

# The Model For Improvement:

## Three Simple Questions to Guide Your Improvement Journey



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# Learning Objectives

<b>Define</b>	Define quality improvement.
<b>Ask</b>	Ask the 3 simple questions embedded in the Model for Improvement to guide your QI project.
<b>Apply</b>	Apply the steps in the Model for Improvement, illustrated in the data-driven improvement story, to structure your work.



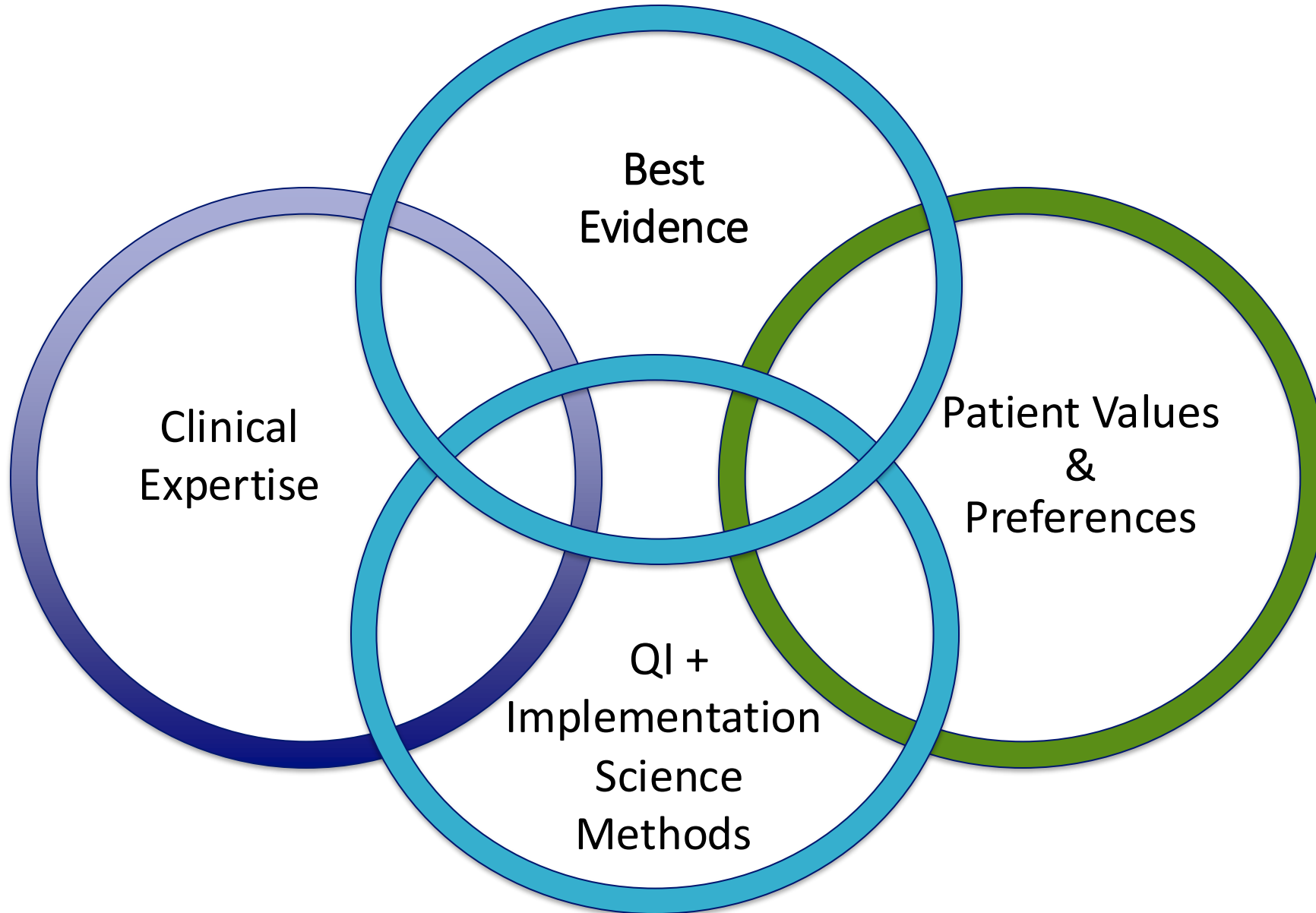
# What is Quality Improvement?

Batalden, P. *Qual Saf Health Care*. 2007;16:2-3.

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*“The combined and unceasing efforts of everyone—  
healthcare professionals, patients and their families,  
researchers, payers, planners and educators—  
to make the changes  
that will lead to better patient outcomes (health),  
better system performance (care) and better  
professional development (learning).”*

# Quality Improvement Requires the Convergence of 4 Powerful Drivers



# Learning From A Real-World Improvement Story

Listen to a Data-Driven Improvement Story



Focus on Improvement Content

- What did they do?
- What results did they achieve?
- More importantly . . . .

How?

- What methods did the team in in this example use that you can apply to your work?

# Quality Improvement Data Driven Story

Decreasing the Need for Emergency Room Visits at The Oregon Clinic by Using Qorus Data and Applying QI Methods



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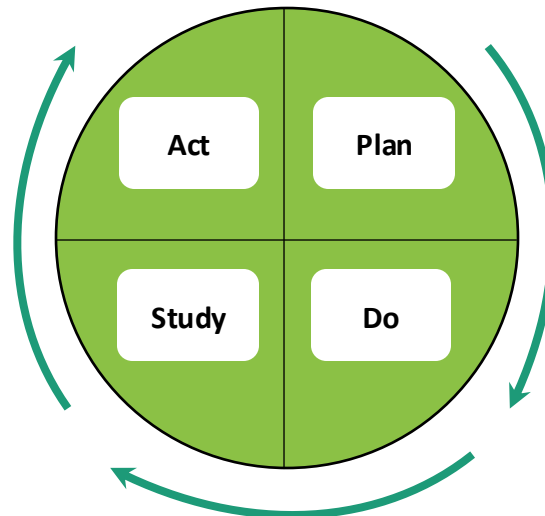
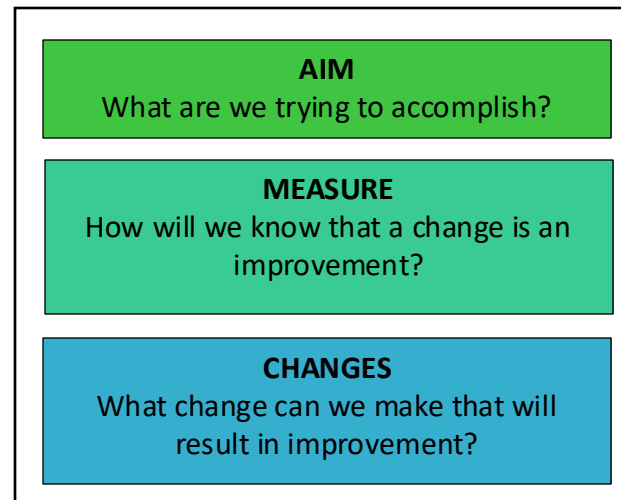
[The Oregon Clinic  
Improvement Story](#)  
[Click Here](#)



Questions?  
Comments?  
Reflections?



# The Cornerstone of Our Methodology: The IHI Model for Improvement





# Quality Improvement Data Driven Story

Decreasing the Need for Emergency Room Visits at The Oregon Clinic by Using Qorus Data and Applying QI Methods




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Question 1:  
What Are We  
Trying To  
Accomplish?

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## Our SMART Aim

We aimed to improve ED utilization for our IBD patients by decreasing ED use from 30% per month to 15% per month by April 30, 2019.

NOTE: Motivated by the end of the Qorus IBD Breakthrough Series.

# GOAL SETTING

S

SPECIFIC

M

MEASURABLE

A

ATTAINABLE

R

RELEVANT

T

TIME-BOUND

Every Project Needs a  
SMART Aim



## Question 2: How Will We Know a Change is an Improvement ?

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# Key Measures


## **Data**

Percent of IBD patients who sought care at any local ED during the past 6 months.

## **Data Source**

- Patient-reported data
- Collected on the Qorus Pre-Clinic Survey Question\*

\*Have you been to an Emergency Department (ED) in the past 6 months due to your IBD?"



Question 3:  
What Changes Can  
We Make That Will  
Result in  
Improvement?

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# Plan-Do-Study-Act Cycles

## **PDSA 1    Test Creation of a High-Risk List**

- 1A                      How Many Questions
- 1B, 1C, 1D          What Questions to Ask (3 revisions)
- 1 E                     Standardize Frequency to See High-Risk Patients

## **PDSA 2    Refine “Work-in Appointments**

- 2A                      Frequency
- 2B                      Number of “Slots” to Hold
- 2C                      When to Release the Slots

## **PDSA 3    Test Weekly Huddles**

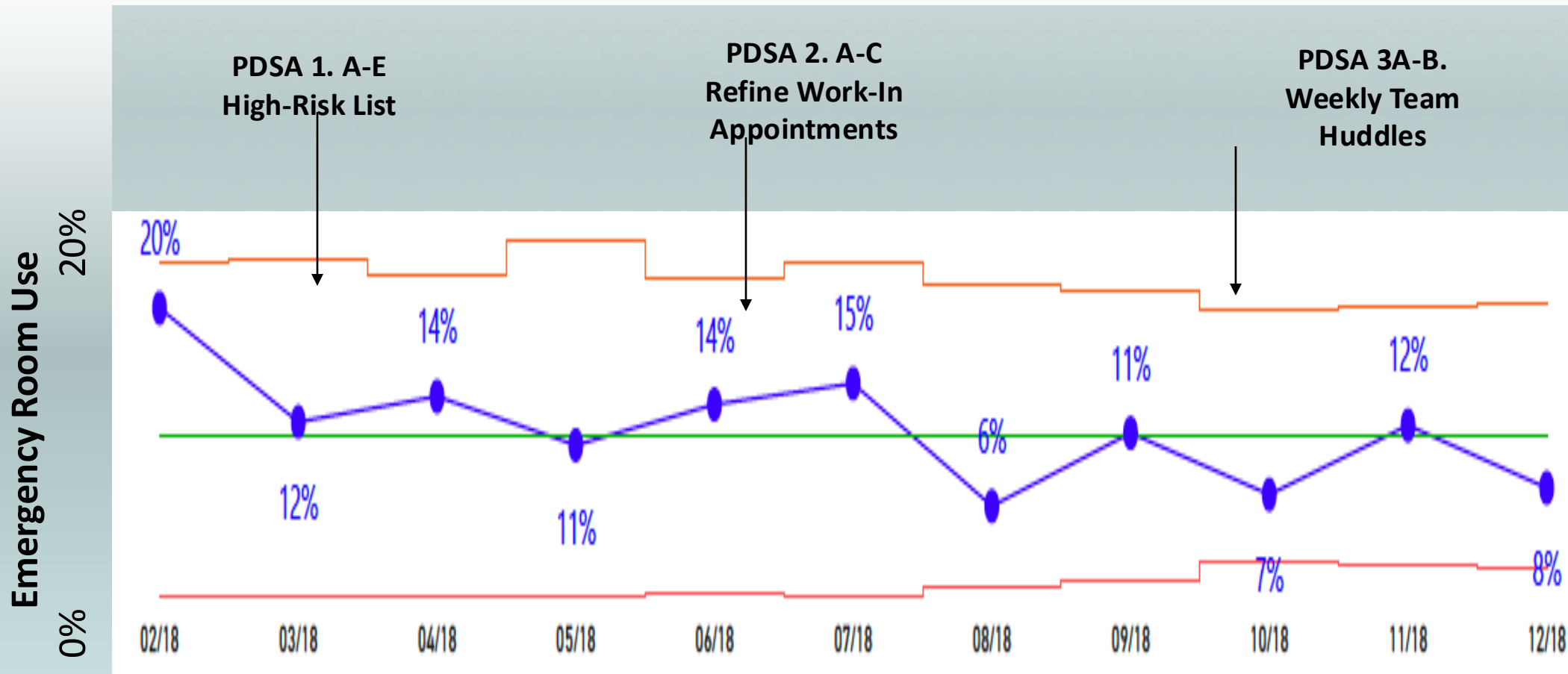
- 3A                      Best Day
- 3B, 3C                Best Time, Method



# Statistical Process Control Chart (p-Chart) Monthly ER Use in Qorus IBD Patients

February 2018 to December 2018 (N= 750 Patients Evaluated)

**Desired  
Direction**



# Connecting the Dots – What Lessons Did You Learn? What Methods Might You Adopt?

Listen to Data-Driven  
Improvement Story



Focus on  
Improvement  
Content

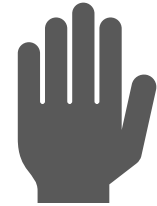
- What did they do?
- What results did they achieve?

How?

- What methods did the team in this example use could you apply to your work?

In the future, when striving to make improvements in my work or with teams I am coaching, I might use key concepts from this lesson to focus on:

- A. Being more intentional in setting a SMART Aim early in the project.
- B. Investing time in creating measures that matter.
- C. Focusing on feeding real-time data back to my team to motivate change.
- D. Engage my end users and/or patient and family partners earlier.
- E. More intentional structured improvement cycles using the Plan-Do-Study-Act method
- F. Other





Use your team huddles and meetings to plan and debrief small scale tests of change.



# Summary

## 3 Key Questions in the Model for Improvement

What

How

Changes



Answer each question with a SMART Aim

Key Measures

Changes Tested via PDSA Cycles



Adopting a common model, disciplined approach and methods leads to improved results!



# Resources

Batalden PB, Davidoff F. What is “quality improvement” and how can it transform healthcare?. *BMJ Quality & Safety*. 2007 Feb 1;16(1):2-3.

Chen Y, VanderLaan PA, Heher YK. Using the Model for Improvement and Plan-Do-Study-Act to effect SMART change and advance quality. *Cancer Cytopathol*. 2020 Aug 4.

Courtlandt CD, Noonan L, Feld LG. Model for improvement - Part 1: A framework for health care quality. *Pediatr Clin North Am*. 2009;56(4):757-778.

Pratap JN, Varughese AM, Adler E. Getting started with the model for improvement: the model in practice. *Br J Hosp Med (Lond)*. 2013;74(1):42-6.

Randolph G, Esporas M, Provost L. Model for Improvement – Part Two: Measurement and feedback for quality improvement efforts. *Pediatr Clin North Am*. 2009;56(4):779-98.

## **Model for Improvement Part 1. IHI Whiteboard Video**

2:54 minutes

Basic Overview

<http://www.ihl.org/education/IHIOpenSchool/resources/Pages/AudioandVideo/Whiteboard3.aspx>

## **Model for Improvement- Improvement Foundation Video**

6:54 minutes

Animated, fun and with an easy example. Explains why tests of change, before implementation are important.

[https://www.youtube.com/watch?v=IZAx-69Vn\\_Y](https://www.youtube.com/watch?v=IZAx-69Vn_Y)