

Health Outcome Data: From the Boardroom to the Bedside

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The Need:

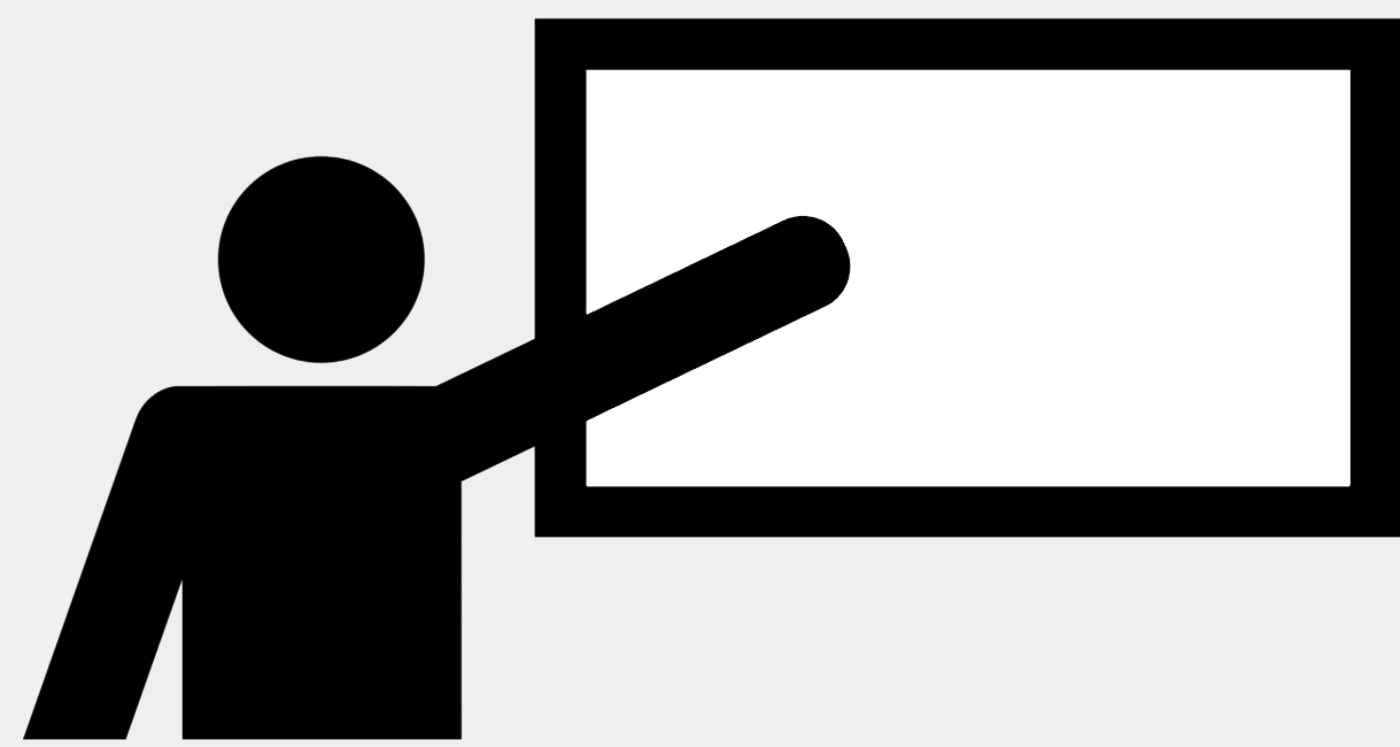
- Frontline workers want to improve healthcare
- Busy with day to day tasks, there is no time to brainstorm how to improve

The Innovation: A Set of Simple Practices

Provide frontline workers with a place and time to discuss how to make improvements

Quality Boards

Public facing displays of data, showing unit process performance and AHS strategic goals.



Quality Huddles

Members of the Collaborative Care Team meet weekly at the Quality Board to review what to work on to improve healthcare on the unit, set goals and review data on their performance.



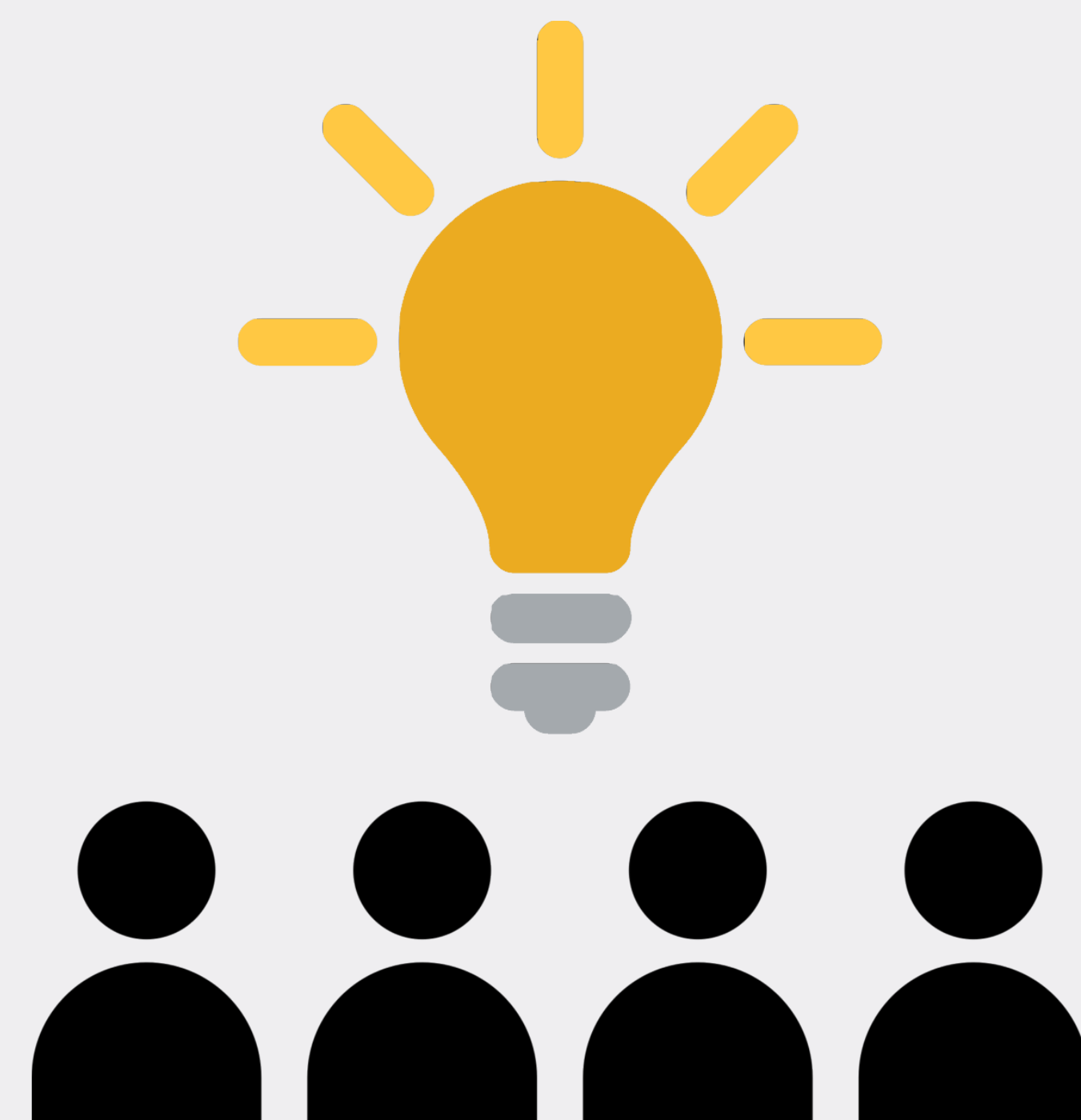
Quality Touchpoints

Brief, daily meetings in which the team updates each other on progress of what is being worked on today.



Quality Councils

Monthly meetings with representation from the entire Collaborative Care Team and patients and families to discuss progress made on quality initiatives and what can be improved at the practice setting and strategies to get there.



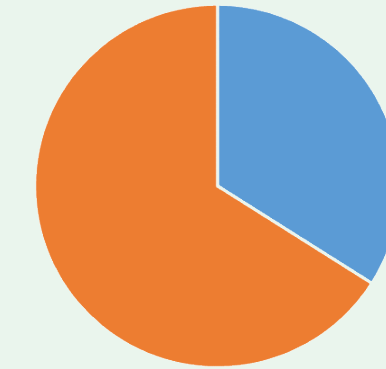
What We Discovered

Conducted two surveys and spoke to frontline staff in a focus group and interviews

Most AHS frontline staff see data like hand hygiene, infection rates, falls rates etc. and know it's important in deciding what to work on next and in judging how they are doing

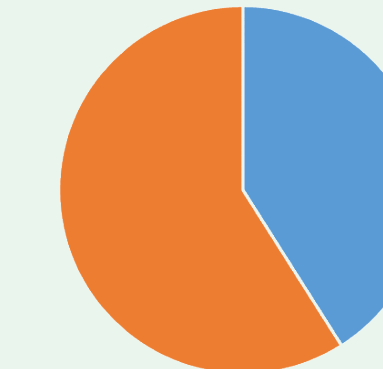
66%

look at data



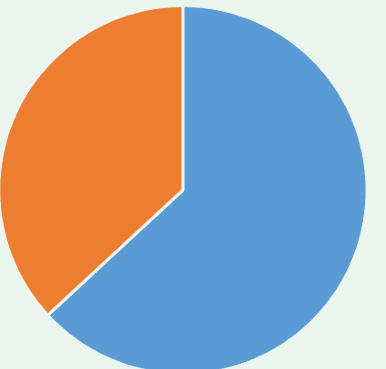
59%

are somewhat comfortable with interpreting/using data



37%

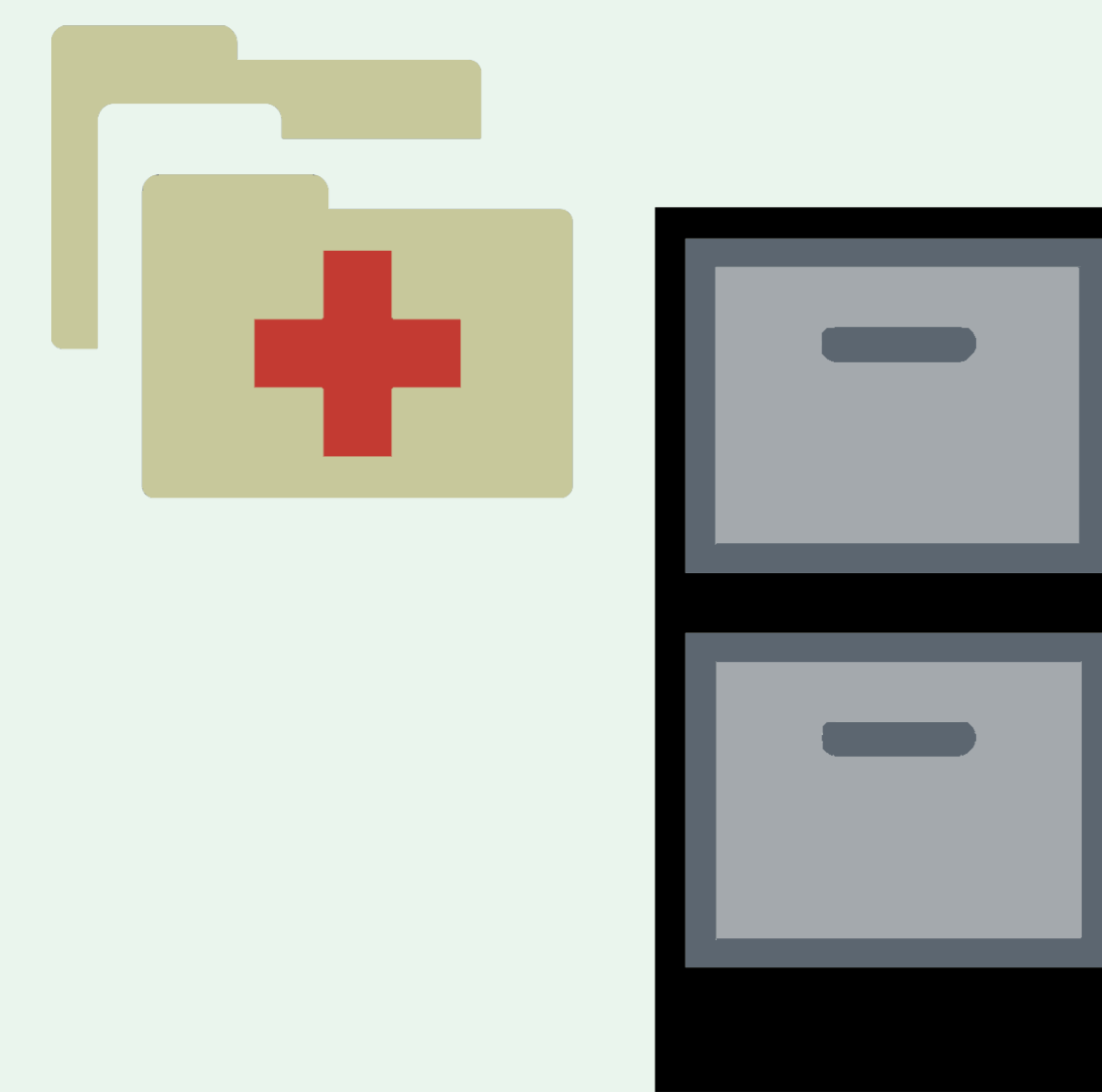
are very comfortable interpreting/using data



Who?

There needs to be clear expectations about whose job it is to collect the data and interpret it.

"I wonder what the expectation is for frontline to access information?"



Meaningful Data

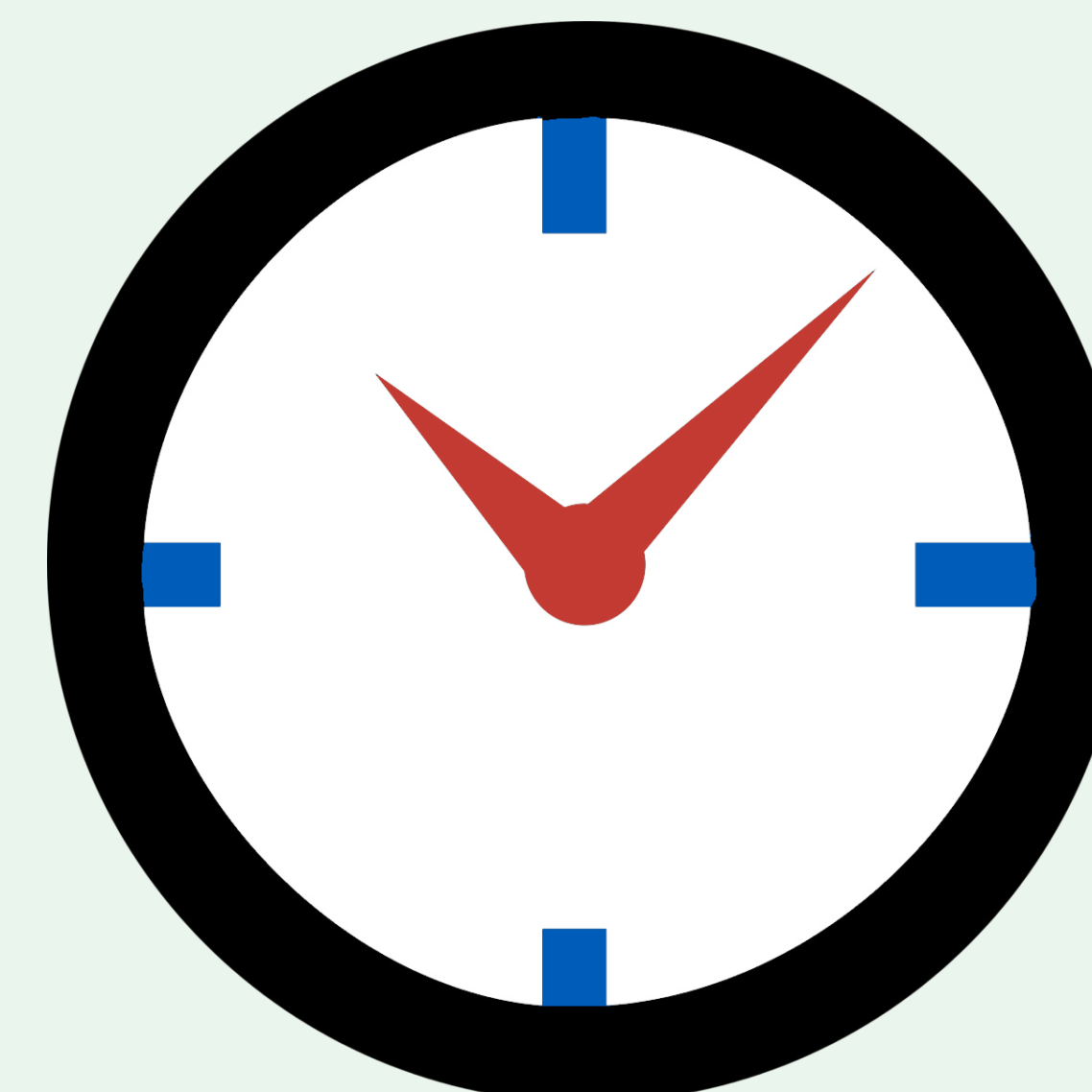
The data posted has to mean something to people and all staff need help in how to present data.

"We are trying to get [staff] to draw the line of site between indicators."



Time

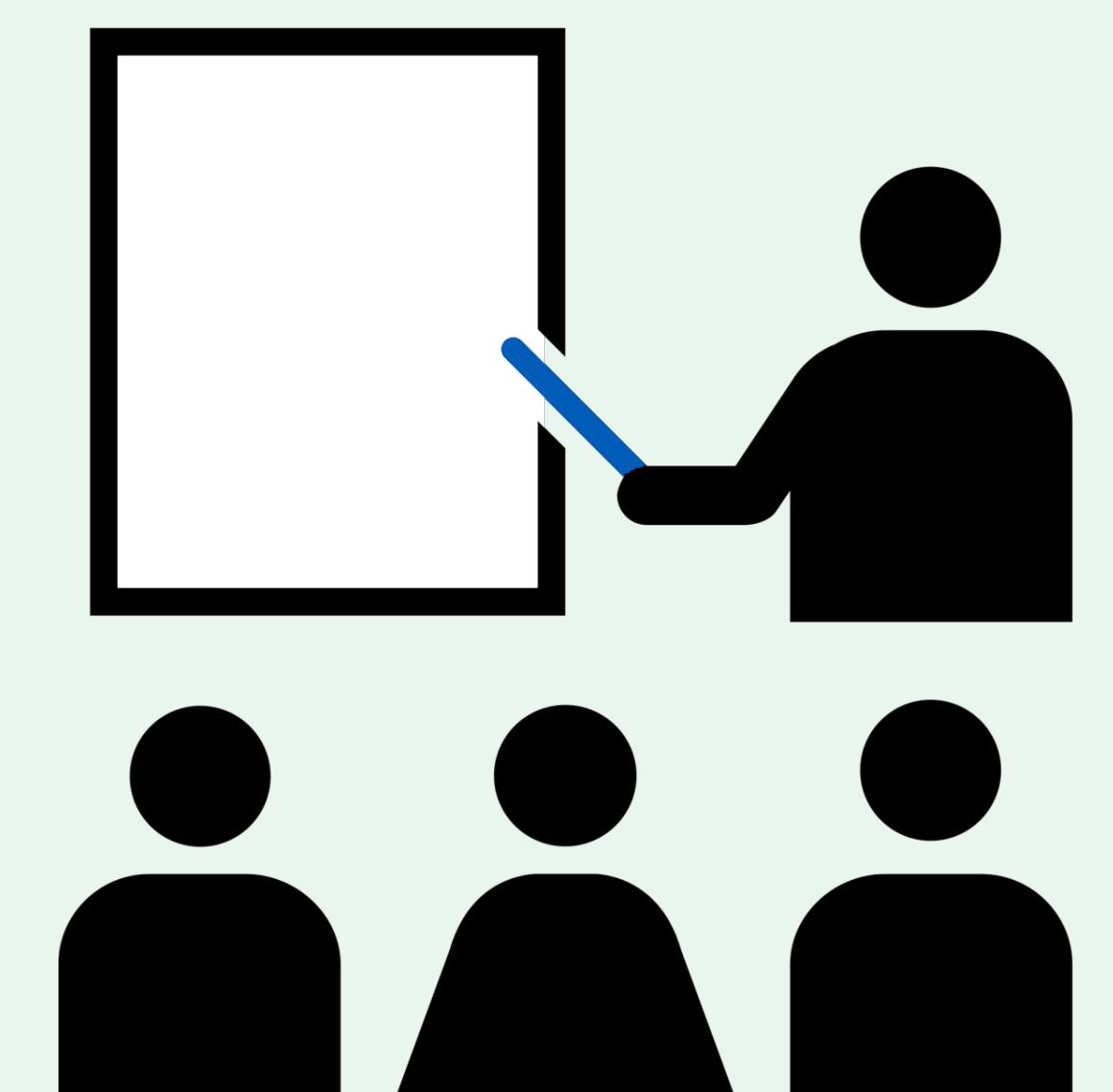
Time is a major barrier to looking at data
"There is still resistance."



Training

Frontline staff want more training for themselves and their leaders and the training needs to be tailored to the setting.

"Use multiple means of education: huddles, through educators, travelling road shows or walk about, posters..."



Next Steps

- Create opportunities to improve quality literacy among all staff so they understand how the interpretation of data can inform their practice
- Work with Clinical Nurse Educators and Unit Managers to help deliver educational programs that are most appropriate for the practice setting