In the Beginning....

(there's always one)

Too Big to Fail?

Never too Big to Fail: Embrace the mismatched socks

QI was challenging when we were small and we could communicate easily...

But we have grown....
We really are too big to fail
You have to ask for help.
You have to let them help you.

Feedback: Public Shaming Works

"I am going to be showing this to 200 people."

...one hour later

Public shaming works

Dr. Alexander HPV rates before public shaming

6 months after public shaming

- % Not Started
- % Completed
- % In Progress
- % Not Started

Rewards also help

Screenings

2010: ZERO developmental screening done/billed
2014: 2,567 screening codes in the Rock Hill
   1330 in the Fort Mill Office—
   = 3897 total

This brought in an additional $27,279
(and improved our care)
(enough to help pay a part time counselor?)

At least you have help

(after many PDSA cycles)  (also after many PDSA cycles)
It is too much to ask to separate whites from darks...

Traditional techniques are not always most efficient...

New people bring new ideas:

If your shirt is all wrinkly, you can squirt this stuff on it and the wrinkles go away. Who knew?

New people bring new ideas

"In the office where I worked before, we would go in after the doctor and answer questions and go over the depart summary."
Hope for the old guys?

Hope for the old guys:
Dr. Hansen reviewing a PSC-Y

96110 Codes Billed
(there is also hope for new guys)

For Laundry and QTIP
- Public Shaming Works.
- Embrace the white towels and the gray ones too.
- Embrace the mismatched socks.
- Sometimes your way is not the best way.
- There is hope for the old guys.
- If it gets to the drawer, you win.
- Don’t worry too much about folding. Put up with some wrinkles or use some Downy. Get over it.
- There is always more laundry.

And there is always hope....

AIM, MEASURE, CHANGE
then do it again

More examples of QI projects
(Remember, your goal is improvement, not perfection)
Repeated Use of PDSAs for Implementation

Dental Varnish at the 12-60 month well checks

Cycle 4:
Test of screen utilization

Cycle 3: What is our baseline?

Cycle 2: Who will wear the Varnish Crown?

Baseline for the week of 12/14
- Martha: 1/3 = 33%
- Wendy 3/7 = 43%
- Hansen 0/5 = 0%
- Osterberg 0/11 = 0%
- Goodbar 1/4 = 20%
- Sarah 1/3 = 33%
- Davis 2/5 = 20%
- Bul 0/6 = 0%
- Wallace-Berman 0/6 = 0%

Wendy, Queen of Dental Varnish

PDSA 2/ increasing varnish rates:
- Plan: See how simply increasing awareness affects #5's done
- Do: Audit charts for the first week of January
- Study: Present percentages to providers and crown a new king or queen.
- Act: set a goal for everyone to do at least 33% of patients 12-60 months in for well checks and do monthly audit of billing data.
PDSA 3/ Increasing Varnish Rates

- Plan: add dental varnish to daily improvement board.
- Do: Find a way to use EMR or billing codes to measure # opportunities for varnish and #’s actually done.
- Study: report this weekly as a metric with goal of 33% for all providers.
- Act: Determine barriers to success as they arise and address them through daily huddle.

One More Quality Improvement Example!

- Improving our system’s “Asthma Appropriate Care” was set as an aim by our hospital system (Carolinas Healthcare).
- Asthma Appropriate Care includes
  - Flu vaccine every year
  - Routine assessment of asthma control
  - Prescribing controller inhalers for patients with persistent asthma

Are you kidding?

ROCK HILL PEDIATRIC ASSOCIATION

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<td>Asthma</td>
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<td>42</td>
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1) ASSESSMENT OF CONTROL

2) FLU VACCINE

3) APPROPRIATE USE OF CONTROLLER MEDICATIONS
Other policy changes to support improving asthma care

1) Refill rescue inhalers: 0-1 only.
2) Educated patients to come in for more frequent asthma recheck visits.
3) Encourage patients bring medications, every visit.
4) Had clinical assistants call patients to ask about control and update information/schedule visits.