



## Quality Improvement For Baby-Friendly

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## *Today's Objectives*

After today's webinar, participants will be able to:

- Apply key quality improvement principles and practices to their ongoing Baby-Friendly implementation efforts.
- Communicate the benefits of using QI principles and practices to achieve excellence in Baby-Friendly work.
- Reflect on current and future challenges that may benefit from a quality improvement approach.
- Describe the Plan Do Study Act framework that could be used to address ongoing implementation challenges.



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## *Today's Discussion Topics...*

- What is quality improvement (QI)? Am I already doing QI?
- Why is QI important?
- How do you know when to use QI? How do you identify projects?
- What is the Plan Do Study Act framework?
- Why is change so hard?

## *What is quality improvement?*

“Quality improvement in public health is the use of a **deliberate and defined improvement process...to achieve measurable improvements in the efficiency, effectiveness, performance, accountability, outcomes, and other indicators of quality** in services or processes.”

-Public Health Foundation

“**Quality Improvement** is a formal approach to the analysis of performance and systematic efforts to improve it. There are numerous models used.”

-Google

## *Why do quality improvement?*

- Achieve/exceed organizational goals/mission!
- Increase efficiency
- Improve effectiveness and outcomes
- Improve accountability
- Empower employees to solve problems
- Improve customer satisfaction
- Reduce errors



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## *QI Examples?*

Do you have an example of a change that your organization made as a result of Baby-Friendly designation that is difficult to sustain or there is an opportunity to improve upon it?

Achieve/exceed organizational goals/mission, improve effectiveness and outcomes, increase efficiency (save time/money), improve accountability, empower employees to solve problems, improve customer satisfaction, reduce errors

Type your example in the chat box.



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## *What defines a QI Project?*

“We make changes in our work all of the time.

How is quality improvement any different?”



## *A Change Versus an Improvement*

Not all changes are improvements!

Improvements are supported by a change in data (whether quantitative or qualitative).



## *What defines a QI Project?*

- Leadership support or sponsorship
- Use of tested tools/methods
- Collection and/or review of relevant data before and after change
- Root cause analysis
- Engages stakeholders with different perspectives
- Time bound (i.e. 3-4 months, 6-9 months)
- Linked to organizational goals and performance (designation criteria)

## *Process Thinking*

- There is no product or service without a process and no process without a product or service.
- Best way to improve the output is to improve the process.
- Processes can be analyzed and improved.
- All work is a process...it's all about the process.
- Improving those processes critical to the customer are at the heart of QI.

# FRAMEWORKS & TOOLS!



## *Quality Improvement/ Process Improvement Frameworks*

- Lean
- Six Sigma
- Plan Do Study Act



## *Plan Do Study Act*



## *Plan Do Study Act*

- PDSA is an iterative four-stage problem-solving framework for improving a process or carrying out change.
- It is a simple, yet powerful framework based on the scientific method, i.e., it involves developing, testing, and analyzing hypotheses.

Source: [http://www.pfh.org/resourcestools/documents/ABCs\\_of\\_PDCA.pdf](http://www.pfh.org/resourcestools/documents/ABCs_of_PDCA.pdf),  
February 13, 2017



## Plan Phase

- Identify and prioritize opportunities for improvement
- Develop an aim statement - The AIM statement should describe what the team is trying to accomplish and should include how the team will know if a change is an improvement.

AIM statements should be SMART:

- S - Specific
- M - Measurable
- A - Achievable
- R - Relevant
- T - Time bound



- Describe the current process (current state); Collect data on current process.

Source: Introduction to Quality Improvement in Public Health, Kansas Department of Public Health and Public Health Foundation, Train.org, February 13, 2017



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## Plan Phase

- Explore root causes of problem.
- Develop an improvement theory
- Develop an action plan to address the problem.

Source: Introduction to Quality Improvement in Public Health, Kansas Department of Public Health and Public Health Foundation, Train.org, February 13, 2017



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## *Do Phase*

- Implement the action plan (proposed improvement)
- Collect and document data
- Document problems, unexpected observations, lessons learned, and knowledge gained

Source: Introduction to Quality Improvement in Public Health, Kansas Department of Public Health and Public Health Foundation, Train.org, February 13, 2017

## *Study Phase*

In "Study," you are tasked with analyzing the effect of the intervention:

- Compare data to the baseline data
- Determine whether the measures in the AIM statement were met - was the test successful?
- Describe and report what was learned

Source: Introduction to Quality Improvement in Public Health, Kansas Department of Public Health and Public Health Foundation, Train.org, February 13, 2017

## Act Phase

In this phase the team gets to act based on the results of the previous phases. Teams can choose to make one of three decisions:

Adapt      Adopt      Abandon



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Source: Introduction to Quality Improvement in Public Health, Kansas Department

## Examples of Tools

### Plan

- Assemble a team
- Examine the current approach



- \* Brainstorming
- \* Affinity Diagrams
- \* Fishbone Diagrams (Cause & Effect)
- \* Flowcharts (Start, Stop, Keep)
- \* Force Field Analysis
- \* Radar Charts
- \* Team Analysis

- Identify root cause of the problem
- Identify possible solutions
- Develop an improvement theory
- Develop an action plan



- \* Fishbone Diagrams (Solution & Effect)
- \* Gantt Chart
- \* RACI Charts

Source: Introduction to Quality Improvement in Public Health, Kansas Department of Public Health and Public Health Foundation, Train.org, February 13, 2017



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## Organizational Change...

Changing practices in organizations (if solving problems or when implementing new policies and procedures) requires change at the individual level.

And remember that any one individual is experiencing many changes at the same time.

Source: Prosci Change Management,  
<https://www.prosci.com/adkar/adkar-model>, February, 13, 2017

## ADKAR Model of Change Management



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For more information on this model or resources, check out:  
 Prosci Inc. at <https://www.prosci.com/adkar/adkar-mode>

## *In Summary...*

- Quality improvement is a set of practices and tools that can be used to solve problems in order for your organization to achieve its goals and achieve its mission.
- Quality improvement is often used to improve processes, and there is a process related to all products and services provided.
- The Plan Do Study Act is a commonly used framework for studying a problem and implementing small tests of changes to see if the changes are an improvement.
- All organizational change starts with individual change. Recognize where team members/staff are in the change process when determining how to best test an improvement.

## *Next Steps – September Workshop 2017*

- Dive deeper into QI based on input from this webinar. Ideas include applying the PDSA tool to a real-life example and explore facilitation methods for ongoing quality improvement.
- Learn more about change management and tools for managing change.

*QUESTIONS OR COMMENTS?*



**THANK YOU!**



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