

HEALTHCARE SYSTEMS: SUPPORTING AND ADVANCING CHILD HEALTH**CONTINUOUS QUALITY IMPROVEMENT****INTRODUCTION**

Continuous Quality Improvement (CQI) in Health Care is a structured organizational process that involves physicians and other personnel in planning and implementing ongoing proactive improvements in processes of care to provide quality health care outcomes. CQI is used by hospitals to optimize clinical care by reducing variability and reducing costs, to help meet regulatory requirements, and to enhance customer service quality. The issues of quality improvement gained additional national attention with the 2001 release of the Institute of Medicine (IOM) report titled “Crossing the Quality Chasm” in which the template was set for quality improvement processes. Pediatric hospitalists are well positioned to promote and champion CQI projects within the hospital setting, working on the “front lines” of clinical care and acting as influential change agents.

KNOWLEDGE

Pediatric hospitalists should be able to:

- Distinguish the basic principles of CQI, which focus upon proactively improving processes of care, from Quality Assurance which focuses on conformance quality.
- Explain how CQI focuses on systematic improvement and can be effectively used to create clinical care plans as well as hospital procedural guidelines.
- Describe the business case for quality, and how quality drives cost.
- Discuss the CQI concept of and methods behind Plan Do Study Act (PDSA) and other models to accomplish rapid cycle improvements within the organization.
- List common terms and language of CQI and Performance Improvement.
- Define commonly used quality terms such as common cause and special cause variation, run charts, cumulative proportion charts, process measures, outcomes, and others.
- Explain the role of reliability science and human factors in implementing healthcare improvements.
- Summarize how CQI supports effective development of care standardization, best practices, and practice guidelines.
- Indicate how evidence-based medicine can be integrated into the CQI planning stage for appropriate clinical projects.
- Explain why building CQI into everyday processes of care is the most effective way to improve quality.
- Describe how decreasing unwanted variability in care impacts clinical outcomes.
- List the attributes necessary to moderate, facilitate and lead QI and patient safety initiatives and discuss the importance of team building methods.
- Describe the components of family centered care and discuss the importance of engaging patients and the family/caregiver in QI efforts.
- Identify the principles outlined in the IOM “Crossing the Quality Chasm” report and stay current with the latest IOM reports on hospital quality.
- Describe how external agencies and societies such as The Joint Commission, Child Health Corporation of America, National Association for Children’s Hospitals and Related Institutions, Agency for Healthcare Research and Quality, and the National Quality Forum impact quality improvement initiatives for hospitalized children.
- Discuss the value of national, state, and local comparative quality data and the utility of national sources such as the Pediatric Health Information Dataset (PHIS).
- Describe the quality improvement education expectations of residency programs set by the ACGME and compare and contrast these to those of the American Board of Pediatrics.

SKILLS

Pediatric hospitalists should be able to:

- Lead as a physician champion and “early adopter” of continuous quality improvement.
- Participate in reviews of quality data, including basic data analysis and development of recommendations from the data.

- Serve as a liaison between physician staff and hospital administrative staff when interpreting physician-specific information and clinical care outliers.
- Initiate a continuous quality improvement project by identifying a process in need of improvement and engaging the appropriate personnel to implement a change, using CQI principles.
- Educate trainees, nursing staff, ancillary staff, peers on the basic principles of CQI and the importance of CQI on child health outcomes.
- Assist with development of best practices and practice guidelines to assure consistent, high quality standards and expectations for care in the hospital setting.
- Effectively use best practice guidelines.
- Demonstrate proficiency in performing a rapid cycle improvement project utilizing the PDSA process.
- Demonstrate facility with the use of common computer applications, including spreadsheet and database management for information retrieval and analysis.
- Effectively collaborate with appropriate healthcare providers critical to quality improvement efforts such as clinical team members, information technology staff, data analysts, and others.

ATTITUDES

Pediatric hospitalists should be able to:

- Lead as an “early adopter” and “change agent” by building an awareness of and consensus for changes needed to make patient care quality a high priority.
- Recognize the importance of team building, leadership, and family centeredness in performing effective CQI.
- Seek opportunities to initiate or actively participate in CQI projects. Work collaboratively to help create and maintain a CQI culture within the institution.
- Model professional behavior when reviewing and interpreting data.

SYSTEMS ORGANIZATION AND IMPROVEMENT

In order to improve efficiency and quality in their organizations, pediatric hospitalists should:

- Engage Hospital Senior Management, Hospital Board of Directors and Medical Staff leadership in creating, implementing, and sustaining short and long term quality improvement goals.
- Participate on Quality Improvement committees and seek opportunities to serve as Quality Improvement Officers or Consultants.
- Advocate for the necessary information systems and other infrastructure to secure accurate data and assure success in the CQI process.