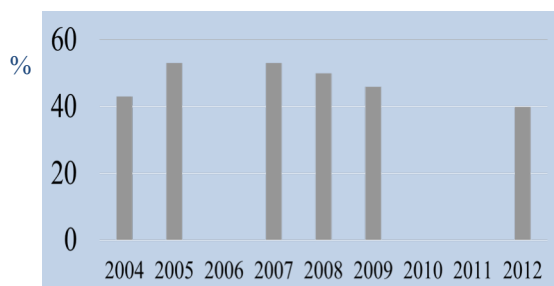


QI Introduction and Choosing a Topic

Adrian Boyle
@dradrianboyle

***Audit doesn't
work***
(mostly)

Fractured Neck of Femur Patients Receiving Analgesia within One Hour



Why Audit Fails?

- Tick box exercise
- Performed by temporary staff
- Lack of feedback loops
- Career advancement rather than care advancement
- Lack of collective responsibility
- Strangled with red tape

Medical Fashions

- Clinical governance
- Evidence based medicine
- Patient safety

What is different about QI?

Quality Assurance

Standards compliance
Inspection
Defensive
'Bad Apples'
Medical Provider
Individual responsibility

Error requires discipline

Quality Improvement

Continuous improvement
Prevention
Proactive
Systems, processes
Patient care
Collective responsibility

Error is an opportunity to learn and improve

Just do something, anything



Over-arching document
across
RCEM committees

Aimed at Members and
Fellows



So what is Quality Improvement?

‘Better patient experience and outcomes
through changing behaviour and organisation
through using a systematic change method and
strategies’

Quality Improvement

- Quicker turnaround
- Shorter feedback loops
- Multiple evaluation points
- Multiple interventions
- Emphasis on culture and engagement

QI Example

Routine INR and APPT tests were being collected
on most adult patients who attended the ED.

This was expensive and rarely changed
management.

PDSA Cycle 1-3

PDSA 1

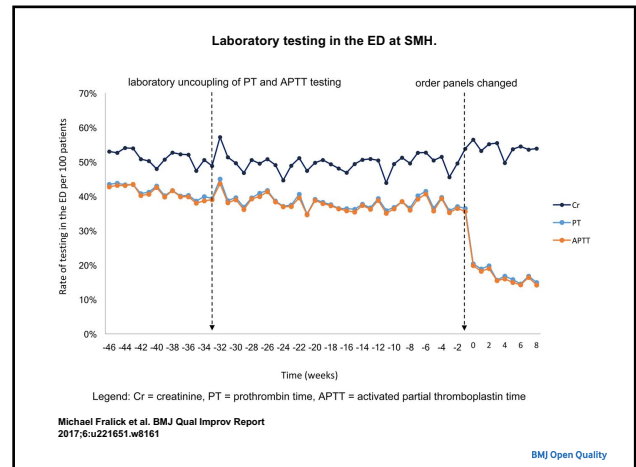
Stakeholder analysis

PDSA 2

Uncoupling order-sets

PDSA 3

Order panels changed



Choosing a QIP

Start **SMALL**

Care about the project and become the expert

Scope what is already around

Good QIP Topics

Improving analgesia for severe pain in adults

Improving patient information provision for patients undergoing procedural sedation

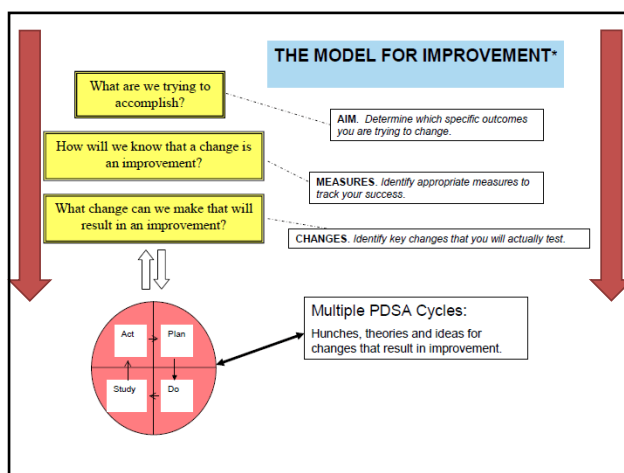
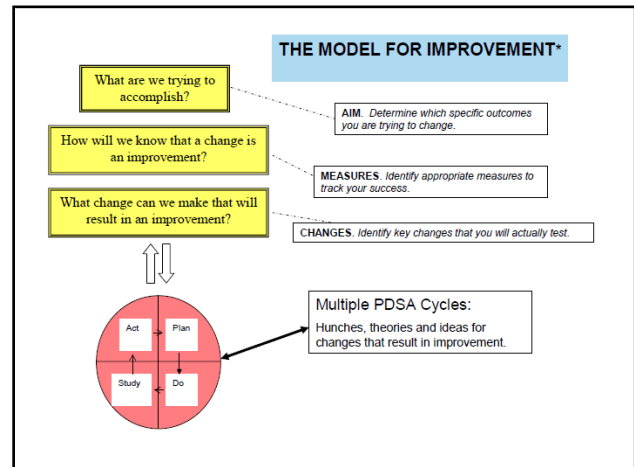
Reducing time to PPCI for patients with STEMIs

Bad QIP Topics

Fixing ED Crowding

Implementing Pentrox

Reducing time to assessment for MH patients



Pitfalls

Solution based problems

'It's a nice piece of kit, can we show that we need it?'

Check lists

Projectitis

*Multiple different QI projects to implement
FIB for #nofs*

Pitfalls (2)

Innovation versus
replication

*'You don't have to
re-invent the wheel'*

Sustainability

'Job done, next?'



Future Hospital Journal 2016, Vol 3, No 3: 191-4

Does quality improvement improve quality?

Authors: Mary Dixon-Woods^a and Graham P Martin^b

ABSTRACT

Although quality improvement (QI) is frequently advocated as a way of addressing the problems with healthcare, evidence of its effectiveness has remained very mixed. The reasons for this are varied but the growing literature highlights particular challenges. Fidelity in the application of QI methods is often variable. QI work is often pursued through time-limited, small-scale projects, led by professionals who may lack the expertise, power or resources to instigate the changes required. There is insufficient attention to rigorous evaluation of improvement and to sharing the lessons of successes and failures. Too many QI interventions are seen as 'magic bullets' that will produce improvement in any situation, regardless of context. Too much improvement work is

US studies suggest that nurses deal with 8.4 work system failures per 8-hour shift continually interrupted.^{5,6} The need for re-learn, associated with the variability processes, is significant. Much professional unproductively in learning anew how to basic as ordering tests, knowing whether cleaned, or how things are arranged in in each setting. Personnel may also mal from place to place, either because they the new procedures or they apply previous different contexts, sometimes with trag

Starting your QIP

Choose topic

Why? Engage stakeholders

Decide on measurement

How? Engage stakeholders

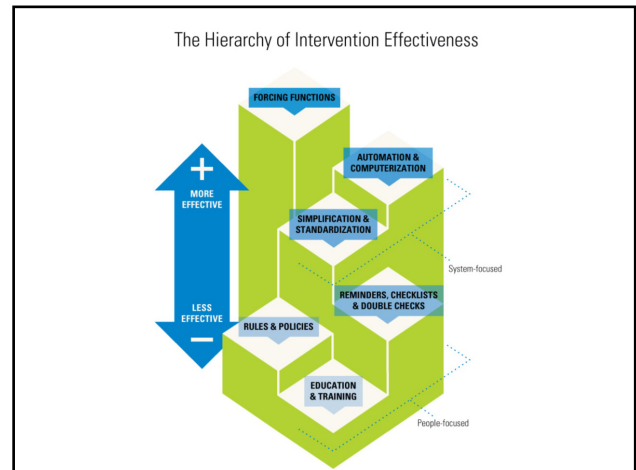
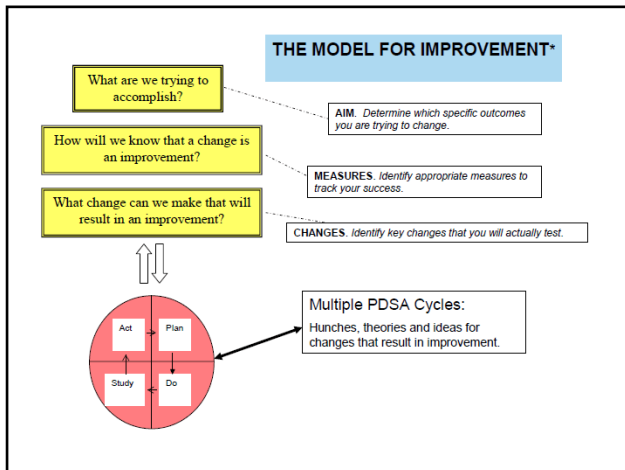
Decide on interventions

What? Engage stakeholders

Plan a QIP

Small Group Activity 10 minutes

Decide on your topic using the MFI



Summary

- QI is Quality Improvement
- Model for Improvement
- Start Small