A Brief Overview of Quality Assurance and Quality Improvement for Public Health

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Presentation Objectives

1) Define the terms QA and QI.
2) Relate QA, Accreditation and QI to one another.
3) Provide the “big picture” of quality.
4) Clear-up misconceptions.
5) Discuss embracing a “culture of quality” in Public Health
6) Answer remaining questions.
QA: The First Big Hurdle
Defining Quality Assurance (QA)

A way to warrant that predefined standards are met. QA is the first step toward quality improvement.
QA in a Healthcare Context

- Utilization review;
- Risk management;
- Infection control;
- Safety program;
- Credentialing;
- Peer review;
QA in Broader Context

- Quality control;
- Privacy;
- Customer satisfaction;
- Employee satisfaction;
- Accreditation.
Defining Assessment/Accreditation

• An assessment/accreditation program is one that uses an identified set of standards or metrics to review the performance of state and/or local public health departments.
Accreditation (Michigan)

- Standards (Minimum Program Requirements)
- Indicators (Way to meet Requirements)
- Corrective Plan of Action (Way to meet Requirements)
- Self-Assessment (Practice/assess to see if meeting Requirements)
The Simple Fact Is:

• Measuring and monitoring performance is essential to demonstrating the effectiveness of, and retaining funding for, your program; not to mention providing the best service possible.
Informal QA: What have you already done?

- Reviewing program processes;
- Identifying performance measures;
- Monitoring outcomes;
- Reporting outcomes;
- Surveying participants;
- Surveying staff or forming work groups
Moving from Monitoring (QA) to Improvement (QI).
Defining Quality Improvement (QI)

• A continuous process to review, critique, and implement positive change to achieve quality improvement in public health policies, programs or infrastructure.
How does QI differ from QA?

• QI moves beyond quality assurance, relies on data-driven decision making, and is used to make a process or system better.
• QI requires the systematic use of improvement models or tools, such as the Plan-Do-Study-Act (PDSA) model.
• QI may also refer to a range of practices geared toward improving performance.
QI Processes Are All Variations of the Same Basic Steps
Choose the Simplest Approach that will Meet Program Needs

- PDCA/PDSA
- Proven in many contexts;
- Front line staff have significant input;
- Many tools are available and inexpensive.
The QI Tool Bag

• Root cause analysis;
• Flow chart;
• Pareto chart;
• Fishbone diagram.
• Logic diagram
Don’t Forget About Improvement

• You use QI to hypothesize the process changes that will result in improvement;
QA and CQI Belong Together
How do QA and QI relate to one another?

- QA and Accreditation is about defining standards (measures) and monitoring performance.
- QI is about using measures to plan and test improvements in a program or process.
The Most Common Misconceptions

• QA/QI is just another way to assess my work performance
• I’m too busy to add QA and/or QI to my duties.
• I don’t know anything about QA or QI, so I can’t participate.
Embracing a “Culture of Quality” in Public Health: What Can I Do?

- Recognize the value of QA/QI;
- Buy into the necessity of change to achieve improvement;
- Work as a team to improve the program;
Embracing a “Culture of Quality” in Public Health: What Can Management Do?

- Recognize untapped expertise among existing team members;
- Invest resources to learn and accomplish improvements;
- Integrate Quality into your Mission
- Recognize while management usually leads accreditation efforts, line staff usually make QI happen
- Celebrate accomplishments in a public manner
Accreditation and Quality Improvement are on the same path
Accreditation and Quality Improvement Together

- Have similar goals where
- Accreditation defines measures and monitors performance and
- QI uses the measures to plan and test improvements
- Combined there are greater benefits
- Moves us toward systemic change
- Leads us to a Culture of Quality
Why Quality Improvement?

- Public Health often slow to adopt improvements
- Cpt James Landcaster in 1601 proved Vitamin C prevented scurvy
- British preventive policy on scurvy adopted 264 years later
- Provides a set of proven, reliable, and repeatable steps that anyone can use to make improvement
Objectives for MLC Going Forward

• Support the voluntary application of QI techniques in Michigan’s accreditation program
• Learn from each other how to apply QI methods and techniques
• Produce improvements, documents and tools that will serve as resources to advance QI efforts for Michigan’s LHDs
• Support Michigan’s and the national accreditation programs inclusion of a voluntary QI component
Any Questions?