Quality Improvement Boot Camp

Addiction Treatment Starts Here:

Learning Session #1

April 10, 2019

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About The Institute for High Quality Care (IHQC)

IHQC – Applied Learning Model

- **Our Mission – Increasing the quality and accessibility of safety net healthcare**

- Since 2007, IHQC has created multiple learning communities – ***participant-defined, applied learning*** laboratories for clinics, provider care teams to:
  - Engage in quality and process improvement trainings
  - Interact and share promising practices with their peers
  - Apply tools and techniques that will advance their own improvement efforts
  - Prepare for an ever-changing healthcare environment

Our Agenda Today – In Three Parts

Improvement Frameworks

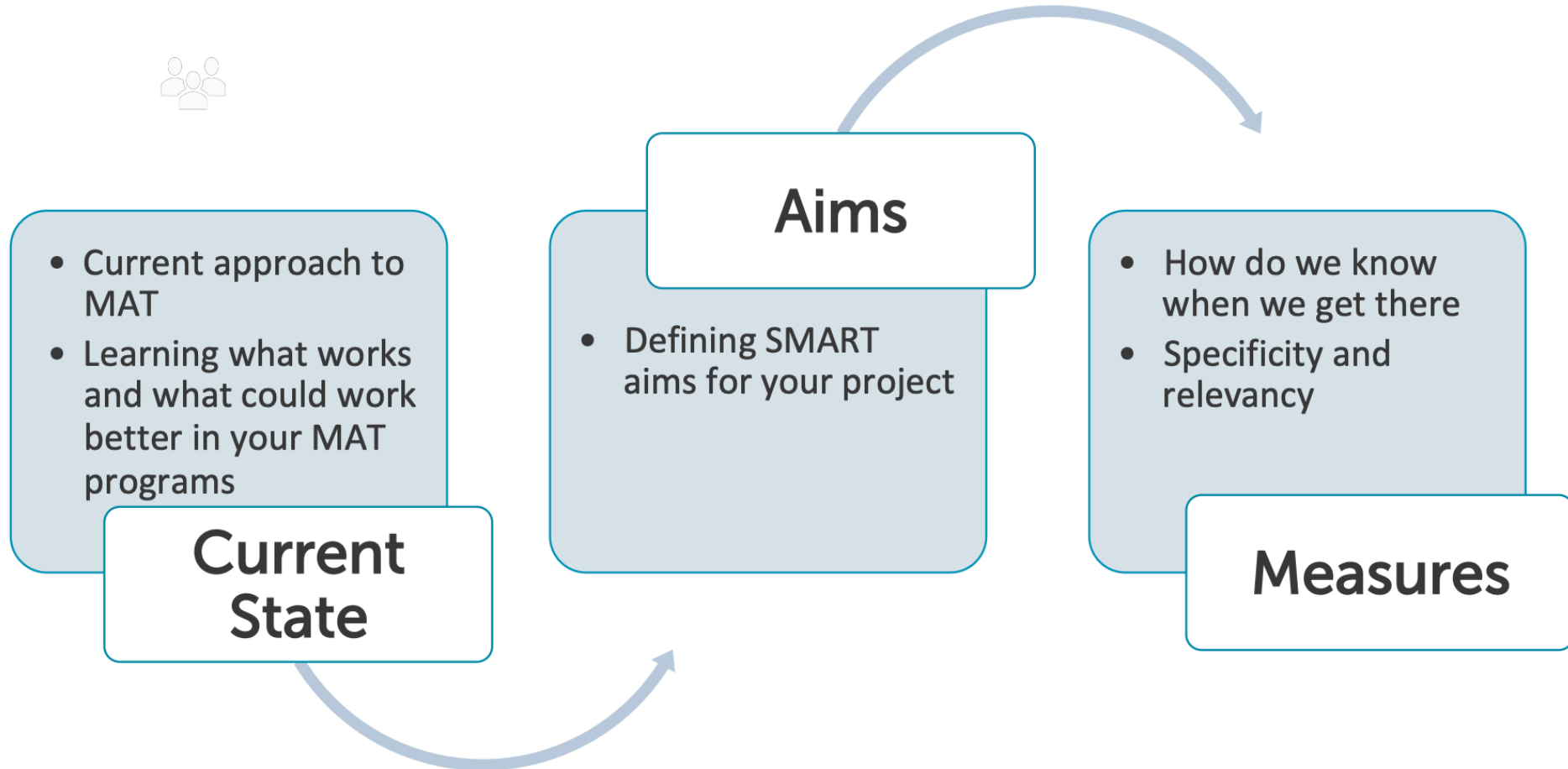| Aim | • What are we trying to accomplish? |
| Measure | • How will we know if a change is an improvement? |
| Change | • What changes can we make that will result in an improvement? |

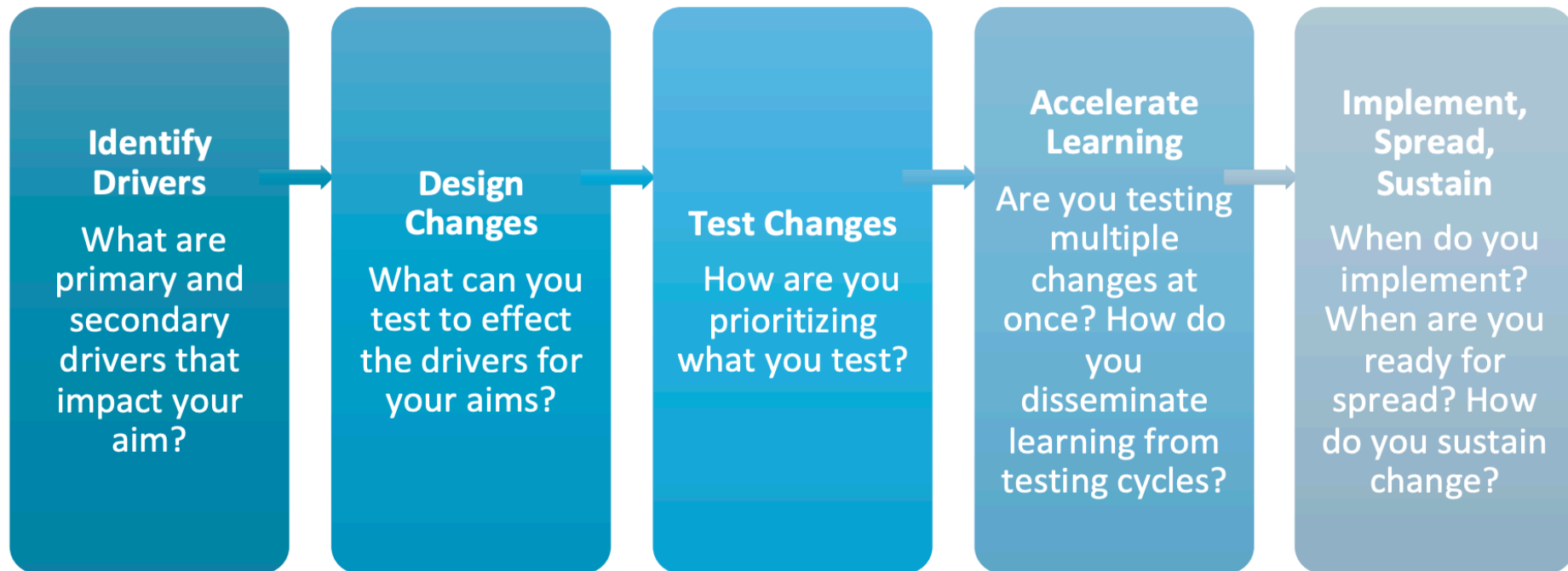## Current State Analysis

PDSA's and Small Tests of Change

Part 1 –
First Step in Designing and Testing:

Know Your Improvement Framework

Foundation To Develop and Sustain Strong MAT Programs

Current State

- Current approach to MAT
- Learning what works and what could work better in your MAT programs

Aims

- Defining SMART aims for your project

Measures

- How do we know when we get there
- Specificity and relevancy

Steps to Developing and Sustaining Strong MAT Programs

Identify Drivers

What are primary and secondary drivers that impact your aim?

Design Changes

What can you test to effect the drivers for your aims?

Test Changes

How are you prioritizing what you test?

Accelerate Learning

Are you testing multiple changes at once? How do you disseminate learning from testing cycles?

Implement, Spread, Sustain

When do you implement? When are you ready for spread? How do you sustain change?

CENTER FOR CARE INNOVATIONS

Why Should We Leverage an Improvement Model in Our Initiatives?

Don't reinvent the wheel – use scientifically proven practices and approaches
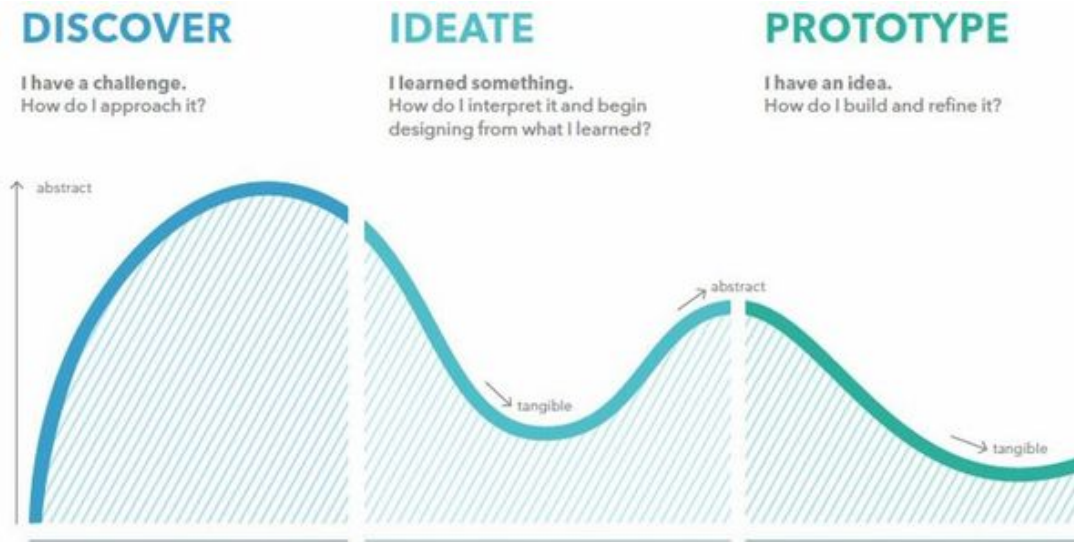
Right Tools

Speak the same language

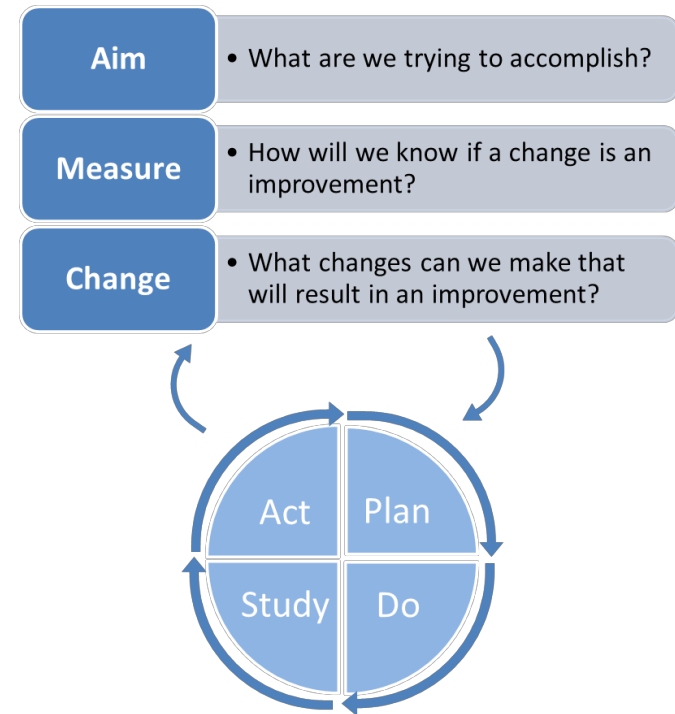**Provide direction when you're…**

Human-Centered Design

DISCOVER
I have a challenge.
How do I approach it?

IDEATE
I learned something.
How do I interpret it and begin designing from what I learned?

PROTOTYPE
I have an idea.
How do I build and refine it?

Source: Ideo.org

Model for Improvement

| Aim	• What are we trying to accomplish?
Measure	• How will we know if a change is an improvement?
Change	• What changes can we make that will result in an improvement?

Act | Plan
Study | Do

Source: ihi.org

Lean & Six-Sigma: *DMAIC*

DEFINE   MEASURE   ANALYZE   IMPROVE   CONTROL

Source: Wikipedia - DanielPenfield

ALL Improvement Models

1

Cyclical Processes

Test the changes on small scale first

Ongoing **measurement**

Analyze/**study** data

Apply lessons learned from one test to the next

2 Use of **Measurement**

3 Need for **Senior Leadership Support**

The Model for Improvement

Aim	• What are we trying to accomplish?
Measure	• How will we know if a change is an improvement?
Change	• What changes can we make that will result in an improvement?

AIM

Measurement

Effective Ideas

Act | Plan
Study | Do
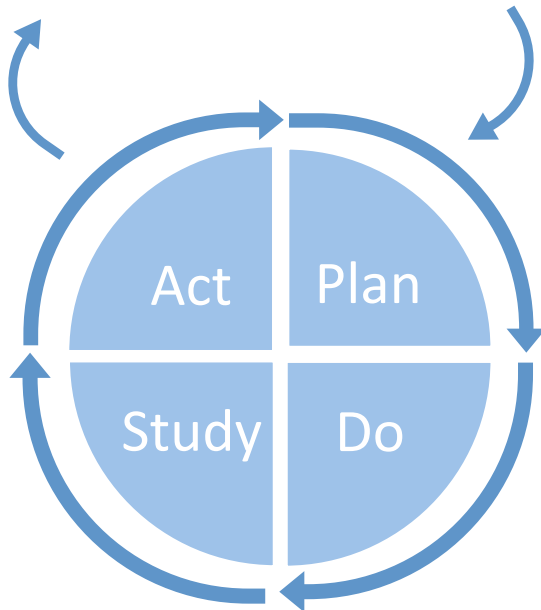
Small **Tests of change**

The Aim Statement

- Like an organization's mission statement, the *Aim Statement* sets the tone for the improvement or implementation project:
  - Defines purpose of project, what you hope to accomplish
  - Identifies system you want to improve
  - Identifies patient population the effort will impact
  - Describes why project is a priority
  - Sets the stage for a time frame to complete the project

- Results from identification of the current state or problem

- In the Model for Improvement, the Aim Statement answers the first question - "*What are we trying to accomplish?*"

SMART Statements

S — SPECIFIC

M — MEASURABLE

A — ATTAINABLE

R — RELEVANT

T — TIME-BOUND

SMART Statement Examples

Time-Bound

Measureable

By July 1, 2019, we will decrease the time
to register and check-in from 40 min to 20 min
for *scheduled patients* at our North Avenue clinic
during the first two hours of the day.

Specific – What system/process

Specific - Who

Specific - Where

Aim Statements– What's Missing?

- "Implement a MAT Program at our clinic"
    - **How big a MAT Program? How many x-waivered clinicians? How many patients?**
    - **Specific where? Which clinic? One provider at the clinic or multiple?**
    - ***Who will do it?* By when?**
    - **How will it get done – which system or process change is needed to implement?**

- "By December 2019, we will spread our MAT program."
    - **Specificity – spread to where? Clinic site? Specific providers?**
    - **Measures? How many x-waivered providers? How many patients?**
    - **How will it get done – which action steps?**

Sample ATSH Project Aim Statement

"By December 2020, LAX Health – Westin Health Center will provide MAT services to 100 patients by getting x-waivers for 4 providers, adopting a comprehensive and efficient screening process for SUD patients, and developing policies and procedures for MAT care delivery."

- *Specific?*
- *Measurable?*
- *Attainable?*
- *Relevant?*
- *Time-bound?*

The Model for Improvement

Aim	• What are we trying to accomplish?
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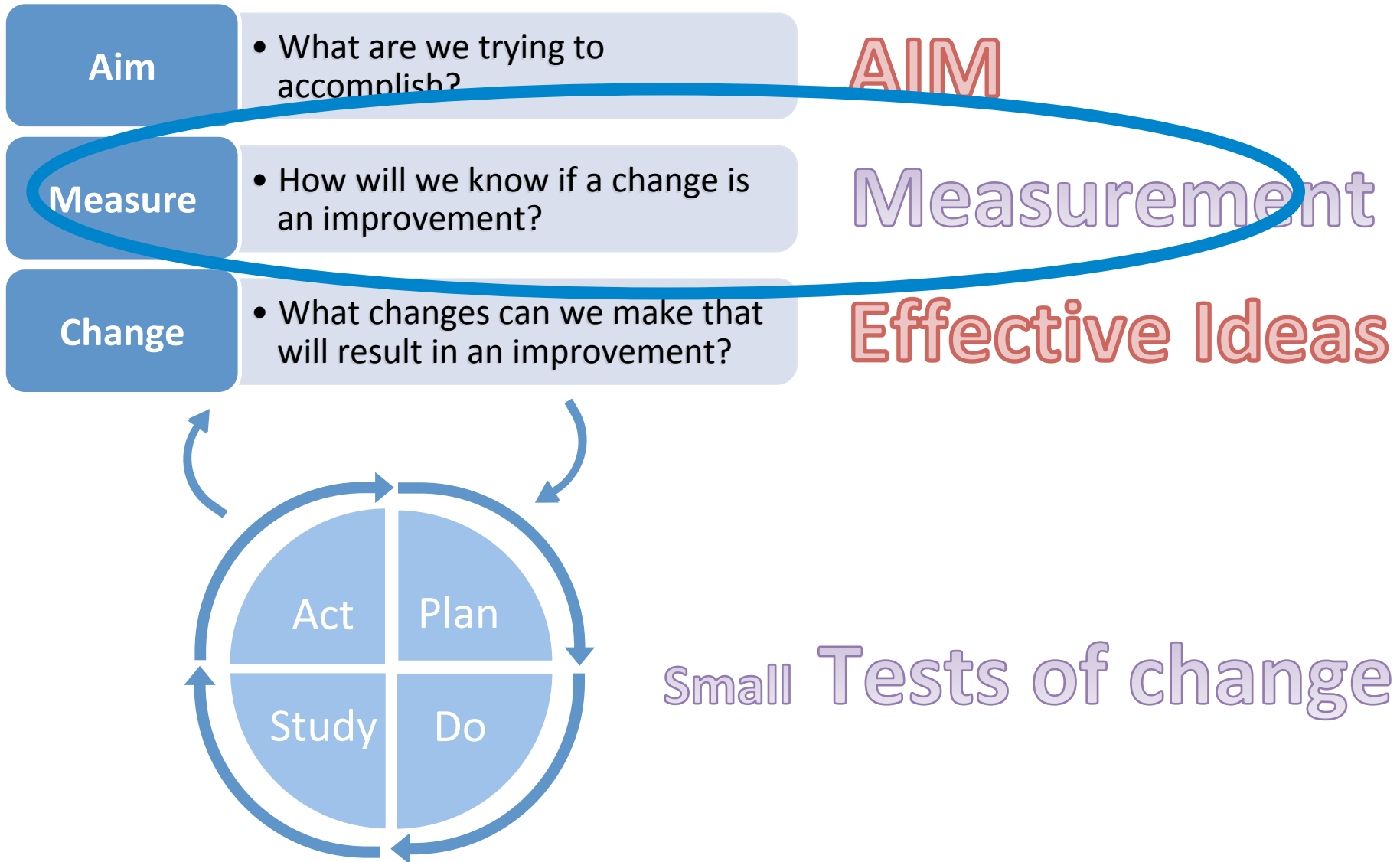
Measurement Strategy□ How and When

Core	Optional	Internal	Capability Assessment
Quarterly submission	Quarterly submission	Site determines time frame	Baseline, midpoint, conclusion
□ICHQ Data Portal		Clinic Maintains	Excel

Program Measure Set
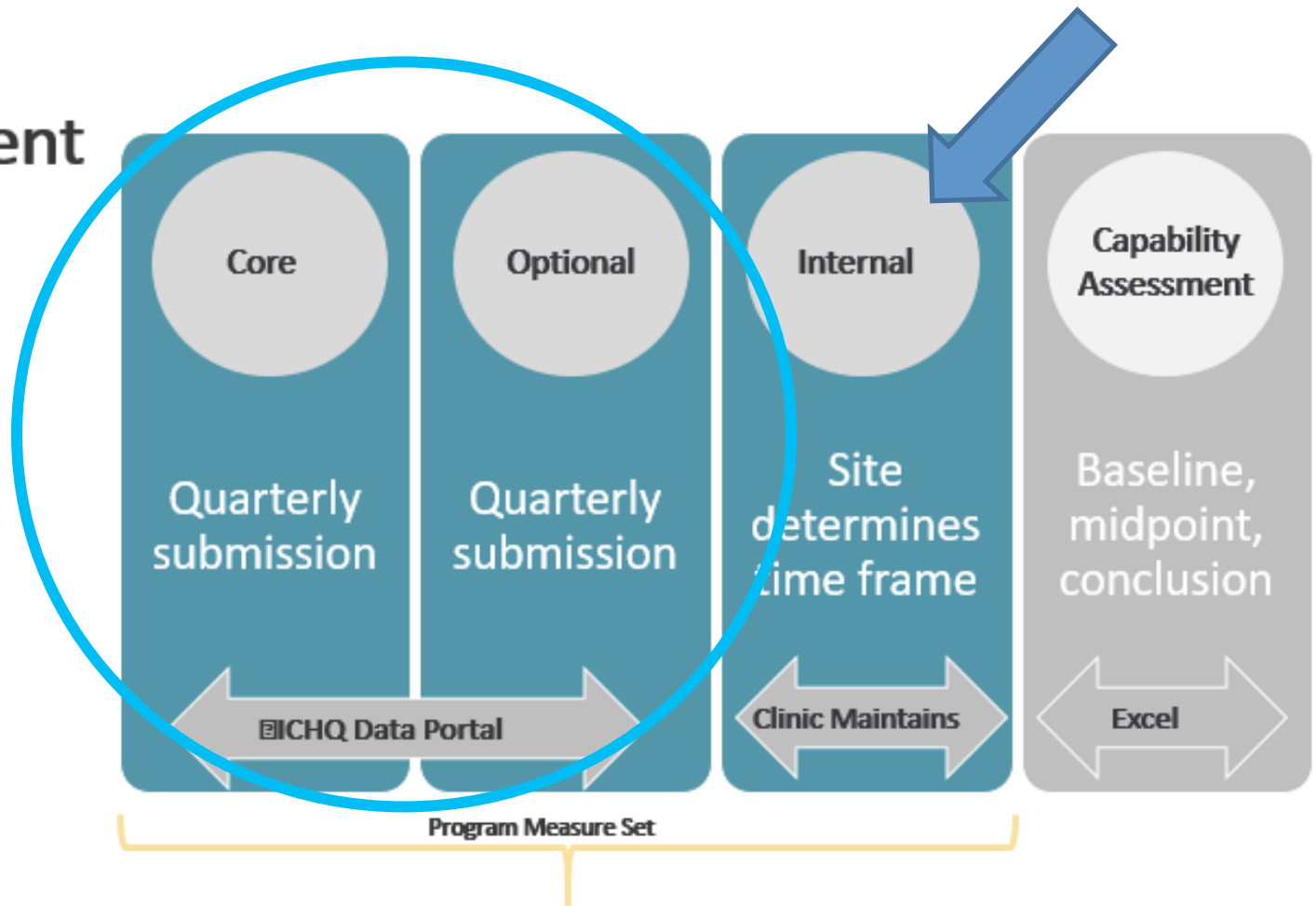
The Path from Data to Action
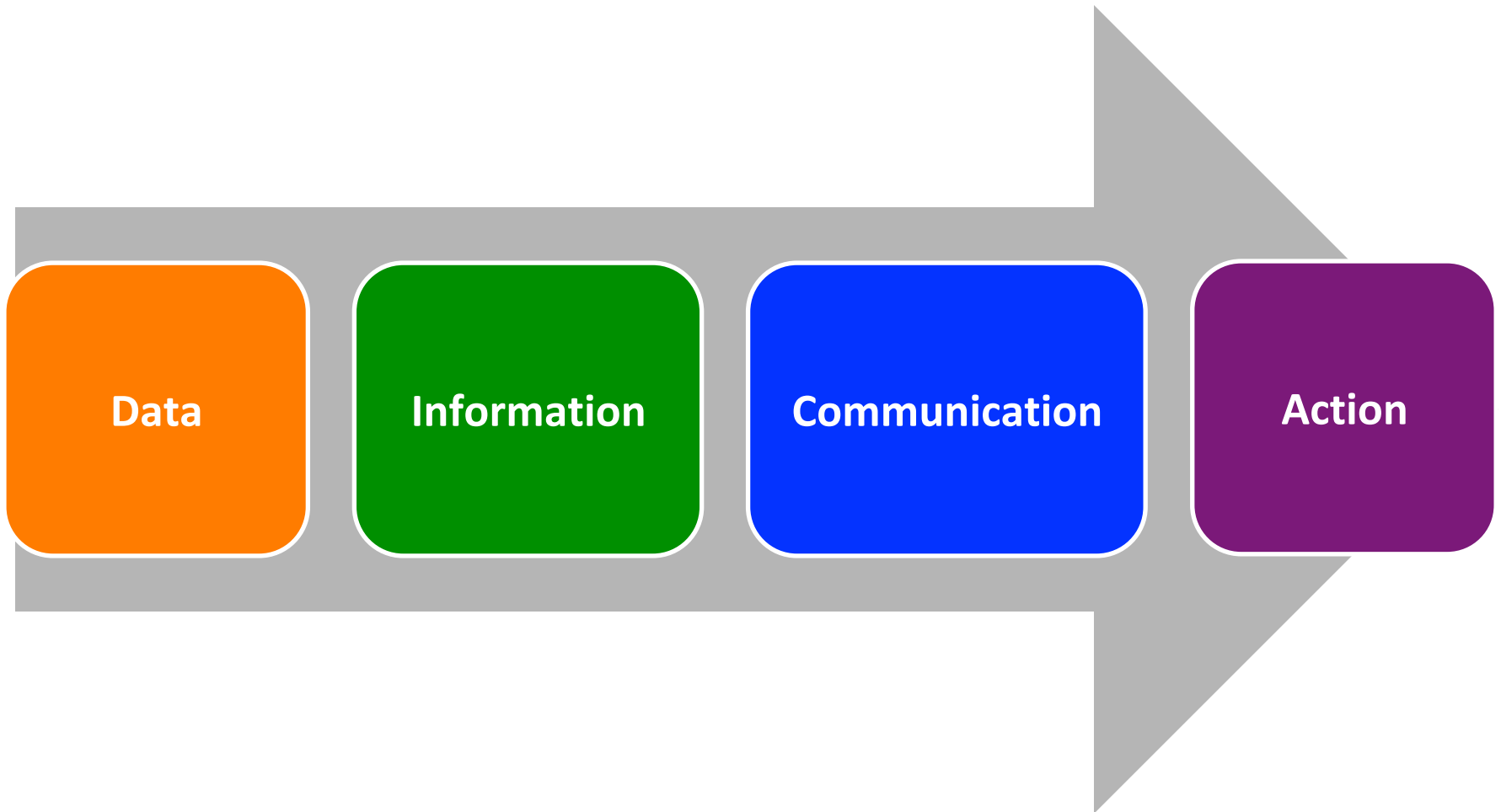
Part 2– Current State Analysis

Current State Analysis

Exercise - Scattergories/Categories

- Who can come up with the most things that start with a certain letter?

- Everyone will be given a *Category* and a *Letter*

- As a team, you will have 2 minutes to brainstorm all the things that fit the category and start with the given letter

For Example:

- **Category: Things we do in a typical day at the clinic**
- **Letter: W**

Things you could write down
- Wash hands
- Weigh patients
- Write down vitals
- Welcome patients to clinic

Round 1

As a team write down ideas for 90 seconds.

Category

Reasons patients miss their appointments

Letter
S

Round 2 – New Rules

Everyone <u>individually</u> will writes down ideas for 60 seconds. After the 60 seconds, you'll combine all your lists.

<u>Category</u>

Things that can be improved at a clinic

<u>Letter</u>

T

Foundation To Develop and Sustain Strong MAT Programs

Current State

- Current approach to MAT
- Learning what works and what could work better in your MAT programs

Aims

- Defining SMART aims for your project

Measures

- How do we know when we get there
- Specificity and relevancy
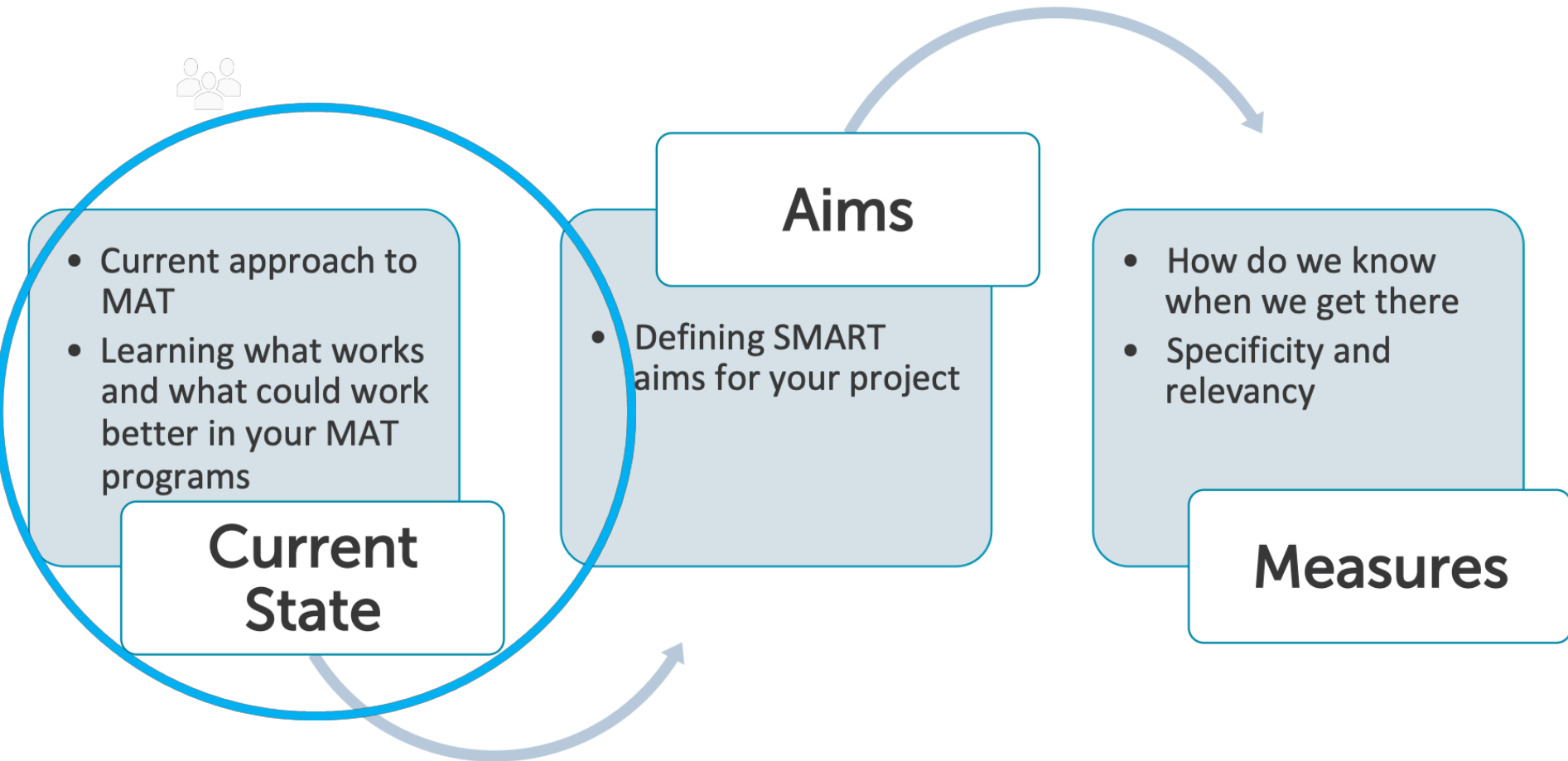
Current State Activities *To Date:*

Capability Assessment

Refining Your Core Team

Learning From Your Patients & Staff

Current-State Analysis – Looking Into The Processes and Systems

Sometimes we think the system is working, but we're only seeing one section of the entire flow. We may not be aware that there is room for refinements and improvement.

Determine the current state or the root cause for why we currently do something – try using analysis tools like:
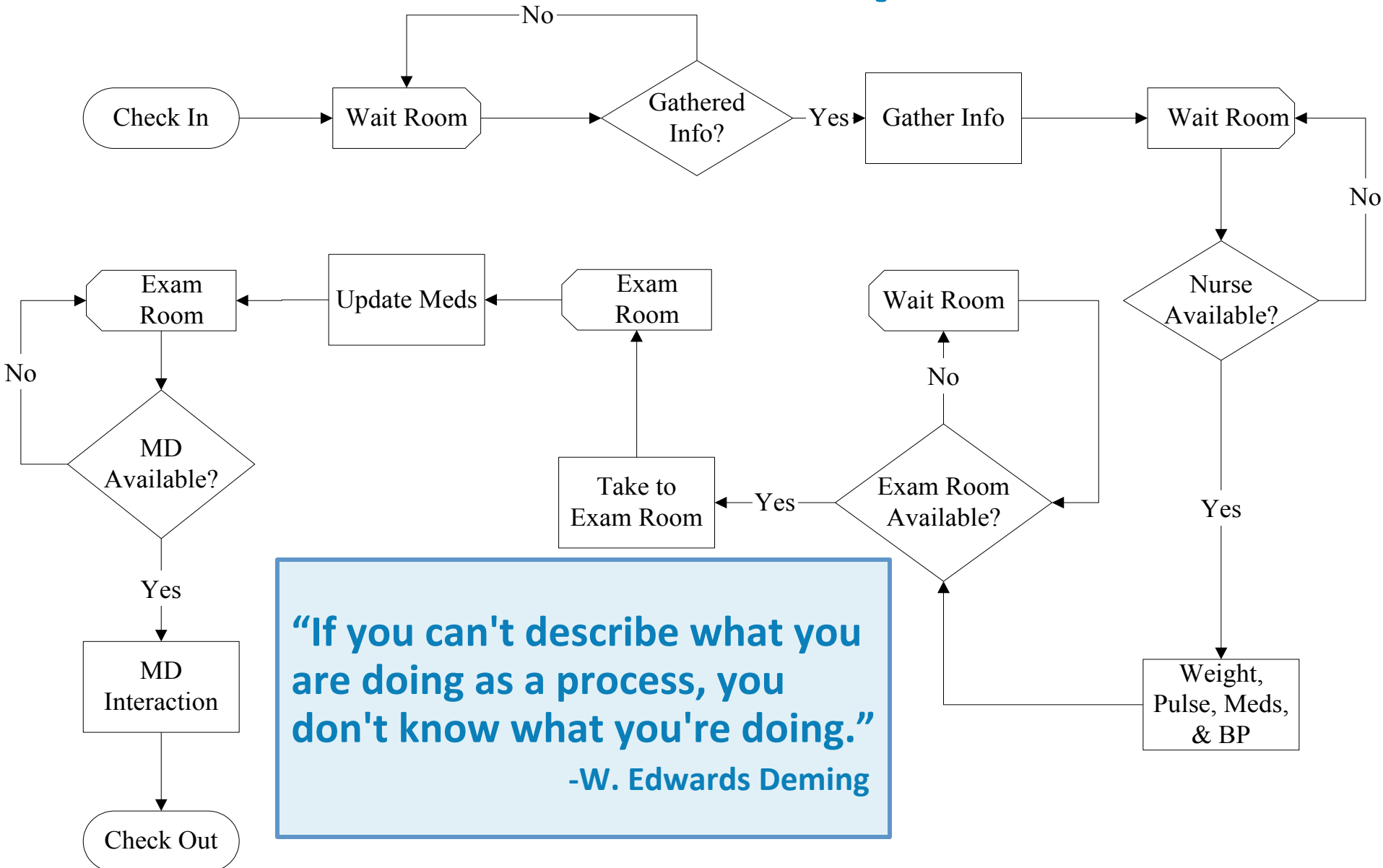
- **Workflow Mapping & Analysis**
- **5 Whys**
- **Fishbone Maps**

Workflow Maps

Workflow/Process Maps

"If you can't describe what you are doing as a process, you don't know what you're doing."
-W. Edwards Deming

Why Workflow Map?

- Provides a picture of a process in its <u>current</u> state
  - Who performs what task, and in what order
  - How long each step takes

- Illustrates a multi-level process
  - Staff have a better understanding of how their work impacts other activities and sub-processes.

- Onboarding tool and reference document

- Creates a structure and framework to assess workflows and develop new, improved processes

Process Flow Map Basics
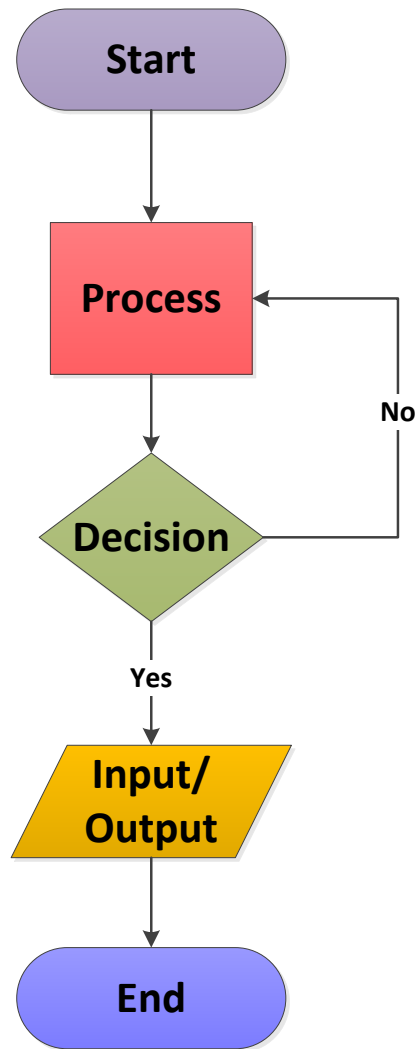
Start – flow charts begin with an oval to indicate the start of a process

Process -   Activity, task, or action taken

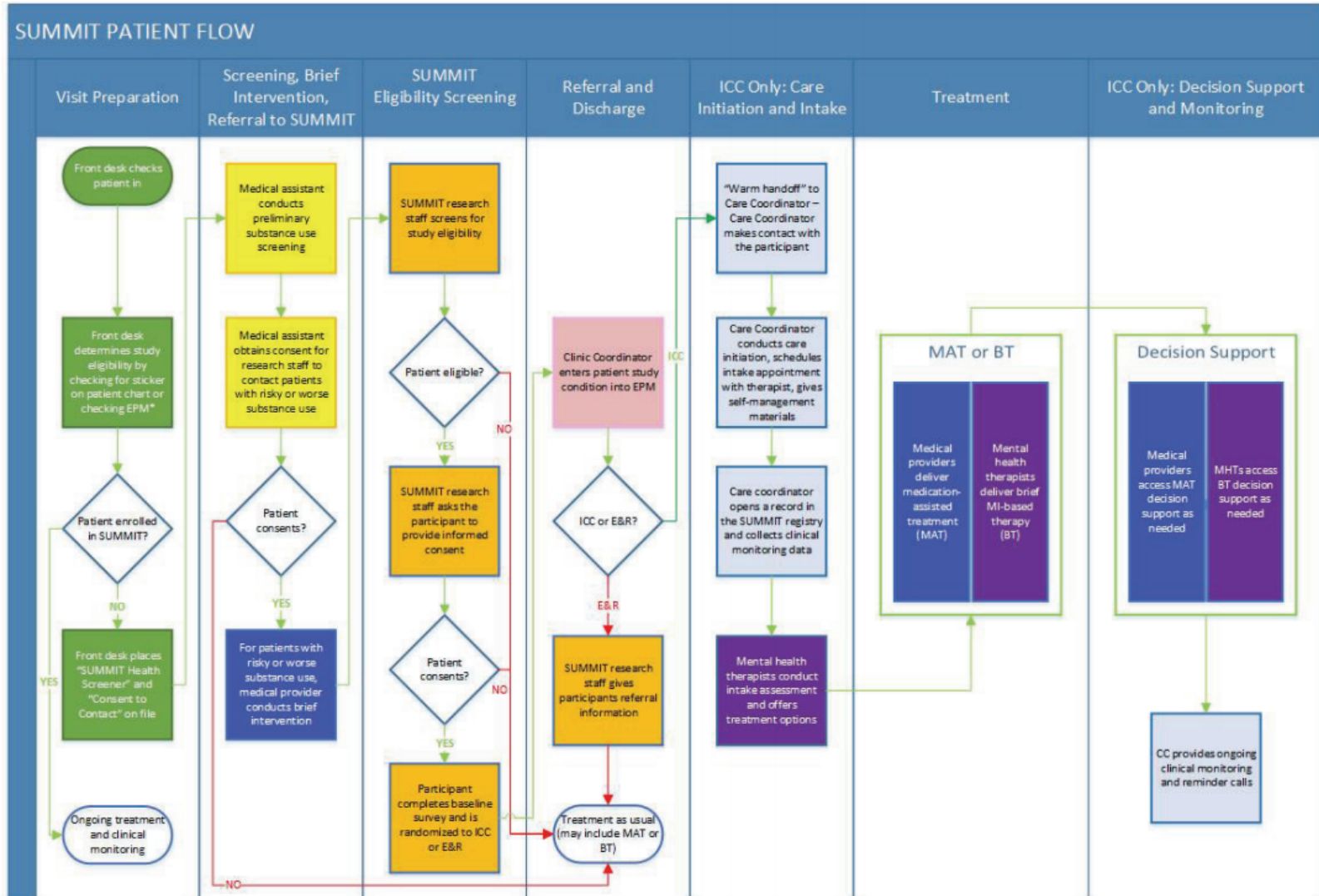**Decision** – A point in the process where a yes/no question is asked or a decision is made

Input/Output – Something added or created during the process (e.g., form, report)

End – an oval is used for the last step in a process
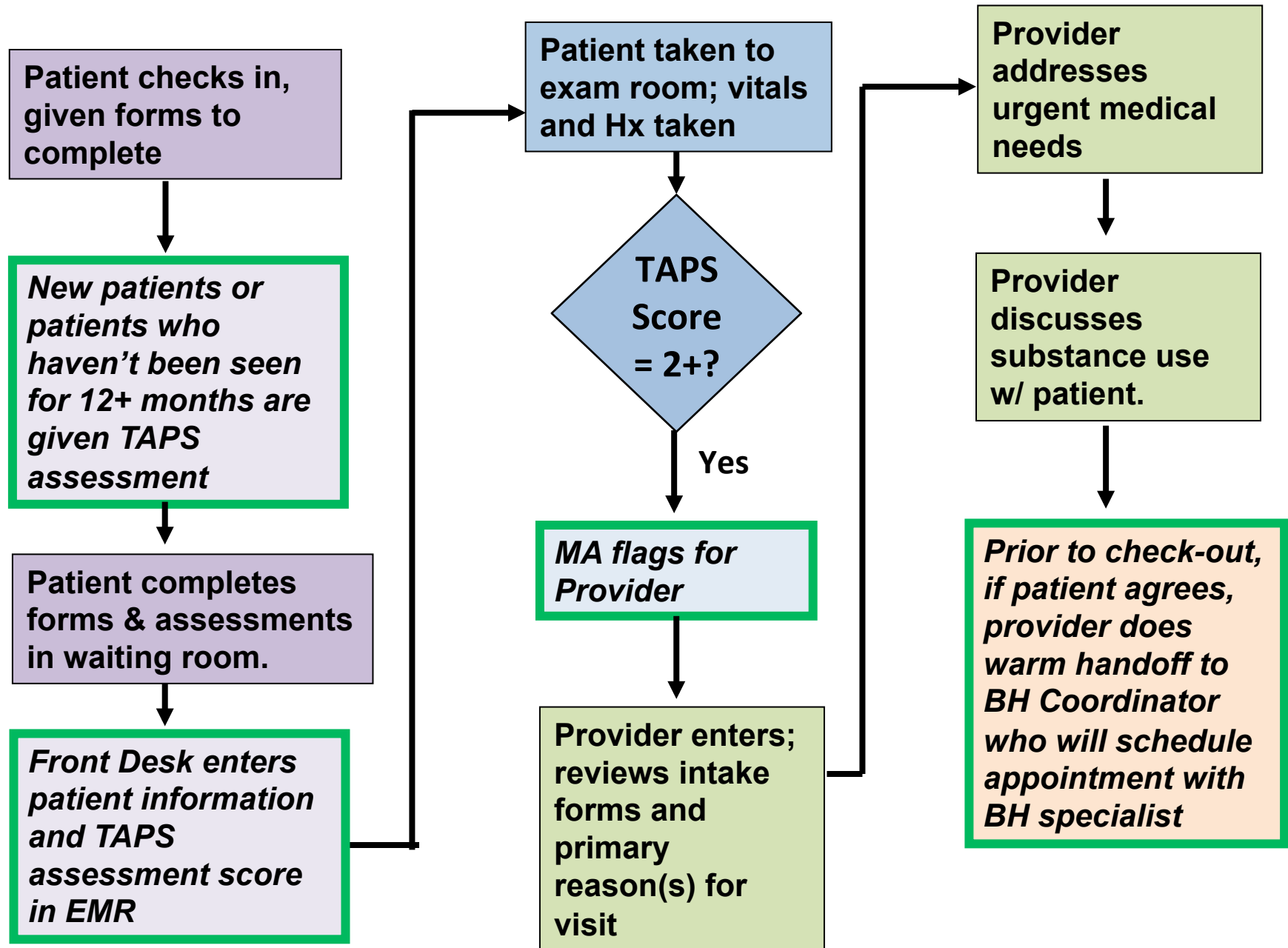
Start

Process

Decision

No

Yes

Input/
Output

End

Example Process Map w/ Swim Lanes

Overview of Patient Flow During SUMMIT

SUMMIT PATIENT FLOW
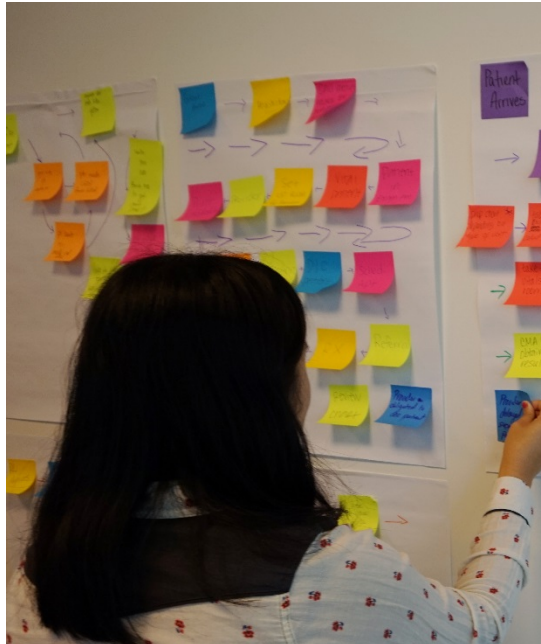
Using Process Maps for Current State Assessment and Diving Deeper

```
Patient checks in,
given forms to
complete
            │
            ▼
New patients or
patients who
haven't been seen
for 12+ months are
given TAPS
assessment
            │
            ▼
Patient completes
forms & assessments
in waiting room.
            │
            ▼
Front Desk enters
patient information
and TAPS
assessment score
in EMR
```

```
Patient taken to
exam room; vitals
and Hx taken
            │
            ▼
        ◆ TAPS
        Score
        = 2+? ◆
            │ Yes
            ▼
MA flags for
Provider
            │
            ▼
Provider enters;
reviews intake
forms and
primary
reason(s) for
visit
```

```
Provider
addresses
urgent medical
needs
            │
            ▼
Provider
discusses
substance use
w/ patient.
            │
            ▼
Prior to check-out,
if patient agrees,
provider does
warm handoff to
BH Coordinator
who will schedule
appointment with
BH specialist
```

Workflow Mapping – A Simplified Approach

– Flip Charts or Posters, Markers, and Post-its.

- *High touch – low-tech*

- Draw the overview of the process on flow charts or large pieces of paper

- Use Post-it notes to define each step – they are portable, and can easily be moved around

Instructions

- At each table – you have flip chart paper, post-it notes, and markers

- Using post-it notes – start with the patient arrives at the clinic for a primary care visit (first step).

- Add notes for the top 5 steps from arrival to in the room.

- Dive deeper – fill out below each note what happens at each stage

Instructions

- **Start** – Patient Arrives for a Primary Care Visit*
- **Step 2**…
  – Additional steps 2a, 2b, 2c…
- **Step 3**…
  – Additional steps 3a, 3b, 3c…
- **Step 4**…
  – Additional steps 4a, 4b, 4c…
- **End** – Patient is in the Exam Room

* Remember - Even if you aren't involved in these steps in your work – you've probably been a patient or helped a patient (family member, loved one)…

Tips for Creating Workflow Maps

Creating Workflow Maps @ Your Health Center

Step 1	**Review a few examples** of process maps that have been created at your health center or related to your project
Step 2	**Create a high-level map** (what are the main 5 to 10 steps that could summarize the entire process from start to finish) – *Get Staff Feedback*
Step 3	**Create Detailed Process Map** for parts of that workflow are likely to be problematic *and involve or confirm maps with staff that are actively a part of these workflows*

Creating Workflow Maps @ Your Health Center

Step 4 **Look for opportunities to improve:** areas with confusion, duplication or other bottlenecks:

- Defects

- Waiting

- Over Processing

- Variation

- Unclear Roles and Responsibilities

- Motion

- Searching

- Inventory

Workflow Map Tools

Numerous tools available to develop process maps

Software
- Microsoft Visio (discount available at TechSoup)
- Powerpoint/Word
- LucidChart, Creately, & MyDraw

Online Tools
- Draw.io – Free online tool, works with Google Drive
- Google Drawings
- Paid – Gliffy & Wireflow

Part 3:
PDSA's Small Tests of Change -
A Tool for Improvement

PDSA's and Small Tests of Change
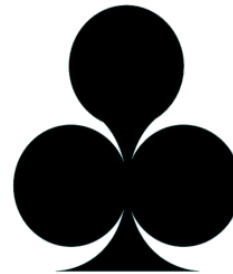
Order for the Card Deck

T o p

B o t t o m

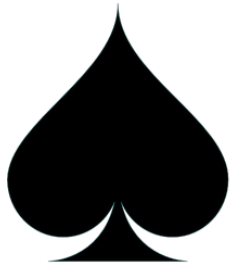A, 2, …Q, K　　A, 2, …Q, K　　A, 2, …Q, K　　A, 2, …Q, K

Order for the Card Deck

01:00

T o p

B o t t o m

♠ ♦ ♣ ♥
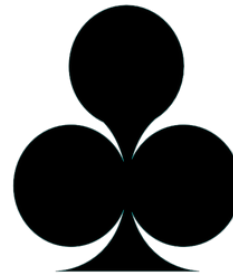
A, 2, …Q, K   **A, 2, …Q, K**   **A, 2, …Q, K**   **A, 2, …Q, K**
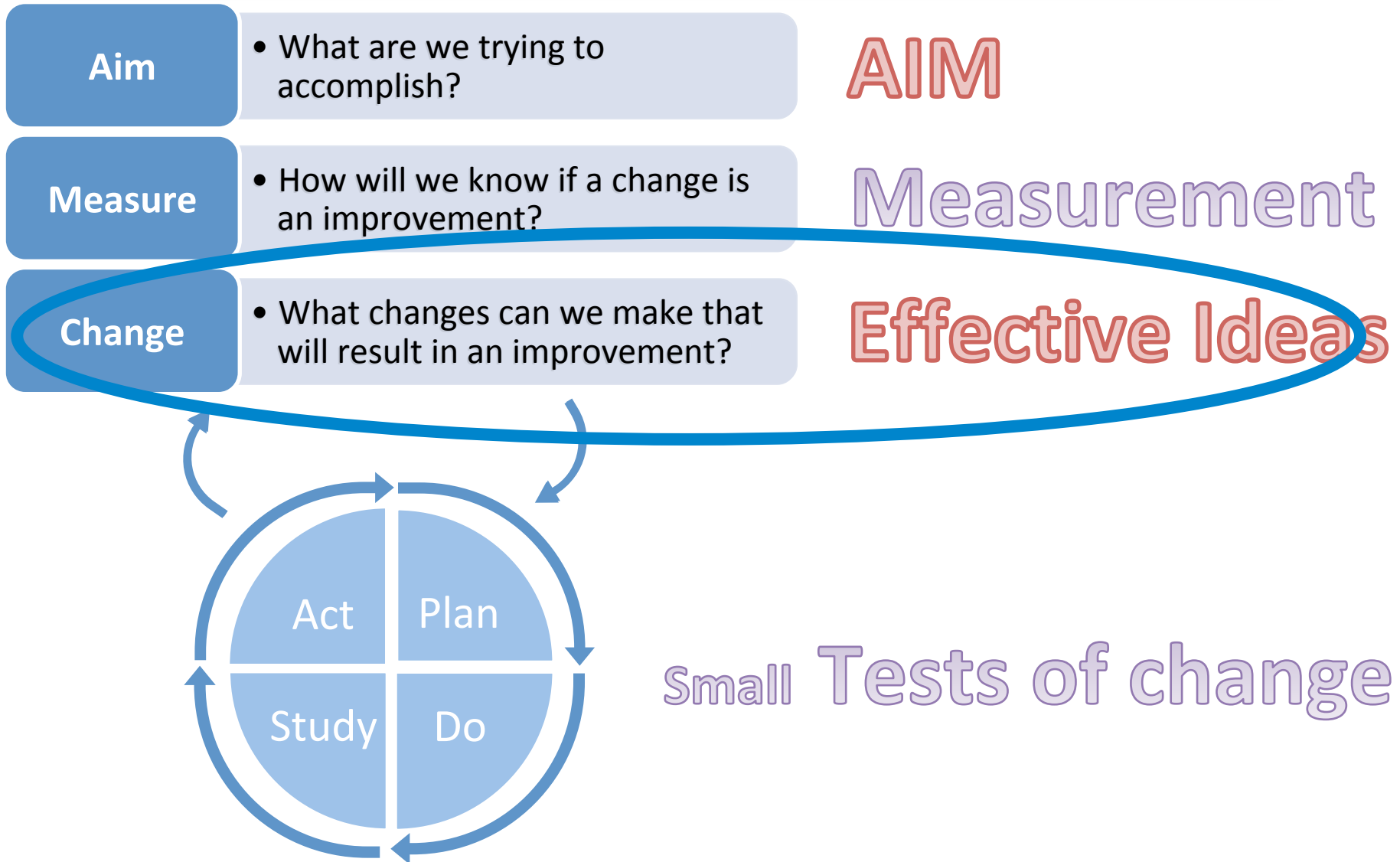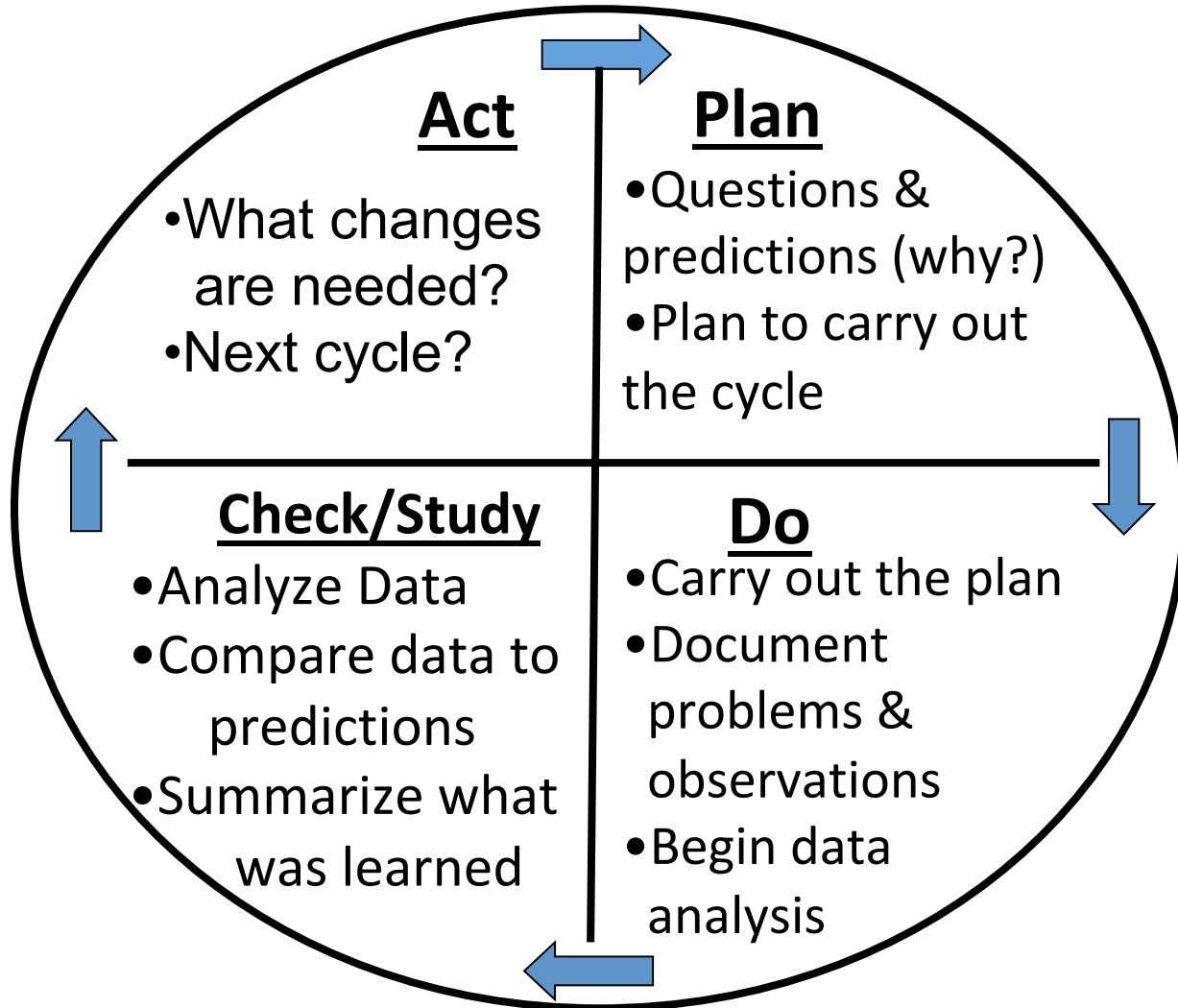
Debrief – Sorting Process

- What worked well?

- What did another team try that might work for your team?

- How can we sort the decks faster?

The Model for Improvement

Aim	• What are we trying to accomplish?
Measure	• How will we know if a change is an improvement?
Change	• What changes can we make that will result in an improvement?

AIM

Measurement

Effective Ideas

Act | Plan
Study | Do

Small Tests of change

PDSA – Rapid Cycle Improvement

Act
- What changes are needed?
- Next cycle?

Plan
- Questions & predictions (why?)
- Plan to carry out the cycle

Check/Study
- Analyze Data
- Compare data to predictions
- Summarize what was learned

Do
- Carry out the plan
- Document problems & observations
- Begin data analysis

Adapted from the Institute for Healthcare Improvement Breakthrough Series College.

The Model for Improvement and PDSAs essentially rely on:

Small Scale Experiments

Iterate & Iterate

Making Pancakes

➢ First few are never perfect.

➢ So we experiment or practice until we get it right

We already do PDSAs everyday

Why Experiment & Iterate?

- **Pancakes** – Our first drafts are never perfect

- **Opportunity** for learning from "failures" without impacting performance

- **Increase** your belief that the change will result in improvement

- **Easier** to take one or two small steps than one giant leap

- **Document** how much improvement can be expected from the change

- **Evaluate** costs and side-effects of the change
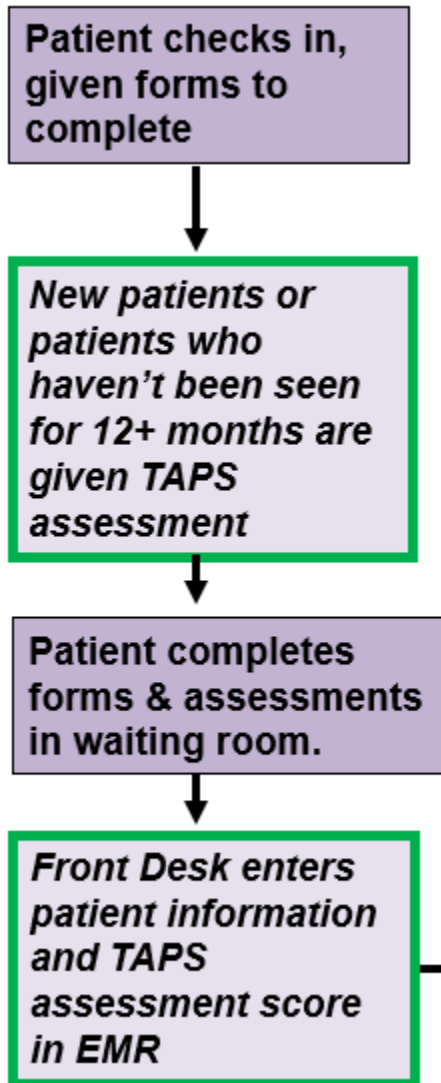
How Do You Decide What to Test?

PDSA's

Tips for Starting PDSA's

☑ Start with a tiny test (1 patient, 2-5 patients)

- o Then try it on more patients each time with each additional tests

- o Or try with another staff/team member – get feedback and ideas on how it can be improved

- o Or test for a longer period of time

PDSA's For Your ATSH Project Ide

Patient checks in, given forms to complete

↓

New patients or patients who haven't been seen for 12+ months are given TAPS assessment

↓

Patient completes forms & assessments in waiting room.

↓

Front Desk enters patient information and TAPS assessment score in EMR

Change Ideas:

1. New protocols for patients completing TAPS assessment (all new patients & annually for all patients)

2. Front Desk entering TAPS assessment score in EMR

PDSA's in Action:

Change Idea: All new patients and annual appointments are give TAPS Assessment form

PLAN: On Monday morning, ask Mary, Front Office representative, to distribute TAPS assessments to any new patient or patient that hadn't been seen in a year. Mary can look up this information in the EMR. Just do this for the first 2 hours of the day (8 am – 10 am)

PDSA #1

DO: As she's checking in patients, Mary looks up last patient appointments, and for eligible patients gives TAPS Assessment form with their paperwork.

STUDY: Mary felt stressed looking up this information in additional to everything else she has to do to check in a patient

ACT: (1) Add TAPS assessments to New Patient Packets

and

(2) In pre-visit prep, ask care teams to highlight patients who haven't been there for 12+ months to save Mary time

PDSA #2

DO: Monday evening, care team reviews list of upcoming appointments, and highlights patients who haven't seen provider >12 months. Mary uses list as she's checking in patients and gives TAPS assessment to highlighted patients.

STUDY: Process was a little smoother for Mary. A few patients were confused by TAPS instructions and Mary was unsure how to respond.
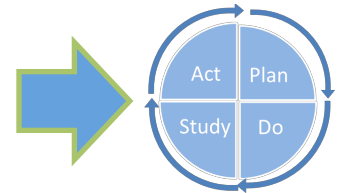
ACT: Edit the instructions on the form and give Mary sample scripts for when patients have questions.

LOOK! 2 PDSAs COMPLETED in 2 days!

Planning the Next PDSA's

- During the Wednesday morning huddle team discusses some additional PDSA's that they should test:

  - **Updating TAPS Assessment Instructions using more patient-centered language**

  - **MAT lead will work with Mary and Front Office manager to find scripts that appropriately answer questions on TAPS**

  - **Now that we're identifying patients, how can we do warm handoffs to the BH team to explore addiction treatment options**
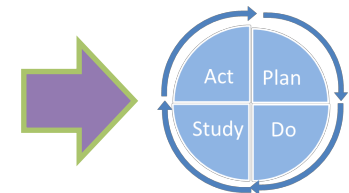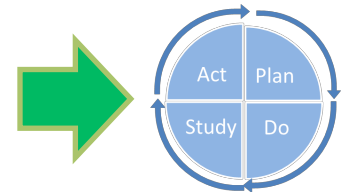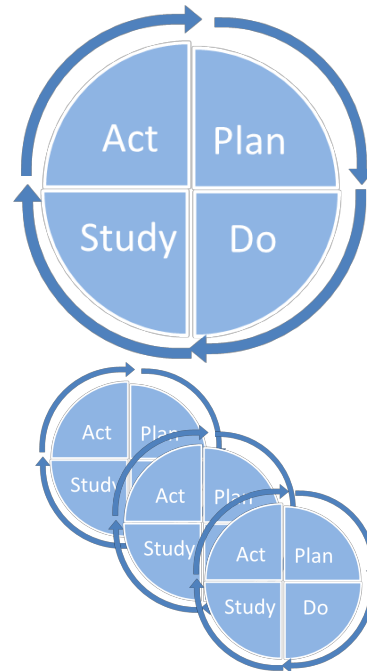
PDSA Series – Testing in Tandem

	Apr			June			Aug
TAPS Assessment							
Scripting – Front Desk							
Scripting – MA's							
Scripting - Providers							
Warm Handoff to BH Team							
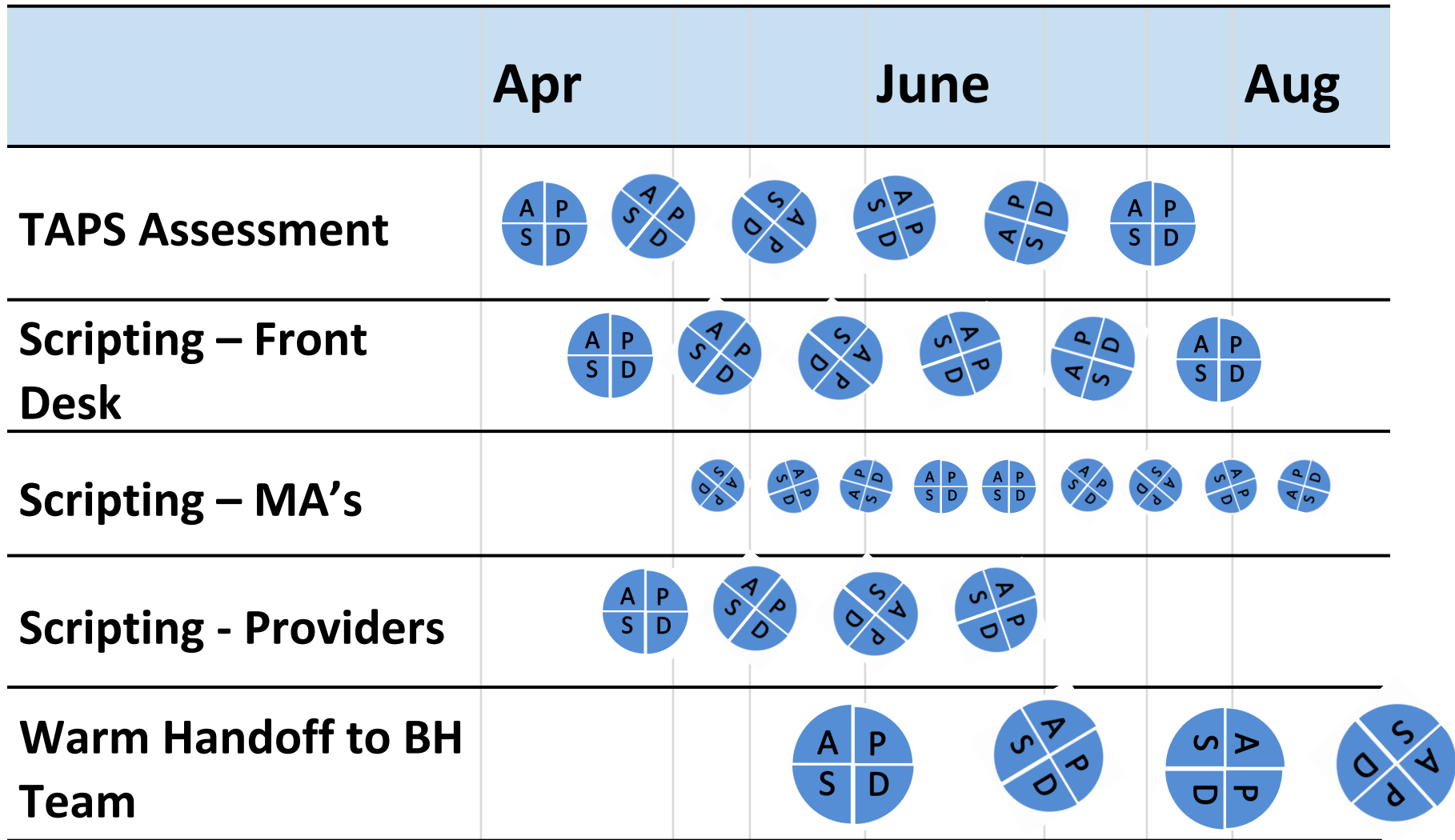
Change Ideas → **Run Experiments w/ Each of Your Change Ideas** → **Figure out what works, then Scale Up**
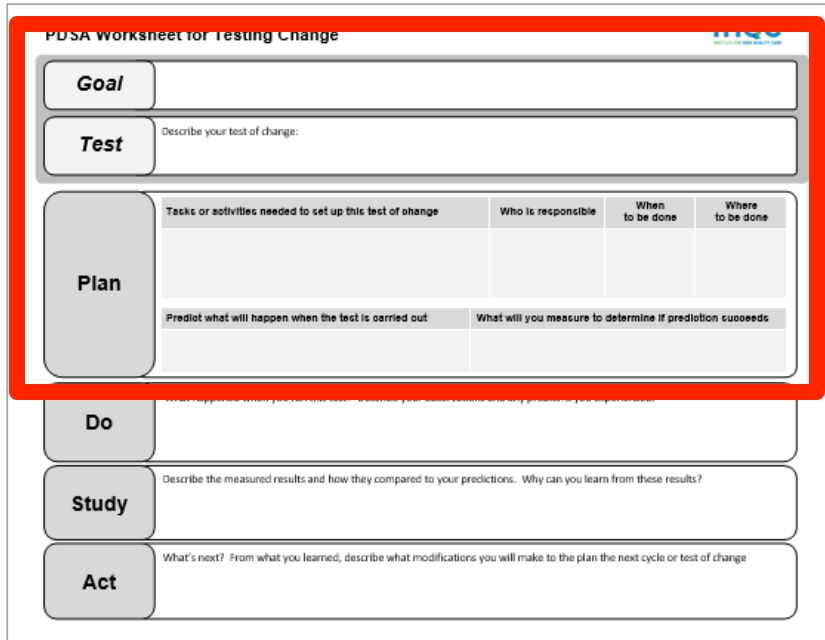
- SUD Assessments
- Scripting
- Warm handoffs to BH Team
- Staff training on stigma
- New workflows
- New processes

PDSA Checklist

- ❑ **Embrace the PDSA, small test of change mindset**
  - ○ "Tweak your week;" "What can we test tomorrow morning?"

- ❑ **Scale Down** - start with a tiny test

- ❑ **Collect useful data** during each test

- ❑ **Think a few tests ahead** & test under a variety of conditions

- ❑ **Reframe tasks into tests**

Activity – Planning for PDSAs in your ATSH project

- What PDSA Tests/ Experiments could **you** do in the next 2 weeks?

- Come up with the elements of the "**P**lan"

Reflections

- *Lingering Questions?*

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www.IHQC.org