


Saving Health Care

“Rapid Cycle Quality Improvement”

Getting to Results Faster While Pulling Our Workforce Out of the Valley of Despair



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Rapid Cycle Quality Improvement

The act of making an existing activity better or implementing a new process in less than six months so to expedite risk control and improved performance.



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Quality improvement (QI) is a systematic, formal approach to the analysis and improvement of how well we do anything and everything that impacts our immediate and long-term **financial, operational and/or reputational health!**



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The cost of poor quality – the difference between the realized cost and losses associated with how a service is delivered or an activity is carried out and what the much larger gain and smaller cost could be if the performance was laser focused on getting it right the first time in the most business smart, defect-free and customer-focused ways possible.

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Rapidly closing holes in the line so to minimize the likelihood of a repeat error and repeat losses!

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Controlling the Line!

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The product of our weak QI activities over the past fifty years!

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Quality Improvement

PDCA
Plan, Do Check, Act

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Quality Improvement Management Methodology

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So, What Does Good QI Look Like?

Medical/Surgical Nursing

Performance Measure 1
Q Initiative

To have 95% of all patients report adequate hand temperature when meals are served.

Month	2013 Jan	2013 Feb	2013 Mar	2013 Apr	2013 May	2013 Jun	2013 Jul	2013 Aug	2013 Sep	2013 Oct	2013 Nov	2013 Dec	2014 Jan	2014 Feb	2014 Mar	2014 Apr	2014 May	2014 Jun	
P	44.5%	77.5%	84.1%	85.8%	86.3%	87.8%	88.0%	82.0%	86.1%	88.0%	88.1%	88.0%	88.0%	88.0%	88.0%	88.0%	88.0%	88.0%	88.0%
A																			
C																			
E																			

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Quality Improvement

Performance Measure 1
Q Initiative

To have 95% of all patients report adequate hand temperature when meals are served.

Month	2013 Jan	2013 Feb	2013 Mar	2013 Apr	2013 May	2013 Jun	2013 Jul	2013 Aug	2013 Sep	2013 Oct	2013 Nov	2013 Dec	2014 Jan	2014 Feb	2014 Mar	2014 Apr	2014 May	2014 Jun	
P	44.5%	77.5%	84.1%	85.8%	86.3%	87.8%	88.0%	88.0%	82.0%	86.1%	88.0%	88.1%	88.0%	88.0%	88.0%	88.0%	88.0%	88.0%	88.0%
A																			
C																			
E																			

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Quality of the best. As one of the top performers, performance of quality in health care, we put a bet at least 95% of our patients in optimal condition.

95.9%	June 2014
95.9%	July 2014
95.9%	August 2014
95.9%	September 2014
95.9%	October 2014
95.9%	November 2014
95.9%	December 2014

Quality

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..... While Bringing Our People Out of The Valley of Despair!!!!!!

Quality

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QI and The Valley of Despair

Quality

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Controlling for the Ring of Turmoil

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Living in the Valley of Despair

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And, most critical in the current environment is the question of where the workforce ends up after the “improvement” is achieved – with a net gain or a net loss in productivity!


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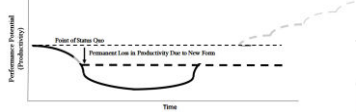
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20 minutes

- 3. 36.5M visits in a year
- 21.9M minutes
- 3. 22 patients
- 547.5M minutes
- 9.0M visits per day
- 9125 hours
- 3800 hours per FTE
- 547 FTEs



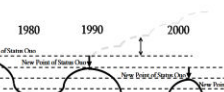





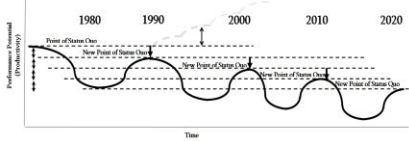
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1980 **1990** **2000** **2010** **2020**







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Manage Every Initiative With the Goal of Results, Reducing Waste and Improving Productivity!!!!

1980 **1990** **2000** **2010** **2020**







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The Best a Department or Group Can Do These Days Is Manage "4" Improvements at One Time – DEPENDING ON THEIR SIZE !!!!!

P 38%	A,C 39%	C,E 49%	C,E 51%	C,e 88%	C,e 94%	C 96%	C 97%	C 94%	C 97%
C 46%	P 38%	P 46%	A,C 49%	A,C,E 62%	C,E 79%	C,E 89%	C,E 91%	C 95%	C 96%
		C 67%	P 74%	P 78%	A 82%	C,E 87%	C,E 89%	C,E 94%	C,E 94%
	C 59%	P	P	P	Parked	Parked	Parked	A,C 67%	C,E 75%

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To Have No More Than 150 Late Charges Per Month Organization-wide

Performance Improvement Goals

QI
Versus
PI

Department	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	YTD
Emergency Room	120	110	100	90	80	70	60	50	40	30	20	10	150
ICU	130	120	110	100	90	80	70	60	50	40	30	20	150
Medical-Surgical	140	130	120	110	100	90	80	70	60	50	40	30	150
Neurology	150	140	130	120	110	100	90	80	70	60	50	40	150
Physical Therapy	160	150	140	130	120	110	100	90	80	70	60	50	150
Radiology	170	160	150	140	130	120	110	100	90	80	70	60	150
Respiratory Therapy	180	170	160	150	140	130	120	110	100	90	80	70	150

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To achieve 95% satisfaction with staff friendliness



Performance Improvement Goals

Department	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	YTD
Emergency Room	90%	92%	94%	96%	98%	99%	97%	95%	93%	91%	89%	87%	95%
ICU	91%	93%	95%	97%	99%	98%	96%	94%	92%	90%	88%	86%	95%
Medical-Surgical	92%	94%	96%	98%	99%	97%	95%	93%	91%	89%	87%	85%	95%
Neurology	93%	95%	97%	99%	98%	96%	94%	92%	90%	88%	86%	84%	95%
Physical Therapy	94%	96%	98%	99%	97%	95%	93%	91%	89%	87%	85%	83%	95%
Radiology	95%	97%	99%	98%	96%	94%	92%	90%	88%	86%	84%	82%	95%

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Welcome to Anywhere Community Hospital's Surgery Center




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What Is Not Working For You.....

Then Turn It Into a Well Managed Rapid Cycle Quality Improvement Initiative So It Does!!!!



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