2024 QI Summer Series: *Bringing QI to the Bedside*

Process Mapping





Overview



- Goals of QI Summer Series
- ILPQC QI Framework: Model of Improvement
- Process Mapping
- Interactive QI Session
- Wrap-up and Next QI Series



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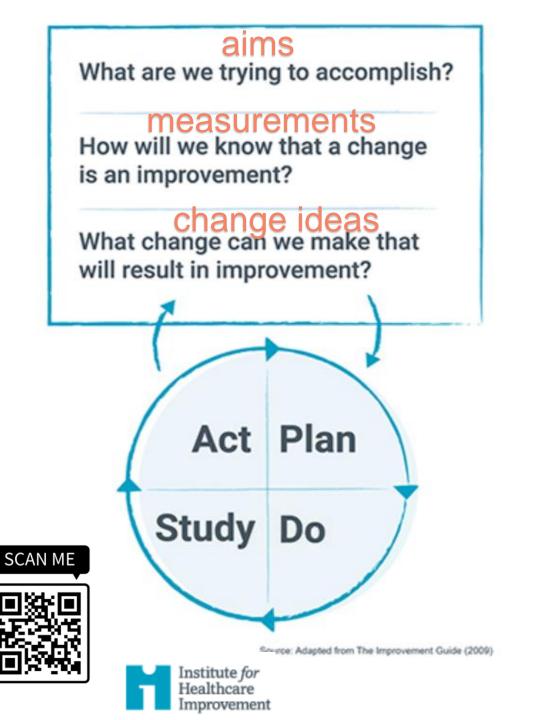
ILC PQC Illinois Perinatal Quality Collaborative

ILPQC Central

Team

Model for Improvement

- Framework to guide and accelerate improvement work
- Model for Improvement has two parts:
 - Three fundamental questions
 - Plan-Do-Study-Act (PDSA) cycle
- Guides the team through:
 - Process of establishing appropriate measures
 - Creating changes
 - Evaluating changes
 - $\circ~$ Implementing changes and spreading changes



Review from last month

ESSI Prioritization matrix template

			Importance	Parent Importance	Resource Intensity	Complexity	Score	Priority Rank
Driver #	Driver name		+ or -	+ or -	+ or -	+ or -	+ or -	#
	+ or -							
1		1. De	etermine	e driver	to be ev	valuated	· [
		2. De	etermine	e criteria	a & ratir	ng scale		
2		3. Sc	ore eac	h interv	ention	using c	riteria	
		4. Pr	ioritize	list of p	otential	inventi	ons _	
3								
4								

Goals of the 2024 QI Summer Series



Refresh your QI tools to apply the Model of Improvement to your work

6

Implement QI

strategies directly where

patient care is

delivered

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Process Mapping

Visual representation of a sequence of a process



Process Mapping



- Flowchart or simple diagram shows all the steps involved in doing something
- Helps team to understand how a process works
- Identify any unnecessary steps
- Find ways to make it more efficient



Determine the type of process map



Ex: Suppliers-Input-Process-Output-Customer (SIPOC)

- What is your *process scope*? Start and stop of process
- **Suppliers**: Entities that provide inputs to the process
- **Inputs**: **Resources** or information needed to execute the process
- **Process**: Series of steps taken to transform inputs into outputs
- **Outputs**: The products, services, or results produced by the process
- **<u>Customers</u>**: The recipients of the outputs, who benefit from the process.



		Process			
Supplier	Input Start:		Output	Customer	
		Stop:			

Suppliers Inputs Processes Outputs Customers Steps · Patients Prescriptions Prescription Patients labels · Pharmacy Medications Families Prescription Intake Staff · Patient Patient HealthCare · Physicians Education professionals Information Prescription Entry Nurses · Drug Prescription Production · Wholesaler Prescription Verification Ψ Dispensing

Example from IHI "QI Essentials Toolbox"

Example showing **Prescription Dispensing Process** from: Alkuwaiti, Ahmed. (2016). Application of Six Sigma Methodology to Reduce Medication Errors in the Outpatient Pharmacy Unit: A Case Study from the King Fahd University Hospital, Saudi Arabia. *International Journal for Quality Research*. 10. 267-278. 10.18421/JQR10.02-03.

Interactive Session





Scenario: QI Team Monthly Meeting

- Hospital Demographics: Suburban, level II hospital, 80-90 births/month
- Team Leads: Alana (RN Champion) and Patti (QI Lead)
- **QI Team members:** you on the call (interdisciplinary team)
- Accomplishments
 - Readiness survey complete
 - QI team has a regular meeting set-up
 - Attended data training calls, QI Leader calls and Jan-May monthly webinars
 - All data is in and current, including baseline data
 - Use the prioritization matrix tool to determine next steps

• Focus on the process of SDoH screening and linkage to our resources

	Aims	Primary Drivers	Secondary Drivers
Key Driver	By December 2025: 1. Greater than 70% of Illinois birthing and children's hospitals will address disparities and promote neonatal equity by actively participating in the ESSI initiative.	Healthcare Professional Commitment	 Equitable and Respectful Care Education and Implementation Safe Sleep Environment Education and Implementation
		Inclusive Clinical Environment	 Organizational Leadership Commitment Equitable and Inclusive Unit Policies Parent and Caregiver Experience Prioritization
Diagram		Parent and Caregiver Empowerment	 Respectful Parent and Caregiver Partnerships Safe Sleep Awareness Transition to Home, including SDoH Screening and Resource Linkage
	2. Greater than 80% of infants will be discharged from	Community Part nerships	 Resource Mapping Building Relationships with Community Organizations Transfer of Care to Community Providers
IL PQC Illinois Perinatal Quality Collaborative	ILPQC hospitals with a completed ESSI bundle.	Healthcare Data Utilization	 Collection of Accurate Race and Ethnicity Data Dissemination of Stratified Data Application of Data to Address Inequities
Illinois Perinatal Quality Collaborative	ESSI Bundle:	avigating challenges to safe Readiness : Family is prepare Inkage	givers report an understanding of a safe sleep environment, including e sleep at home d for a transition to home, including SDoH screening and resource orn Care Plan (Awareness & Readiness) documented in the discharge

SIPOC Diagram for sDOH Screening and Linkage

- **Suppliers**

- Patient
- Social Worker
- Nursing •
- Physician •
- Registrars
- Patient Partners ٠
- Rep from all team members; ex: health informaticist

Inputs

- Medical Record
- Resources to connect them to
- Patient data
- Knowledge of what

resources are available

• Screening tools

- **Processes**
 - Screening tool needs to • be filled out
 - Relationship building • with community organizations
 - Accountability of • process
 - Evaluate patient need •
 - Education/training of tool
 - Identify goal of process •
 - Automatic EMR • processes
 - Referral to resources

Link to social work •

Outputs

Customers

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Completed screening ٠ tool

IL

- Referrals made to • appropriate resource
- Follow up • information; tip sheets, educational sheets and tools
- Documentation in ٠ the chart
- Improved patient • outcomes

- Patients
- Parents
- Providers
- Receiving agency
 - Commun ity partners
- Social workers

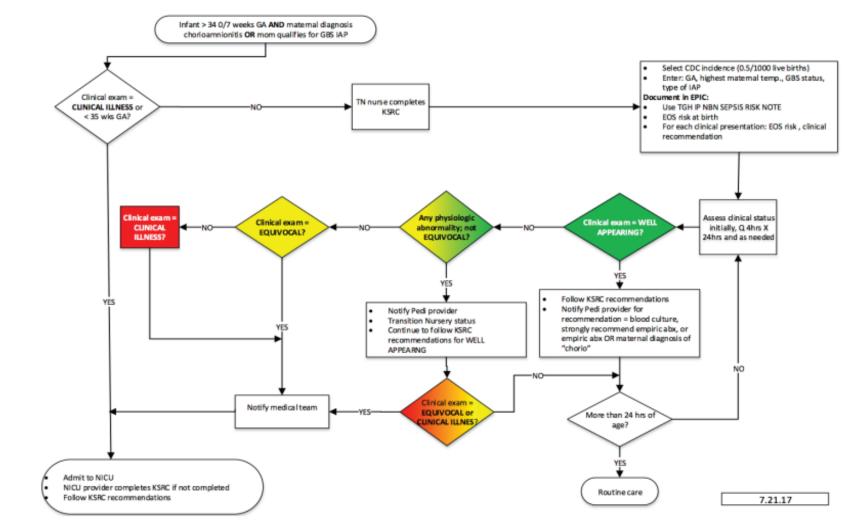
But now, we're ready for a visual

- 1. Ensure all key stakeholders are represented for discussion.
- 2. Identify the start and stop of your process (i.e., scope).
- 3. Detail the tasks (or processes), decisions, and delays in each functional area. Note that decisions should be binary (yes or no).
- 4. Diagram the start, stop, tasks (or processes), decisions, and delays using the process map symbols.
- 5. Connect steps with arrows.
- 6. Review the completed process map with your team and consider "walking the process" to determine if it is apted from goleansix sigma.com and lean.ohio.gov an accurate reflection of the actual or desired process.

Process map symbols		
	Start and stop of the process	
	Task or functional area of the process	
\bigcirc	Decision point (Note: only 2 arrows should come out of a decision point)	
	Delay or waiting before the next task or decision can occur	

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KAISER SEPSIS RISK CALCULATOR PROCESS FLOW



Balakrishnan, M. (2018). Using QI tools to further improvement efforts.

Questions? Clarifications? Examples?





Scan me!



LOOKING TO BETTER

UNDERSTAND THE ILPQC DATA

SYSTEM?

ILPQC QI SUMMER SERIES

LUNCH & LEARN @ 12:00PM

REDCAP

Equity and Safe Sleep for Infants (ESSI):

Thursday, June 20th

Birth Equity (BE):

Thursday, July 18th

Promoting Vaginal Birth (PVB):

Thursday, August 15th



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REDCapi

Questions? Email Alana at arivera@northshore.org

WANT TO LEARN MORE ON ACCESS TO INITIATIVE-SPECIFIC REPORTS?

SAVE THE DATE



THE WESTIN LOMBARD