Rapid Improvement Project Participants

• Cape Fear Valley – Bladen County Hospital
• Charles A. Cannon, Jr. Memorial Hospital
• J. Arthur Dosher Memorial Hospital
• LifeBrite Community Hospital of Stokes
• Murphy Medical Center
• Pender Memorial Hospital
• Swain Community Hospital
• Vidant Bertie Hospital
4 Sessions and 1 Workshop:

• February 13\textsuperscript{th} – Webinar 1: Defining the Project Scope
• March 7\textsuperscript{th} – Webinar 2: Analyzing the Current State
• March 23\textsuperscript{rd} – In-Person Workshop: Process Mapping, Issue Prioritization, and Root Cause Analysis
• April 17\textsuperscript{th} – Webinar 3: Right Side of the A3
• May 4\textsuperscript{th} – Webinar 4: A3 Tools Review and Sharing
Today’s Agenda

• Introductions
• Virtual Technology Overview
• Project Overview and Expectations
• Process Improvement Methodology Overview
• Project Scoping
• Observation
Participant Expectations

• Attend every session
• Complete homework
• Participate in in-person workshop
• Implement solutions and share successes
• Have fun!
Virtual Netiquette

https://www.youtube.com/watch?v=z_tiq1B
Fjbk
Virtual Netiquette

• Mute is your friend
  o use when not talking
  o do not place on hold – use mute to step away

• Pace yourself
  o ask <pause> listen

• Chat it up
  o questions, brainstorms, etc.
Introductions

• Name, role(s), facility

• How does the HCAHPS Care Transitions measure relate to your facility’s mission and goals?
  o Mission statement
  o Strategic plan
  o Community Health Needs Assessment (CHNA) Implementation Plan
Rapid Improvement Project Tool Box

Utilize similar language and format to increase collaboration and improve outcomes

- Project Scoping
- A3 Problem Solving
- Current State Process Mapping
Process Improvement Methodologies

**Six Sigma**
- Define
- Measure
- Analyze
- Improve
- Control

**Lean**
- Identify Value
- Understand Value Stream
- Eliminate Waste
- Establish Flow
- Enable Pull
- Pursue Perfection

Model for Improvement:
- What are we trying to accomplish?
- How will we know that a change is an improvement?
- What change can we make that will result in improvement?

Act | Study
--- | ---
Plan | Do
Process Improvement Similarities

- Disciplined methodologies with specific languages and tools
- Rely on measures (data)
- Focused on continuous improvement of outcomes
- Long history of success in the field
As of Q1 2017, the HCAHPS Care Transitions measure scored 51% in North Carolina and 52% in the US.
**Rapid Improvement Project**

**Goal:** Improve HCAHPS score on Care Transitions

**Project Objectives:**

- Provide opportunity for collaboration with peers to make measurable improvement in a targeted measure
- Transition from “data to doing” by providing educational support, tools and networking opportunities to facilitate a rapid-cycle improvement project
Project Scope – What is it?

Part of project planning process that involves determining and documenting a list of specific project goals, deliverables, tasks, costs and deadlines.
Project Scope – Why use it?

Most important part of project

• Clearly defined expectations and goals
• Defined timeline
• Identifies resources and costs
• Prevents scope creep
**Project Scoping – Step by Step**

**Step 1: Project Scope**

- **Project Aim:** (What are we trying to accomplish?)
- **Project Goal:** (SMART goal)

**Project Constraints:** (What are the boundaries for this project?)
- Budget:
- Schedule:
- Quality:
- Other: (Policies, Regulations, Senior Management requirements)

**Evaluation Measure** (use standardized data, easily obtainable if possible - examples include FURS, NQF, CMS, IQR and/or UOS measures)

<table>
<thead>
<tr>
<th>Measure Identifier/Number</th>
<th>Description</th>
<th>DataSource</th>
<th>Target Performance</th>
<th>Current Performance</th>
<th>Current Performance Date</th>
</tr>
</thead>
</table>

**Project Team**

<table>
<thead>
<tr>
<th>Name</th>
<th>Title/Department</th>
<th>Role</th>
<th>Responsibilities</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Process Prioritization**

<table>
<thead>
<tr>
<th>Potential Processes</th>
<th>Priority ranking (Low, medium, high)</th>
<th>Estimated Completion Date</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Step 2: Process Scope**

1. Process to be analyzed:
   - Basic overview/title:

2. Why is this process being chosen to analyze?
   - What brought up the desire to map the process?

3. Improvement SMART goal/target for chosen process:
   - (Specific, Measurable, Action oriented, Realistic and Time based)

4. Scope of process to be analyzed (clearly define start point and end point):

5. EHR/Documentation system, module and/or applications involved:

6. Items/equipment/devices involved in process:

7. Physical locations involved in process:

8. Staff/people involved in process:

9. How will the process be mapped (value stream map, flowchart, etc.) using what method (direct observation, video recording, etc.)?

10. Who will own the map once completed?

11. Planned start date/target end date (of mapping exercise)

**Step 3: Repeat**
Step 1: Project Scope

Select a Measure 7 Question to Improve

- **Q23:** During this hospital stay, staff took my preferences and those of my family or care giver into account in deciding what my health care needs would be when I left.
- **Q24:** When I left the hospital, I had a good understanding of the things I was responsible for in managing my health.
- **Q25:** When I left the hospital, I clearly understood the purpose for taking each of my medications.

Question Selection Criteria

- Lowest score
- Low hanging fruit
- Constraints
- Facility goals and current projects
**Project Aim/Goal**

**Project Aim:** (What are we trying to accomplish?)

**Project Goal:** (SMART goal)

**Project Aim:**
- Overall purpose/intention of project
- Broad statement of desired outcomes
- “Paints a picture” of project

**Project SMART Goal:**

- **S**pecific: State exactly what you want to accomplish (who, what, where & why)
- **M**easurable: How will you demonstrate & evaluate the extent the goal has been met?
- **A**ction Oriented: Use action verbs and identify who is accountable for tasks
- **R**ealistic: Is goal & timeframe realistic for the goal you have established?
- **T**ime Based: Set target dates to guide your goal to successful, timely completion (include deadlines, frequencies, etc.)
Project Constraints

<table>
<thead>
<tr>
<th>Project Constraints: (What are the boundaries for this project?)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Budget:</td>
</tr>
<tr>
<td>Schedule:</td>
</tr>
<tr>
<td>Quality:</td>
</tr>
<tr>
<td>Other: (Policies, Regulations, Senior Management requirements)</td>
</tr>
</tbody>
</table>

Project Boundaries/Constraints

- Resources (materials, staffing, etc.)
- Regulatory
- Monuments & Elephants
  - Don’t move mountains
  - Be open about elephants
- Maintain Balance
  - Time, Cost & Quality
### Evaluation Measure - Data

**Evaluation Measure** (use standardized data, easily obtainable if possible - examples include PQRS, NQF, CMS, IQR and or UDS measures)

<table>
<thead>
<tr>
<th>Measure Identifier/Number</th>
<th>Description</th>
<th>Data Source</th>
<th>Target Performance</th>
<th>Current Performance</th>
<th>Current Performance Date</th>
</tr>
</thead>
</table>

**Data Types**

- **Quality Examples:**
  - MBQIP, PQRS, NQF, CMS, etc.

- **Site Specific Examples:**
  - Financial, Billing, EMR…
  - Public Health, Community Health Needs Assessments
  - Project specific data collection, time studies, observations
## Evaluation Measure – Measure 7

**Evaluation Measure** (use standardized data, easily obtainable if possible - examples include PQRS, NQF, CMS, IQR and or UDS measures)

<table>
<thead>
<tr>
<th>Measure Identifier/Number</th>
<th>Description</th>
<th>Data Source</th>
<th>Target Performance</th>
<th>Current Performance</th>
<th>Current Performance Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Care Transition #7/Q25</td>
<td>When leaving hospital, Patient clearly understands purpose for taking each medication</td>
<td>HCAHPS</td>
<td>75%</td>
<td>38.7%</td>
<td>Q4 2015</td>
</tr>
</tbody>
</table>

Prioritize based on:
- Low hanging fruit
- Biggest impact
- Monument-free
1. Brainstorm ALL related processes
2. Walk processes to gain deeper understanding
3. Identify and table monuments
4. Look for low hanging fruit, up-stream processes, minimal resources required, etc.
5. Select first process to improve

<table>
<thead>
<tr>
<th>Potential Processes</th>
<th>Priority ranking (low, medium, high)</th>
<th>Estimated Completion Date</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medication Review Process</td>
<td>High</td>
<td>9/24/16</td>
<td>Manager Joan on vacation until 7/6/16 – unable to begin until returns (small monument) Larger process – from admission to discharge</td>
</tr>
<tr>
<td>Medication Ordering Process</td>
<td>Low</td>
<td>8/16/16</td>
<td>Held rapid cycle improvement project  Q1 2016; will evaluate again after test period</td>
</tr>
<tr>
<td>Patient Medication Education at Discharge Process</td>
<td>High</td>
<td>8/5/16</td>
<td>Very low score, minimal cost/time to improve</td>
</tr>
<tr>
<td>Med Pass Process</td>
<td>Medium</td>
<td>9/4/16</td>
<td>Reviewing Med Errors, time study needed for further evaluation</td>
</tr>
</tbody>
</table>
Process Prioritization Methods
**Step 2: Process Scoping**

### Process Scope

<table>
<thead>
<tr>
<th>1. Process to be analyzed:</th>
<th>Patient Medication Education at Discharge Process</th>
</tr>
</thead>
<tbody>
<tr>
<td>Basic Overview/Title:</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>2. Why is this process being chosen to analyze?</th>
<th>Low HCAHPS Measure 7/Q25 score (38.7); when process observed – determined process not clearly defined, staff not educated on process. Patients interviewed expressed confusion between education and understanding paperwork sent home at discharge</th>
</tr>
</thead>
<tbody>
<tr>
<td>What brought up the desire to map the process?</td>
<td>To improve patient understanding of taking medication at discharge as Measure 7/Q25 score to 75% or greater in Q4 2016 through lean rapid cycle project and patient panel review to be implemented by 8.9.16.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>3. Improvement SMART goal/target for chosen process:</th>
<th>Request for patient medication education at discharge triggered by discharge orders in EMR to care coordinator follow-up with patient one week following discharge.</th>
</tr>
</thead>
<tbody>
<tr>
<td>(Specific, Measurable, Action oriented, Realistic and Time based)</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>4. Scope of process to be analyzed (clearly define start point and endpoint):</th>
<th>Epic; Patient Discharge Forms XYZ; etc.</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>5. EHR/Documentation system, module</th>
<th></th>
</tr>
</thead>
</table>

**Scope selected process in same manner as project**

- More detailed and focused as only one part of project
**Step 2: Process Scoping**

<table>
<thead>
<tr>
<th>Step</th>
<th>Description</th>
<th>Example</th>
</tr>
</thead>
<tbody>
<tr>
<td>5</td>
<td>EHR/Documentation system, module and/or applications involved:</td>
<td>Epic; Patient Discharge Forms XYZ; etc.</td>
</tr>
<tr>
<td>6</td>
<td>Items/equipment/devices involved in process:</td>
<td>Laptop; Patient Pill Organizer Box; Video...etc.</td>
</tr>
<tr>
<td>7</td>
<td>Physical locations involved in process:</td>
<td>Inpatient Rooms Floor 2, Wing 1</td>
</tr>
<tr>
<td>8</td>
<td>Staff/people involved in process:</td>
<td>Joe E. Pharmacy; Ellen Q. Nursing; Gail S. Social Services; Rob T. IT; Julie K., Liz F., Bill R – Care Coordinators; Rita W. Long Term Care; etc.</td>
</tr>
<tr>
<td>9</td>
<td>How will the process be mapped (value stream map, flowchart, etc.) using what method (direct observation, video recording, etc.)?</td>
<td>Value Stream Map</td>
</tr>
</tbody>
</table>

The devil is in the details...

- Identify ALL the following (if info missing, could indicate possible issue in process and great place to start):
  - Who does process involve? - EVERYONE
  - What is used (is needed) in process? - all materials, forms, electronics, etc.
  - Where does process occur?
Step 2: Process Scoping

To ensure success – Be accountable
- Where – location project documents will be archived for future use
- When – clearly state time line
- Who – Identify and invite Process Improvement Project Team
  - May or may not be the same as Project Team Leads – depends on who the specific process work touches
Homework

Prior to next session, please complete the following tasks and email related documents to:

dhunter@ncha.org

• Project Scope Document (submit via email)
• Process Scope Document (submit via email)
• Every team leader walk selected process
  o Identified during Process Prioritization
• Identify and invite team members to project
Project Schedule

☐ February 13th – Webinar 1: Defining the Project Scope

• March 7th – Webinar 2: Analyzing the Current State

• March 23rd – In-Person Workshop: Process Mapping, Issue Prioritization, and Root Cause Analysis

• April 17th – Webinar 3: Right Side of the A3

• May 4th – Webinar 4: A3 Tools Review and Sharing
Thank you!!