

Process improvement fundamentals

Improving the entire patient journey to ensure better outcomes requires building a culture of continuous improvement and operational excellence. Through process improvement, hospitals can adopt quality improvement models and evidence-based practices to systematically drive change and deliver safe high-quality equitable care. These best practices provide a set of basic steps your team can deploy to pilot small tests of change, standardize care processes and sustain performance.



Foster a culture of quality

Ensure leadership and key stakeholders are committed to a goal of zero harm. Create a sense of urgency to change, mobilize your team and build consensus to execute your change strategy. Identify volunteers, choose easy concepts to apply and replicate changes achieved elsewhere to gain "quick wins" early on and avoid losing momentum.



Form a frontline of defense

Create an effective safety culture where everyone is accountable for safety and quality within the hospital. Assess your current state to ensure a systematic quality improvement approach is in place that applies evidence-based practices at the bedside. Conduct QI activities such as gap analyses and process mapping to pinpoint barriers and address clinical areas of improvement.



Boost bundle compliance

Adopt and track the use of <u>evidence-based care bundles</u> and clinical pathways to encourage clinical guidance as a solution for prevention. Regularly audit bundles to assess clinical practices.



Harness technology

Explore how best practices can leverage technology and digital tools. Work with your team to identify and improve platform enhancement and integration opportunities as well as clinical decision support.



Strengthen coding and documentation

Ensure assessments are accurately and consistently documented and prevention strategies are supported by internal guidelines. Provide staff education on coding and clinical documentation improvement programs to enhance understanding.



Diagnose root causes

After a patient safety event, uncover contributing factors (i.e., <u>root cause analysis</u>) to learn how and why errors occurred, identify system vulnerabilities and target solutions for system change, <u>sustainability and spread</u>.



Dig in to the data!



Scope and define the problem

Bring together stakeholders to assess your data for specific data quality issues negatively impacting your organization. Track quality performance with the use of aggregated data to identify gaps and trend performance against goals. Monitor run charts to track process changes over time. With the use of quality and data tools, teams can effectively identify how and when specific improvement interventions related to changes have occurred and if action should be taken.

- · Benchmark using scorecards and dashboards.
- Use a <u>balanced set of measures</u> for all improvement efforts: outcome, process and balancing.
- Refer to tips for effective measures to guide your team's efforts.



Set your challenge

How can your organization achieve its goal and prevent patient safety events before they cause harm and reduce their impact if they occur? Consider:

- · what you are trying to accomplish;
- how you will know whether a change is an improvement; and
- what changes you can make that will result in improvement.



Go to the guidelines

Review current guidelines for evidence-based practice recommendations, prioritize interventions and develop quality indicators to measure and compare and improve the quality of care. Adapt and customize to your setting within the boundaries of the evidence, educate providers and embed it into daily clinical practice.



Make a change

Incorporate process improvement tools and evidence-based methodologies such as the <u>Model for Improvement</u> to help define the scope of the problem and employ Plan-Do-Study-Act cycles.



Get started

Kick-start your QI activities and key action steps with best practice tools and resources to improve patient safety and accelerate improvement. Refer to the <u>Unit-based Patient Safety and Quality Improvement Toolkit</u> and <u>IHI Quality Improvement Essentials Toolkit</u> to launch your project, engage frontline staff in QI efforts and strengthen a culture of safety.



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