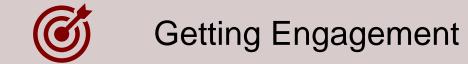


## Doing More With Less: Amplifying Your QI Efforts Through Capacity Building

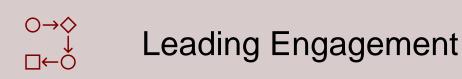
CQI Conference October 12, 2023 – Champaign-Urbana, Illinois

Rebecca Schedin, MPPA; Heather Himelhoch PhD, MPH

### Agenda



Systems Framework Capacity and Capability



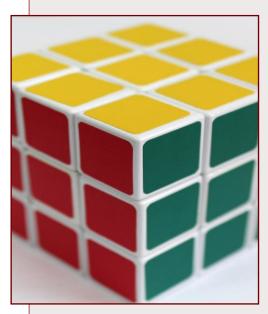
Where do we begin? Who is involved? How do we do it?

Maturing Your Engaged Audience

Supporting Development Leveraging Resources



## **Objectives**



By the end of this event, we should be able to:

- Understand the framework and characteristics of a learning health system
- Describe the relationship between **capacity and capability building** and a learning organization
- Discuss techniques for engaging teams
- Explore how to best leverage resources to amplify your QI efforts

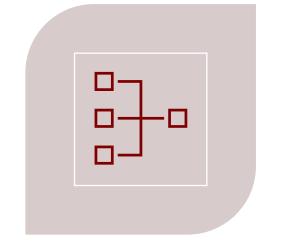




# In which domains do you experience the greatest challenges?

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### **Getting Engagement**





#### SYSTEMS FRAMEWORK

CAPACITY AND CAPABILITY



### "A bad system will beat a good person every time."

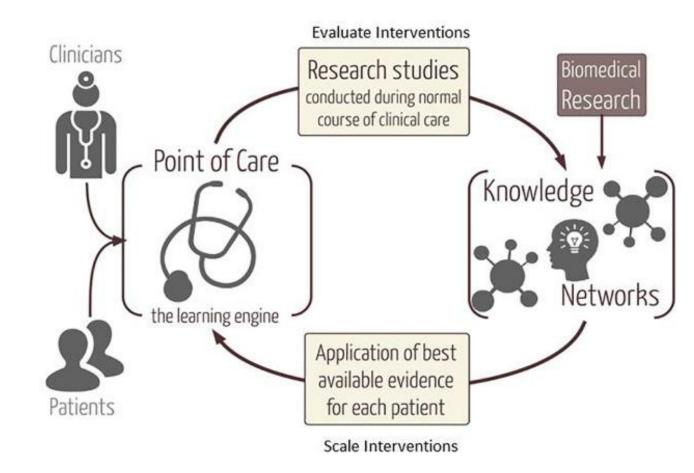
--W. Edwards Deming



## Systems-thinking to frame QI and engagement

#### A Learning Health System (LHS)

- Generates and applies the best evidence
- Discovery is a natural outgrowth of patient care
- Ensures innovation, quality, safety and value in healthcare

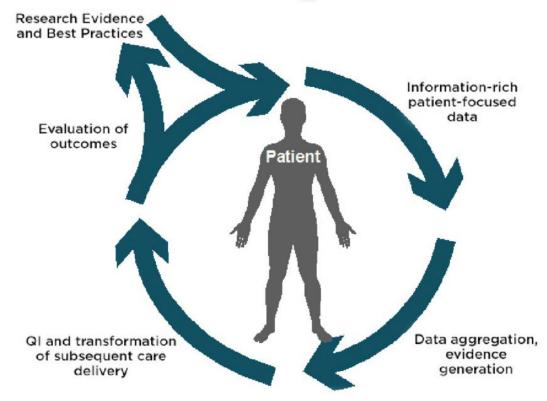




#### LHS: Rapid-learning and application

We learn from one another, evaluate our work, and share lessons learned in everything we do.

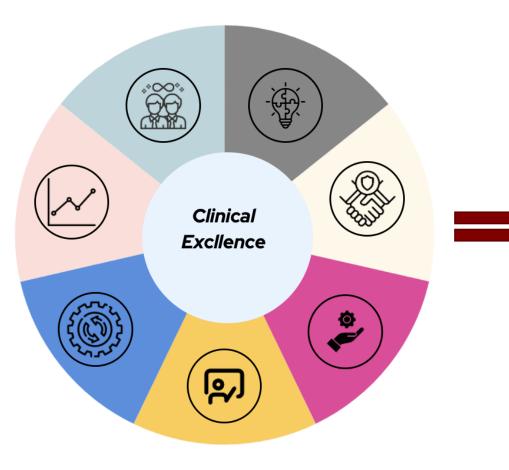
- We cultivate lessons learned and share them across teams
- We accelerate the cycle of improvement, leveraging existing work and insights across teams
- We **generate knowledge** about how to achieve outcomes as a byproduct of clinical performance improvement
- We strategically amplify lessons learned externally through peer-review, publications, speaking engagements, and participation in external collaboratives



Patient-Centered Rapid Learning Health System



## This LHS framework is fundamental to achieving (clinical) excellence



#### **Highly Reliable System**

strives to achieve error-free performance and safety in every procedure, every time - all while operating in complex, high-risk or hazardous environments through predictable and repeatable systems

**Approach and Tools:** Elimination of unwarranted variation, standardized care across the system

- Standard Work
- Clinical pathways
- Standardized templates, order sets
- Value Stream Mapping
- Kaizen Events

#### Learning Health System

progress in science, care delivery, and care culture align to generate new knowledge as an ongoing, natural byproduct of the care experience, and seamlessly refine and deliver best practices for continuous improvement in health and health care.

**Approach and Tools**: Build capabilities and capacity, learn, scale

- Learning communities (simulation)
- Mixed Methods Evaluation at local and system levels
- Implementation Science
- Dissemination strategies
- Embedded Pragmatic Research



## **Engagement in these frameworks can overcome QI barriers**

- » Sets organizational culture
- » Ensures Accountability to patients/clients
- » Ingests innovation into everyday processes
- » Places incremental change into a larger context
- » Engages everyone (not just formal QI roles)

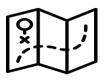


#### Improvement and Transformation requires workforce Capabilities and Capacities to implement and evaluate





Widespread **competency** in quality improvement across the workforce



Aligned priorities: both across the team and with the health system



Culture of **continuous learning** and sharing of lessons learned



Widespread **data literacy and access** to outcomes and process measures



Optimal adherence to **standardized** care delivery **processes** 



Collaborative, nimble, and empowered clinical performance leadership teams with clear **accountability and authority** 



Ability to make **rapid-cycle improvements** 



Ability to **de-implement** unnecessary practices and workflows



#### **Building Engagement through Capacity and Capability is Essential**



- Alignment of improvement priorities with job role priorities
- Integration of improvement into daily work
- Incentivization of improvement (personal, team level, organization level)
- Culture that encourages continuous iteration and improvement



- Clear *understanding* of the solution to be implemented
- Knowledge of improvement *methods*
- Data fluency
- Systems and processes built to support improvement



#### Leading Engagement



#### WHERE DO WE WHO IS INVOLVED? HOW DO WE DO IT? BEGIN?



## "If you want to go fast, go alone; if you want to go far, go together."

--most often cited as an "African proverb," though it's also attributed to Warren Buffet, Hilary Clinton, Cory Booker, Al Gore and others.





# How confident do you feel leading quality efforts in your organization?

(i) Start presenting to display the poll results on this slide.

## **Leading Engagement**

While confidence and skills are great, leading successful transformation begins with **culture and leadership** 



Shared principles and practices help individuals, teams, and systems evolve and excel



Thoughtfully **engaging and equipping all team members** in advancing transformation builds capacity and capability



## Where do we begin? E<sup>4</sup> Leadership



**Equity** is the foundation of E<sup>4</sup> Leadership

We all **Engage** in improvement efforts

We **Evolve** to meet diverse and changing needs

We **Excel** at using our expertise to remain **At the Forefront** in all we do



E<sup>4</sup> Leadership supports our team in creating innovative solutions for the patients of today and tomorrow

Goal: Leverage E4 Leadership to support and develop 12,000 inter-dependent problem solvers

#### Leading Engagement through Continuous Improvement

- Plan-Do-Study-Act is an approach of rapid experimentation based in the scientific method
  - Bias for action and tolerance for unexpected outcomes
- A system of daily management (MDI) emphasizes incremental improvement every day
- E4 Leadership tools and methods provide a common language to accelerate improvement across the organization





## Managing to Outcomes — Which Ones?

A small sampling of what an academic medical center manages:



Not to mention....

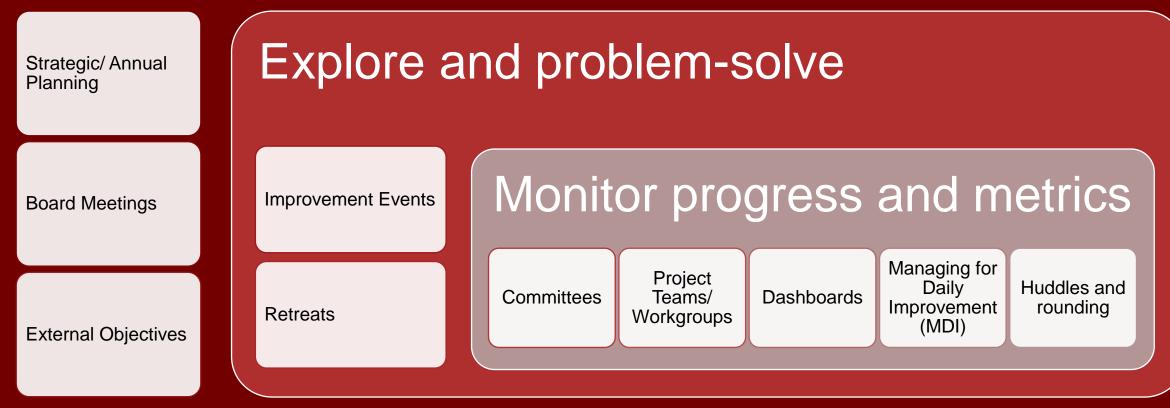
- Stakeholder feedback (patient surveys, online reviews)
- Employee satisfaction
- Clinical productivity and benchmarks
- Risk and Safety
- Grants and awards
- Value-based care contracts
- New programs
- Electronic Health Record (EHR) Data

## How do we know what initiatives to focus on?

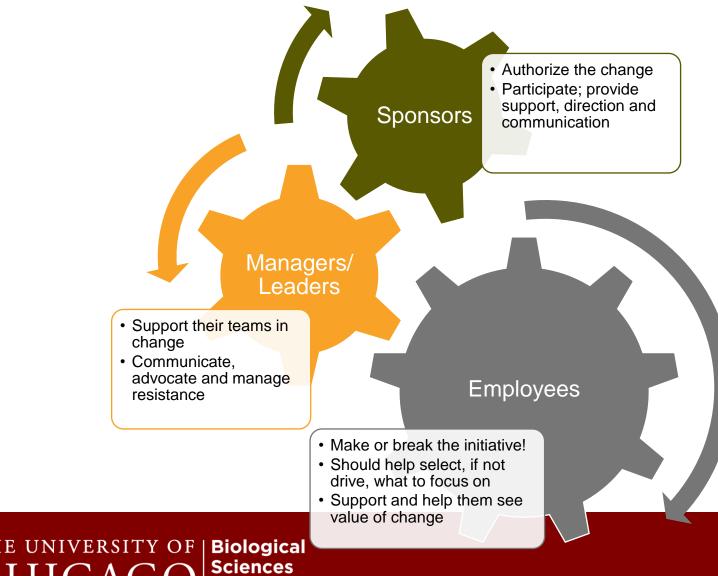


## Where do we begin? Forums for Prioritizing and Managing

## Set higher-level priorities



## Who is Involved? Stakeholders and Roles



Division

#### **Enabling Roles**

*Change Practitioner* – Apply structure and intent to change, enable and equip other roles through facilitation of change

*Project Manager* – Focus on designing, developing, and delivering technical solution by moving things forward

#### **Enabling roles should:**

Collaborate and help identify and support core team

Build capability and capacity

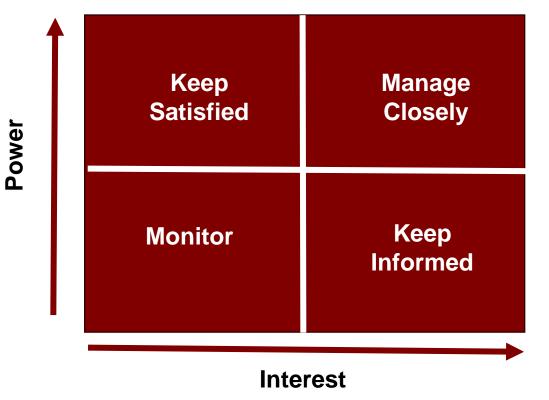
## Who is involved? Identifying Stakeholders

- Activity Part 1
  - » Pick a current or upcoming project
  - » List as many stakeholder roles as possible
  - » Share



## Who is Involved? Engaging Stakeholders

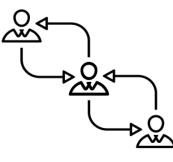
### Activity – Part 2 - Stakeholder Power-Interest Matrix



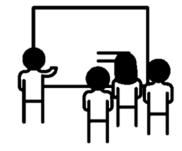
THE UNIVERSITY OF Biological Sciences Division

- Think about your identified stakeholders in terms of how much *Interest* and *Power* they have in the project
- Put each of your identified stakeholders in one of these 4 categories
- Think about possible forums you might leverage to engage each group
- Share and provide feedback

## How do we do it? Managing for Daily improvement (MDI)



Managing for Daily Improvement, or MDI, is one of UCM's critical management processes for information flow, escalation, and problem solving



MDI is a structured system **conducted through daily team huddles,** with units, departments, and cross-functional teams



MDI utilizes boards to monitor metrics, team readiness, and project status





All team members are **trained in approach** and lead huddles and coach teams on problem-solving and escalation

#### How do we do it? Tools to Make Processes and Progress Visible

CareLink Team

Local Research Staff Person

- Project Charters (e.g., A3)
- Dashboards (e.g., MDI) and reports
- Process/Value Stream Maps
- Project Management Tools
  - Action logs, Gantt charts, Project Boards, SmartSheet
- Report Outs

PD w	Length of Stay	•		-			stribution Dashb	oard L	,					
Clinical Faculty Dashboard								THE U	HE UNIVERSITY OF Hicago biological sciences					
	Mix ①							•						Filters
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	Manth End Olars						F							
	Month End Close													
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INICIIICOL	Payroll AP	Sam Gonzalez	In Progress	01/10/23 01/20/23	01/20/23	Enter Roadblock Details	P P F	Payroll	_	A M	P	AR		
	Payroll AP AR	Sam Gonzalez Sandi Cosler	In Progress Roadblock	01/10/23 01/20/23 02/15/23	01/20/23 02/01/23	Enter Roadblock Details		Payroll		A	P	AR		



Welcome to E4 Leadership Report Out

Please remain on mute with your camera on

This week's report out features:

- Urban Health Initiative
  - Improving show rates to the UCM-Provident neuro clinic through CHW collaboration

#### Cancer Services

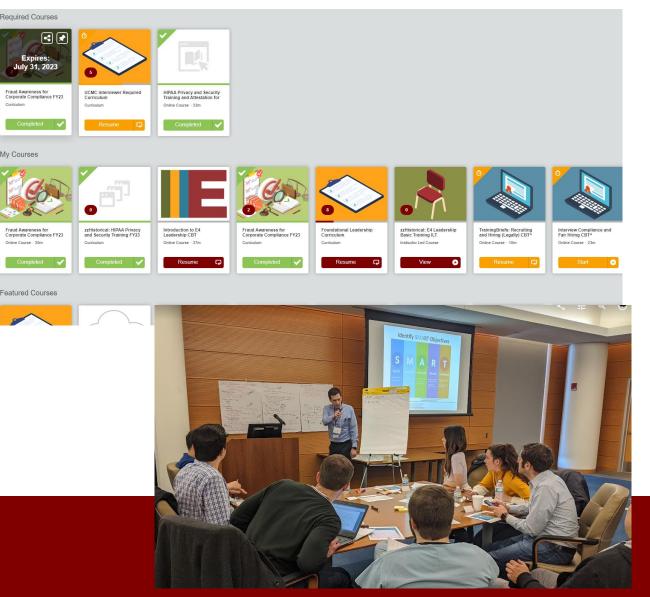
Check-out process Kaizen





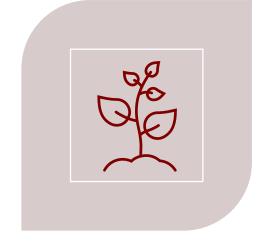
#### How do we do it? Tools to Help Develop Capabilities

- Internal trainings
  - » Introduction to E4 Leadership
  - » Managing for Daily Improvement Basics & Advanced
  - » Advanced Problem Solving
  - » Quality & Patient Safety Fundamentals
- Collaboratives
  - » Lunch & learns
  - » Affinity groups and committees
- Leveraging external knowledge
  - » School of Medicine
  - » Clinicians
  - » Other departments, organizations, industries





#### **Maturing Your Engaged Audience**





#### SUPPORTING DEVELOPMENT

#### LEVERAGING RESOURCES





# Where do you turn for support in the work you do?

(i) Start presenting to display the poll results on this slide.

#### **Mentorship and Sponsorship**

- Actively seek out opportunities
- Can be formal, informal, or bi-directional
  - Professional Devolvement
  - Emotional Support
  - Accountability
  - Access
  - Institutional Knowledge

#### **SPONSORS ACT**

#### Sponsors...

- connect protégés to career opportunities.
- advocate for protégé's advancement.
- support risk-taking.
- publicly endorse protégés.
- expect high performance in return.
- help protégés confront and interrupt bias.

#### MENTORS ADVISE

#### Mentors...

- reduce isolation and stress.
- navigate unwritten rules.
- build confidence.
- provide tips and strategies.
- promote inclusion to company.



## **Capability and Capacity Building Resources**

#### No / Low Cost

- Mentorship and hands-on collaboratives
- Staff rotations and rounding
- Internal training opportunities
- Student engagement
  - Internships
  - Masters' projects
- Affinity groups and learning collaboratives
- Auditing classes
- Webinars and workshops
- Publicly available trainings (IHI, AHRQ, etc.)
- CQI Conference!

#### Some Cost

- Certifications
  - Lean/6 Sigma (Belts)
  - Change management
  - Project management
  - Healthcare quality orgs
  - Data visualization
  - Informatics and analytics
- Degrees
  - Public Health
  - Administration (social service, policy, business)
  - Health Informatics
  - Change Management, Program Evaluation
- Professional organization memberships, conferences



### Maturing Your Engaged Audience: Tips and Considerations

- Different learning styles and approaches
- Your team's needs and strengths
  - » Do you need capacity, capability?
  - » Who has something to teach?
  - » What skills and knowledge can you leverage?
- What learning and skills are most valued in your field
  - » Six Sigma/Lean
  - » Change, Project Management
  - » Institute for Healthcare Improvement
  - » Degree
  - » Other?





Biological Sciences Division

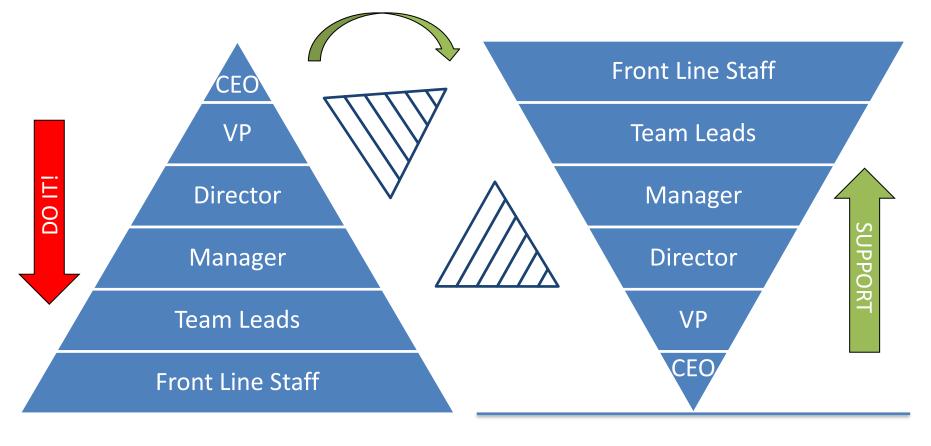


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## Appendix



#### **Examining Roles in Leading Engagement**



**Traditional Management** 

E<sup>4</sup> Leadership



#### What does MDI look like?





#### **Benefits to MDI**



Monitor department **metrics** and determine **progress** 



Issue resolution through escalation



Identify gaps and issues through visual management



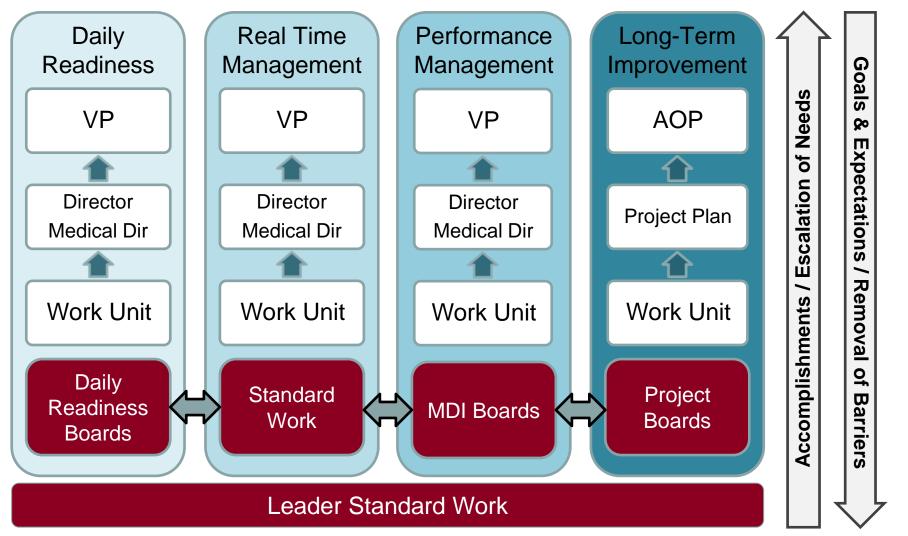
Drives **accountability** through ownership of **countermeasures** 



AT THE FOREFRONT

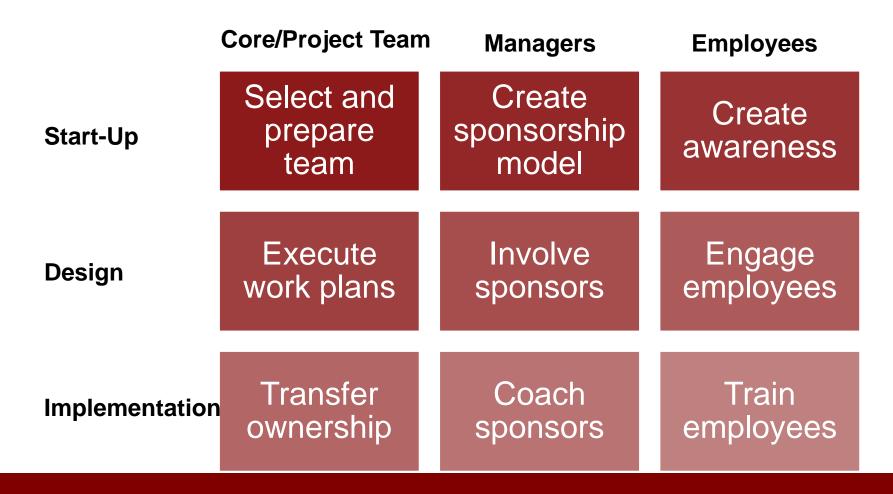
**JChicago** Medicine

#### How We Do It - Managing for Daily Improvement (MDI)





During change, engage stakeholders through the following activities:





Adapted from PROSCI Best Practices in Change Management 11th Edition, p. E23

## How do we do it? Tracking and Transitioning Projects

Tracking					
Let Data Guide You	Iransitioning				
<ul> <li>Utilize Tools for Visually Tracking Progress</li> <li>Small tests of change</li> </ul>	Decide when it's time to close				
(and adjustments)	Sustainment/ metric plan				
Leverage Resources Communicate Progress	Hand off to process owners and integrate				
	Share results and successes				
	Let Data Guide You • Utilize Tools for Visually Tracking Progress Small tests of change (and adjustments)	Let Data Guide YouTransitioning• Utilize Tools for Visually Tracking ProgressDecide when it's time to closeSmall tests of change (and adjustments)Decide when it's time to closeLeverage Resources Communicate ProgressSustainment/ metric plan Hand off to process owners and integrate Share results and			

