

***The Art of a Quality Improvement Study***

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Vero Beach, Florida  
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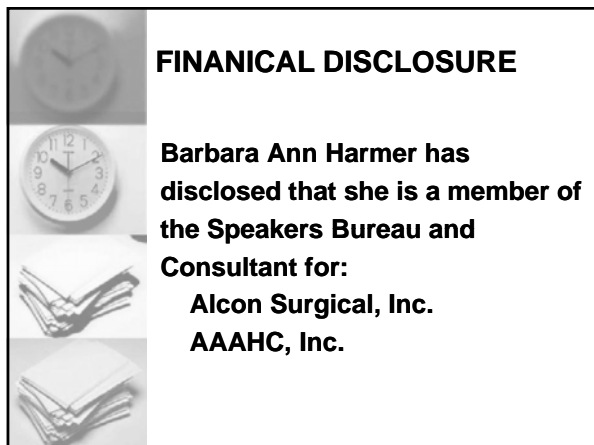
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**FINANICAL DISCLOSURE**

Barbara Ann Harmer has disclosed that she is a member of the Speakers Bureau and Consultant for:

**Alcon Surgical, Inc.  
AAAHC, Inc.**

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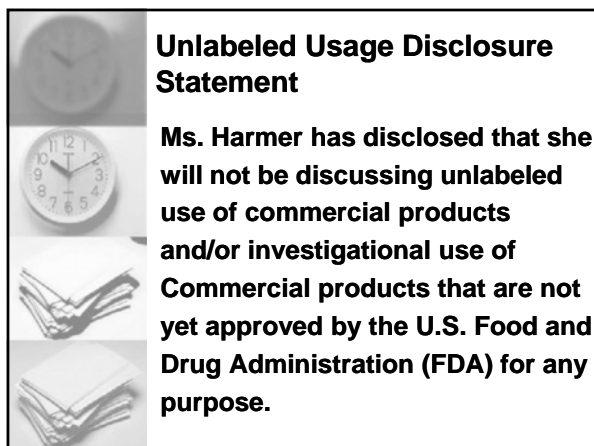
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**Unlabeled Usage Disclosure Statement**

Ms. Harmer has disclosed that she will not be discussing unlabeled use of commercial products and/or investigational use of Commercial products that are not yet approved by the U.S. Food and Drug Administration (FDA) for any purpose.

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**OBJECTIVES**

1. **State at least three areas that a QI study might address.**
2. **Describe the ten elements that at a minimum must be included in a quality improvement study.**

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**QUALITY IMPROVEMENT PROGRAM**

- Addresses Clinical, Administrative, Operational, Financial, Cost of Care Patient Outcomes, and/or Regulatory Issues and Concerns
- Adoption of Program
  - Approval of Governing Body
  - Education
- Benchmarking

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**QUALITY IMPROVEMENT: GETTING STARTED**

- Have you had any unexpected or unanticipated outcomes in your organization?
- What do you do the most of?
- What do you do that is very expensive in terms of time, supplies and staff and has implications for patient outcomes?
- What do you do for which providers vary widely in their management?
- How do you anticipate involving health care providers/administrators/patients/staff in the development, implementation, and follow-up of the study?
- Have you chosen an issue to study that you can act on (make changes)?
- Can you collect data on your topic AND protect patient and provider confidentiality?
- Do you need informed consent to get the data? HIPAA?
- Are there sources of available measures available to your topic ("good research")?
- How long and difficult is it going to be to collect the data you need?

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**DOCUMENTING A QI ACTIVITY\***

1. A statement of the purpose of the QI activity that includes a description of the known or suspected problem and explains why it is significant to the organization.

- HINTS
  - Briefly state your known or suspected problem.
  - Describe why it is important for your organization to address this problem.

\* AAAHC, Inc., 2009

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**DOCUMENTING A QI ACTIVITY**

2. Identification of the Performance Goals against which the organization will compare its current performance in the area of study.

- HINTS
  - Determine and describe the level of performance your organization wants to achieve in the area of study.
  - Determine if internal/external benchmarks may be referenced.
  - Understand why 0% or 100% may not be realistic targets.

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**DOCUMENTING A QI ACTIVITY**

3. Description of the data that will be collected in order to determine the organization's current performance.

- HINTS
  - What data are needed to verify:
    - Whether the problem actually exists
    - Frequency and severity of the problem
    - Source of the problem
  - How will the data be collected?
  - How will you collect the information?

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**DOCUMENTING A QI ACTIVITY**

**4. Evidence of data collection.**

- HINTS
  - Describe the data you actually collected.
  - How did you record the data that you collected?

Do NOT describe your conclusions about the data in this element – just describe the data.

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**DOCUMENTING A QI ACTIVITY**

**5. Data analysis that describes findings about the frequency, severity and source(s) of the problem(s).**

- HINTS
  - Carefully analyze the data that you collected.
  - Determine what the data tell you about whether the suspected problem actually exists. If the problem does not exist, STOP HERE.
  - If the problem does exist, determine what the data tell you about the frequency, severity and source(s) of the problem(s).
  - Describe how the data were analyzed and describe your findings (conclusions).

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**DOCUMENTING A QI ACTIVITY**

**6. A comparison of the organization's current performance in the area of study against the previously identified performance goal.**

- HINTS
  - Compare the results of your data analysis to the performance goal identified in element 2.

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**DOCUMENTING A QI ACTIVITY**

7. Implementation of corrective action(s) to resolve identified problem(s).

- HINTS
  - Based on what you have learned about the frequency, severity and source(s) of the problem(s), determine what corrective action(s) you will take to improve your performance in the area of study.
  - Implement the selected corrective action(s) and determine the appropriate length of time until re-measurement is to occur.

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**DOCUMENTING A QI ACTIVITY**

8. Re-measurement to objectively determine whether the corrective actions have achieved and sustained demonstrable improvement.

- HINTS
  - At the designated re-measurement time, repeat the steps for data collection and analysis.
  - Compare the results of your second round of data collection and analysis to the performance goal identified in element 2 and determine whether the corrective actions have achieved the desired performance goal.

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**DOCUMENTING A QI ACTIVITY**

9. If the initial corrective action(s) did not achieve and/or sustain the desired improved performance, implementation of additional corrective action(s) and continued re-measurement until the problem is resolved or no longer relevant.

- HINTS
  - Determine whether this element is applicable to the study that you have conducted. If you have met and are sustaining your goal, this does not apply.
  - If this does apply, repeat elements 7-8 until your performance goal is met.

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**DOCUMENTING A QI ACTIVITY**

10. Communication of the findings of the quality improvement activities to the governing body and throughout the organization, as appropriate, and incorporation of such findings into the organization's educational activities.

- HINTS
  - Report and document your QI study results to your governing body. Is there anyone else that the results should be reported to?

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**CONTACT INFORMATION**

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