Job Aid: Introduction to Quality Improvement

Quality Improvement (QI) Basics

The QI Process
You will be helping practices to:

- Identify areas for improvement.
- Set goals.
- Develop a plan that specifies:
  - what changes the practice will make.
  - how it will use data to track performance over time.

QI is a team sport and everyone in the practice should be included in QI work.

High-quality Primary Care
According to the National Academy of Medicine, high-quality healthcare is:

- **Safe.** It avoids harming patients.
- **Effective.** It is evidence-based, which means that everyone gets the care that they’ll benefit from and no one gets care that, according to the evidence, won’t help them.
- **Patient-centered.** It is respectful of and responsive to individual patient preferences, culture and social context, and personal values. It also recognizes that patients’ experiences of care, and the role they play in their care, matter.
- **Timely.** It eliminates potentially harmful delays in getting care, and is respectful of patients’ time and avoids excessive wait times.
- **Efficient.** It avoids waste, including waste of equipment, supplies, ideas, and energy.
- **Equitable.** It does not vary in quality because of a person’s race or ethnicity, gender or gender identity, sexual orientation, English proficiency, or socioeconomic status.

QI Frameworks
QI frameworks provide a structured approach to improvement work that can help a practice organize their QI work. Here are three common QI frameworks used by primary care practices.

- **Model for Improvement (MFI)** is a commonly used, and easy-to-use QI approach. Its hallmark is the use of Plan-Do-Study-Act cycles - called PDSAs - to conduct small tests of change that support eventual scale and spread of a proven improvement.
- **Lean** focuses on eliminating "waste," that is, actions that do not contribute value to the customer.
- **Lean/Six Sigma** focuses on eliminating errors and defects.
Aligning QI Work with Practices’ Goals

Align the goals of your facilitation effort with practices’ priorities to build the productive relationships that are critical to your success. Goals of primary care practices typically fall into three categories:

- Improving quality of patient care
- Increasing joy at work
- Assuring financial stability

Introducing a Practice to QI

Ask about the practice's current approach to quality improvement.

Use this information to align your approach with the methods they use and to decide on recommendations for adopting a framework. Ask:

- How do you go about making improvements currently?
- Do you use a structured QI framework like Lean or the Model for Improvement?
- If yes, what and how has that approach worked for you so far? Align your work with their QI framework, supplementing with methods from other frameworks.
- If no, recommend the practice consider adopting the Model for Improvement as a simple framework to organize their work.

Key Driver Diagrams

Key driver diagrams are visual representations of how multiple changes build upon each other to get a practice to reach a particular goal. Like a roadmap, it lays out a practice’s theory of change - depicting the strategies and activities they believe or that the evidence tells them will help them reach a particular goal.
How to Create a Key Driver Diagram

Working backwards from the left to the right of a key driver diagram template, work with the practice to complete these four steps:

1. Define the improvement aim and measures of success and place in the far left-hand box on the template.
2. Identify 2-5 primary drivers that the practice believes will produce the desired outcome.
3. Identify secondary drivers. These are the strategies that contribute to the primary drivers. There can be many secondary drivers.
4. Develop a list of ideas for changes and actions that will impact the drivers.

Sample Key Driver Diagram