

Intro to Quality



A series committed to assisting the HOPA membership along the quality improvement journey

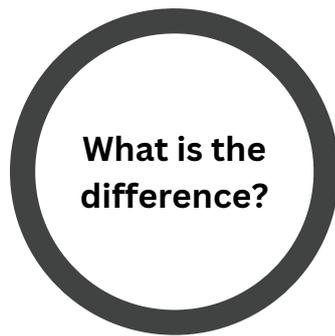
Why should hematology/oncology pharmacists care about quality?

The delivery of cancer care is challenging and continues to become more complex. Faulty system design and system performance are the primary root causes of patient safety events and inefficient use of resources. Front-line pharmacists have intimate knowledge of these systems. Best practices in system redesign depend on the involvement of multidisciplinary teams, including front-line pharmacists.

Definitions:

Health Care Quality	The degree to which health care services for individuals and populations increase the likelihood of desired health outcomes and are consistent with current professional knowledge.
Quality Measures/Metrics	A specific quantitative measure that provides information about an observed level of activity (immunization rates, readmission rate). Can be created and tracked based on relevance to the practice site.
Quality Indicators	Standardized, evidence-based measures of health care quality that can be used with readily available data to measure and track clinical performance and outcomes (the immunization rate that would be expected to reduce mortality).
Quality Improvement	The framework used to systematically improve care . Quality improvement seeks to standardize processes and structures to reduce variation, achieve predictable results, and improve outcomes for patients, healthcare systems, and organizations.
Safety	Relates to actual or potential bodily harm . Safety is the foundation upon which quality care is built.

Safety vs Quality vs Research



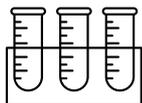
Safety

Goal is lack of harm. Focus is on avoiding bad events.



Quality

Goal is to do things well. Focus is on efficient, effective, purposeful care done at the right time for the right cost.



Research

Goal is discovery. Focuses on generating new ideas and data to contribute to more extensive body of evidence.

How does this difference apply to projects?

	Research Project	Quality Improvement Project
DESIGN	Designed to develop new knowledge	Designed to assess a process or program
PURPOSE	To answer a question or test a hypothesis	To improve a program process or system
PROTOCOL	Strict study protocol	Adaptive, iterative
RISK	May put subjects at risk for unknown toxicity or less effective intervention	Does not increase risk to patients (other than privacy)
IRB	IRB approval required to protect the patient	IRB approval is usually not needed
MEASUREMENT	Pre and post-assessment of single test or intervention	Continuous measurement of sequential tests or interventions
OUTCOME	May or may not change clinical practice; new data generated	Sustained improvement of process
APPLICATION	Need to generalize results to other contexts	Evidence may benefit other organizations with similar settings and issues; the ability to replicate the interventions

References:

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4. Quentin W, Partanen VM, Brownwood I, et al. Measuring healthcare quality. In: Busse R, Klazinga N, Panteli D, et al., editors. Improving healthcare quality in Europe: Characteristics, effectiveness and implementation of different strategies [Internet]. Copenhagen (Denmark): European Observatory on Health Systems and Policies; 2019. (Health Policy Series, No. 53.) 3.
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Stay tuned for future future topics:

QI models and frameworks ~ QI tools ~ Developing QI projects: Understanding the problem, diagnosing the problem, data in quality, defining measures and countermeasures, assessing results ~ Quality indicators and metrics ~ How to teach residents about quality ~ Designing a quality rotation vs longitudinal project ~ Sharing results

Interested in more information? [Click here](#) to see our HOPA Quality website.



This document was developed by the HOPA Quality Residency Training Committee for informational purposes only.