



HCAC 2023

7TH QUALITY HEALTH CARE CONFERENCE AND EXHIBITION

Nov 13th-15th 2023

Globalization Toward Quality & Patient Safety
A Future Perspective

الجودة من منظور عالمي - تطلعات مستقبلية

Point of Care Quality Improvement (POCQI) Workshop



USAID
FROM THE AMERICAN PEOPLE



Navigating the Journey of Quality Improvement: Essential Concepts

Dr. Raja Khater

USAID Health Services Quality Accelerator Activity
Senior Service Delivery Advisor



Does Quality Improvement differ from the concept of change?



What does Quality Improvement Mean?

Why there is a Need for Quality Improvement?



Are you too busy to improve?

No
thanks!

We are
too busy



How to Start a Quality Improvement Initiative



How will the effectiveness be measured for the improvements done?

Purpose - aim and mission.

Patients - reason for doing our work.

People - staff who take care of patients.

Processes - interrelated process that make up the micro system.



What Skills Are
Essential For
Effectively
Contributing To
a Successful
Quality Initiative?



The Top 8 Skills



Communication

Clearly articulating concepts is the **#1 skill** for anyone who works in process improvement.

1

Trust Building

Articulate and communicate the vision to **build trust** that the outcome will be better than before.



2

Seeing the Big Picture



Managing the step-by-step details while keeping the **ultimate goal** in mind.

8

Coaching

Be a **good coach**: be supportive and know when to critique something that needs to be improved.



3

Resilience and Persistence



Tirelessly addressing resistance is the hallmark of a successful process improvement leader.

7

Understand Process Management

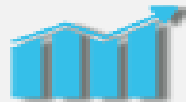
Understand the current **process**, determine a solution, and design & implement the new process.



4

6

5



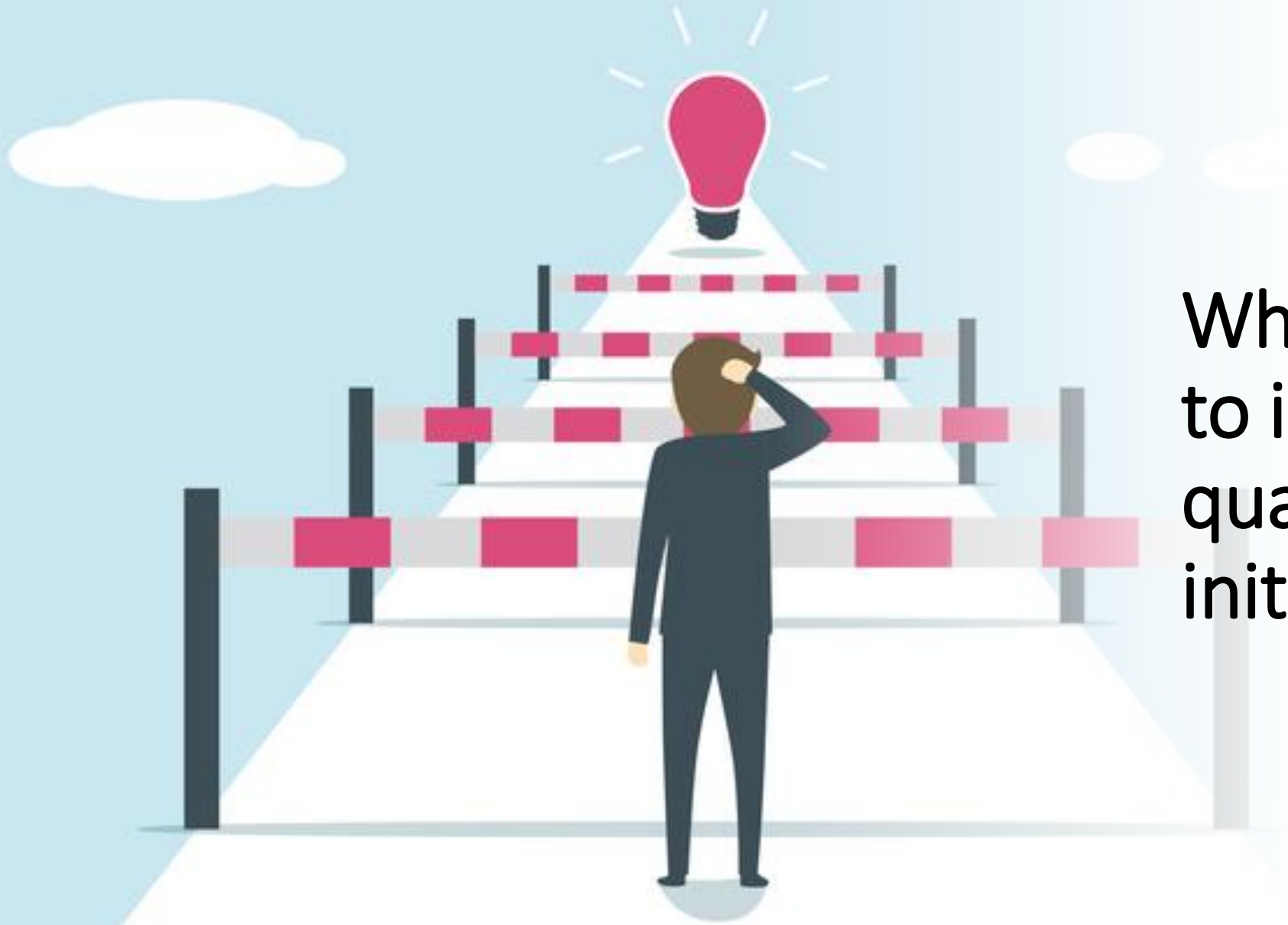
Constructive Accountability and Conflict

Create an environment of constructive **accountability** to shatter the mold of "that's the way we've always done it."



Understand Care Management Personnel

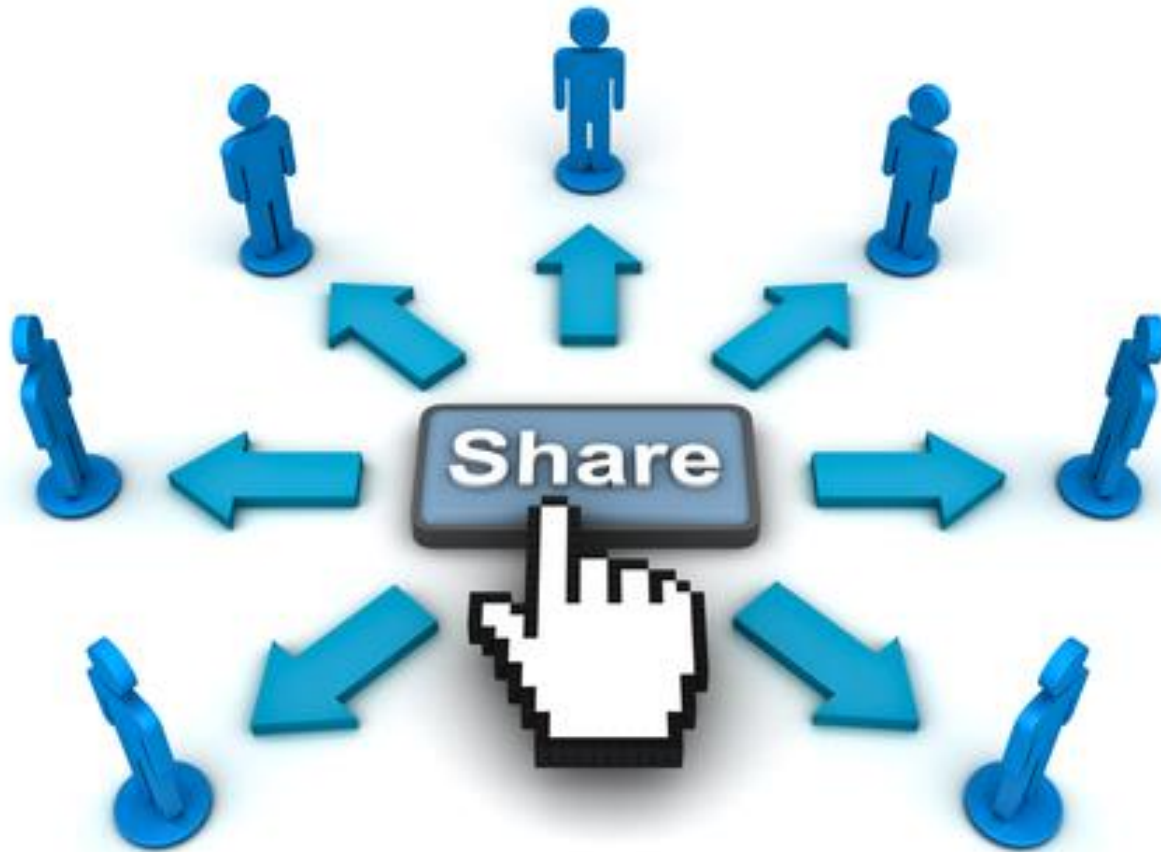
Understand how the process relates to the real environment, including **frontline workers**.



What are the barriers to implementing quality improvement initiatives ?

How can organizations ensure that their strategies for quality improvement are effectively integrated and sustained within their operations?





What networks can you engage with to help spread your improvements?



Are You Prepared
to Start the
Quality
Improvement
Journey?





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POCQI Model

POCQI implementation framework

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Clinical Quality Improvement Advisor



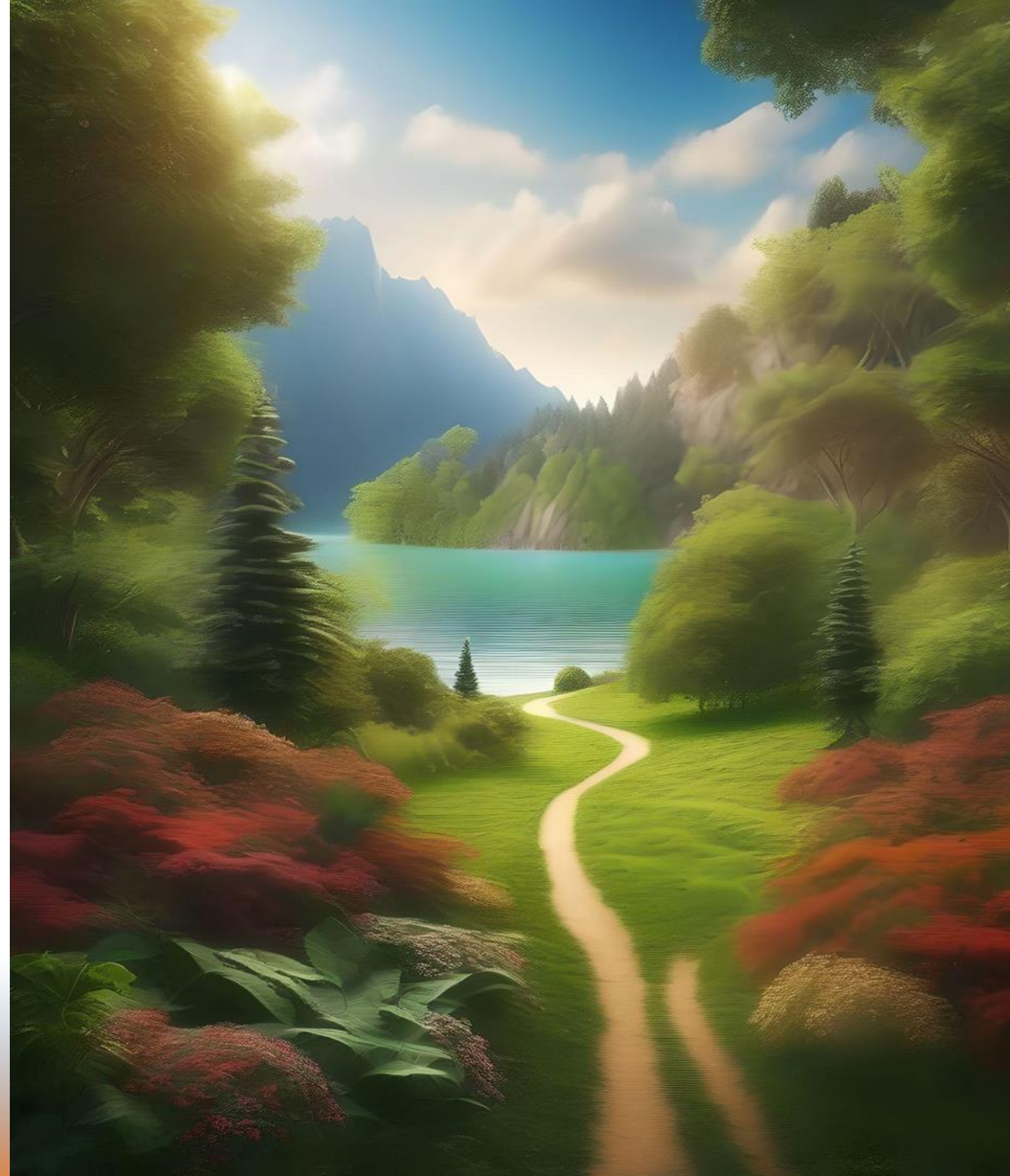
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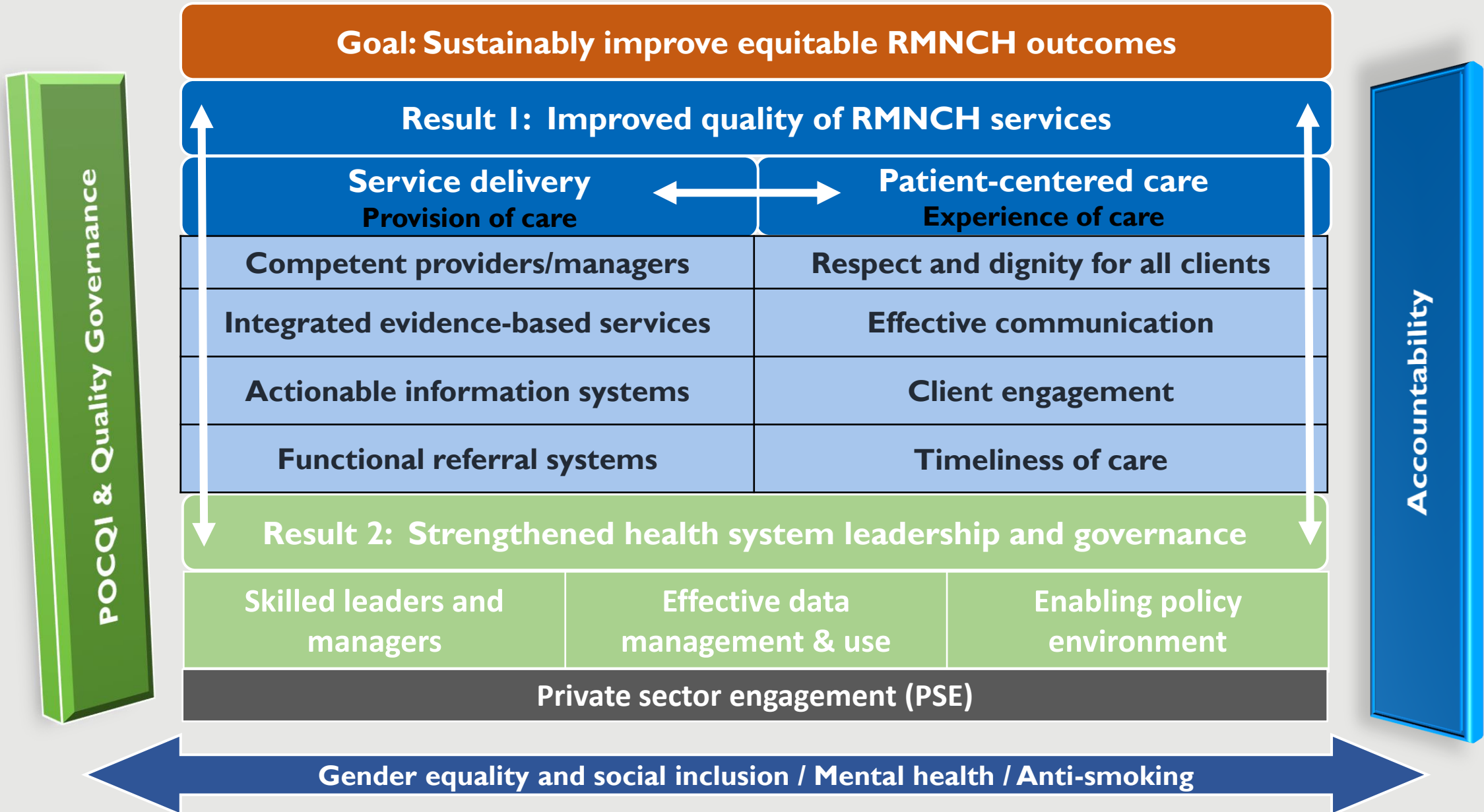
Outline

This workshop covers the following topics on the POCQI model in healthcare:

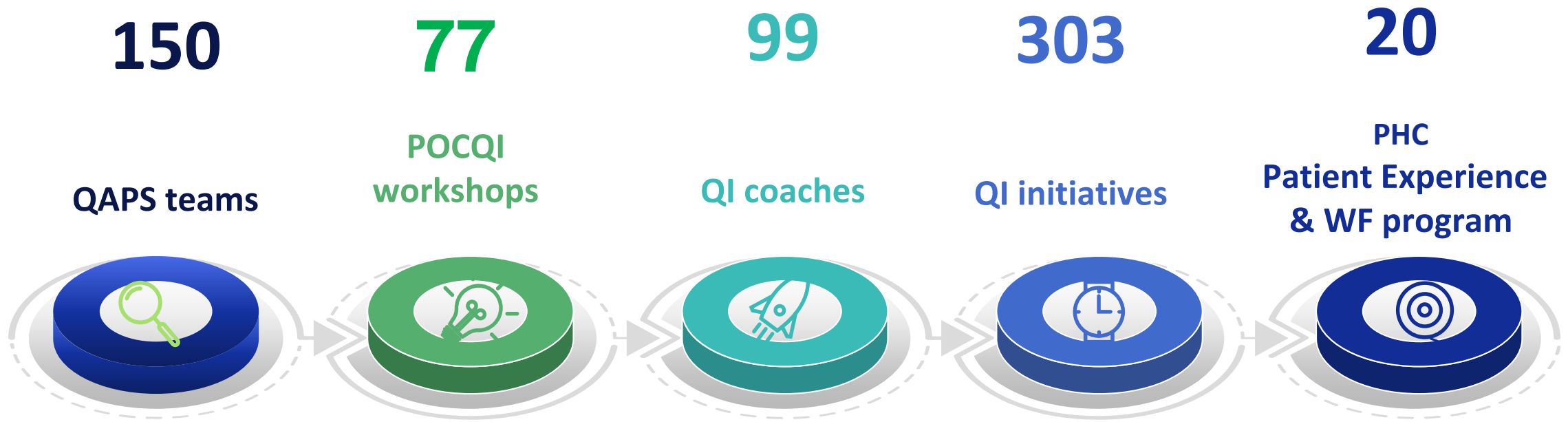
- POCQI model and its relevance in healthcare.
- Benefits of POCQI Model implementation in healthcare.
- Challenges in implementing the POCQI model in healthcare, along with their solutions.
- A case study on the POCQI Model in Healthcare in Jordan.
- Impact of POCQI model on healthcare in Jordan- Success stories and challenges.
- Future directions for development in POCQI model implementation in healthcare.



Strategic Framework to Accelerate Quality of RMNCH Services in Jordan



At What Point are we in our Journey?

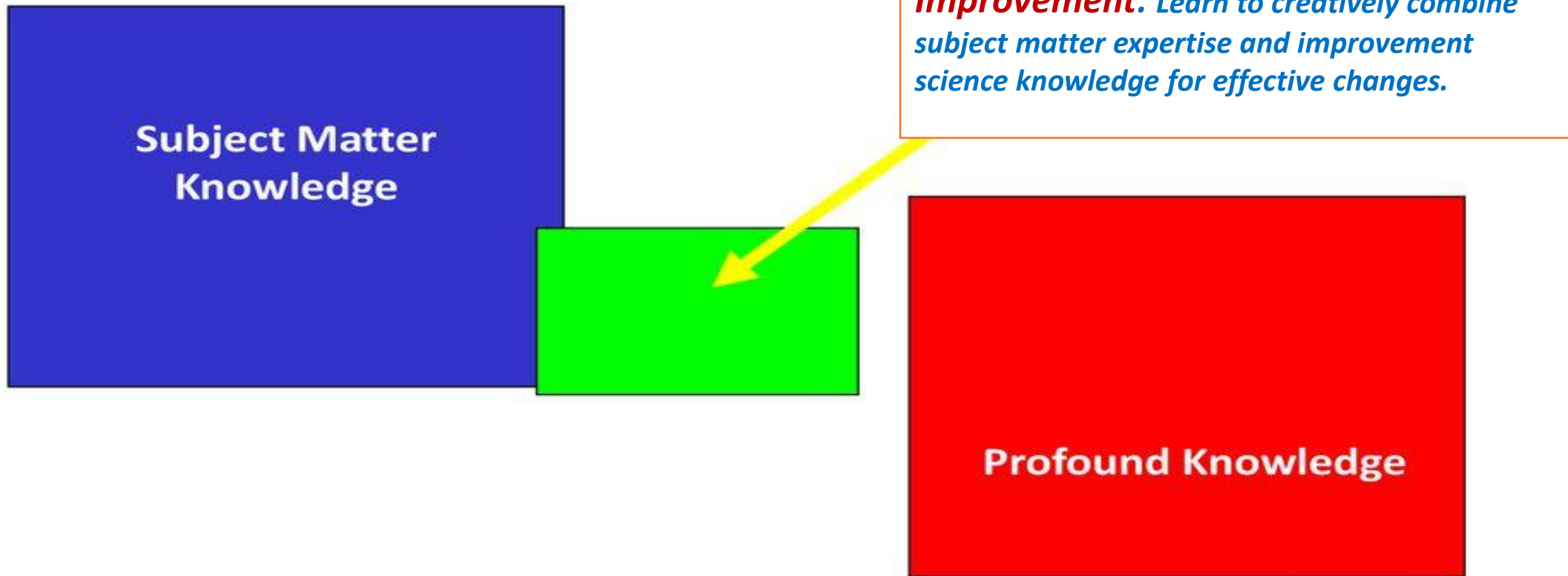


Improving Quality of Care for Maternal, Newborn, and Child Health

***From theory to reality - let's make it
happen!***

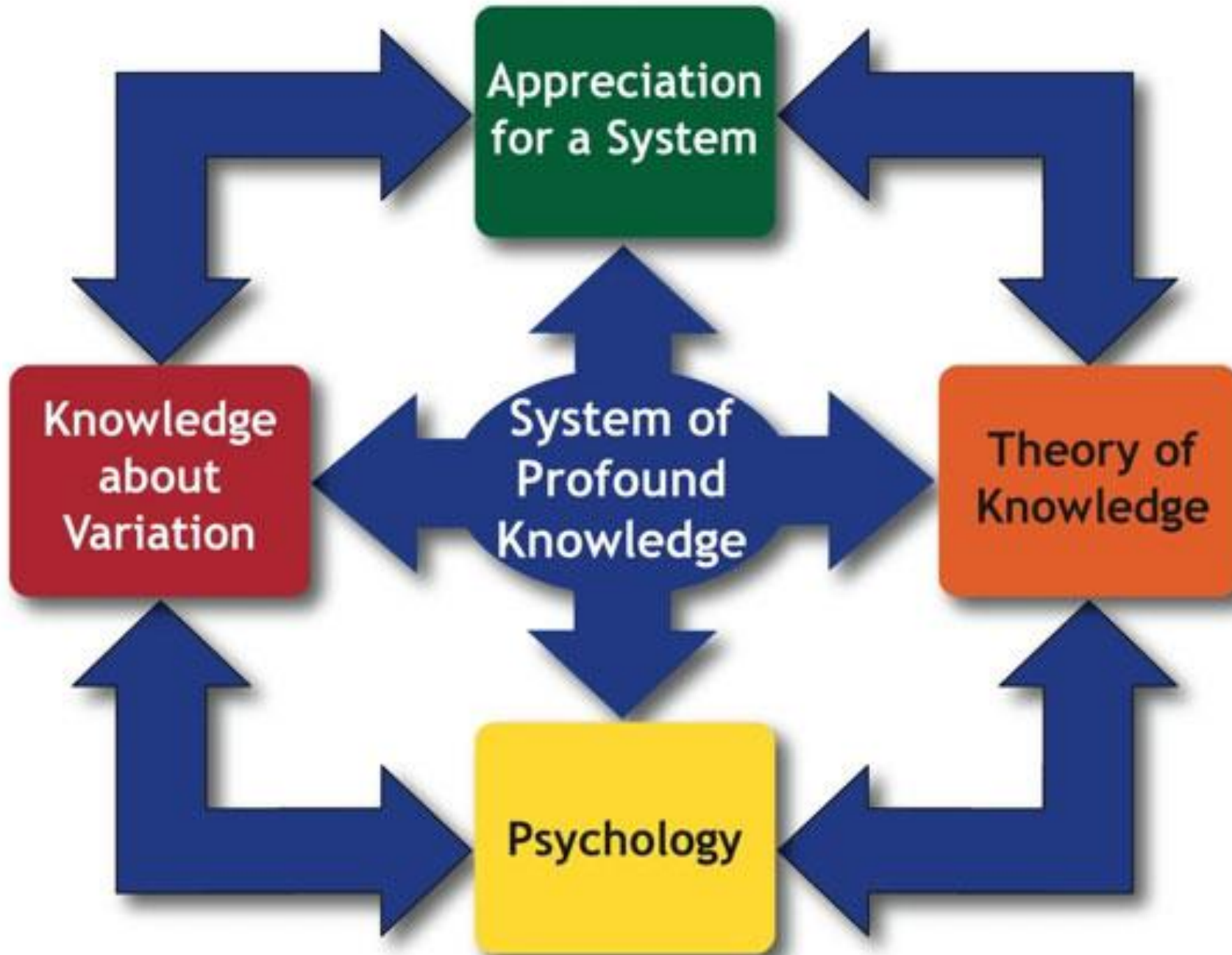


Subject Matter Knowledge: Knowledge basic to the things we do in life. Professional knowledge.



Profound Knowledge: The interaction of the theories of systems, variation, knowledge, and psychology.

(W Edwards Deming)



Dr. Edwards Deming
1900-1993



***The application of knowledge leads
to improvement.***

Aim

Measure

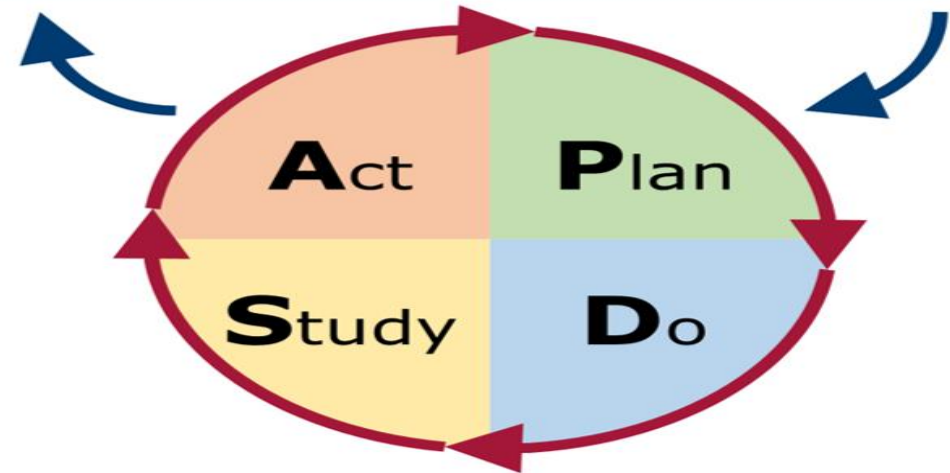
Change

Model for Improvement

What are we trying to accomplish?

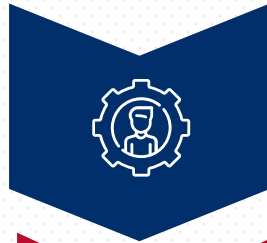
How will we know that a change is an improvement?

What change can we make that will result in improvement?



Point of Care Quality Improvement Model (POCQI)

1 Step 1



- Identifying a problem based on available data
- Developing an SMART aim statement

2 Step 2



Analyzing the problem, planning for change

3 Step 3



Testing changes (PDSA)

4 Step 4

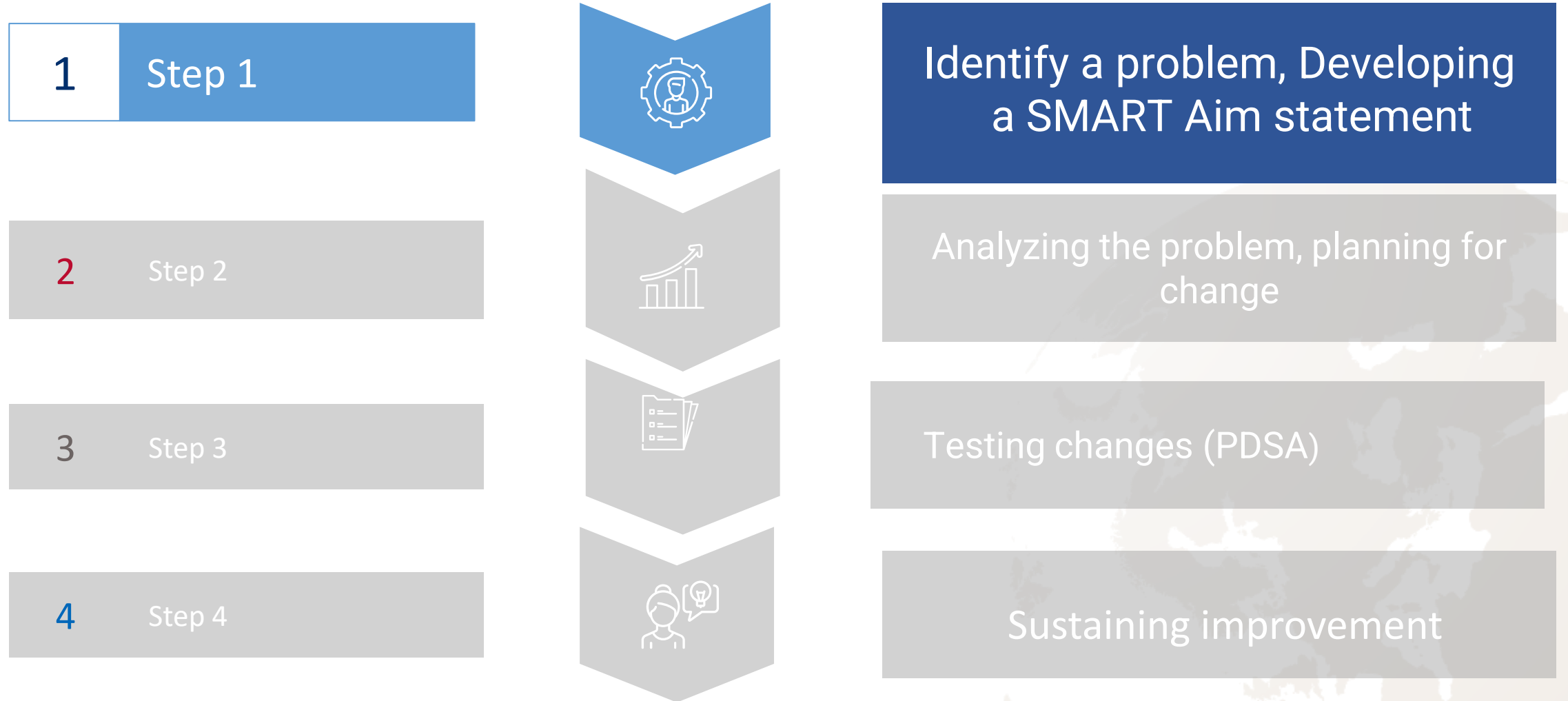


Sustaining improvement

***Experience implementing the POCQI model
for RMNCH quality improvement***

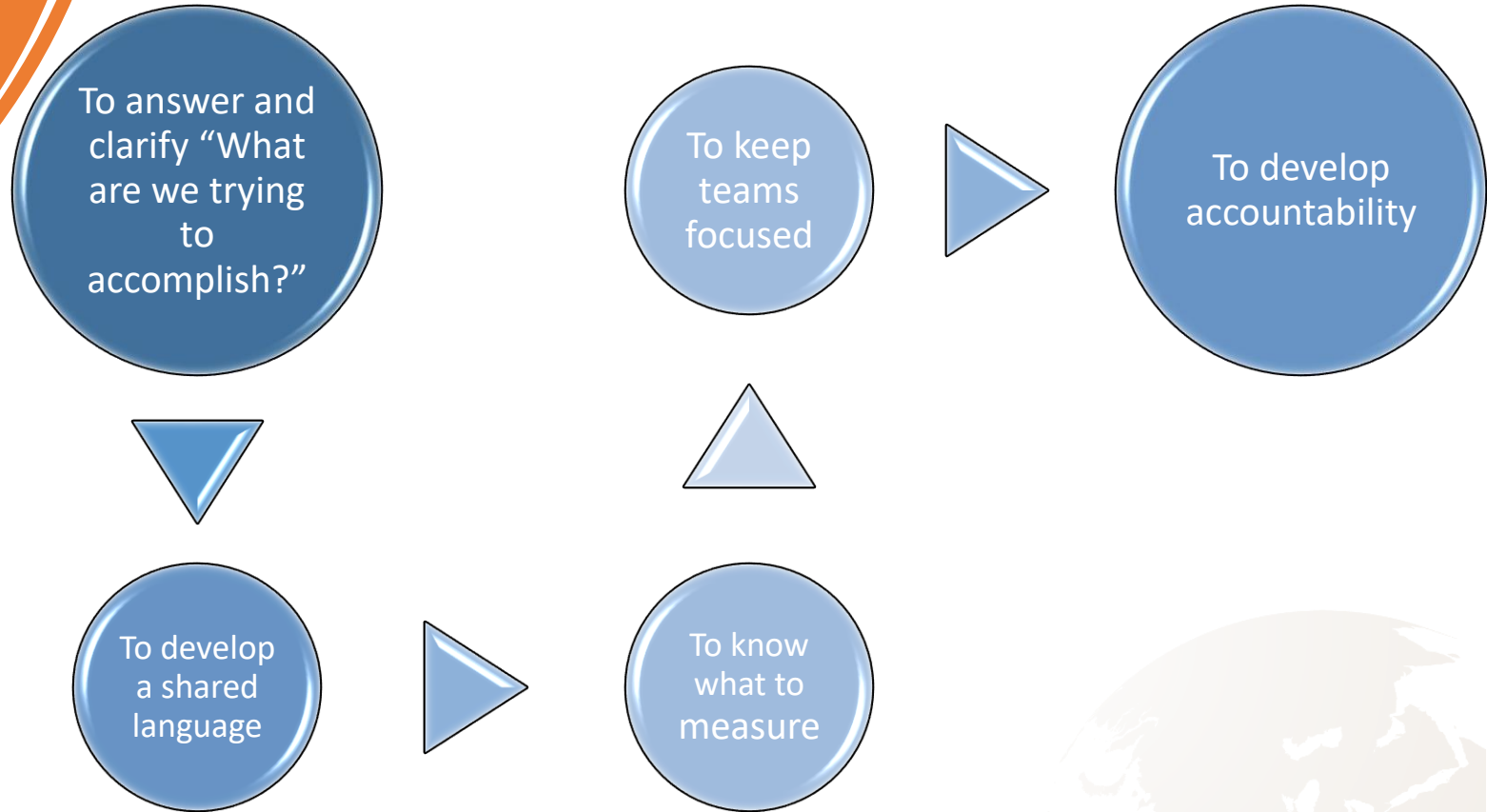


POCQI Model



Why spend time on an aim statement?

The Power Of Aim

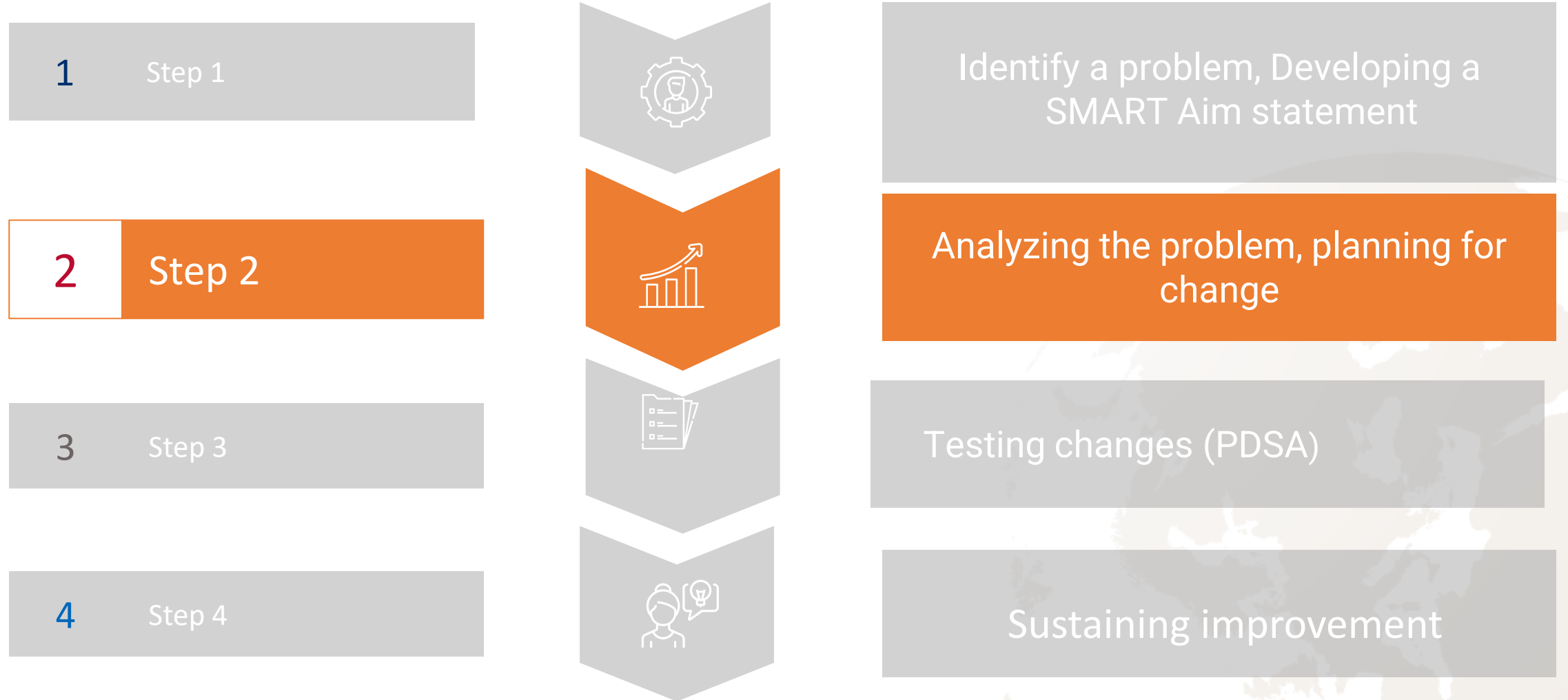


Aims Create Systems, Systems Create Results

Dennis Wagner, 2016



POCQI Model

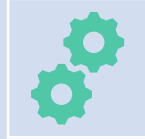


Quality Tools



Idea creation tools:

When you want to come up with new ideas or organize many ideas.



Process analysis tools:

When you want to understand a work process or some part of a process.



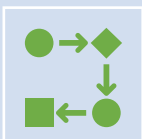
Data collection and analysis tools:

When you want to collect data or analyze data



Cause analysis tools:

When you want to discover the cause of a problem or situation.

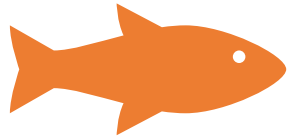


Evaluation and decision-making tools:

When you want to narrow a group of choices to the best one or evaluate how well you have done something.



Combining Tools



Fishbone and 5 Why
Analysis



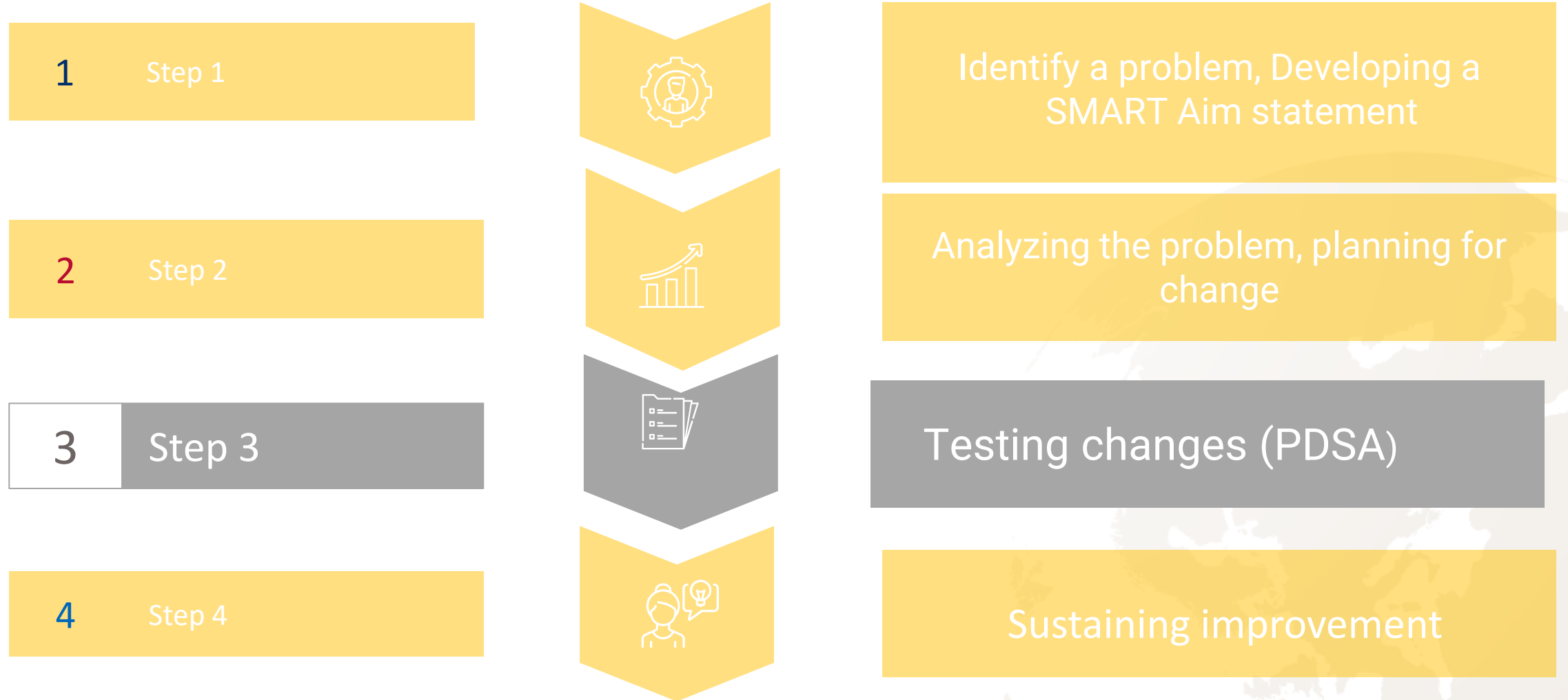
Fishbone and Flow chart



Flow chart and Pareto
Chart



POCQI Model



Change

All improvement
requires making
changes

Not all changes result
in improvements

Identify changes most
likely to result in
improvement



Where do we get ideas to test?

Selecting Changes



Reasons to Test Changes



Decide which change leads to improvement



Determine if changes works in actual environment



Learn from “failures” with minimal impact



Predict how much improvement can be expected



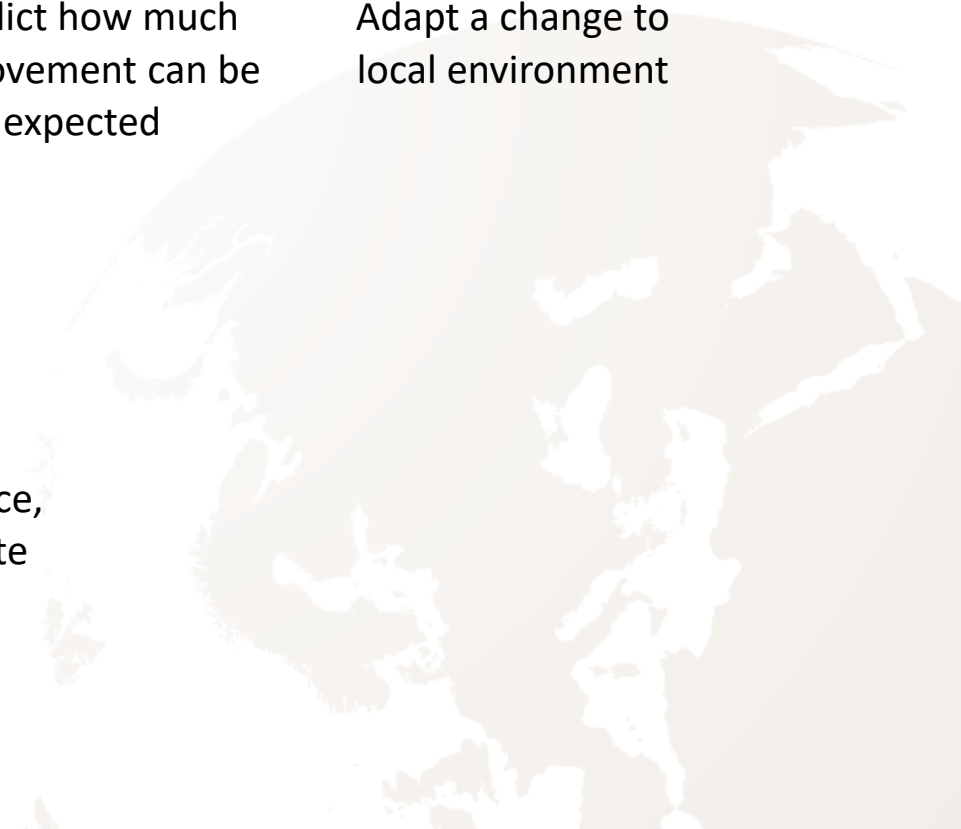
Adapt a change to local environment



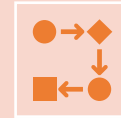
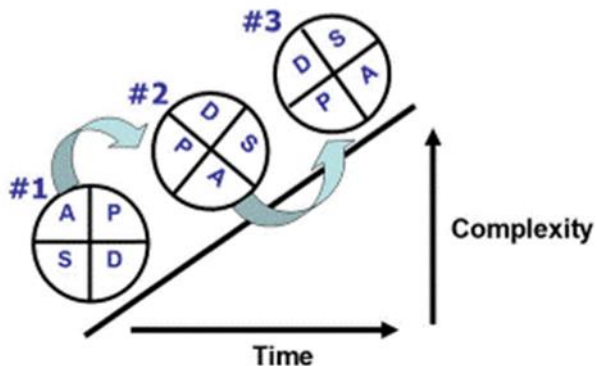
Evaluate costs and side-effects



Minimize resistance, trauma, and waste



Principles of Testing a Change



Test on a small Scale and Build Knowledge Sequentially



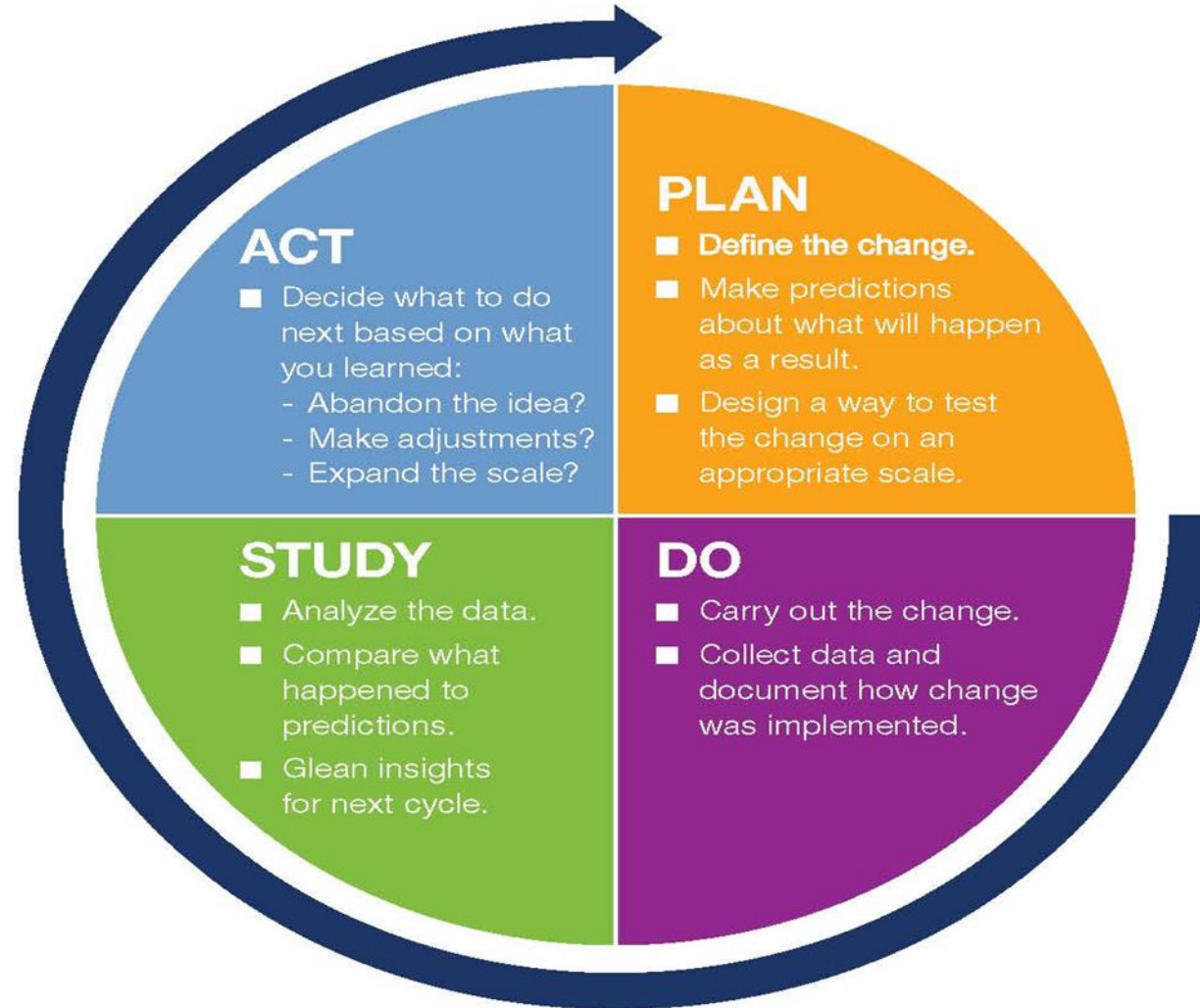
Collect Data of Time



Include a Wide Range of Conditions in the Sequence of Tests

Model for Improvement

Learning Model



Is it a PDSA cycle



The plan for the test or observation included a data collection plan and a prediction of results.



The plan was executed
(do the plan)

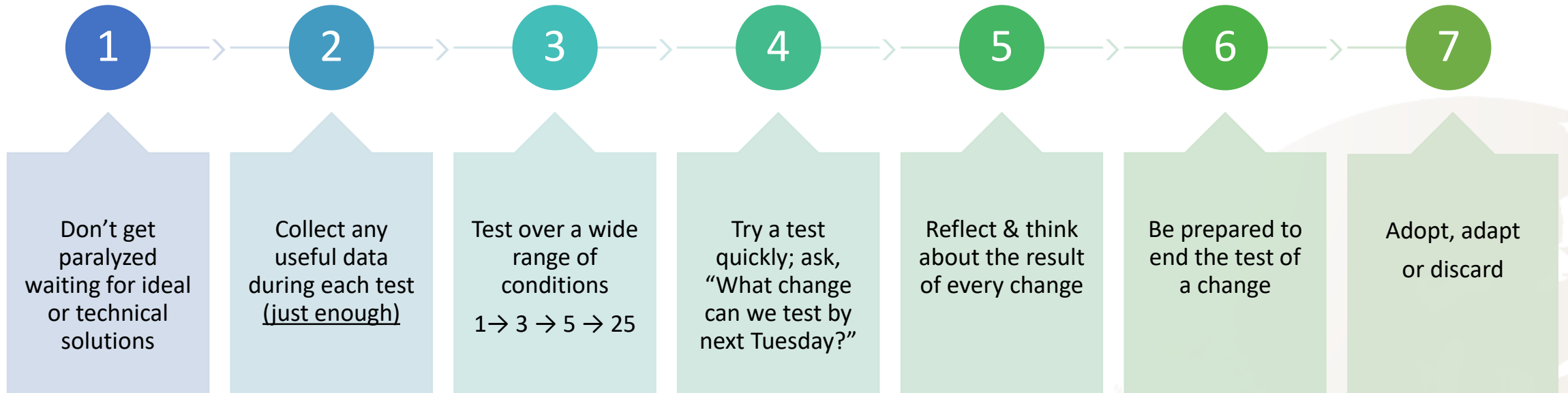


Time was allocated to analyze the data and review the results.

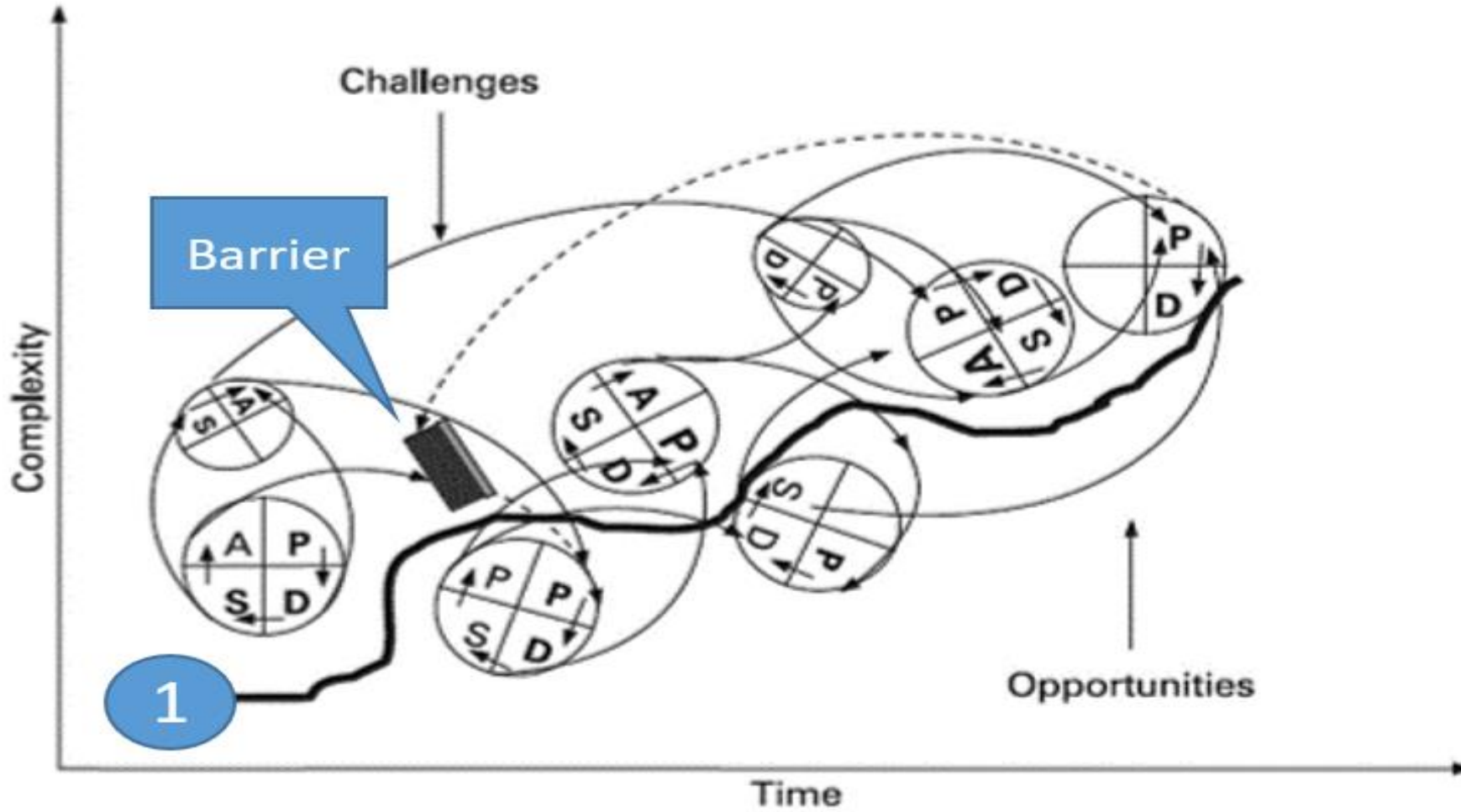


The action taken was rational, based on acquired knowledge, and resulted in significant change.

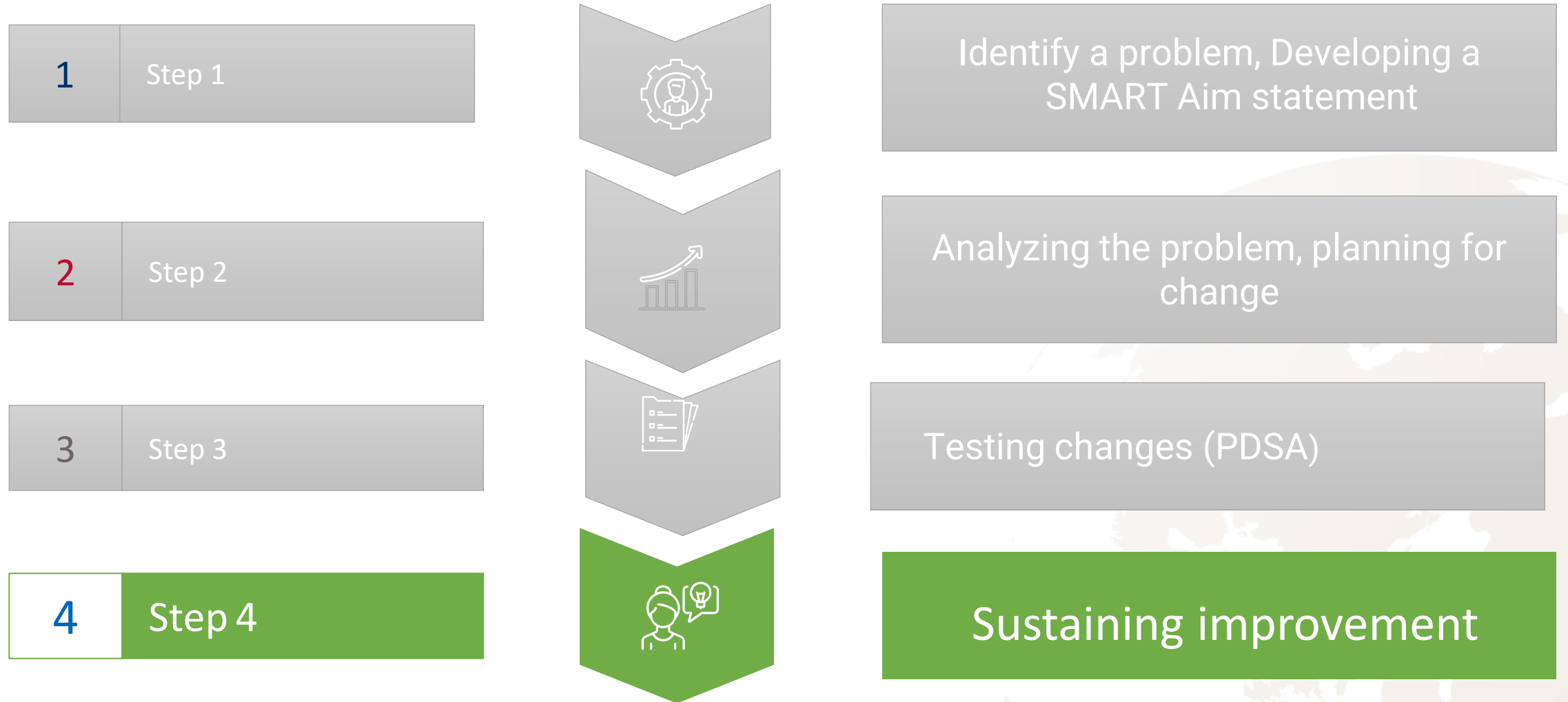
PDSA Tips



Real World PDSAs



POCQI Model

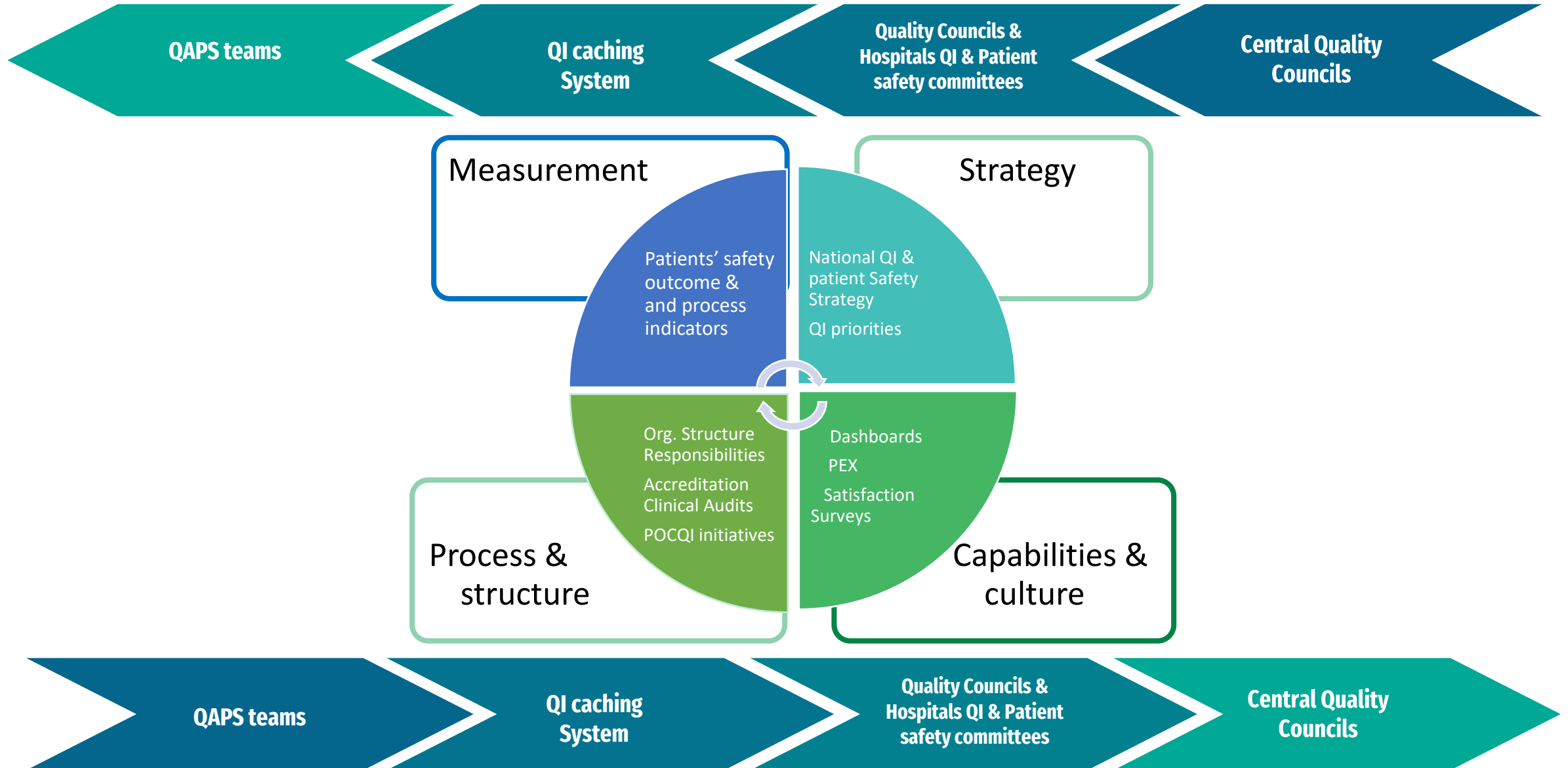




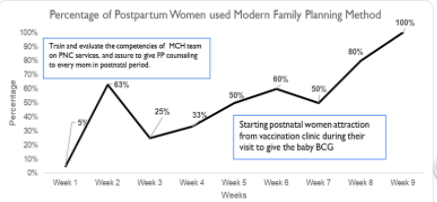
***Suggestions for advancing POCQI
model implementation in healthcare.***



HSQA Quality Governance Framework



POCQI



Problem

Increase the proportion of women in the postnatal period who are using modern family planning methods, increasing it from 55% to 70% over the period spanning from June 3, 2023, to July 18, 2023

1

Result

4

Sustainability Measure

3

Activate attraction technique as routine procedure to attract postnatal women visiting BCG vaccine clinic to get counselling about family planning and providing the service

Change Ideas

- 1. Train and evaluate the competencies of MCH team on PNC services, and assure to give FP counseling to every mom in postnatal period.
- 2. Starting postnatal women attraction from vaccination clinic during their visit to give the baby BCG

2

QAPS TALKS





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POCQI Model: Case Scenario

Rosaline Ayed

USAID Health Services Quality Accelerator Activity
Senior Technical Quality Officer



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Case Scenario Objectives

Describe

How the of point
of care quality
improvement
model
Implemented in
the RMNCH
Services

Review

How the Quality
Improvement
Tools Utilized in
POCQI model

Apply

Point of Care Quality
Improvement
(POCQI) Approach
process when
preparing the Quality
Improvement steps.

Case Scenario overview

- Two real case scenarios one from hospital and the another from Primary Health Center (PHC) distributed to each table
- Each of you will consider his\her self a QAPS team member
- The problem analysis results will be provided for your team based on the problem the team decide
- Nominate a presenter for each step
- Use the flipchart to write down your comments and answers

Case Scenario (Hospital)

- General government hospital, with 151 bed Hospital, serves 150000 population, the hospital receive referrals from 69 primary health centers and 18 health centers.
Provide all



Case Scenario (PHC)

- Comprehensive health center, receives 10,000 - 13,000 visits annually (833 – 1000) monthly, provides maternal and child services. The services provided in the center:
- vaccination services within the national vaccination schedule
- Providing growth and development services for children from 0-5 years old
- Antenatal care.
- Family planning.



Point of Care Quality Improvement Model (POCQI)

01 Step 1



- Forming a QAPS team,
- Identifying a problem, based on available data
- Developing an aim statement

02 Step 2



Analyzing the problem, planning for change

03 Step 3



Testing changes (PDSA)

04 Step 4



Sustaining improvement

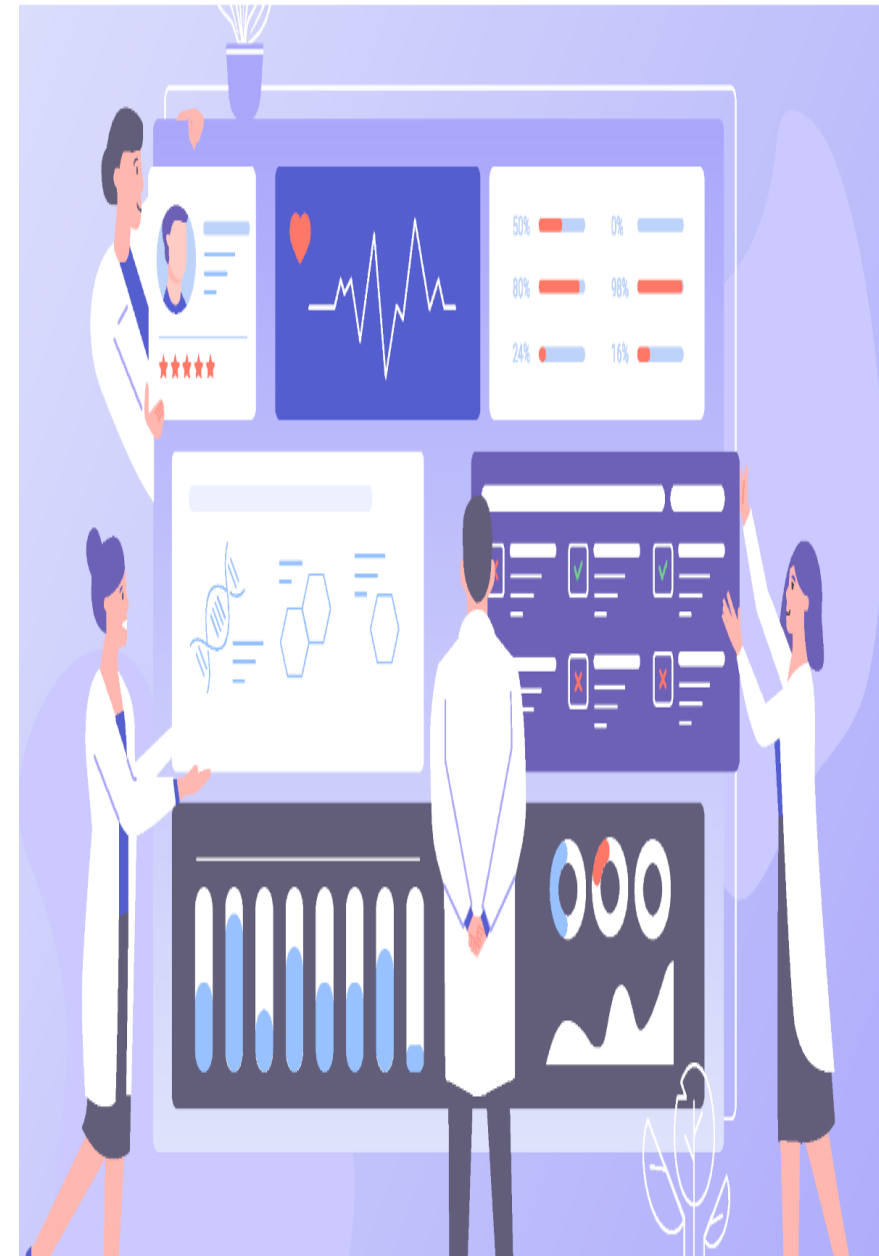
Review Data

- Review the **RMNCH** data cards to decide what the problems that could **identify** in both the hospital and the health center.



Identify the problem , formulate aim statement (15 minutes)

1. Through brainstorming technique and Utilizing the prioritization matrix ,decide what the problem the QAPS team in both hospital and health center could start on.
2. Formulate SMART aim statement based on the outcome of prioritization matrix Knowing that the team start their initiative from the 1st of June 2023 for six weeks.
3. Use flip chart



Case Scenario (Hospital)

Possible problem	Important to patient outcomes (1-5)	Affordable in terms of time and resources (1-5)	Easy to measure (1-5)	Under control of team members (1-5)	Total score (4-20)

Case Scenario (PHC)

Possible problem	Important to patient outcomes (1-5)	Affordable in terms of time and resources (1-5)	Easy to measure (1-5)	Under control of team members (1-5)	Total score (4-20)

Point of Care Quality Improvement Model (POCQI)

01 Step 1



- Forming a QAPS team,
- Identifying a problem, based on available data
- Developing an aim statement

02 Step 2



Analyzing the problem, planning for change

03 Step 3



Testing changes (PDSA)

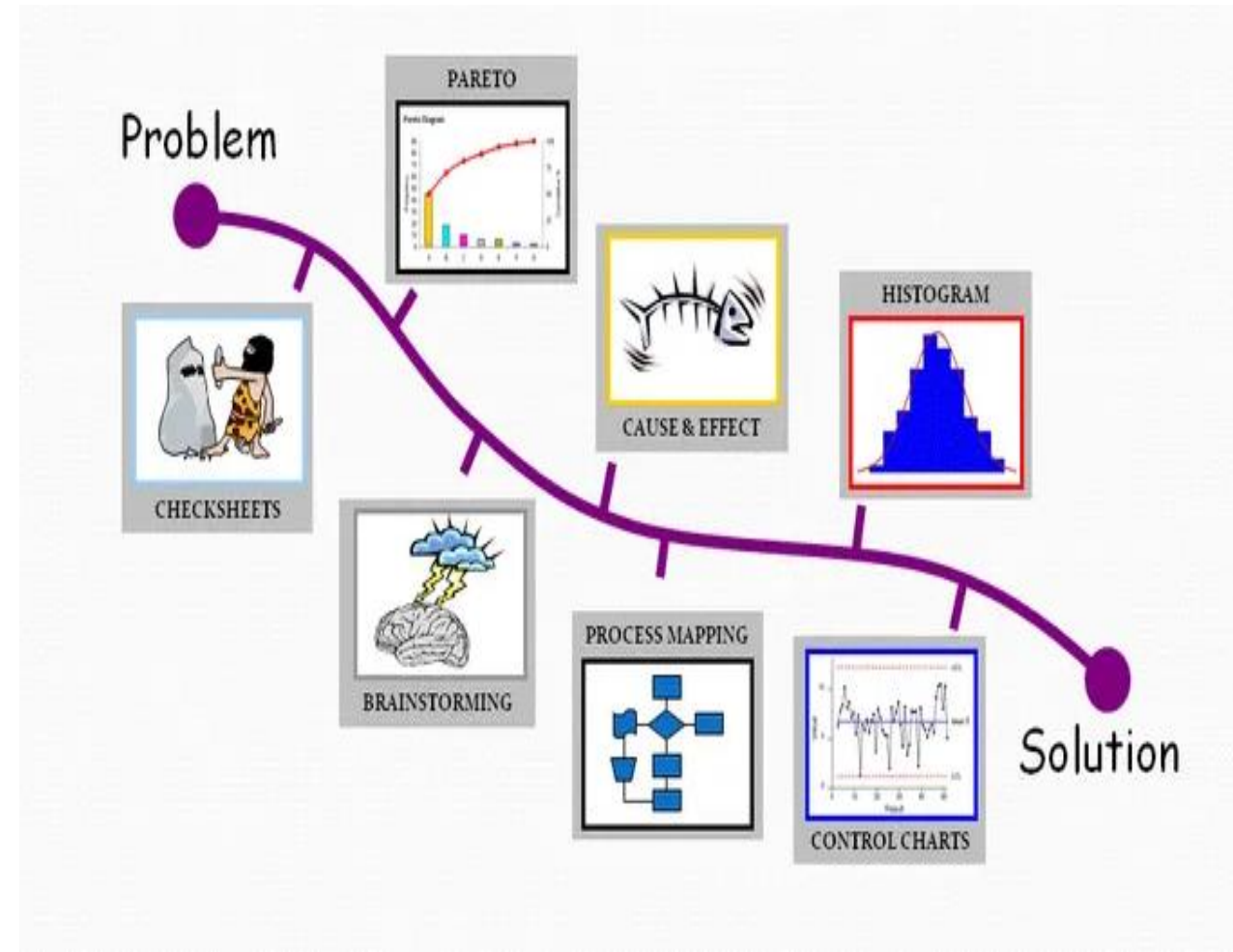
04 Step 4



Sustaining improvement

Analyzing the problem (10 minutes)

1. You will receive the problem analysis findings (flow chart and fish bone) for the problem you choose
2. Study the problem analysis



Planning for change

1. Through brainstorming and based on the **problem analysis findings**, please write 3 **innovative & creative** ideas to be tested
2. Use Stick note and flip charts
3. The change ideas will be **discussed** by all of you



Point of Care Quality Improvement Model (POCQI)

01 Step 1

02 Step 2

03 Step 3

04 Step 4



- Forming a QAPS team,
- Identifying a problem, based on available data
- Developing an aim statement

Analyzing the problem, planning for change

Testing changes (PDSA)

Sustaining improvement

Testing changes (PDSA) (15 Minutes)

1. Utilize the PDSA cycle to test the ideas you choose.



✓ PLAN

✓ DO

✓ STUDY

ACT

ACT

ADOPT

ADAPT

ABANDON

Point of Care Quality Improvement Model (POCQI)

01 Step 1

02 Step 2

03 Step 3

04 Step 4



- Forming a QAPS team,
- Identifying a problem, based on available data
- Developing an aim statement

Analyzing the problem, planning for change

Testing changes (PDSA)

Sustaining improvement

Sustaining improvement (10 Minutes)

1. mention **four sustaining measures** to ensure the Improvement will be sustained
2. Use flip chart



Huddle: Visual Management

Considered as daily activities to ensure the sustaining of QI.



Huddle

Ensure that the staff on board





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POCQI: Success Stories

Heba Mezeyd

USAID Health Services Quality Accelerator Activity
Senior Technical Quality Officer



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Team Work



Working together is
Success



Keeping together is
Progress



Coming together is
Beginning

Quality Improvement Initiative(QI)

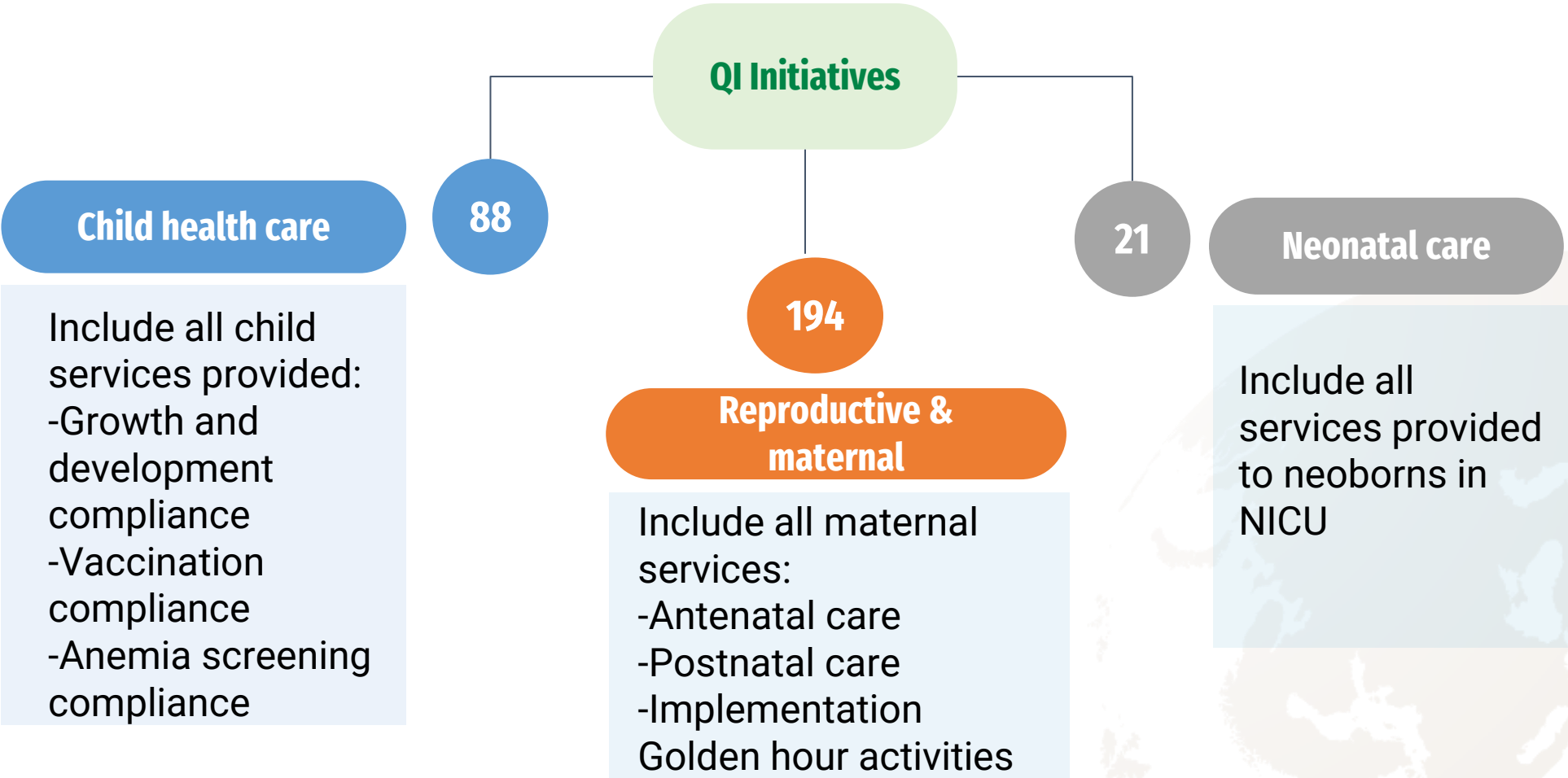


An innovative quality project that initiated by QAPS team to improve specific provided services by using POCQI model

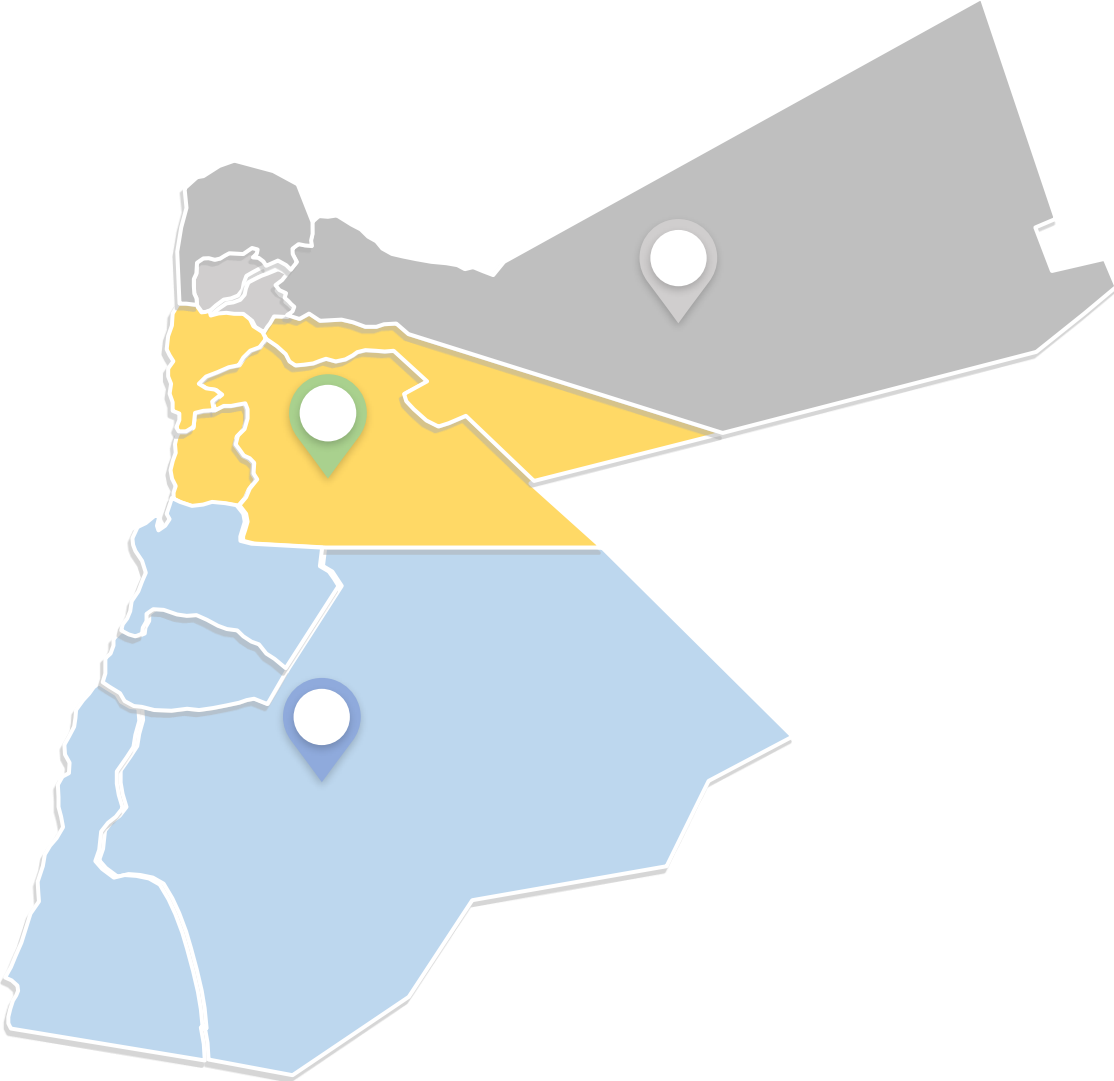
Sectors of QI Initiatives using POCQI Model

	Hospital	CHC	PHC	Clinic
MOH	34	124	108	
RMS	12	6		
IFH				17
NWHCC			2	

Categories of QI Initiatives using POCQI Model



RMNCH QI Initiative Distribution by Region



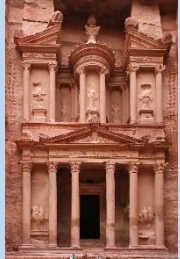
North

106 QI
Initiatives



Center

126 QI
Initiatives



South

71 QI
Initiatives

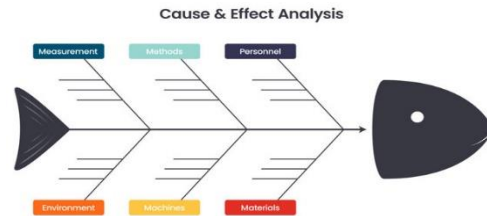
Success Stories in Jordan



Prevention of CPAP related Nasal Pressure Ulcers among newborns in NICU

2. Change Ideas

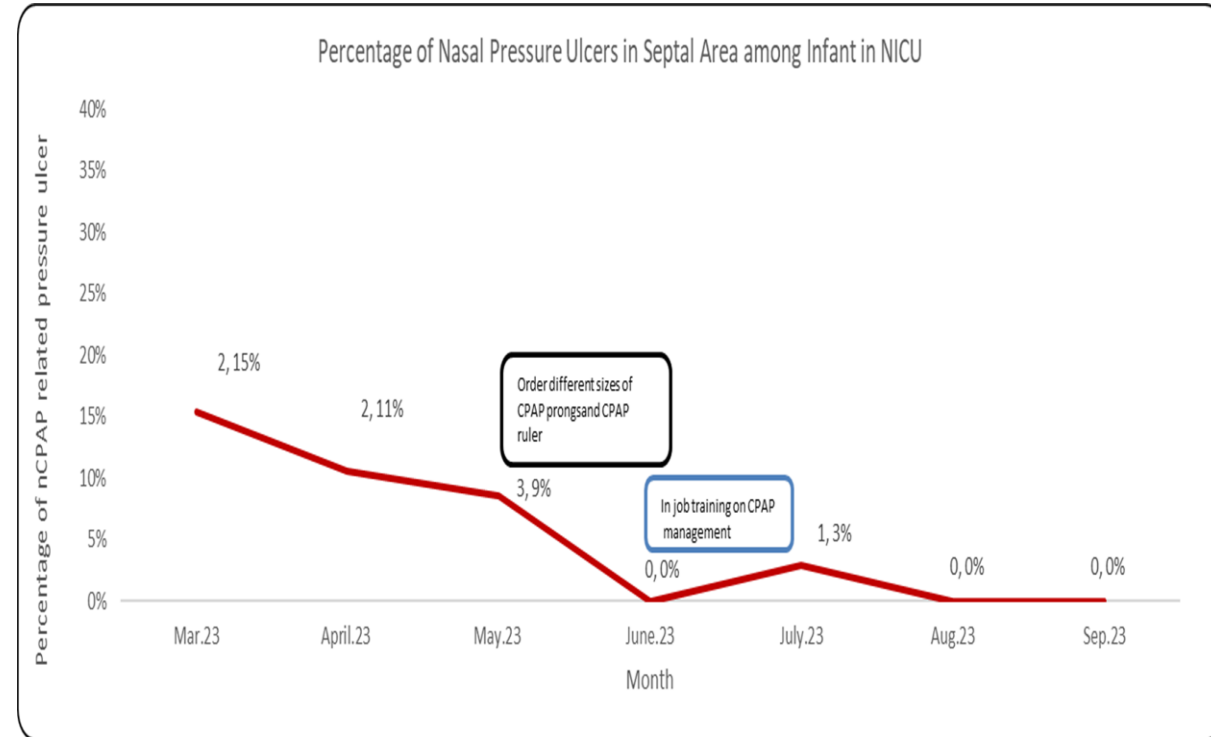
Supply the NICU with the necessary equipment, such as a CPAP prongs (different sizes), and CPAP ruler and provide in job training on CPAP management followed with creating a CPAP staff competency sheet



1. Aim

Reduce the nasal septal pressure ulcers incident among NICU newborns on nCPAP devices from 15% to 6%, from May 21, to July 16, 2023

3. Result

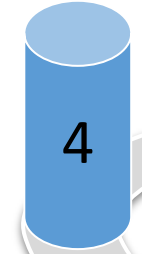


4. Sustainability Measures

Availability of all sizes of nasal prongs in NICU

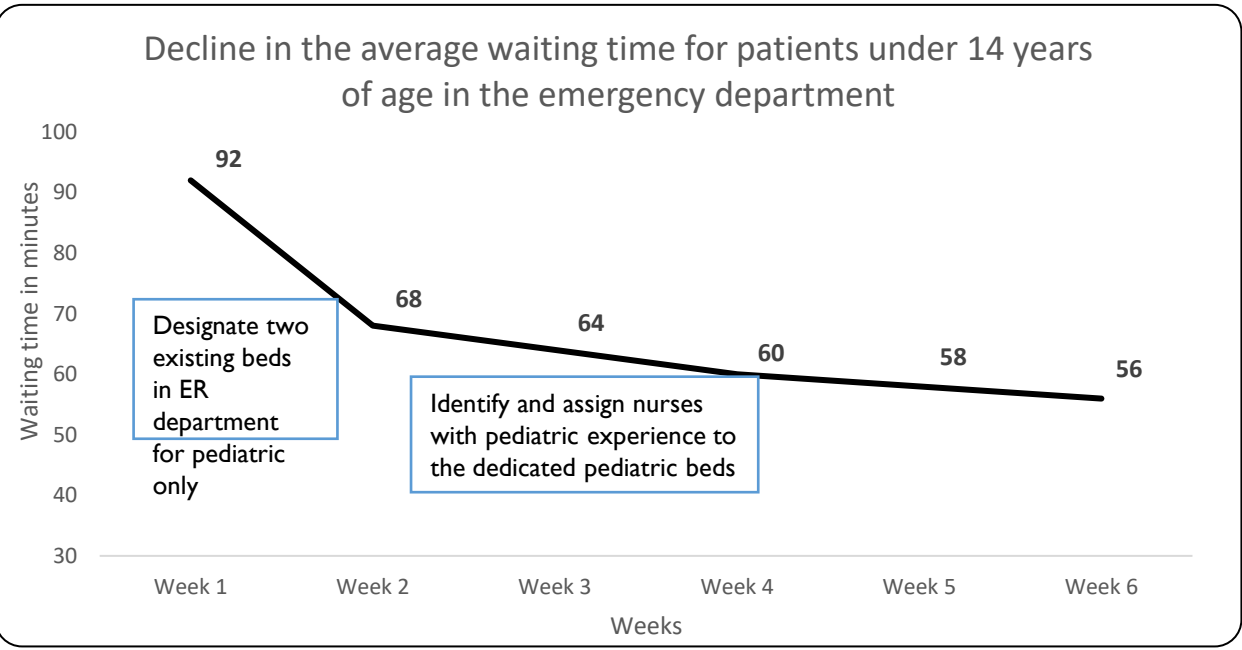
Reducing waiting times for pediatric patients in the emergency department

Sustainability



Develop Pediatric procedure training program

Result

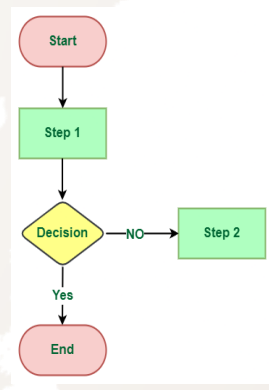


Aim

Reduce the average wait time for children in the emergency department from the current 90 minutes to 60 minutes or less within six weeks from August 30 to October 7, 2022

Change Ideas

Designate two existing beds in the emergency department for pediatric use only and assign nurses with pediatric experience to the dedicated pediatric beds



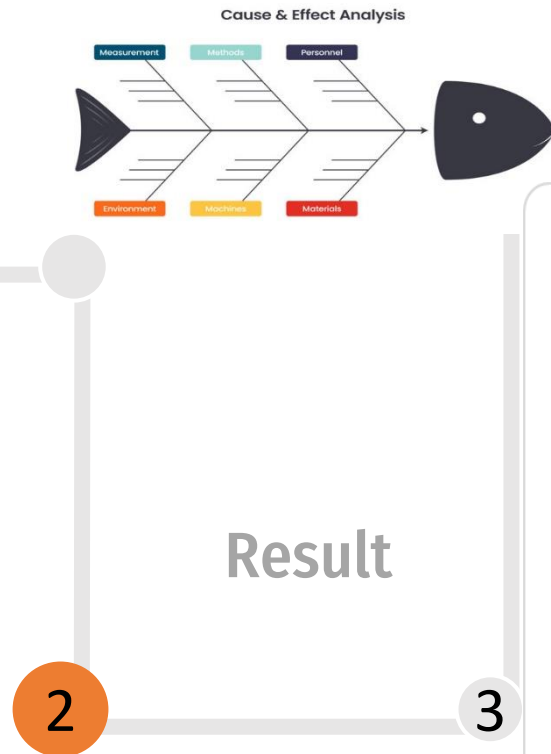
Initiation of Breastfeeding for NICU Babies

Aim

Increase the percentage of breast feeding process for the newborns admitted in NICU department from 0% - 40 % during 8 weeks from 3/6-29/7/2023

Change Ideas

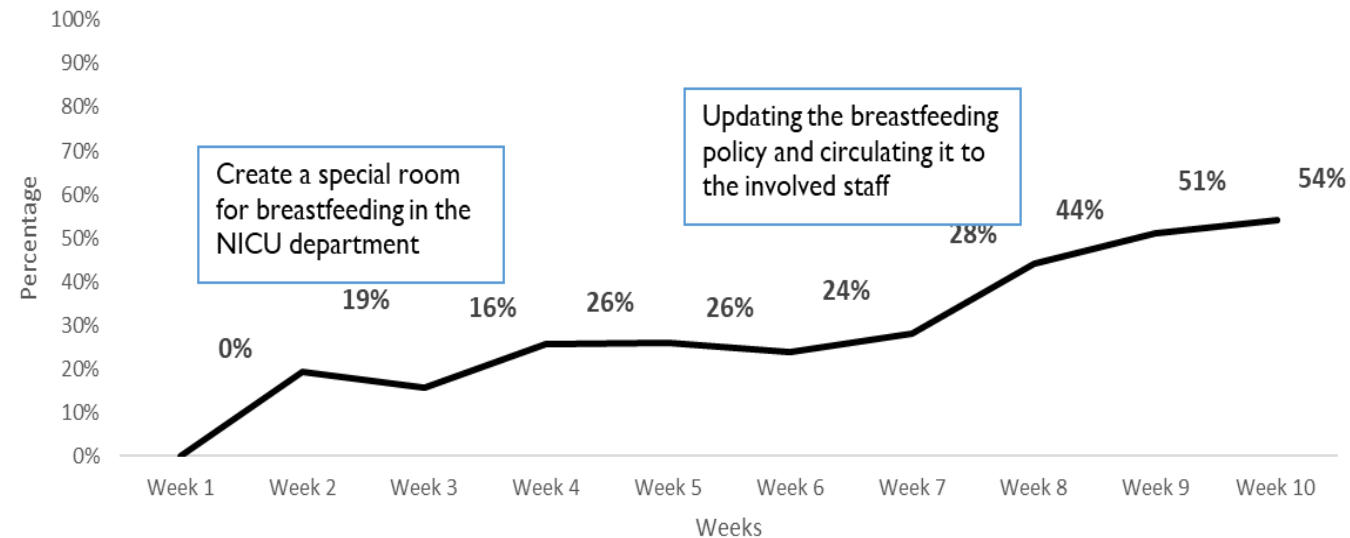
Create a special room for breastfeeding in the NICU department, and updating the breastfeeding policy



Support and continuous following up with discharged mothers

4 Sustainability

Percentage the newborns who were breastfed from the total number of newborns allowed to be breastfed in the NICU department

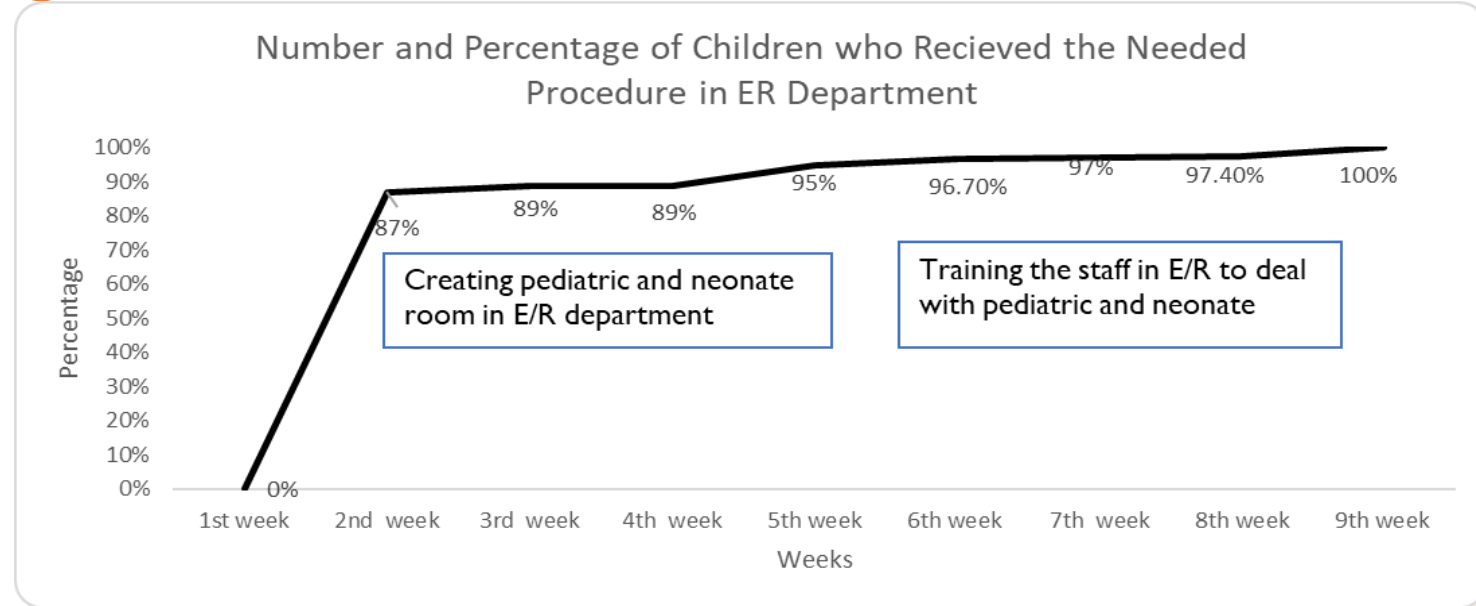


Improving Flow of Work for Pediatric Patients in Emergency Department

2 Change Ideas

Creating pediatric and neonate room in E/R department and training the staff to deal with pediatric and neonate

3 Result



1 Aim

Improve pediatric patients management in ER department and provide all invasive procedure in place from 0% to 100% during 8 weeks from 1.June to 1.Aug.23

4 Sustainability Measures

Continue monitoring the staff commitment

Enhancing Use of Modern Family Planning Methods in Postnatal Period

4

Sustainability measures

Result

3

Adapt activate attraction technique as routine procedure

Change Ideas

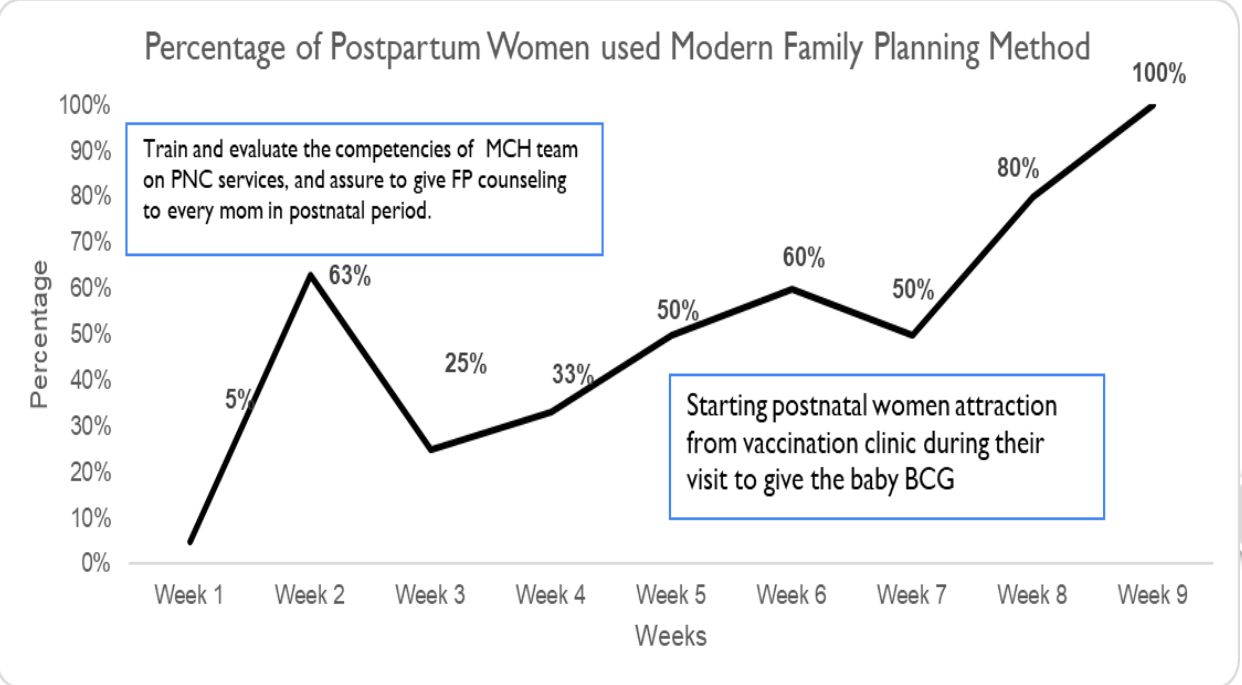
2

Train and evaluate the competencies of MCH team on PNC services, and assure to give FP counseling to every mom in postnatal period. And starting postnatal women attraction from vaccination clinic during their visit to give the baby BCG

1

Problem

Increase the postnatal women who are using modern family planning methods, increasing it from 55% to 70% over the period spanning from June 3, 2023, to July 18, 2023



Improve Anemia Screening for Childrens

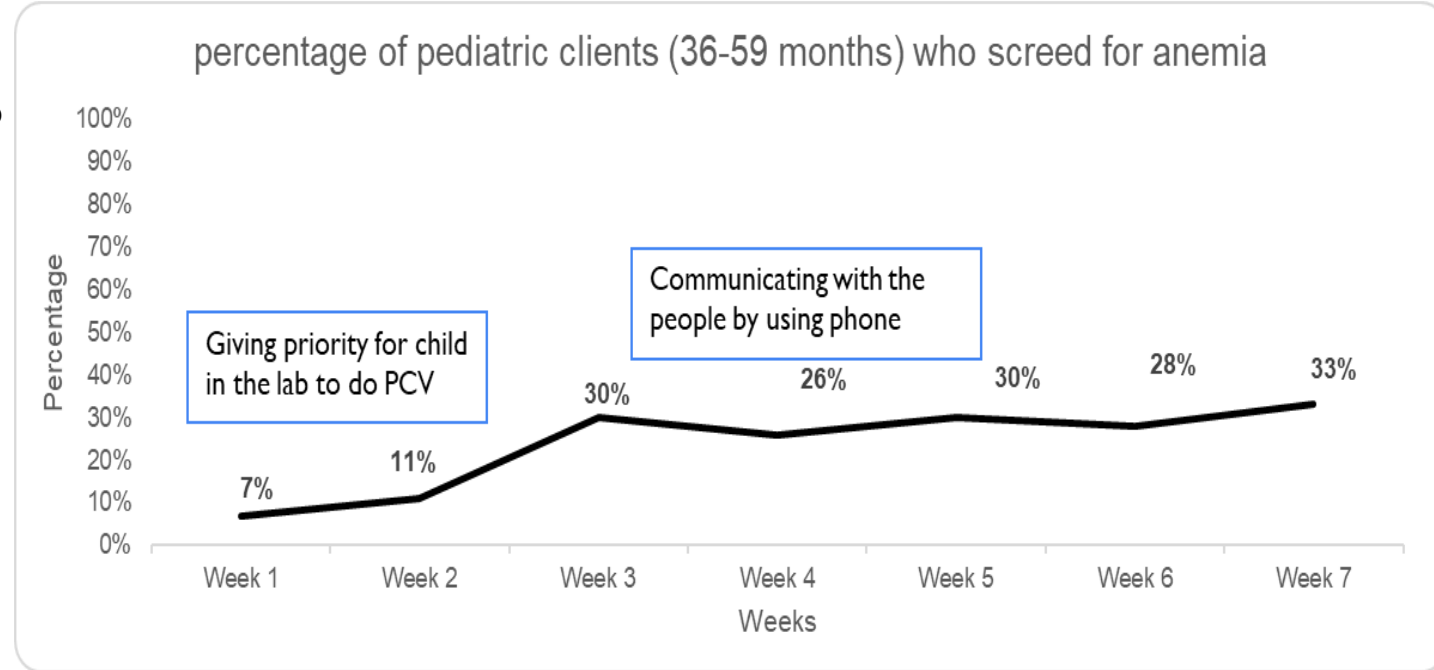
2.Change Ideas

Giving priority for child in the lab to do PCV test and communicating with the people by using phone

1.Aim

Increase percentage of pediatric clients (36-59 months) who screened for anemia according to the MOH clinical pathways from 7% to 10% within 6 weeks from 22. May to 15. July. 23

3.Result



4.Sustainability Measures


Add projects as a part of general orientation to enhance process





"Quality is everyone's responsibility"

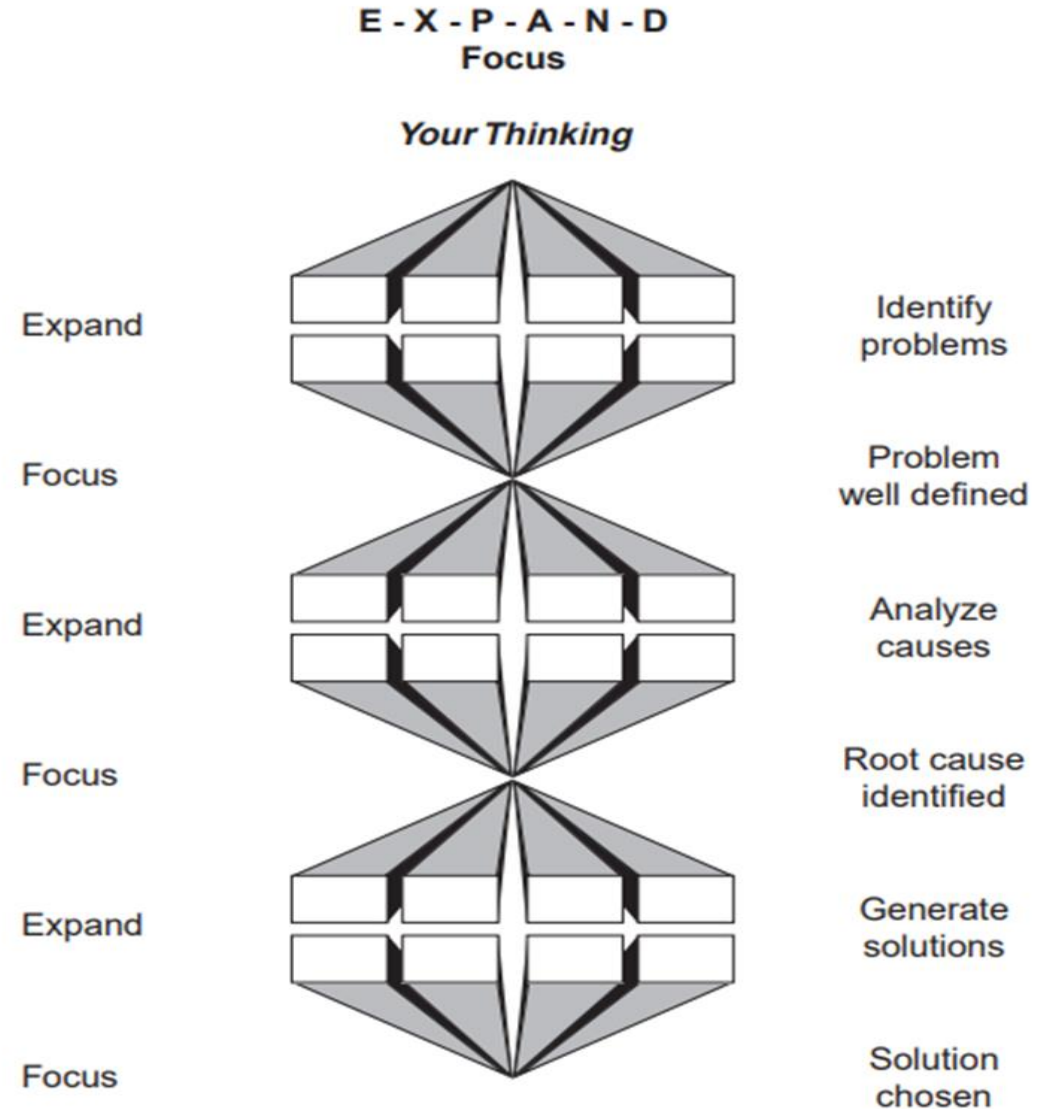
W. Edwards Deming

Expand-Focus Sequence

 *The expanding period is creative and can generate new and innovative ideas.*

 *The focus period is analytical and action-oriented.*

 *Act, don't ponder. Action leads to results.*



QAPS Quotes

“Before attending this training I thought that it will be a quality training with solid and hard terms and not applicable easily by health care providers except the quality specialists.

But after attending it I believe that is necessary to include most of health facilities in this training because it will help the health care providers to improve their care quality and also their facilities reputation by using simple and clear POCQI model

*Major midwife: Lamaia Al Zubi
Al Hussain Hospital*

“The training workshop achieved my training expectations and more, I learned new quality models and refreshed what I learned before. It was amazing training and the trainers very cooperative and they have simple way to present the material.

Ms. Manal Al-Sadi, Registered Nurse, Swieleh CHC, joined on Mar 2023

“I would thank the trainers and all staff who works on this workshop, it was excellent which give us valued and important information regarding improving quality of care provided to clients”

Dr. Nafera Sahawneh, Family medicine specialist, Ain Al-Bash CHC, joined on Feb 2023

“It was amazing workshop, which help us to think in new ideas and in systematic and simple way

Ms. Rash Ghanem, Registered Nurse, Prince Hussein Bin Abdullah Hospital, joined on Mar 2023

“The training workshop enhanced quality knowledge and I learned new quality tools. The trainers have amazing training and presenting skills.

Ms. Mariam Abed, Head of Nurses, Sahab CHC, joined on Mar 2023



THANK YOU

