



### Making Measurement Meaningful

September 22, 2023

New Hampshire Infection Control & Epidemiology Professional Group (NHICEP)

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### Who are we?



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Continuous Improvement Specialist

Elliot Health System



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*Sr. Continuous Improvement* Specialist

Elliot Health System









4,000 + caregivers









### Introduction to Mentimeter

Interactive presentation software.

Boosts learning and outcomes

Lets log in

#### Instructions

Go to

www.menti.com

Enter the code

4839 0176









# ICE BREAKER

## Learning Objectives

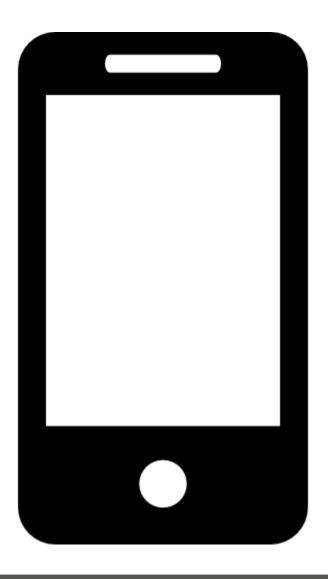
- 1. Understand the importance of using data to drive improvement
- 2. Define the types of quality measures
  - Outcome
  - Process
  - Balance
- 3. Introduce the quantitative tools that can be used for displaying and analyzing data
  - Run Charts
  - Pareto Charts



## **Assessing Comfort Data**

**Polling the Audience:** What is your current comfort level with collecting, analyzing and visualizing data?

- Exceptional
- Pretty good
- Some what
- Uncomfortable
- Anything but data!



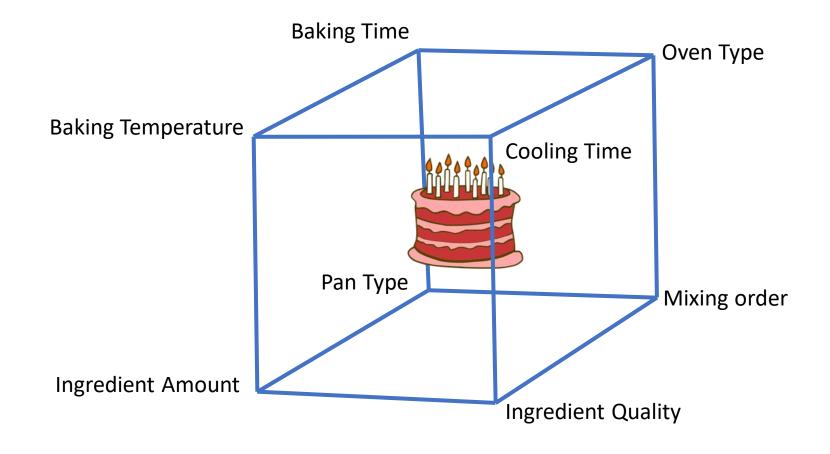
Types of Measures



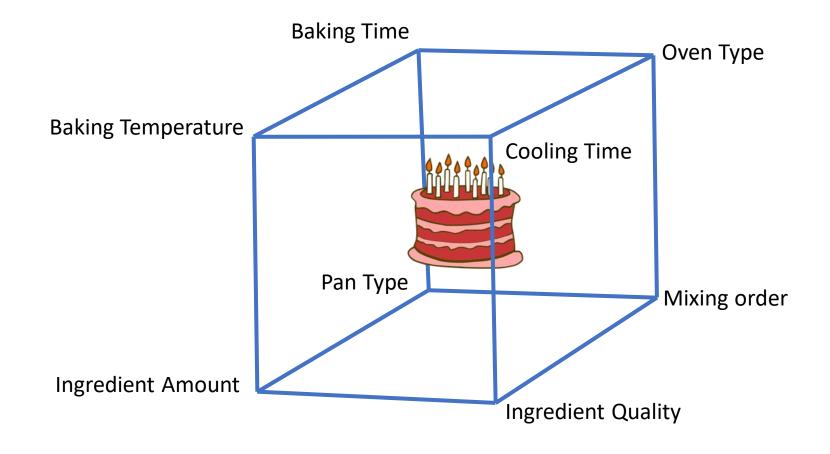
# Types of Measures

Measure	Definition	Characteristics		
Outcome	Reflects how well the <u>steps</u> in the system impact a particular outcome metric (maintained internally).	<ul> <li>Reflects the aim of the project</li> <li>Voice of the customer</li> <li>Often a lag in reporting</li> </ul>		
Process	Reflects how well the <u>steps</u> in the system impact a particular outcome metric (maintained internally).	<ul> <li>Easy to collect</li> <li>Reflects process capability</li> <li>Helps keeps improvement project on track</li> </ul>		

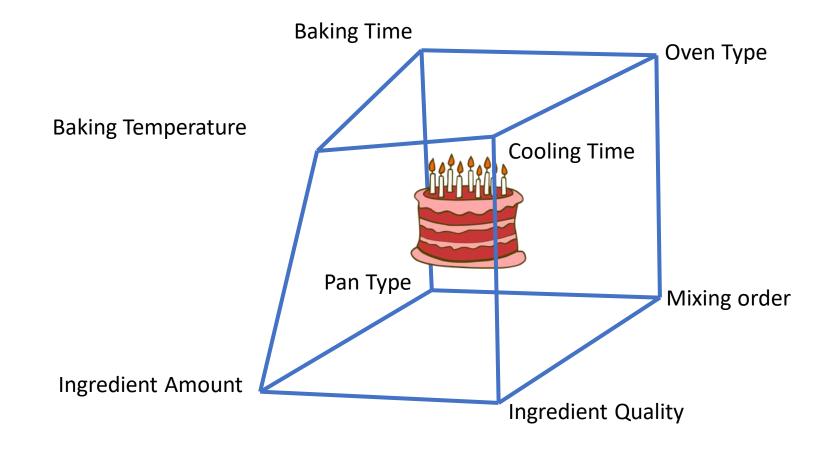




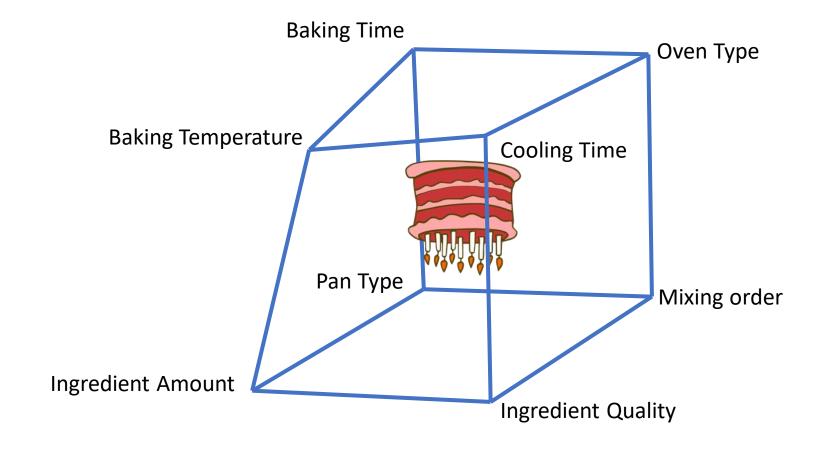














# Case Study



### Eastside Medical Center

Post-COVID pandemic, Eastside Medical Center has been under significant staffing constraints but is finally regaining normalcy. With improved staffing levels, the nursing leadership team determined it was an appropriate time to launch new improvement work. The leadership team reviewed several HARM metrics and noted an increase in the occurrence of Catheter-Associated Urinary Tract Infections (CAUTI) from the past year.

The national benchmark for performance is 1.00. With the number of CAUTI events increasing and over the benchmark, the nursing team organized an interdisciplinary team to investigate the problem in more detail and hopefully determine the root cause.

#### **Making Measurement Meaningful**

#### Types of Measures

**OVERVIEW:** When approaching improvement work, it is important to recognize the different types of measures and consider all three when making process changes.

		i	
Measure	Definition	Characteristics	
Outcome	Reflects how well the <u>steps</u> in the system impact a particular outcome metric (maintained internally).	Reflects the aim of the project     Voice of the customer     Often a lag in reporting	
Process	Reflects how well the <u>steps</u> in the system impact a particular outcome metric (maintained internally).	<ul> <li>Easy to collect</li> <li>Reflects process capability</li> <li>Helps keeps improvement project on track</li> </ul>	
Balance	Reflects any unintended consequences brought on by changes in the process	Ensures related measures are maintained or improved	

#### STEP 1: Identify the OUTCOME MEASURE

**OVERVIEW:** OUTCOME measures reflect the <u>system's</u> ability to produce the products or services that are intended to meet the customer's requirements.

CASE STUDY: Post COVID pandemic, Eastside Medical Center has identified an increase in occurrence of Catheter Associated Urinary Tract Infections (CAUTI) and you have been asked to help the team solve this problem.

#### OUTCOME MEASURE:

CAUTI Rates per 1000 Device Days

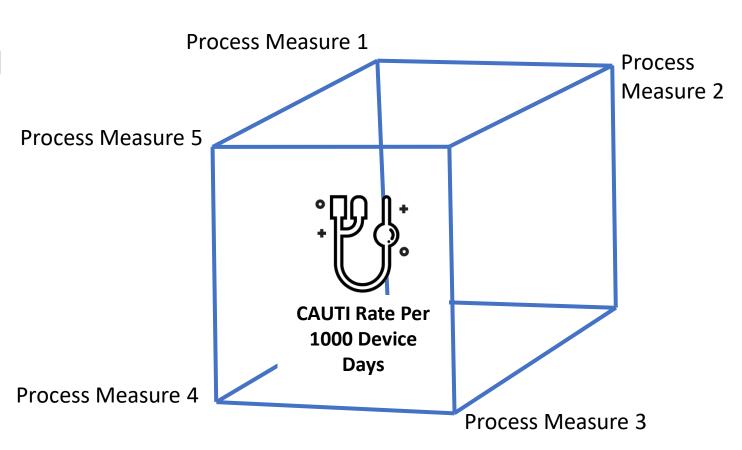


#### **STEP 2:** Converting Outcome Measures to Process Measures

What process steps have the biggest impact on CAUTI Prevention?

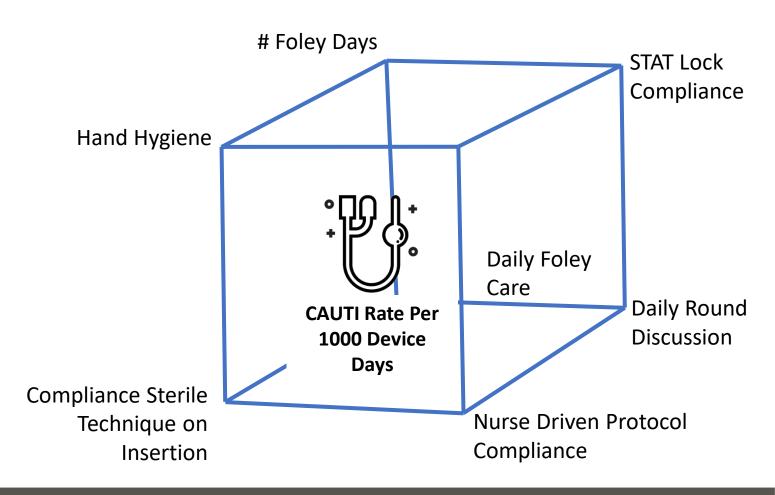
Consider how you might measure that?

- # of occurrences
- % compliance



#### **STEP 2:** Converting Outcome Measures to Process Measures

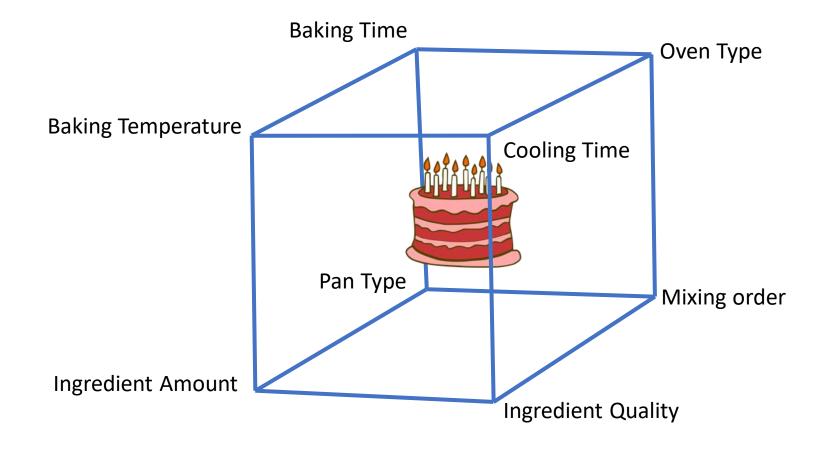
What process measures did you identify?



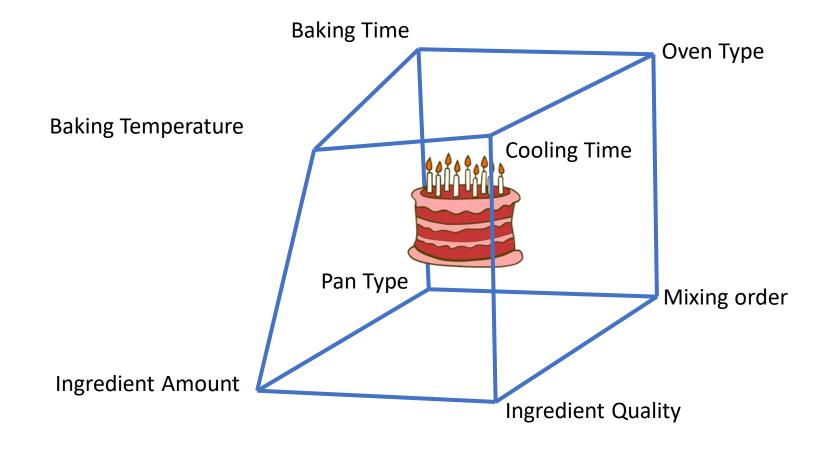
# Types of Measures

Measure	Definition	Characteristics
Outcome	Reflects the impact that the system has on the status of the patient (often reported to government and commercial payers).	<ul> <li>Reflects the aim of the project</li> <li>Voice of the customer</li> <li>Often a lag in reporting</li> </ul>
Process	Reflects how well the <u>steps</u> in the system impact a particular outcome metric (maintained internally).	■ Easy to collect ■ Reflects process capability ■ Helps keeps improvement project on track
Balance	Reflects any unintended consequences brought on by changes in the process	■ Ensures related measures are maintained or improved

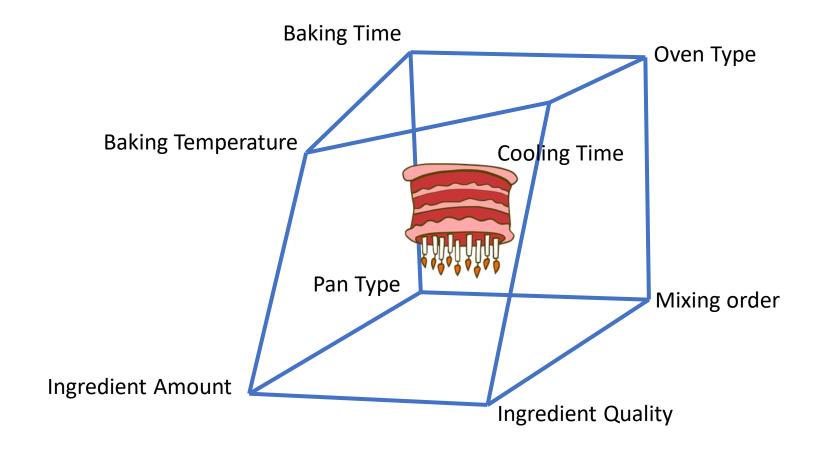
### Process Measures vs Balance Measures



### Process Measures vs Balance Measures



### Process Measures vs Balance Measures





### **STEP 3:** Identify your Balance Measures

Take a few minutes and brainstorm balance measures.

What other measures might you monitor during your improvement work to ensure there aren't any unintended consequences?





# STEP 3: Identify your Balance Measures

**Nurse Driven Protocols** 

# of Foley Days
STAT Lock Compliance

Daily Foley Care

**Process Measures** 

# of Urine Cultures

**Total Costs** 

**Supplies** 

Nursing Time/Workload

**Balance Measures** 



# Chart Selection & Analysis

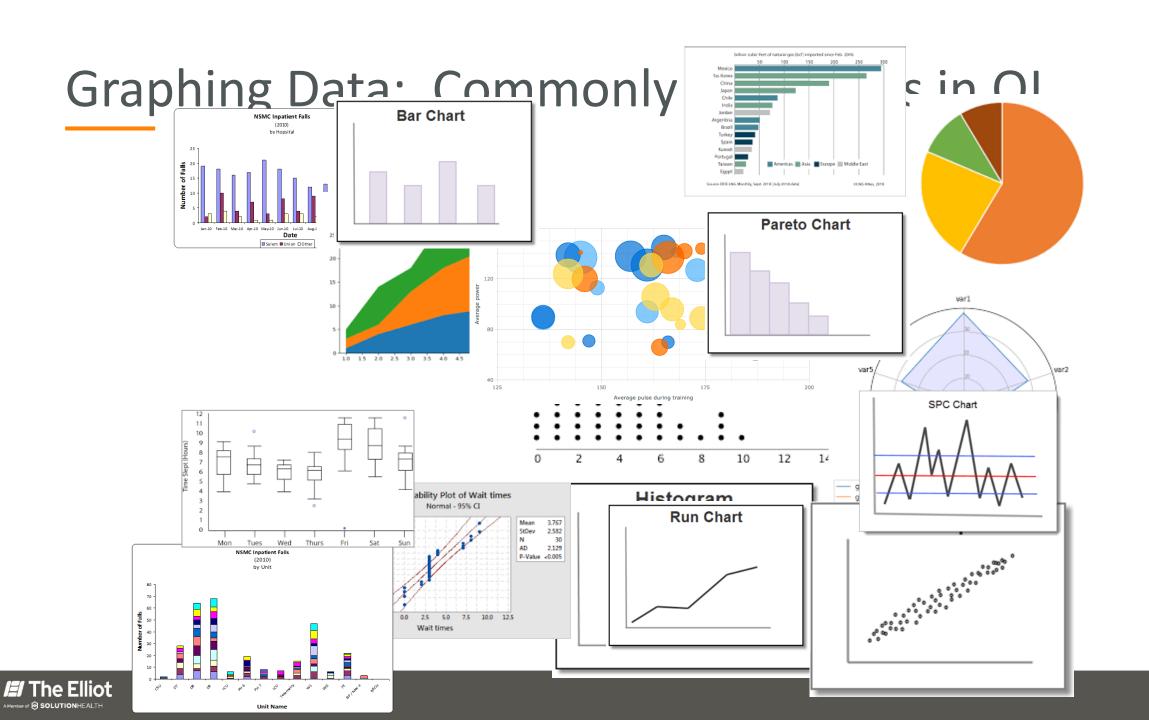


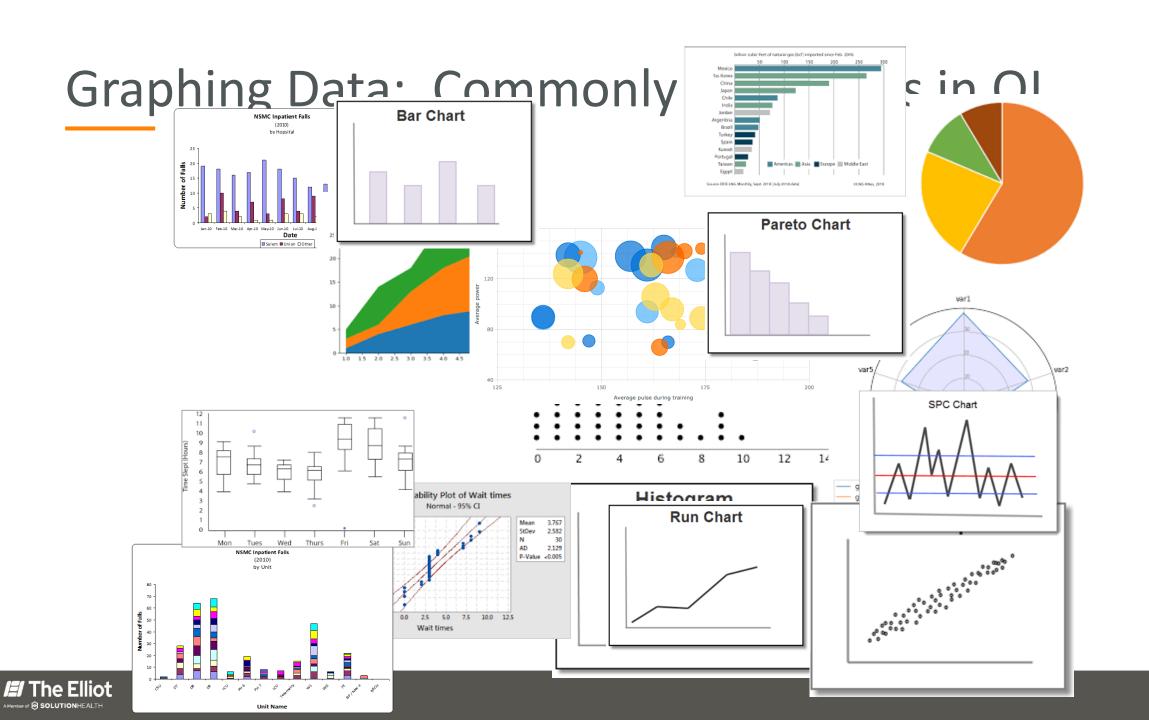
## Purpose of a Chart (Graph)

A chart (or graph) is a visual representation that converts raw data into useful information for managerial decision making; it can be used:

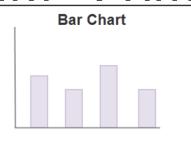
- 1. to Compare
- 2. to show the **Variation**
- 3. to show **Trends** over time
- 4. to explain Parts of the Whole
- 5. to understand the Relationship

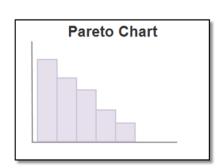


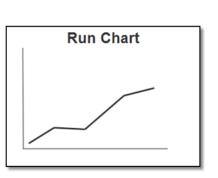




Graphing Data: Commonly used tools in Ol

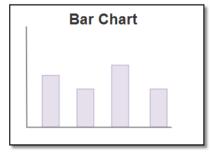


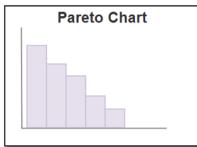


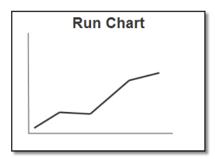




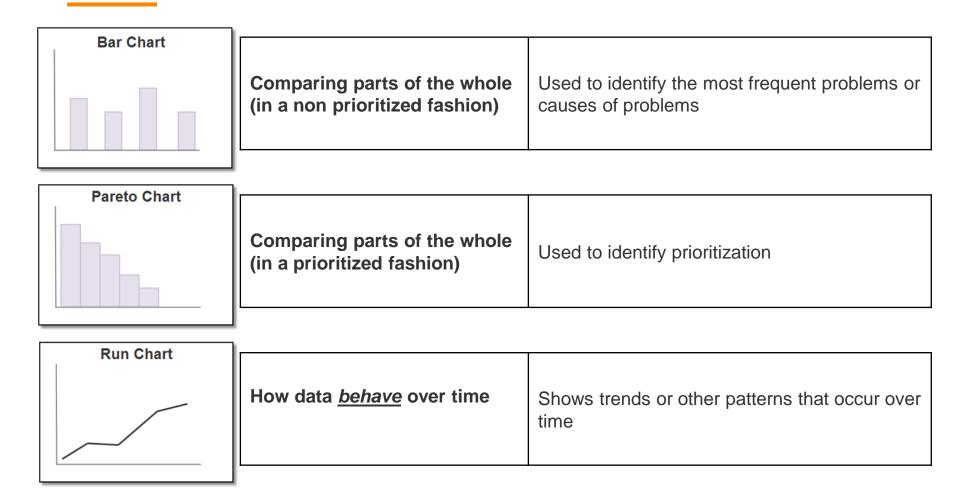
# Graphing Data: Commonly used tools in QI







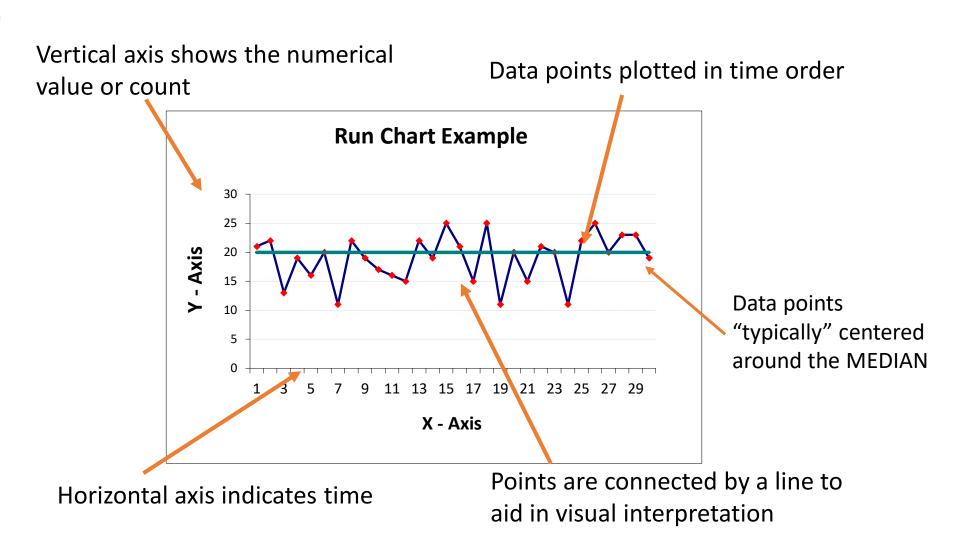
# Graphing Data: Commonly used tools in QI



Run Charts – to show a trend over time



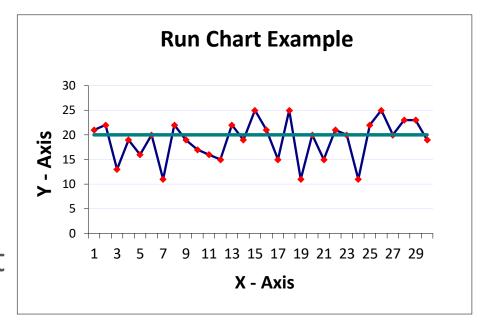
### Run Chart Features





### Uses for Run Charts?

- Display data to make process performance visible
- Establish if a change resulted in improvement
- Monitor process changes for sustainment



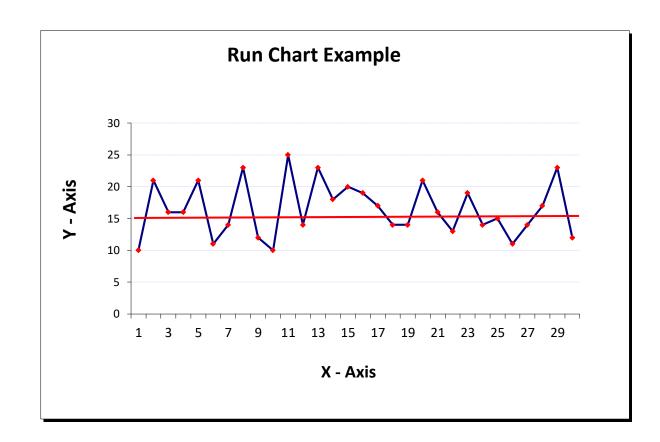
A run chart should include at least 10-15 data points before applying any of the run chart rules.



### **Analyzing Run Charts**

**Knowing the Median** – helps to understand the types of variation

- Common Cause Variation:
  - Inherent/ Predictable to the process
  - Due to regular, natural changes
  - Controlled by managing the process
- Special Cause Variation:
  - Not inherent to the process
  - Due specific changes to the process
  - Controlled by managing the individual or moment



## If you don't understand variation.....

#### You might be tempted to:

- Deny the data (doesn't fit my reality!)
- See trends where there are none
- Try to explain natural variation as special events
- Blame or give credit to people for things they have no control over
- Distort the process
- Kill the messenger!

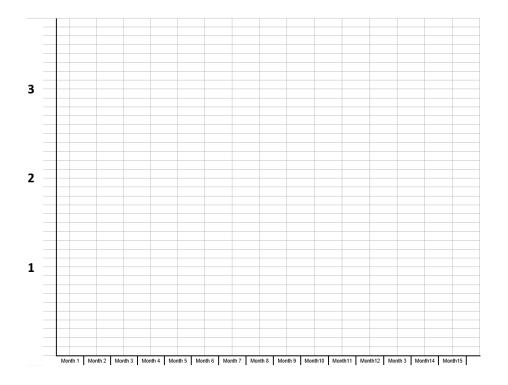


# Step 4: Build your run chart

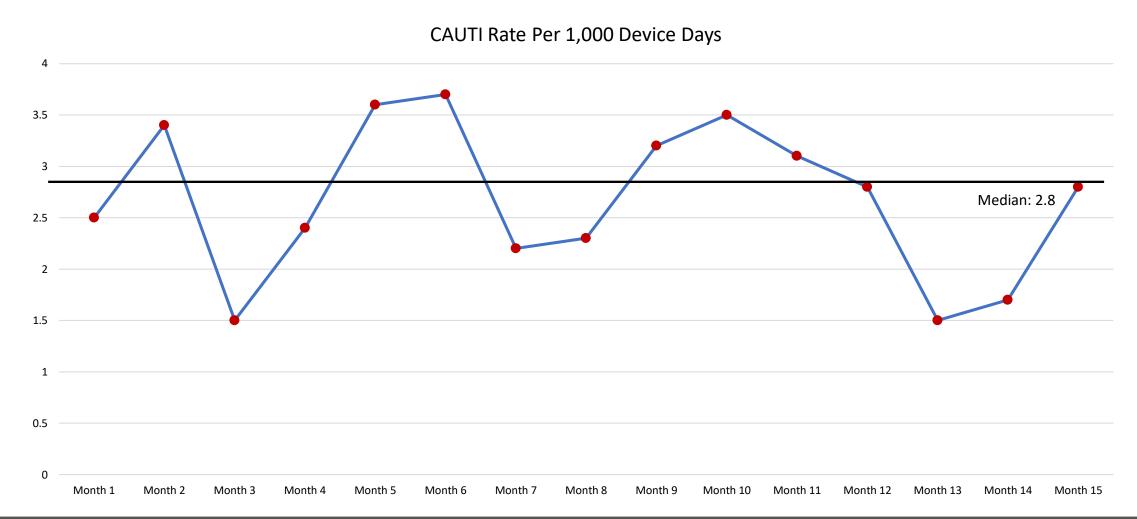
Using the baseline data provided, create a run chart.

Be sure to add the Median ().

Month #	CAUTI Rate	Month #	CAUTI Rate	Month#	CAUTI Rate
Month 1	2.5	Month 6	3.7	Month 11	3.1
Month 2	3.4	Month 7	2.2	Month 12	2.8
Month 3	1.5	Month 8	2.3	Month 13	1.5
Month 4	2.4	Month 9	3.2	Month 14	1.7
Month 5	3.6	Month 10	3.5	Month 15	2.8



# Step 4: Build your run chart

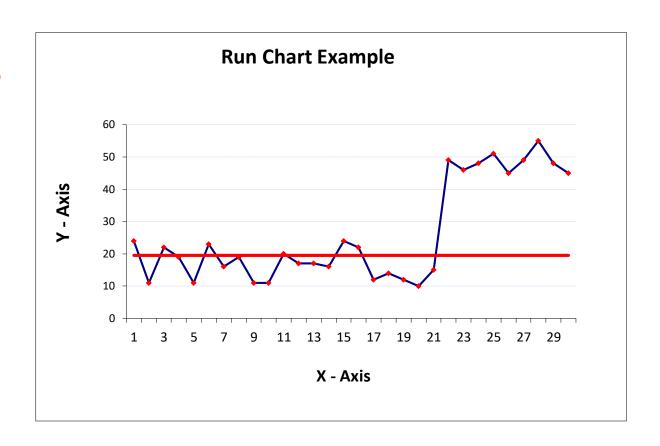


## **Analyzing Run Charts**

#### **Shifts**

Six or more consecutive points all above or below the median.

- A process shift will generally occur quickly and as a result of a dramatic change in the process.
- This occurs when the <u>average</u> of the process has increased or decreased.

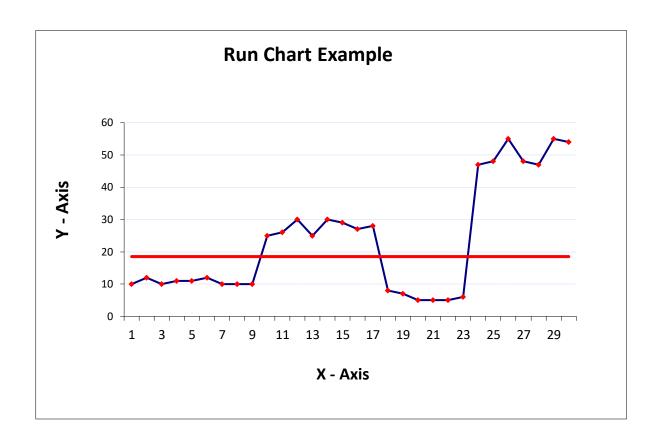


# **Analyzing Run Charts**

#### **Clusters**

Groups of points on one side of the median or the other.

• This occurs when there is a **shift** in the process average or a cyclical pattern.

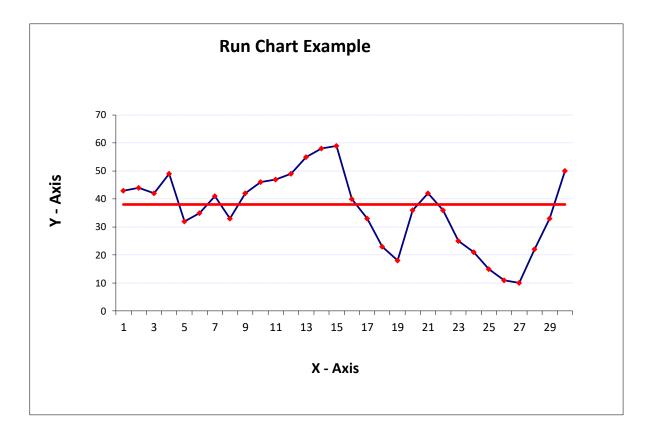


## **Analyzing Run Charts**

#### **Trends**

Six or more points in a row are decreasing or increasing.

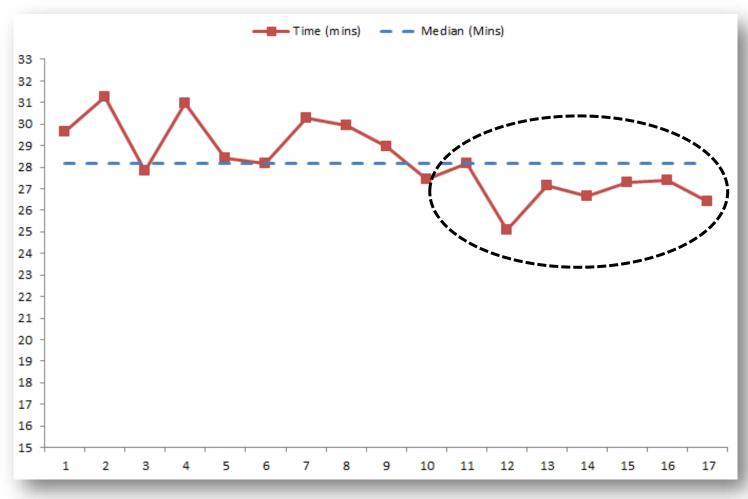
 A trend is a series of changes that occur to processes over time.







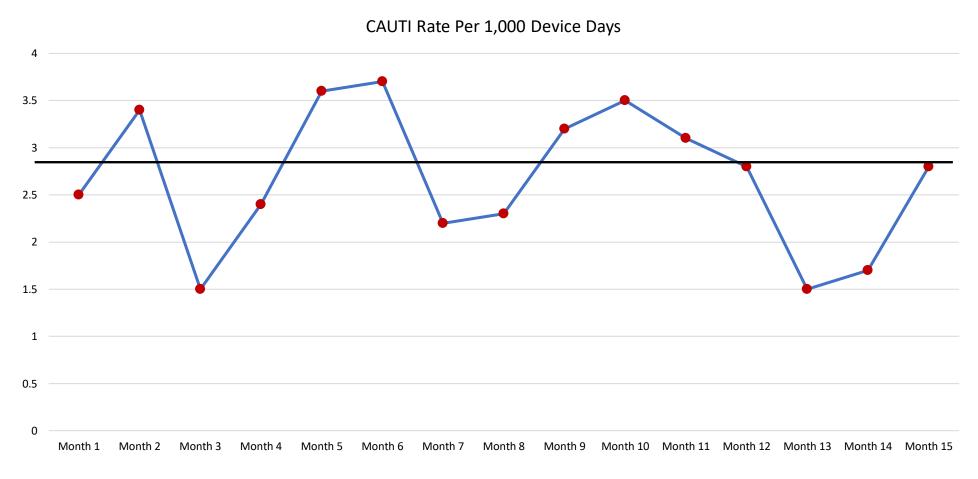
# Applying our Learning....



Which rules apply here?



# Step 5: Assess your baseline run chart



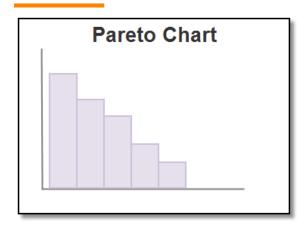




## Pareto Charts



## Break into parts



#### What do you want to do?

You want to show:

- How various parts comprise the whole
- Identify which problem should be studied.
- Which potential causes of the problem are most significant.

**Type of Chart:** Pareto Chart

Break down data to analyze amount & cumulative percentage

#### **Examples:**

- Patients by age, acuity, location
- Results by patient unit

## Pareto Principle

#### Vilfredo Pareto discovered that:

That 20% of the factors account for 80% of the results.

- The 20% may be referred to as the "Vital Few"
- The remaining 80% may be referred to as the "Trivial Many"

#### The Pareto principle:

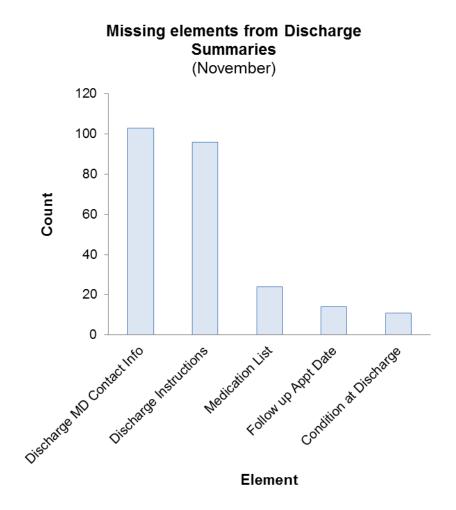
- implies that we can frequently solve a problem by identifying and attacking the "vital few" (20%) sources.
- can be applied to most systems and processes.
- is used to dissect a large problem into smaller pieces



### Pareto Chart

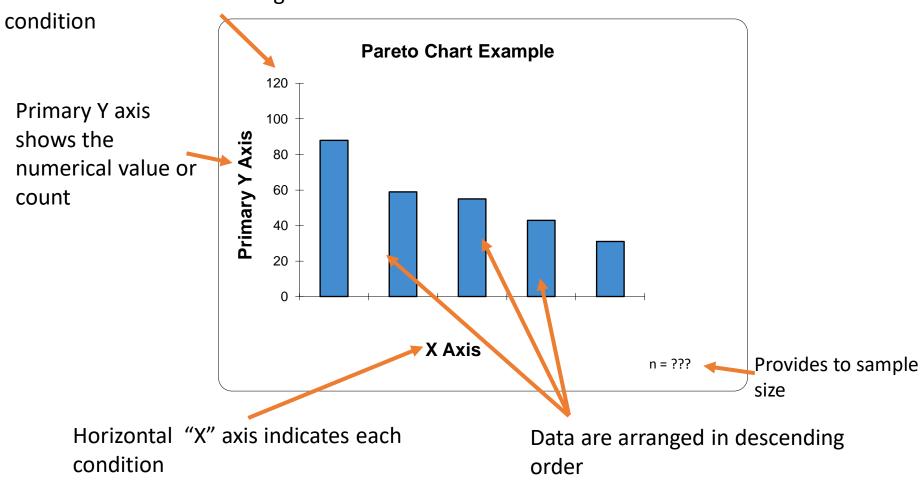
Pareto Charts are specialized bar charts that separate data into 'prioritize' columns that represent the quantity of a variable for each category.

- The visual height of the bars quickly communicates the value, importance, or effect of a category.
- Data is arranged in descending order.



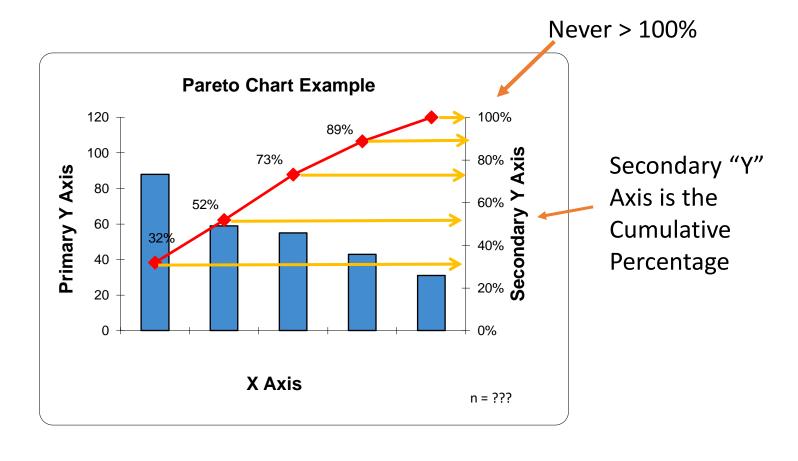
## Pareto Chart – version 1

Never > the count of the largest



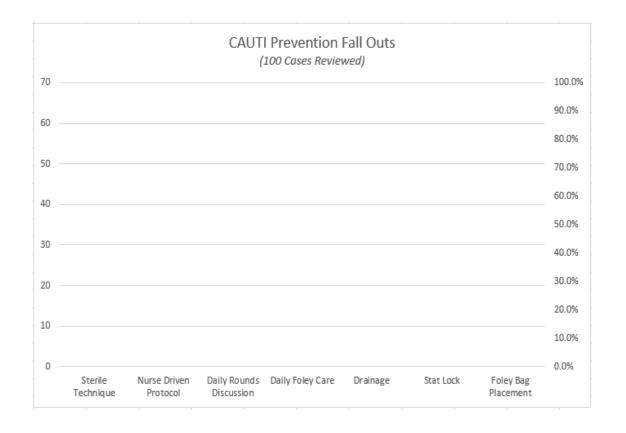


## Pareto Chart – version 2



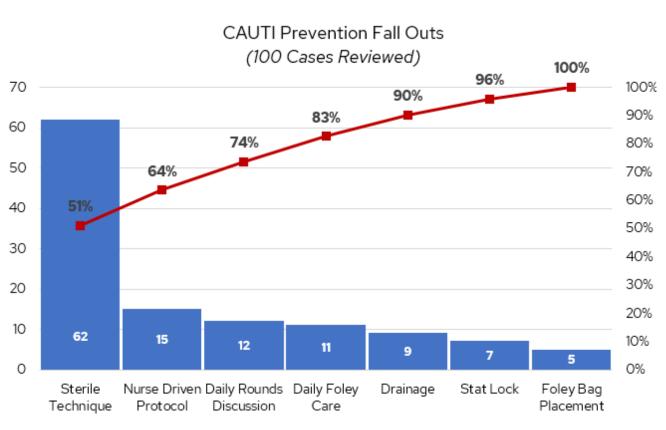
### Step 6: Breakdown the problem using a PARETO chart

Process Step	Non-Compliance	Cumulative Total	Cumulative %
Sterile Technique	62	62	62 / 121 = 51.23%
Nurse Driven Protocol	15	62 + 15 = 77	77 / 121 = 63.6%
Daily Rounds Discussion	12	77 + 12 = 89	89/121=73.6%
Daily Foley Care	11	89 + 11 =	
Drainage	9		
Stat Lock	7		
Foley Bag Placement	5		
TOTAL	121		



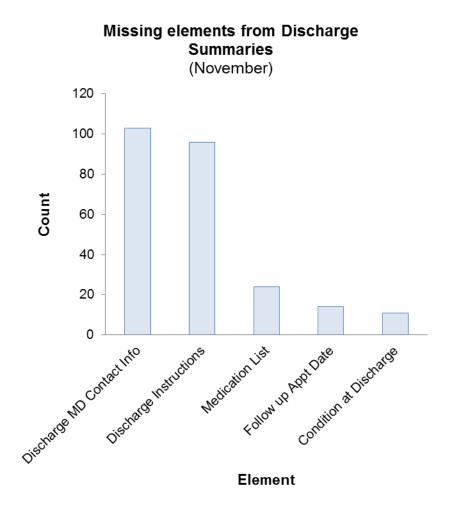
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Daily Foley Care	11	89 + 11 = 100	100/121=82.6%
Drainage	9	100+9=109	109/121=90.1%
Stat Lock	7	109+7=116	116/121=95.9%
Foley Bag Placement	5	116+5=121	121/121=100%
TOTAL	121		

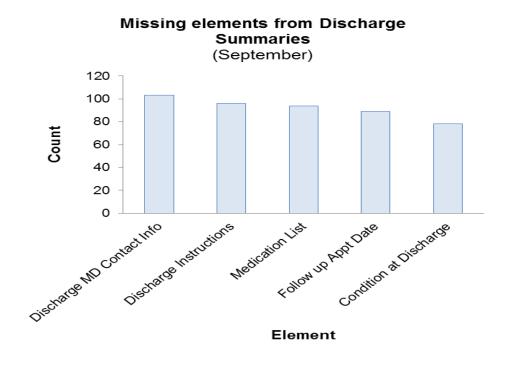


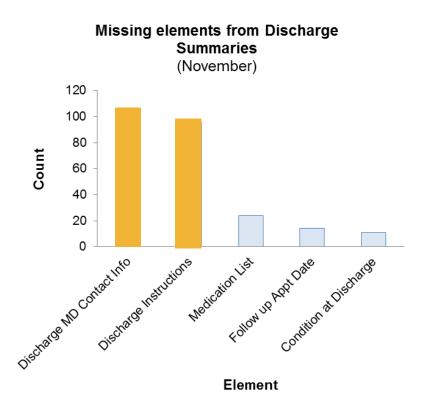
### Pareto Chart

- Pareto Charts are specialized bar charts that separate data into 'prioritize' columns that represent the quantity of a variable for each category.
  - The visual height of the bars quickly communicates the value, importance, or effect of a category.
  - Data is arranged in descending order.



## Pareto Chart Analysis





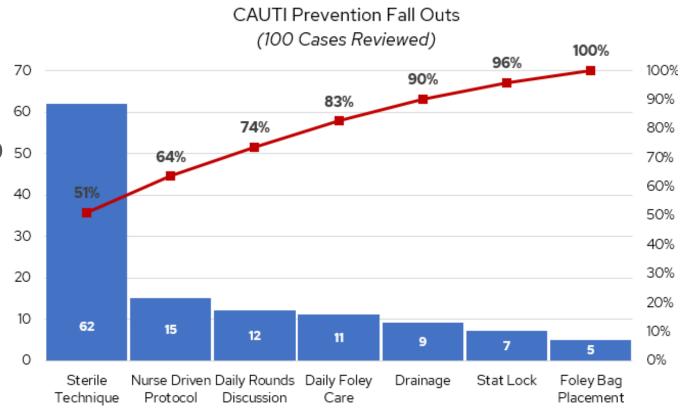
### **Analysis:**

**Chart A** - fairly 'flat' distribution of missing elements (problems are more wide spread /general)

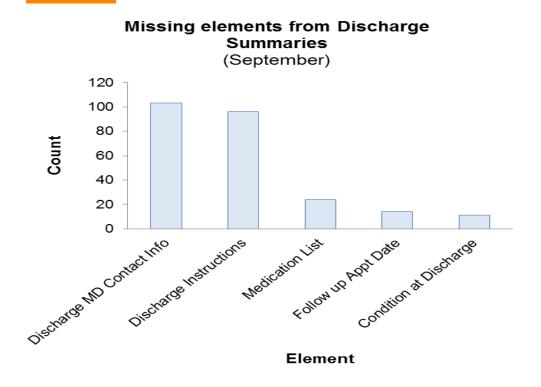
Chart B - distinctive 80/20 rule of missing elements (problems are more narrow /specific)

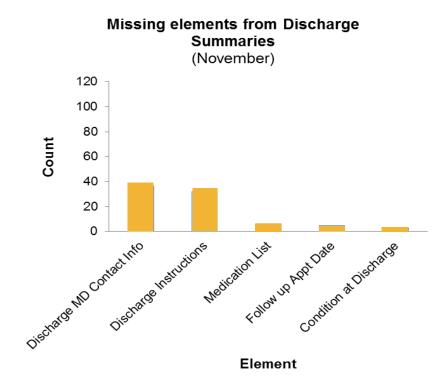
### **Step 6:** Interpret the Pareto Chart

- Does the PARETO principle apply?
- What would you recommend to 50 the team as their next step?



## Pareto Chart Analysis

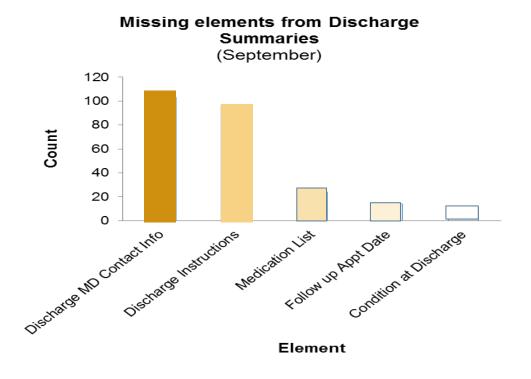


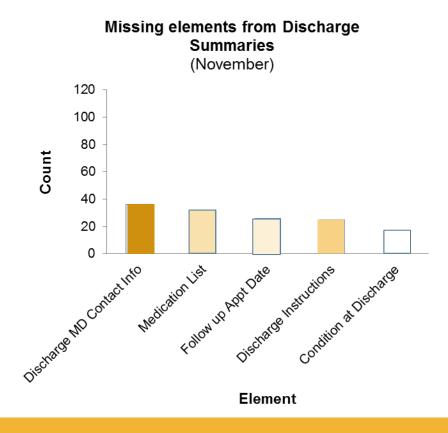


### **Analysis:**

Significant reduction of missing elements from Chart A to Chart B

## Pareto Chart Analysis





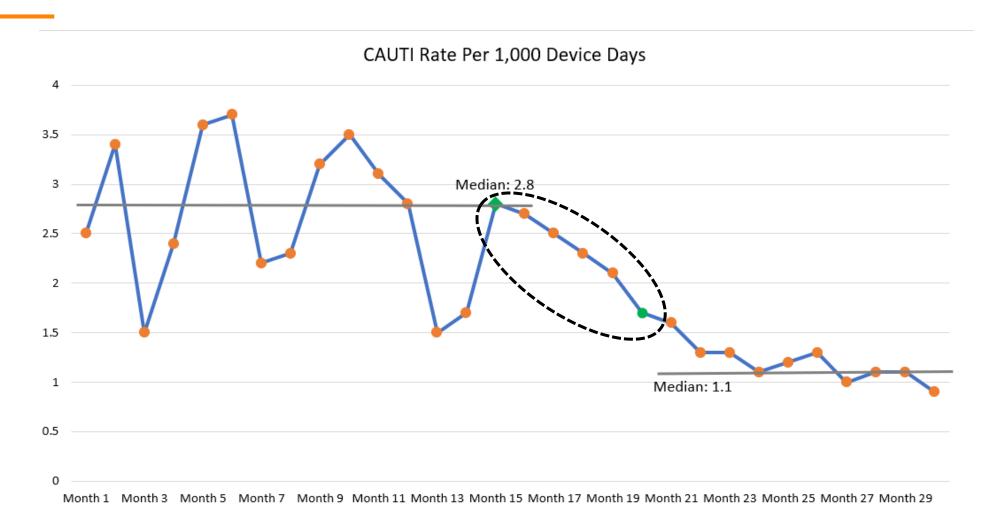
#### **Analysis:**

Significant reduction of missing elements from Chart A to Chart B

Reordering of missing elements from Chart A to Chart B



## Revisit Your Run Chart



## Summary

- 1. Understand the importance of using data to drive improvement
- 2. Define the types of quality measures
  - Outcome
  - Process
  - Balance
- 3. Introduce the quantitative tools that can be used for displaying and analyzing data
  - Run Charts
  - Pareto Charts

