

Accelerate PI

# Physician Engagement in Quality Improvement

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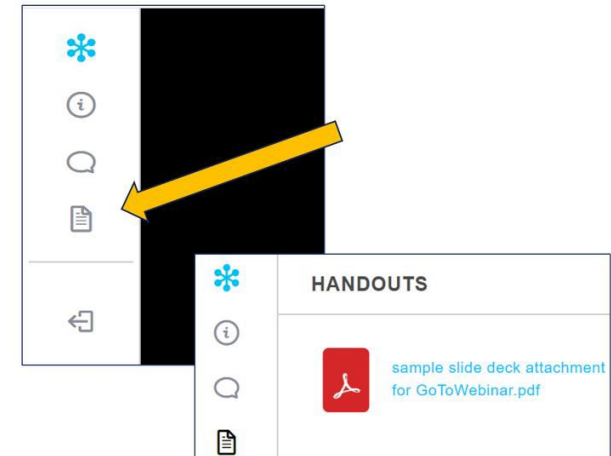
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# Learning Objectives



1. Describe the role of physician quality leaders in quality improvement initiatives.
2. Recognize approaches that promote engagement vs. approaches that may cause physician leaders to withdraw and
3. Identify strategies to counter resistance.

# Disclosure Statement

These staff and speakers have disclosed that they do not have any conflicts of interest. For example, financial arrangements, affiliations with, or ownership of organizations that provide grants, consultancies, honoraria, travel, or other benefits that would impact the presentation of today's webinar content.

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# Championing Quality and Patient Safety

We're committed to advancing safety and quality as well as transforming health care by encouraging and supporting health care organizations to embrace quality improvement.

# Related Standards

## **PI (Performance Improvement) Chapter**

- The organization collects data to monitor its performance.
- The organization has a performance improvement plan.
- The organization compiles and analyzes data.
- The organization improves performance.

# Related Standards (cont.)

## **LD (Leadership) Chapter**

- Leaders establish priorities for performance improvement.
- Leaders use hospitalwide planning to establish structures and processes that focus on safety and quality.
- The hospital considers clinical practice guidelines when designing or improving processes.

# Resources

- [NEW Accelerate PI Resources Video Short](#)

Suite of performance improvement resources available on Joint Commission Connect<sup>®</sup> and The Joint Commission Website

- [Performance Improvement Fundamentals for Hospitals Webinar Recording](#)

Basic performance improvement principals and methodologies for hospitals (includes examples)

- [Performance Improvement Fundamentals for Post-Acute Care Settings Webinar Recording](#)

Basic performance improvement principals and methodologies for post-acute care settings (includes examples)

# Bobby Redwood MD, MPH, FACEP

## Physician Engagement in Quality Improvement



# Content Outline

- A Quality Improvement Primer for Physicians
  - Physician QI Leader Roles and Responsibilities
- Engaging Physicians in QI
  - Finding and engaging a physician champion
  - Transforming the laggards
  - Charting a course for the future of physician engagement in QI

# Physician Quality Roles

# Physician Quality Roles:

- General clinical workforce
- QI project team member
- Physician quality champion
- Departmental medical director
- Director of quality
- CEO/CFO/COO



Ahrq.gov, DeWalt, et al. 2010

# Physician Quality Responsibilities: General clinical workforce

- Be aware of clinical guidelines and recommendations
- Stay abreast of departmental quality initiatives and requirements
- Support QI leadership by setting an example among your physician peers and other clinical professionals

# Physician Quality Responsibilities:

## Physician quality champion

- Be available for special tasks (often one-time responsibilities) that will help move the project forward
- Be an ambassador for the QI team
- Provide real-time feedback on QI projects
- Be willing to be the first physician to trial the changes
- Help guide expectations/accountability when building ongoing measures into the medical staff structure

# Physician Quality Responsibilities: QI project team member

- Possess a deep knowledge of the process or area in question
- Have the authority to test and implement a change and to problem solve issues that arise in this process
- Understand how changes will affect the clinical care process and the impact these changes may have on physician workforce or other parts of the organization

# Physician Quality Responsibilities:

## Departmental medical director

- Have executive authority and serve as the link between the QI team and the organization's senior management
- Support your QI department's implementation of projects
- Ensure that your department provides adequate staffing, budget and facilities to perform and support ongoing quality improvement
- Ensure department providers are using agreed upon processes, guidelines, procedures, etc.

# Physician Quality Responsibilities: Director of Quality (1 of 2)

- Set quality goals and timelines that are in-line with the mission and strategic plan of your institution and the needs of the executive leadership
- Meet regularly to review performance data; ensure dashboard measures are clinically relevant
- Identify areas in need of improvement

# Physician Quality Responsibilities: Director of Quality (2 of 2)

- Carry out and monitor improvement efforts
- Model for Improvement (MFI)
- Plan Do Study Act (PDSA) cycles
- Workflow mapping
- Assessments
- Audit and feedback
- Benchmarking
- Best practices research



# Physician Quality Responsibilities: CMO/CEO/COO

- Ensure that the quality department is aligned with your institutional needs (CMS core measures, public reporting, regulatory standards)
- Do not participate on a daily basis with the team, but join periodically and stays apprised of team progress
- Assist the team in obtaining resources and overcoming barriers encountered when implementing improvements
- Give praise when praise is due and celebrate milestones in quality throughout the institution



# Physician Engagement Pearl: Clearly define your physician QI expectations

- Scope creep is real and a physician may react suspiciously to a vague, uncompensated QI role request with no clear end date
- Make the “SMART” ask: Specific, Measurable, Achievable, Relevant, and Time-Bound
- If it’s a big & ongoing role—make it a compensated job with protected time and a title
- *Your pearls? What physician QI roles have been successful in your hospital?*

# Physician Engagement in Quality Improvement

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# Understanding Physicians

- Some physicians are suspicious of QI work.
- QI may be viewed as the craft of
  - “Suits”
  - “Bean counters”
  - “MBAs”
  - “Corporate medicine”
- Let’s unpack this...



# Understanding Physicians (the cynical view)

- Do physicians feel entitled?
  - 4 years of undergrad
    - No fun, lots of library time
  - 4 years med school
    - Relationships on hold, weekends are a myth, hair thinning faster than your non-medical peers
  - 4 years of residency
    - Sleep deprivation, hierarchical work environment, reminded daily of your incompetence
    - \$350k in debt, Friends all have kids/houses by now
-

# Understanding Physicians (a brighter perspective)

- Physicians truly care about & feel responsible for patients
  - Patient trust
  - Bird's eye vision of the care plan
  - Detail oriented, careful, skeptical
  - Protecting your plate
  - Time with patients matters most
  - Money matters least
- Nearly limitless dedication, if the cause is worthy and the level of engagement appropriate



# Physician Engagement Pearl: Master the individual patient case

- Some physicians are population health minded, but many emphasize the individual patient
- Most QI work is designed to benefit the population, but there is always a way to work in the individual patient benefit
- *Your pearls? What arguments have worked for you?*

# Finding and Retaining your Physician Champion

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# Physician Quality Responsibilities: Overview

- The physician champion
  - Finding the ideal physician champion for your project
  - Working with physicians at your institution
  - Continued engagement
  - Compensation for QI work (monetary or otherwise)
    - i.e. publications, tenure track points, bonuses, recognition



# What to look for in an effective physician champion

- Respected as a clinical physician
- Good at communicating
- Willing to stand up when needed (has courage)
- Good social skills and relationships
- Primary care or truly team-based specialty background is a bonus and has a health systems perspective

# How to keep your physician champion engaged

- Compensate (if possible... a little goes a long way)
- Be strategic in their involvement (do they need to be present for every meeting? Best to engage when it involves changing practice)
- Respect their time
  - Shift huddle, Curbside consult, 5-minute zoom or stand-up meeting >>> 1-hour daytime meeting
- Best way to thank them is with small gestures that save them time or improve their family relations
  - Coffee card, game tickets, flowers or hospital swag for their spouse, baby-sitting vouchers, get admin to block their last appt of the day

# How to lose your physician champion

- Too many meetings, especially meetings during clinical time
- Pushing for interventions that are overly burdensome to clinical work flow
- Putting them in an adversarial position with their peers
- Drifting too far from the science (anecdotes and storytelling...up for discussion)



# Physician Engagement Pearl: Choosing physician-friendly metrics

- In general, physicians appreciate metrics that
  - Encourage high yield interventions (Aspirin for acute MI)
  - Remind us to do things we want to do, but often forget (blood cx)
- Physicians get frustrated with metrics that
  - Can work against good clinical care (pain scale, patient satisfaction)
  - Are not based on solid evidence (Blood cultures for PNA)
  - Great metrics can be ruined by hard stops in the EHR, BPA pop-ups or other delays
- *Your pearls? What metrics have physicians responded well to?*

# Why are the Laggards Lagging?

# Physicians may feel they are *already* very involved in QI

- Proactive quality and safety activities are often simply added to myriad competing duties, such as dealing with:
- Physician credentialing
- Peer review
- Patient complaints
- Reactive regulatory quality and safety efforts (i.e. National Patient Safety Goals)



# How prepared are your physician champions' colleagues to effect change?

- Pre-contemplation – consciousness raising
- Contemplation – emphasize benefits
- Preparation – provide support
- Action – continue support in addition to encouragement and praise
- Engagement – let them thrive with periodic check ins and focus your efforts on others

Prochaska et al 1992



# Pearl: If you meet resistance...

- Do
  - Back off and regroup
  - Add some levity to the request
  - Use physician peers to your advantage
  - Stay optimistic (you have the patient in mind!)
- Don't
  - Blame, shame, intimidate, or nag
  - Give up
- Your pearls? What strategies work when you meet resistance?

# The Future of Physician Quality Improvement Work

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# How do we evolve, so physician QI engagement is the norm?

Physicians	Collaboration	Quality Professionals
<ul style="list-style-type: none"> <li>-Create MD-MSc (QI) tracks</li> <li>-Incorporate QI in our professional societies</li> <li>-Budget protected time for physician QI engagement</li> <li>-Engage physicians with grant \$ and real change, not bonuses</li> </ul>	<ul style="list-style-type: none"> <li>-Focus on achieving measurable results to demonstrate progress</li> <li>-Quality and safety dashboards for physicians should reflect what is important rather than what is expedient</li> </ul>	<ul style="list-style-type: none"> <li>-Improve infrastructure to support QI work</li> <li>-Better define QI job descriptions in healthcare</li> <li>-Formalize QI professionals' roles in medical schools</li> <li>-Formalize QI professionals' roles in medical schools</li> </ul>



# Pearl: Emphasize the Science of QI

- At its core, quality work is implementation science
- QI topics are largely chosen based on advances in the medical literature...good science that's not making it to the bedside
- Get nerdy with us. Use medical jargon—i.e. Biostats & Epidemiology-speak (incidence, prevalence, rates, statistical significance)
- Don't be afraid to present your knowledge with confidence... We know medicine, but *you* know quality
- Integrate the fields, so quality professionals are medical professionals and vice versa

# Q&A Segment

The original broadcast included a live Q&A segment, which is included in this recording.

Regarding the On Demand webinar operations and CE-related inquiries:  
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RESOURCE

## Joint Commission Continuous Customer Engagement Targeted Topics Webinar - Hospitals C Section Reduction

11/03/2021

November 3, 2021 Documents

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## Joint Commission Continuous Customer Engagement Nursing Care Centers Webinar: Rehospitalizations

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