, or evidence-based practices	Percentage of individuals or public health partner organizations reached through dissemination of information, products, or evidence-based practices
Quality enhancement of services or programs	Description of issue or improvement opportunity and its resolution for a specific service or program
Quality enhancement of data systems	Description of issue or improvement opportunity and its resolution for a specific data or health information system
Organizational design improvements	Description of improvements to organizational operations, business processes, or service or program delivery resulting from specific organizational redesign efforts
Increased preventive behaviors	Percentage of preventive or health-promoting behavior or early indicators of preventive behaviors in a target population
Decreased incidence or prevalence of disease	Percentage of individuals with disease in the target population

Associated Outcome	Example Measure	
Quantitative		
Effectiveness		
Customer and staff satisfaction	% of nursing staff satisfied or extremely satisfied with the protocols in their refugee clinic	
Increased preventive behaviors	% of babies born at hospital to moms with diabetes who are exclusively breastfed in the hospital	
Decreased incidence and prevalence	% of individuals exposed to syphilis who are designated as unable to locate	
Dissemination of Information	% of participating programs that are submitting meaningful measures to the agency Dashboard report	
Organizational design improvements	% of job descriptions across the division that align with standard (responsibilities) domains identified for each job class	
Qualitative		
Effectiveness		
Quality enhancement, services	Uniform standard policy and procedures for disposal of sharps used in HIV testing will be in place within 6 mo of development	
Quality enhancement, systems	Extent to which health departments' databases are compliant with standards for collection of race, ethnicity, and gender data	

What have you measured in your QI project(s)?

Impactful Measures

- How do you know your project is making an impact?
- ► How have you measured impact in previous programs or QI projects?

- https://www.phqix.org/content/reducing-no-show-rate-immunization-clinics-local-health-department-lessons-learned
- https://www.phqix.org/content/improving-5astobacco-cessation-counseling-usage-adult-clientshealth-department

What more do you want to know about QI?

- https://www.naccho.org/uploads/downloadable-resources/NACCHO-PM-System-Guide_August-2018.pdf
- https://www.ncbi.nlm.nih.gov/pmc/articles/PMC435 5721/
- https://www.cdc.gov/mmwr/preview/mmwrhtml/rr4 811a1.htm
- https://www.cdc.gov/dhdsp/pubs/docs/cb_dece mber_2012.pdf

Thank you!

Next TALC:

MAY 23, 2019

3PM ET, 2PM CT, 1PM MT, 12PM PT

Upcoming Trainings/Events







2019 Public Health Improvement Training

New Orleans, LA

June 12, 2019 - June 13, 2019