Getting started with your quality improvement project

Point of Care Quality Improvement (www.pocqi.org)

Thursday, 31st May 2018

Participants to use 'chat box' to introduce themselves and share their questions and QI project draft aim statements.







Guidelines

- Please use the chat box to:
 - ✓ Introduce yourselves
 - ✓ Ask questions
 - ✓ Contribute throughout the session
- ✓ All participants please **remain muted**.
- √ To speak please message in the chat box and we will unmute you
- Please be patient with the technology
- Any connection problems
 - Send Email ontopaiims@gmail.com
- Participate, Share and Learn
- Twitter #QISEA

Webinar Roles

Speaker



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Moderator



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The only constant is change

To improve is to changeTo be perfect is to change often

- Winston Churchill

4 step approach to Quality Improvement

Point of Care Quality Improvement #POCQI

Identifying problem

Forming Team & Aim Statement

Analyzing and measuring quality of care

Developing and testing changes PDSA

Sustaining improvement

STEP 1: Learning Objectives

You will learn:

- 1. How to review data to identify a problem
- 2. How to prioritize which problem to work on
- 3. How to form a team to work on that problem
- 4. How to write a clear "aim statement"

Identifying a problem to solve

- Data-based decision: Review local health facility data and identify gaps
- Choose simple, easy to fix and amenable to change
- Value for patient outcome
- Short turn about time: easy success is motivating
- Avoid long-term projects, projects with less frequent event rates or those which involve follow up

St. John's Hospital Experience

Core team – reviewed annual data

- Neonatal mortality rate 12/1000
- Infections, preterm, asphyxia
- Reduce nosocomial sepsis, NMR
- Reduce Inborn asphyxia
- Consent forms not filled up before procedure
- X rays turn around time high
- Preterm babies had lactation issues

Sample Birth Register in a district health facility

		MM)	(24 hr)	given in 1 st min			drying	clamping	(DD/MM)	, Referred)
1	Gini	15.06	00.45	٧	3400	35.4	٧	٧	16.06	Home
2	Meenu	15.06	06.30		2460	34.5		٧	17.06	Home
3	Gita	15.06	14.30		2350	35.2			16.06	Home
4	Ranchu	16.06	09.20	٧	3310	36.8	٧	٧	17.06	Home
5	Tina	16.06	17.50		2670	37.1	٧	٧	17.06	Home

2740

2851

2780

2618

2651

34.9

36.8

37.1

35.8

37.4

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Discharge

18.06

19.06

19.06

23.06

24.06

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Date

Discharge

(Home, Died

Referred

PPH

Home

Home

Referred PPH

Home

SI. No.	Name B/O	DOB (DD/ MM)	birth (24 hr)	tonic given in 1 st min	Birth Wt (grams)	Temp °C at 1 hour	Imme- diate drying	Delay-ed cord clamping
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02.42

08.16

12.25

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22.10

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17.06

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Puja

Kiran

Meera

Saroj

Kirti

Sample Birth Register in a district health facility

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given in

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tonic

Birth Wt

(grams)

Temp °C

at 1 hour

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Delay-ed

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cord

Discharge

(DD/MM)

19.06

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24.06

Date

Discharge

, Referred)

(Home, Died

PPH

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SI.

No.

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Kiran

Meera

Saroj

Kirti

18.06

19.06

19.06

19.06

08.16

12.25

18.20

22.10

Name

B/O

DOB

(DD/

MM)

Time of

birth

(24 hr)

				1 st min						
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2780

2618

2651

Prioritisation Matrix

Possible aim	Important to patient outcomes (1-5)	Affordabl e in terms of time and resource s (1-5)	Easy to measure (1-5)	Under control of team members (1-5)	Total score (4-20)
Uterotonic given within 1 min	4	5	5	5	19
Management of PPH	5	4	2	3	14
Immediate drying of the baby	5	5	4	5	19
Delayed cord clamping	4	4	3	4	15
Low temperature at 1 hr <36.5 degree C	5	4	5	5	19
Decrease in low birth wright <2500 grams	5	3	5	1	14

Prioritisation of problem – PICER!

- P Problem
- I Impact /Value for patient outcome
- C Under control of team
- E Easy to do
- R Resources required

St. John's Hospital Experience

■ Reduce sepsis, NMR

Problem Impact√ Control× Easy× Resources×

Reduce Inborn asphyxia

PI CX EX RX

Consent forms not filled up

P I? C ✓ E ✓ R ✓

X rays turn around time high

P | ? ✓ C ✓ E ✓ R ✓

Preterm moms lactation issues

P I ✓ C? ✓ E × R? ✓

Opinion Poll

Poll: Choose the first QI project for your NICU team

- A. Reducing retinopathy of prematurity
- B. Early initiation of KMC in NICU
- C. Improve exclusive breastfeeding rates at 6 months in normal term babies
- D. Increasing antenatal steroid coverage

Opinion Poll Results:

Poll: Choose the first QI project for your NICU team

- A. Reducing retinopathy of prematurity
- B. Early initiation of KMC in NICU
- C. Improve exclusive breastfeeding rates at 6 months in normal term babies
- D. Increasing antenatal steroid coverage

Select your TEAM!

Look for volunteers who are

Enthusiastic

Involved

Influential

Select your team

Identify who should be in the team:

Need people from every level

Even parents, patients, family & community members

Assign roles

- Leader
- Recorder
- Communicator
- Data manager

Teamwork - Importance

Healthcare is provided in complex environment by range of people in the hospital

 Front line staff identify problems and generate ideas to resolve them

- Participation improves ideas, buying-in & reduces resistance to change
- Accomplishing things together increases the confidence of each member

St. John's Experience

Consent forms

Team: 2 Resident, nurse, 1 parent, consultant, In charge

nurse

Reduce X ray time

Team: Resident, nurse, aide girls, X ray technician,

consultant, In charge nurse

Early colostrum < 6 h for NICU babies</p>

Team: Labor room/OT nurse, Resident, NICU nurse,

consultant - Neo & OB, In charge nurse



Team building

5-7 - Multidisciplinary composition

Three elements:-



- 1. System leadership: At least 1 person with authority
- 2. Clinical expertise: Expert knowledge in project
- 3. **Project champion**: driving day to day progress

Team flexibility: constructed to fit the specific problem

Opinion Poll #2

For your QI project on reducing waiting time in pediatric OPD, who should definitely be part of your team?

- A. Chief of hospital
- B. Head of Pediatric Department
- C. OPD registration nurse
- D. Chief of nursing services

Opinion Poll #2 Results:

Writing an aim statement: SMART

Aim statement answers the questions

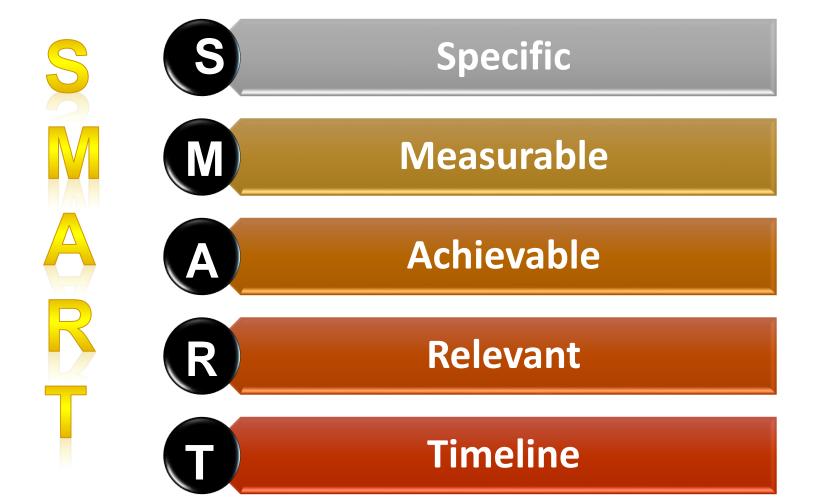
"What"-outcome or process that needs improvement

"Who"-patient group that will be affected

"How much"-change from baseline to the desired level

"By when"-when you plan to achieve your desired goal

SMART Aim Statement



Structure of aim statement

Follow the structure:

We aim to (what do you want to achieve)
in (which patient group)
from (what is the current performance)
to (what is the desired level of performance)
by (how long)

Example: Good Aim Statement

Problem: All babies are not dried immediately after birth

We aim to (increase the standard practice of immediate drying)

in (all normal births)

from (current level of 70%)

to (100%)

by (one month – from 1st July to 30th July 2018)



To increase kangaroo mother care in low birth weight babies

To increase kangaroo mother care in low birth weight babies from current average of 4 hours to atleast 8 hours in 2 months from June 1st to Aug 1st 2018



To establish skin to skin contact after delivery in low risk mothers admitted in Labour Room

To establish skin to skin contact immediately after delivery for atleast one hour from current 0% to 25% in two weeks (from July 1st to July 15th) in low risk mothers admitted in Labour Room



NICU will give 100 % of typed discharge summaries at discharge

NICU will give 90% of VLBW babies typed discharge summaries at discharge from the from current level 0% by 2 months (from July 15th to Sept 15th)

Opinion Poll #3

Is this aim SMART?

We aim to improve exclusive breastfeeding rates at discharge to 90% among all infants at our hospital.

- A. Yes
- B. No

Opinion Poll #3 Results

No.

Let us make it SMART!

• • • • • • •

We aim to improve exclusive breastfeeding rates at discharge among infants born in our hospital from current 65% to 90% by 2 months (from 15th July to 15th September)

STEP 1: Learning Objectives

- 1. Review data to identify problems
- 2. Prioritize which problem to work on
- 3. Forming a good team
- 4. How to write a SMART "aim statement"

Thank you!

Please share the problems you wish to solve and any draft aim statements in the chat box!

4 step approach to Quality Improvement

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Next Steps

- ☐ Contact your Coach. If you don't know who your coach is please email us or leave us a note in the chatbox.
- ☐ Start / Continue QI work and document

- ☐ Get your POCQI certificate (workbook.pocqi.org)
- ☐ Email ontopaiims@gmail.com to share your QI projects: Next webinar Wednesday, 13th June 2018

Thank you!

Open for Questions now!

- Please use the chat box to:
 - ✓ Ask questions
 - ✓ Contribute



- ✓ All participants are muted currently.
- ✓ To speak message in chat box!

Thank you for your participation!

Contact: ontopaiims@gmail.com

"Improving the quality of maternal, newborn and child health in the WHO South - East Asia region"

Next webinars for Hospital teams to share QI projects:

Wednesday, 13th June 2018





