

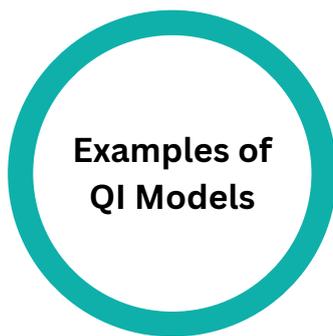
Quality Improvement Models



★ FAQ #2 in a series committed to assisting the HOPA membership along the quality improvement journey

How can hematology/oncology pharmacists approach the quality improvement process?

Start with a quality improvement (QI) model. Quality improvement models are frameworks that provide systematic, structured approaches to system or process improvement. While working with any QI model, the key is to carefully choose strategies that have the best chance to improve how your team interacts with patients.



The Institute for Healthcare Improvement (IHI) Model for Improvement

Focus on setting goals and developing measures to determine if change resulted in improvement



Lean

Focus on removing waste in the delivery of a service (ie patient care)



Six Sigma

Focus on removing the causes of errors and minimizing variability in processes

Common Features of Quality Improvement Models:

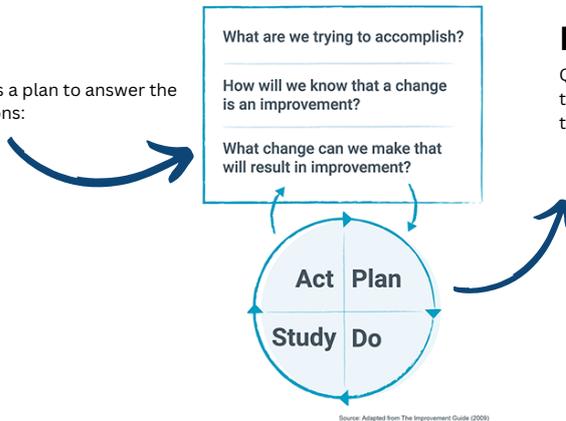
- Clear goals
- Transparent metrics
- Emphasis on:
 - Leadership support to communicate the vision and strategy, eliminate barriers, and hold team members accountable
 - Stakeholders involved as participants in the quality improvement process
- The use of:
 - Measurement and analysis to identify issues and guide decisions
 - Structured processes to implement interventions
 - Tools to support analysis and implementation
- Continual assessment and reporting to track progress of interventions

The IHI Model for Improvement

Focus on setting goals and developing measures to determine if change resulted in improvement

Part I

QI team develops a plan to answer the following questions:



Part II

QI team uses a series of small scale interventions introduced in rapid cycles to test the change, learn from these tests, and adopt, modify or discard the intervention for the next cycle.

- The PDSA cycle: numerous small cycles of change can accumulate into large effects
 - **Plan** – form a team, gather baseline data, develop problem and AIM statements, understand the current process, diagnose the problems, develop counter measure
 - **Do** – implement the counter measure
 - **Study** – study the results of the intervention to see if there was an improvement. Did you meet you AIM?
 - **Act** – decide if you adopt the intervention, or modify it or discard it completely.
 - **Start the next cycle as needed** to meet the AIM

Lean

Focus on removing waste in the delivery of a service (ie patient care)

“Lean” thinking in Healthcare

A clear understanding of all steps involved in the process under review, elimination of unnecessary steps and redesign of a process based on the needs of the patient

Value Stream Mapping:

A visual map of each step of a current process such that the team may identify steps in the process that result in waste, poor flow, low value, and/or errors.

5S organization:

The purpose is to improve space organization and eliminate time/motion waste of searching for items needed for work.

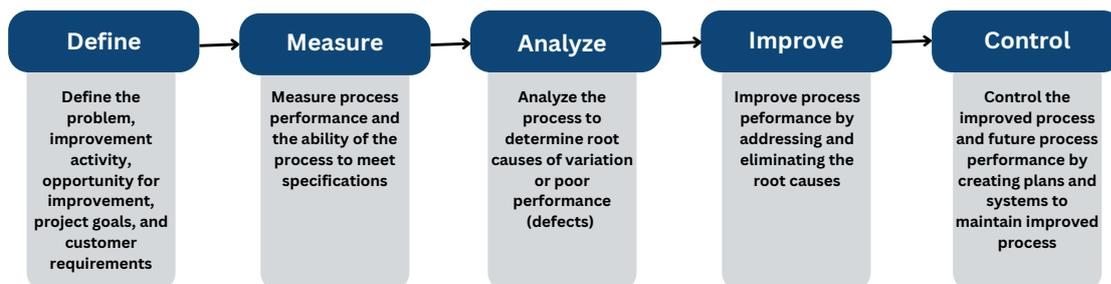
LEAN 5S METHODOLOGY



Six Sigma

Focus on removing the causes of errors and minimizing variability in processes

DMAIC methodology



References:

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2. Section 4: Ways to Approach the Quality Improvement Process (continued). (n.d.). <https://www.ahrq.gov/cahps/quality-improvement/improvement-guide/4-approach-qi-process/sect4part2.html>
3. DMAIC process: Define, measure, analyze, improve, control | ASQ. (n.d.). <https://asq.org/quality-resources/dmaic>
4. ASHP Foundation. Clinical Microsystems. Transformational Framework for Lean Thinking. Accessible at: <http://www.ashpfoundation.org/lean/> External Link Disclaimer.
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Stay tuned for future future topics:

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.