

Quality Improvement Project

WXGPVTS residential

9/10/15

Aims of this session

- Revision for those of you who have done QIP.
- Nuts and bolts of QIP for those yet to do QIP.
- Finding out your learning needs for QIP to cover at future VTS sessions.

- In your groups:
- List 3 things you know about QIP
- and 3 things you would like to know about QIP

Things you know about QIP

- Summary of groupwork flipcharts:
- Mandatory
- Different to audit
- Recognition something is not working well
- Identify need
- Can be simple
- No guidelines/standards to follow
- About service improvement
- No need to "close the loop"
- must be SMART
- PDSA
- "bottom up"

Things you would like to know

- Summary of groupwork flipcharts :
- How to do the write up
- How to make panel love it!
- Format of write up
- How is it different from audit?
- What if your intervention makes things worse??
- Examples of QIP topics/ideas for projects
- How to repeat the cycle
- Can you do it in ST1 or ST2
- Audit or QIP - which is better?
- How many QIPs?
- Do you need to register it?
- How do you get support?

Who has done a QIP?

- When did you do it?
- How long did it take you?
- Who supported you?
- Did you implement some lasting changes?
- Was it useful?

What is quality improvement?

- not just doing the same thing but trying harder
- not just doing something differently
- considering how to improve as a process of continuous reflection

QIP Video 1

- www.youtube.com/watch?v=jq52ZjMzqyl

How would you define
quality?

What is Quality?

- **Safe:** avoiding harm to staff and patients from the care that is intended to help them
- **Timely:** reducing waits and harmful delays for both those who receive and those who give care
- **Effective:** care based on robust evidence to all who could benefit and not given to those not likely to benefit



- Crossing the Quality Chasm: A New Health System for the 21st Century, The Institute of Medicine, 2001

What is Quality?

- Efficient:** avoiding waste, of equipment, supplies, ideas, energy
- Equitable:** care that does not vary in quality because of personal characteristics such as gender, ethnicity, geographic location, and socio-economic status
- Patient-Centered:** care that is respectful and responsive to individual patient preferences, needs and values, and ensuring that patient values guide all clinical decisions



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QIP video 2

- https://www.youtube.com/watch?v=jsp-19o_5vU

- Process mapping - in the second video note how mother mapped out the process of getting to school and worked out her interventions to reduce lateness. She then "tweaked" the interventions when they weren't working eg choosing the clothes the night before - but did the children initially wear the clothes they had chosen?? Hence she implemented the reward structure.
- Stakeholder analysis
- PDSA

Act on your findings

Select changes (identify next intervention) and plan to test them...

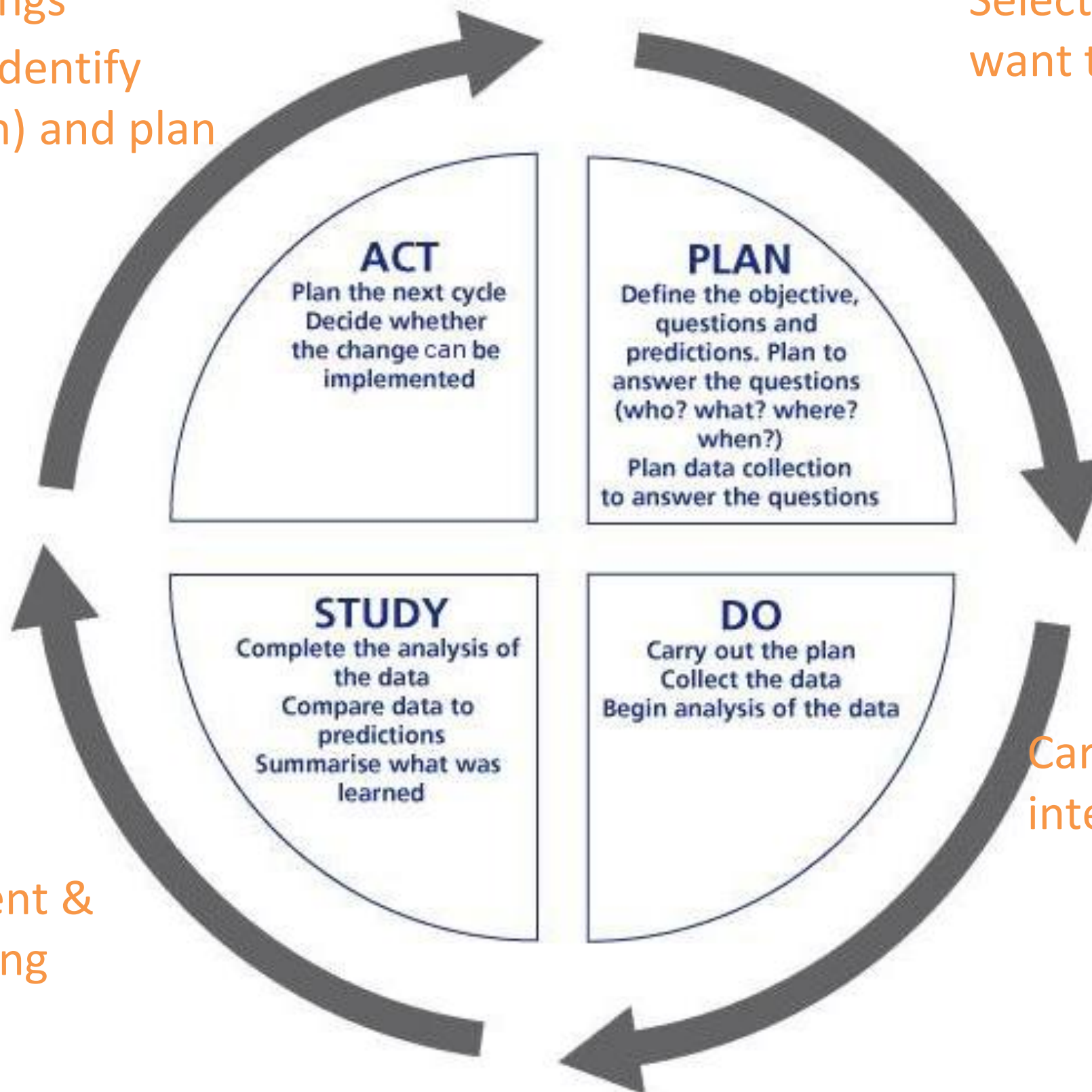
Ideas for change can come from borrowing from others who have successfully improved

Study improvement & Summarise learning

Select the Quality you want to improve

Plan to identify the current situation, how to intervene & to measure improvement

Carry out your intervention



MODEL FOR IMPROVEMENT

What are we trying to accomplish?

How will we know if a change is an improvement?

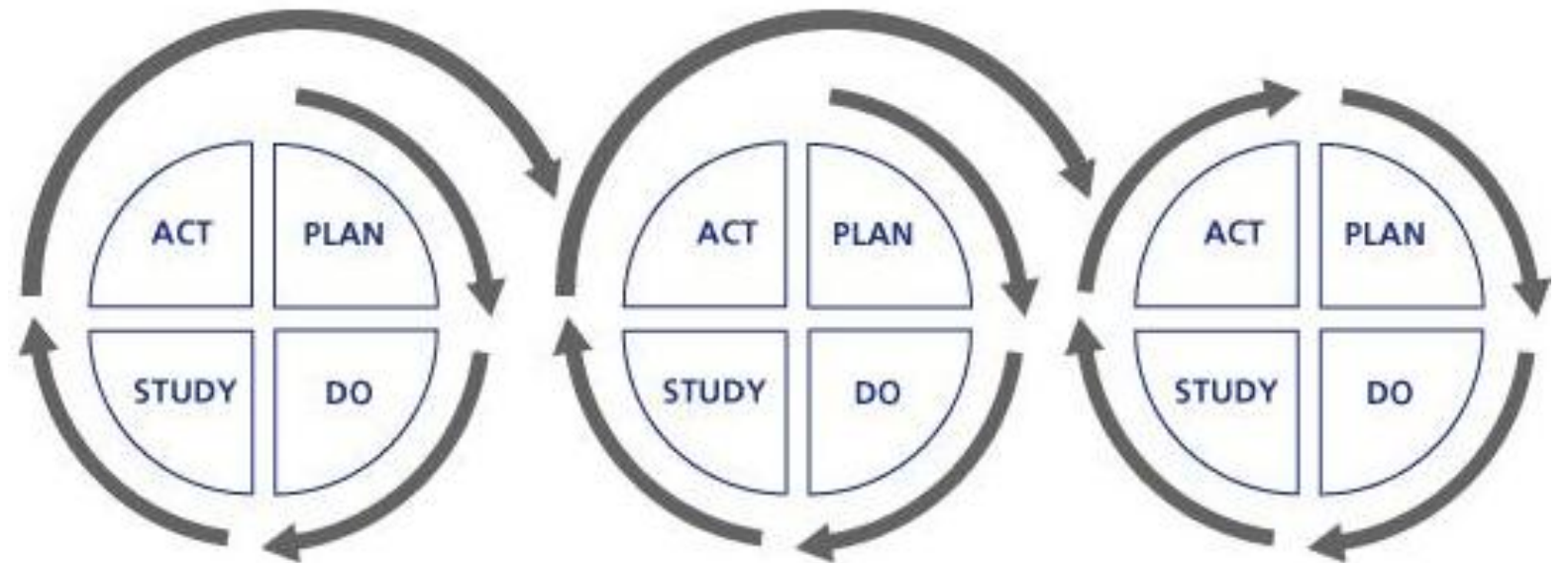
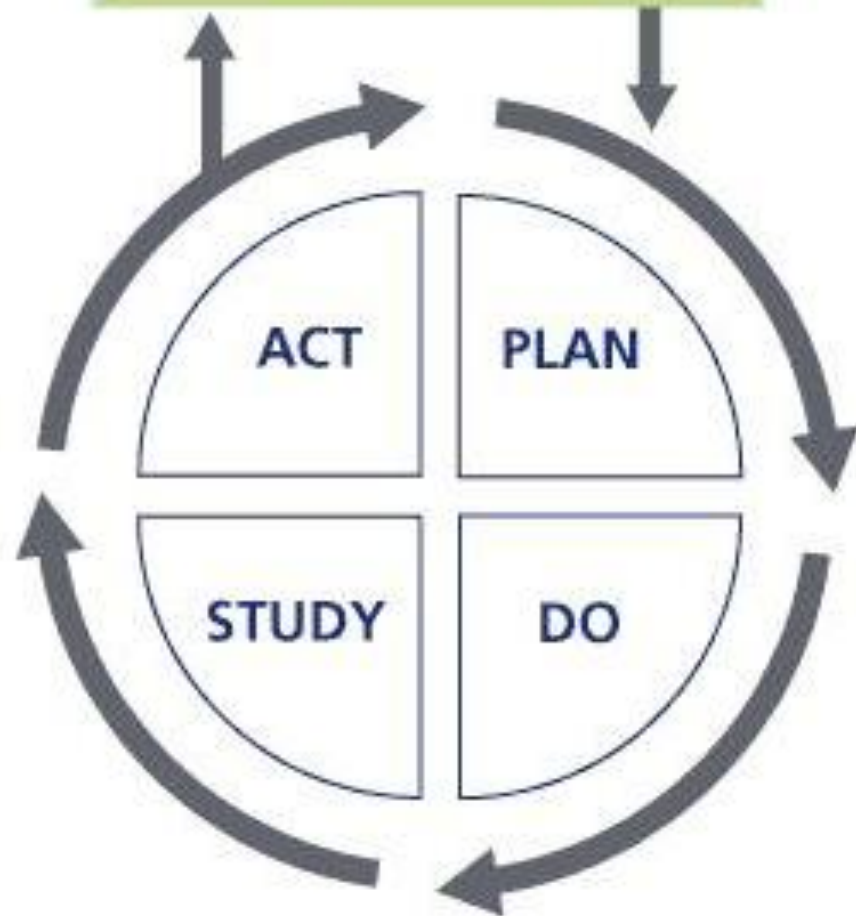
What changes can we make that will result in improvement?

→ Set aims: keep it simple / SMART

→ Establish Measures: can be qualitative

→ Select Changes: can borrow ideas

Sequential cycles when the study reveals results which suggest a different intervention is needed:



Quality Improvement Project (QIP)

- Trainees identify an improvement and lead it
- Clear Project (simple and SMART)
- The Background
- Process Mapping
- Stakeholder Analysis
- The Intervention
- Conclusions
- Reflections (self-assessment)



8-12 weeks to complete 1-2 cycles of a simple QIP

List some possible QIP ideas

- In your groups think of one QIP idea and state the following:
 - 1) What are you aiming to improve (be specific) , why have you chosen it and how can you write it in a SMART way?
 - 2) Why have you chosen this? Is it ACHIEVABLE and REALISTIC?
 - 3) What is your process map?
 - 4) Who are you stakeholders?
 - 5) What can you change from the current processes (INTERVENTIONS) and how are you going to test those changes? (PDSA)
 - 6) Is there anything you can measure to show effective change and how do you know that your changes are leading to an improvement? (MEASURABLE)

- 7) Conclusions :
outcomes/implications/impact/sustainability
- 8) Reflections: enablers/barriers/leadership skills

To recap....

- What are you aiming to improve? (be SPECIFIC)
- Write your aim in a SMART way
- Why? (the background to your project, is it ACHIEVABLE and REALISTIC?)
- How is this process being done at the moment? (PROCESS MAPPING)
- What can you change from the current processes and how are you going to test those changes? (PDSA)
- Who are your STAKEHOLDERS?
- Is there anything you can measure to show effective change and how do you know that your changes are leading to an improvement? (MEASURABLE)
- Conclusions : outcomes/implications/impact/sustainability
- Reflections: enablers/barriers/leadership skills

Skills learned through QIP

- In your groups - list 5 skills that can be acquired through doing QIP

Some examples of leadership skills learned through doing QIP:

- Improving services
- Patient safety
- Critically evaluating
- Encouraging improvement and innovation
- Facilitating transformation
- Change management
- Working with others
- Managing services
- Planning
- Managing resources
- Managing people
- Managing performance
- Applying knowledge and evidence
- Making decisions
- Evaluating impact
- Creating a vision
- Developing strategy
- Implementing a strategy

- QIP TOP TIPS :
- Timing : don't leave it too late, can take 12 weeks to show improvement, ST1 has many hurdles so start early in the year.
- Do something that interests you, take ownership, it is likely to benefit your practice anyway.
- Keep it simple
- Keep it SMART
- Can be a qualitative project eg patient experience
- Don't forget that what you perceive to be "unsuccessful" can be a valuable QIP
- Don't be afraid to borrow ideas during PDSA
- Can build upon previous QIPs that other people in the practice have done
- attend GP school QIP workshops

- Anything not covered today will be covered in future VTS sessions.

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