

Better Quality Through Better Measurement OCC

Faculty/Staff

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Questions

What questions do you have about the program that you are hoping to have answered today? Please put them in the chat and we will try to get through as many as we can on today's call!





Improving Care Improving Lives with You

ihi.org



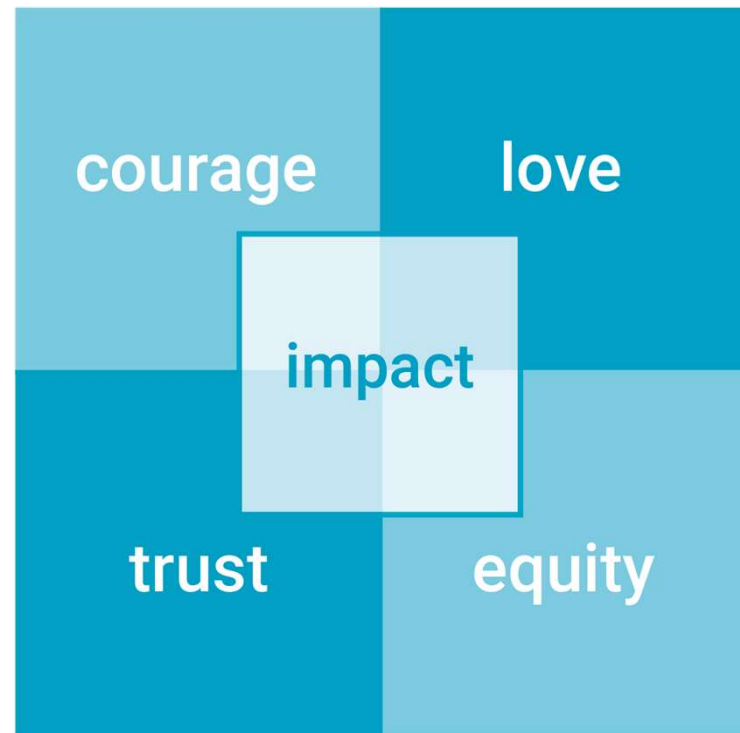
Our Mission

To improve health and health care worldwide

Our Vision

Everyone has the best care and health possible

Our Values



Since 1991

In large systems and small villages, we have taken improvement methods originally used in the manufacturing industry and applied them to improving all aspects of health and health care.

We build improvement capability by providing people with methods and tools to make care better.



Working alongside you to improve health and health care worldwide!



Better Quality Through Better Measurement



Learning Objectives

1. Describe the concepts and methods of measurement for improvement
2. Apply the steps/tools in the quality measurement journey to a system you are improving
3. Design a family of measures
4. Construct effective data collection plans that incorporate stratification and sampling methods
5. Design run and control charts to analyze data for improvement
6. Distinguish common and special cause variation in data

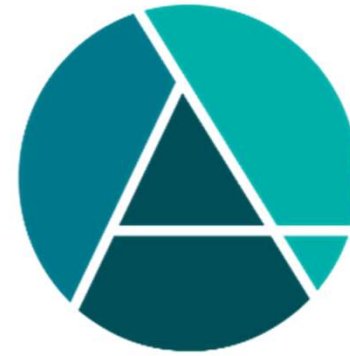


Continuing Education

This program is approved to provide 12 credits for physicians, nurses, pharmacists, and Certified Professional in Patient Safety (CPPS) recertification.

The Institute for Healthcare Improvement designates this blended learning activity for a maximum of 12 *AMA PRA Category 1 Credits™*. Physicians should claim only the credit commensurate with the extent of their participation in the activity. This activity may also be applicable for other professions that accept *AMA PRA Category 1 Credits™*.

[A growing list of countries accept ACCME-accredited education.](#)



JOINTLY ACCREDITED PROVIDER™
INTERPROFESSIONAL CONTINUING EDUCATION



Who Attends?

This online course is open to professionals familiar with quality improvement methods interested into taking a deeper look into measurement

- Quality Leaders and Managers
- Chief Quality Officers
- Patient Safety Officers/Executives
- Data Analytics Staff



The IHI Program Team



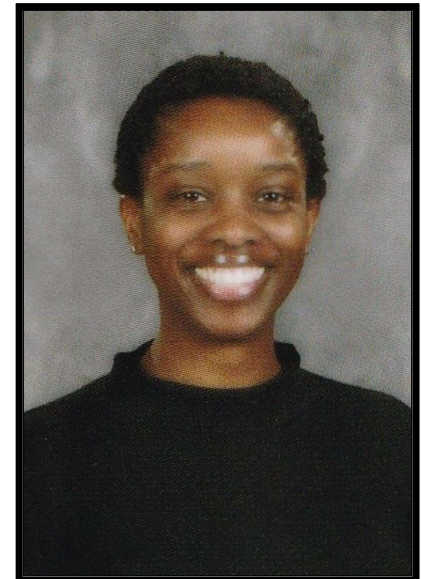
Jesse McCall
Program Director
Lead Faculty



Robert Lloyd
Lead Faculty



Rebecca Steinfield
Support Faculty



Francesca Keeling
Program Manager



Measurement is Central to Improvement

- The purpose of measurement in QI work is for learning not judgment!
- All measures have limitations, but that does not negate their value for learning
- You need a set of 3-8 measures reported daily, weekly or monthly
- Measures should be linked to the team's Aim.
- Measures should be used to guide improvement and test changes.
- Measures should be integrated into the team's daily routine and make use of existing databases when possible



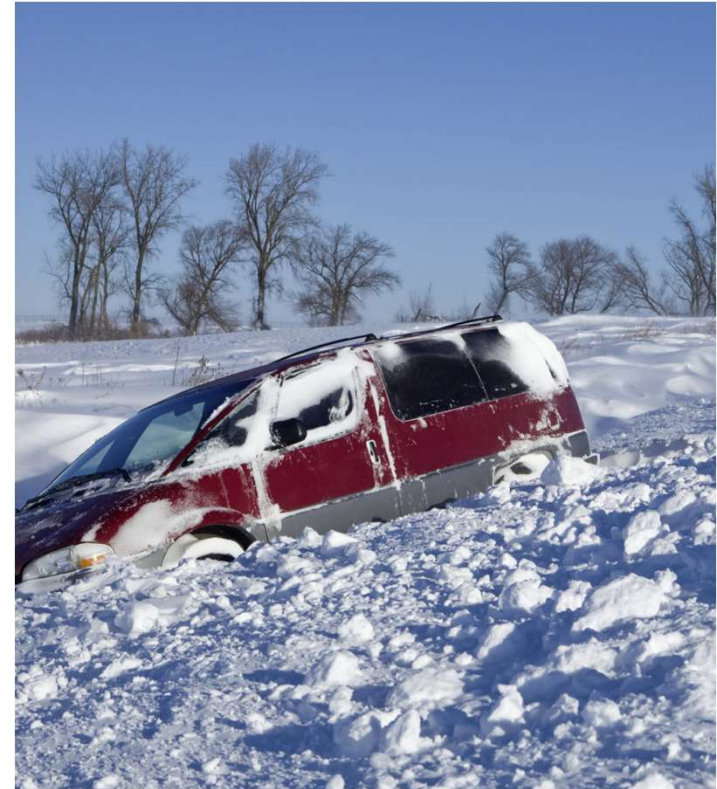
Chat Question...

What is your biggest challenge around measurement?



Measurement ditches

- Overambitious plans
- Unclear operational definitions
- Measure is not sensitive enough to capture improvement
- Unclear/insufficient sampling plans
- Measures not linked to improvements
- Plans did not factor in analysis and collection roles
- Data collection plans hard to implement
- Trouble with analysis
 - Skill level
 - Missing data



A mixed-methods study of challenges experienced by clinical teams in measuring improvement. Woodcock, Liberati & Dixon Woods, BMJ Qual Saf August 2019



Milestones in the Quality Measurement Journey (QMJ)



Organizing Your Measures Worksheet[®]

Topic for Improvement: _____

Concept	Potential Measure(s)	Outcome	Process	Balancing



Operational Definition Worksheet

Measure Name: _____
 (Remember this should be specific and quantifiable, e.g., the time it takes to..., the number of..., the percent of... or the rate of...)

Operational Definition
 Define the specific components of this measure. Specify the numerator and denominator if it is a percent or a rate. If it is an average, identify the calculation for deriving the average. Include any special equipment needed to capture the data. If it is a score (such as a patient satisfaction score) describe how the score is derived. When a measure reflects concepts such as accuracy, complete, timely, or an error, describe the criteria to be used to determine "accuracy."



Data Collection Plan Worksheet

Project name & location: _____

Measure Name	Is Stratification appropriate? If Yes, list the levels of stratification	Will you use sampling? If Yes, describe the sampling method you will use	Frequency of data collection (e.g., hourly, daily, weekly?)	Duration of data collection (i.e., how long do you plan to collect the data?)



Measurement Dashboard Worksheet[®]

Name of team: _____ Date: _____

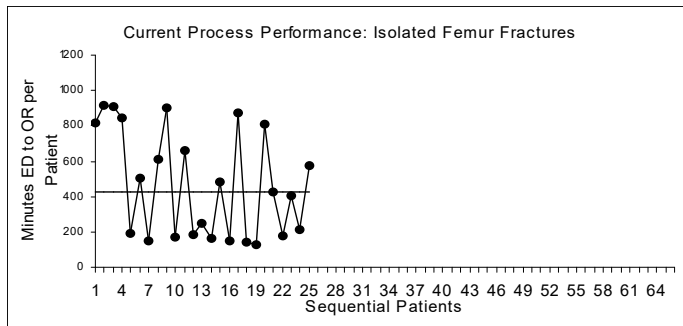
Measure Name (Be sure to indicate if it is a count, percent, rate, days between, etc.)	Operational Definition (Define the measure in very specific terms. Provide the numerator and the denominator if a percentage or rate. Be as clear and unambiguous as possible)	Data Collection Plan (How will the data be collected? Who will do it? Frequency? Duration? What is to be excluded?)

Building a Measurement System that Works!

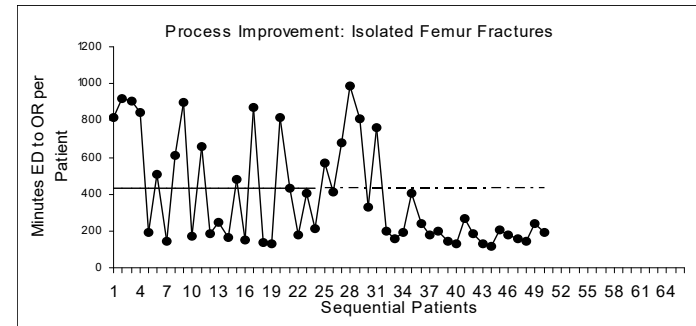


Three uses of time series charts

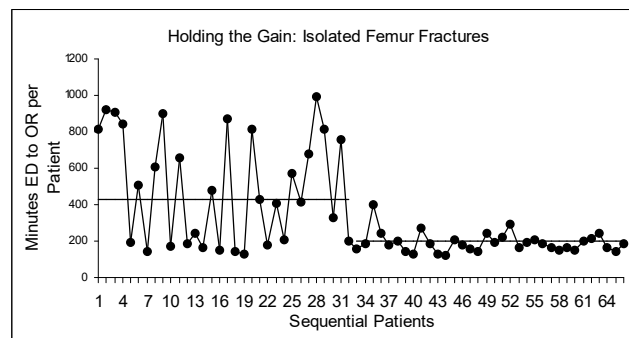
1. Make process performance visible



2. Determine if a change is an improvement



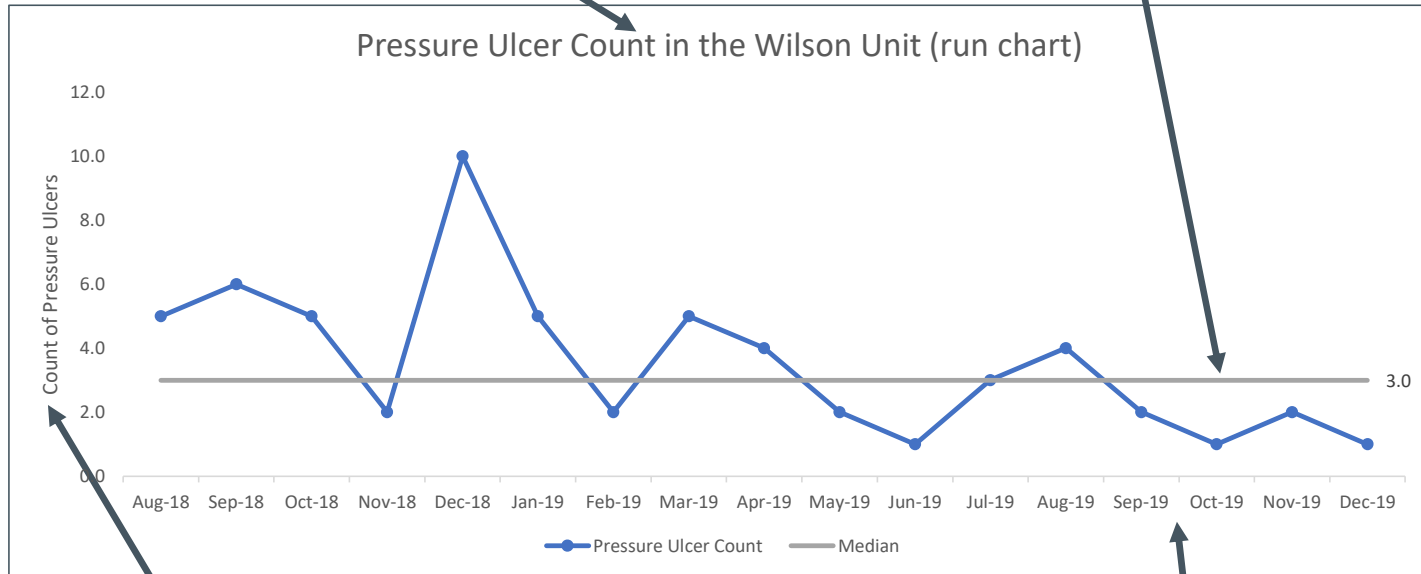
3. Determine if we are holding the gains



A Run Chart!

One measure at a time, could be a percent, count, time, length, weight, etc.

The centerline (CL) on a Run Chart is the median (half of the data points are above/below the median)

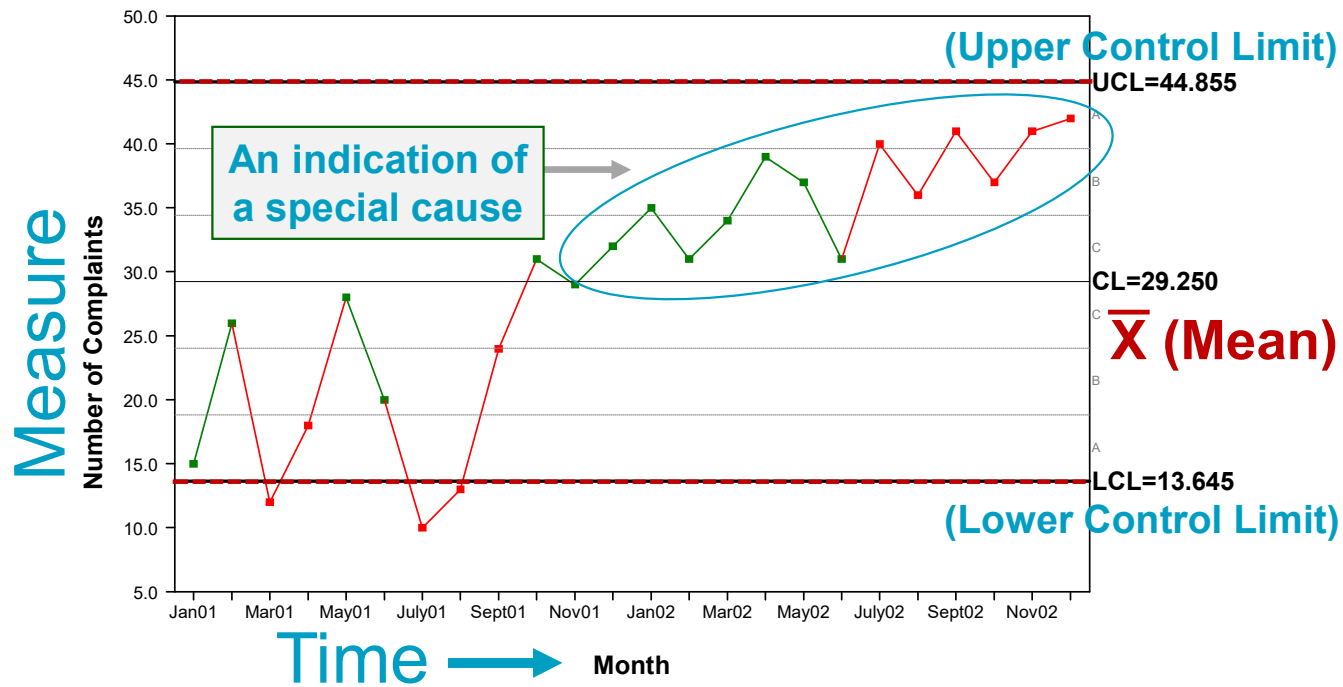


The Y Axis is the unit of measure

The measure is plotted over time displayed on the X Axis



A Control/SPC/Shewhart Chart!



Why are Control Charts preferred over Run Charts?

Because Control Charts...

1. Are more sensitive than run charts
 - A run chart cannot detect special causes that are due to point-to-point variation (median versus the mean)
 - Tests for detecting special causes can be used with control charts
2. Have the added feature of control limits, which allow us to determine if the process is stable (common cause variation) or not stable (special cause variation).
3. Can be used to define process capability.
4. Allow us to more accurately predict process behavior and future performance.



Course Topics

Lesson 1 – Why are you measuring? Introduction to the Quality Measurement Journey

Lesson 2 – Aims, Moving from concepts to measures, Operational Definitions

Lesson 3 – Understanding variation

Lesson 4 – Run charts

Lesson 5 – Control charts

Lesson 6 – Linking measurement to improvement

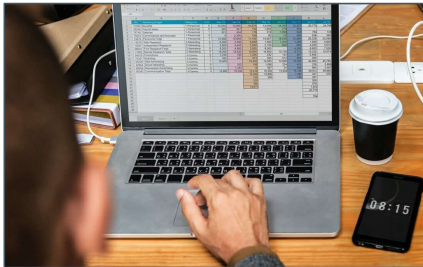


Technical Requirements



Participants should be proficient with Excel.

We will be using Excel to create run charts



Participants may wish to purchase SPC software

We will cover how to select the correct control charts and how to analyze them, but will not be using a specific software to instruct the creation of them.



Self-Paced Lessons

- ❖ Six lessons
- ❖ 12-week course duration

Virtual Calls

- ❖ Live virtual calls are hosted on Zoom and will run for one hour
 - *last two calls are 1.5 hours
- ❖ We expect you attend all sessions
 - *all sessions are recorded



Enrollment Details

- ❖ Course begins April 14, 2025
- ❖ Registration rate: \$549 per person
- ❖ Scholarship deadline [March 3, 2025](#)
- ❖ Registration deadline [April 28, 2025](#)



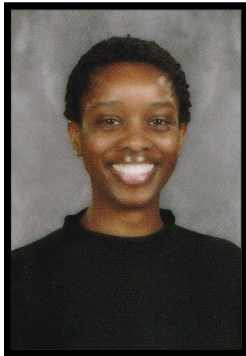
Please provide feedback!

<https://forms.office.com/r/5ruDBApxYB>

**Better Quality Through Better
Measurement Informational Call**



We hope you can
join us on our
journey!



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