Guidance Implementation / QI

Initial Working DRAFT for Stakeholder Input and Refinement

What is the Problem to be Solved (Current State)

Organizations are challenged to consistently, accurately assess and improve their capacity for instituting repeatable approaches to improving care delivery and outcomes; however, improving care delivery and outcomes is complex, challenging, and time consuming.

Contributing to the complexity are difficulties implementing clinical guidance, pathways and decision support interventions through care process analysis and reengineering.

Healthcare delivery organizations have differing approaches, capacities, and gaps associated with change management needed to deliver care based on state-of-the-practice evidence-based care guidance.
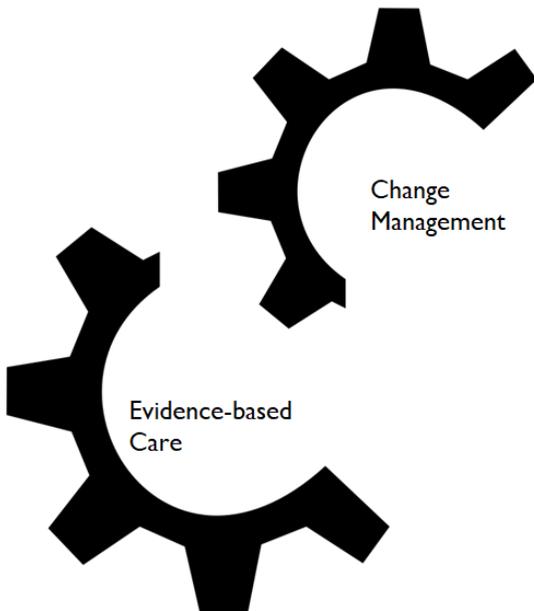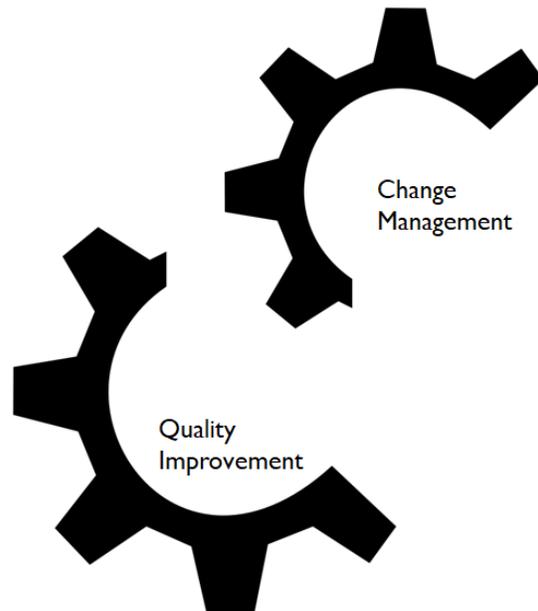
- There are challenges not only across the healthcare sector, but also for individual care delivery organizations or sites diagnosing and improving their ability and capacity to support evidence-based care practices. These organizations often need support for the change management processes needed to successfully optimize care delivery and often don't know where to get that help.
- We need to encourage use of system-wide standards, evidence-based protocols for critical care processes and continuing education for clinicians related to key critical care functions. (see Recommendations from NAM re: COVID-19 lessons and needs regarding advancing innovations in practice)

What Does the Solution Look Like (Future State)

The future state includes executive support for a focus on care transformation, identification of gaps adversely affecting care delivery, care quality, and quality improvement, and action taken to improve performance and outcome through a systematic, coordinated outcomes-focused approach.

A key initial step in successful care transformation efforts is conducting an objective assessment of an organization's capacity to absorb evidence-based care practices, ranging from executive sponsorship, staffing challenges, content ownership, IT tooling, education, and a host of other issues. The use of an industry-accepted reference maturity model allows organizations to assess their capability for process change and quality improvement and proven methodologies for organizational change management allows them to design and implement effective changes.

(See here for work in progress toward providing this toolset)

Users can access best practice tools and processes for analyzing organizational status and readiness regarding care process changes (including optimally leveraging health IT tools as appropriate) and implementing, evaluating and continually improving these changes.

Focus is "People, process, technology - **in that order**."

Patients are key stakeholders and engaged in the implementation/QI process.
Well-organized toolkits comprised of specific change management/QI tools are readily available and make it easy for the user to identify, access and apply the specific tools best suited to specific tasks (clinical targets, components of QI efforts needing support, etc.) and organizational characteristics (solo practice vs. large IDN).

Tool Users/Use Cases

- Quality improvement teams (analyze and improve target-focused care), and CDS/pathway implementers who support them (successfully deploy interventions in ways that improve targeted care processes, outcomes and stakeholder satisfaction),
- Certification/accreditation authorities (e.g., those that assess/certify compliance with best practices)
- Executives and managers (support their allocation of resources needed to support change management and outcomes improvement)
- Trainers/educators (help those in organizations who will be affected by changes to understand, execute, and benefit from these changes)
- IT/technical Staff (understanding how infrastructure needs to be modified to achieve change management goals)
- Data analytics staff (understand/produce metrics important to the effort and leverage them to help drive improvement)

Infrastructure needed to produce tools/solve problem

- Mechanisms for gathering, organizing, disseminating, and helping users access and apply tools and strategies for care process analysis and change. (e.g., related to knowledge portals)

Other enablers needed to solve problem

- Organizational appreciation for importance of systematic approach to care process improvement (including health IT-enablement as appropriate), and resources and skilled workforce needed to drive this change. Investment and coordination to produce, maintain and disseminate the needed *interoperable* tools - includes culture change/buy in to focus on 'puzzle box picture' rather then uncoordinated creation of disconnected puzzle pieces, unnecessary redundancy.

Steps to address needed infrastructure / enablers - Who does what?

- Need aggregators to identify/collate/vet care process re-engineering tools, and/or standardized mechanisms to describe and tag these resources so collation can be semi-automatic. Increasing focus on value-based care by payers will strengthen ROI for this work.

How tool(s) fit in Patient Journey

- Supports the patient journey *indirectly* by ensuring that care delivery organizations that patients interact with are effectively deploying health IT-enabled quality improvement approaches that enhance *their* care delivery experiences and outcomes.

Ecosystem Cycle Step(s) where tool is applicable

- Supports "Integrate tools into systems and workflows" cycle step