Planning the Change...
SMART Goals, Process & Outcome Measures

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## Your Feedback Is Important!

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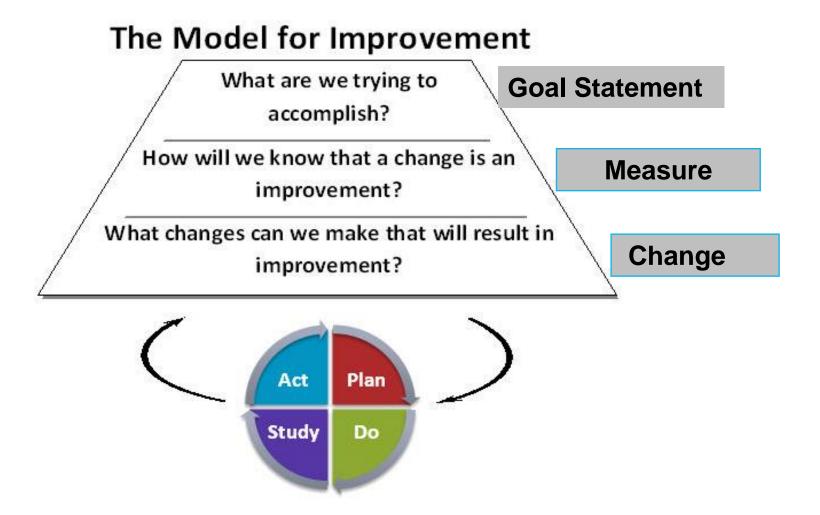


- Explore the Model for Improvement
- Discuss SMART Goals
- Review development of outcome and process measures

# Three Fundamental Questions From the Model for Improvement









#### **Setting the Stage... Developing SMART Goals**







## Specific Measurable Attainable Relevant Time-bound

# Develoand M

### **Developing Goals** and Measures





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# Dissecting Your Data to Get to the Root Cause





	# Residents with new PU			% of Residents with Pressure Ulcers		# of Newly acquired PU by Stage						
Date	Admitted	Acquired	Monthly Census	Admitted	Acquired	# stage I	# stage II	# stage III	# stage IV	# unstageable	#sDTI	Total # PU
Jan-12	2	4	248	0.81%	1.61%	0	4	0	0	0	0	4
Feb-12	3	6	245	1.22%	2.45%	1	5	0	0	0	0	6
Mar-12	2	4	243	0.82%	1.65%	0	3	1	0	0	0	4
Apr-12	2	2	245	0.82%	0.82%	1	3	0	0	0	1	5
May-12	2	6	245	0.82%	2.45%	0	6	1	0	0	1	8
Jun-12	4	5	246	1.63%	2.03%	0	4	1	0	0	0	5
Jul-12	5	8	245	2.04%	3.26%	2	5	0	0	1	0	8
Aug-12	4	4	243	1.65%	1.65%	0	3	0	0	0	1	4
Sep-12	5	5	245	2.04%	2.04%	1	4	0	0	0	0	5
Oct-12	4	4	243	1.65%	1.65%	0	5	0	0	0	0	5
Nov-12	3	4	246	1.22%	1.63%	1	3	0	0	0	0	4
Dec-12	4	5	248	1.61%	2.02%	0	3	2	0	0	0	5
Jan-13	2	4	245	0.82%	1.63%	0	3	1	0	0	0	4
Feb-13	1	6	243	0.41%	2.47%	0	4	2	0	0	0	6
Mar-13												





#### **Observation**

Stage 2 consistently developing

Stage 1 being missed

#### Question

Occurring on a specific unit, team?

Is it a specific type of resident?

# What Would Your SMART (Soal Be?





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#### **Sample Goals**

To reduce in-house acquired PU by 20% on West Wing in 3 months.

To reduce number of residents with an in-house acquired PU by 6 in 3 months.













 Outcome measures tell you whether changes you are making are actually leading to improvement

2

These are the measures you ultimately want to move

3

 They tell you how the system is performing—what is the ultimate result?

# Outcome Measures Could Look Like This...





## **Outcome Measure**

 Number of days between new nosocomial stage II –IV pressure ulcers

# **Outcome Measure**

 Percent of residents developing a newly acquired PU

# Process Measures...Are We Quality Improvement Organizations Sharing Knowledge. Improving Health Care. CENTERS FOR MEDICARE & MEDICA



1

To affect the outcome measure, you have to improve your processes

2

 Measuring the results of these process changes will tell you if they're leading to improvement

3

Are the parts/steps in the system performing as planned?

## **Examples of Process Measures**





#### **Sample Process Measures**

For Falls: 100% residents will have a falls risk assessment done within 24 hours of admission

Consistent use of appropriate pressure relief devices on identified high-risk residents

# Process Measures Could Look Like This...





#### **Process Measure**

 Consistent use of appropriate pressure relief devices on identified high-risk residents

#### **Process Measure**

 Percent of newly admitted residents that have a pressure ulcer risk assessment within one calendar day of admission

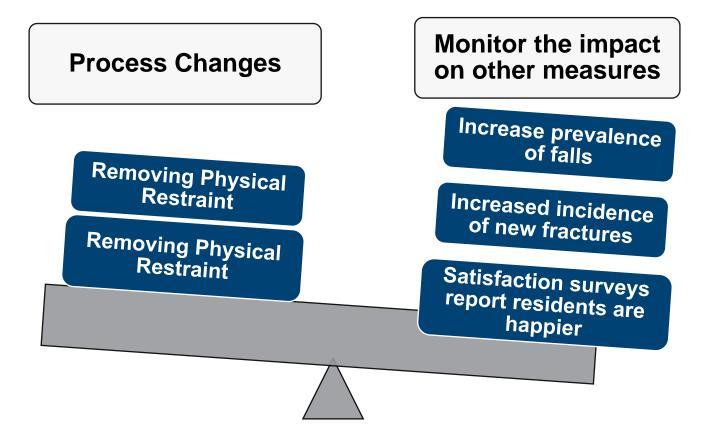






## **Balancing Measures**

Are the changes we are making to one part of the system causing problems in other parts of the system?



# Pressure Ulcer Measures (Could Look Like This...





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## **Outcome Measure**

 Number of days between new nosocomial stage II –IV pressure ulcers.

## **Process Measure**

 Percent of newly admitted residents that have a pressure ulcer risk assessment within one calendar day of admission.

## Balancing Measure

Percent of staff
 who are satisfied
 or highly satisfied
 working in facility
 striving to reduce
 pressure ulcers.

### Reminders As You Begin Your Improvement Plan





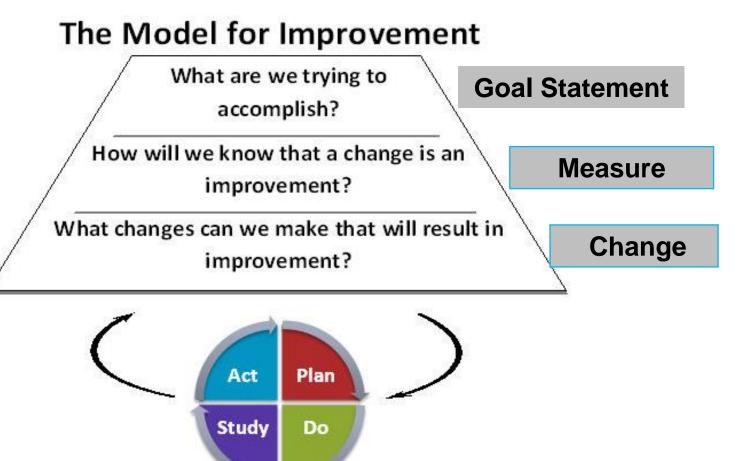


- Gather information to provide focus for the project
- Seek input from staff about what might improve the process
- What are the specific issues to be investigated?
- What would be the impact on the organization?
- What resources will be required?

### **In Summary**







#### **For More Information**

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This material was prepared by the IPRO QIN-QIO, a partnership of Healthcentric Advisors, Qlarant and IPRO, serving as the Medicare Quality Innovation Network-Quality Improvement Organization for the New England states, NY, NJ, OH, DE, MD, and the District of Columbia, under contract with the Centers for Medicare & Medicaid Services (CMS), an agency of the U.S. Department of Health and Human Services. The contents do not necessarily reflect CMS policy. 12SOW-IPRO-DE-TA-A5-21-349