



## Quality & Process Improvement Resources

### ***Organizations Supporting Quality & Process Improvement:***

Significant infrastructure has grown up to support the growing concern and attention that is being addressed to QI and PI nationwide. Among those organizations that are most helpful for individuals and organizations undertaking improvement efforts are:

### **Rand Health**

Rand Health is a research division within RAND, the first organization to be called a "think tank." For more than 50 years, RAND has been working to improve policy and decision-making through research and analysis. RAND Health continues that tradition, advancing understanding of health and health behaviors, and examining how the organization and financing of care affect costs, quality, and access.

RAND Health originated in the 1960s, when policymakers were engaged in a vigorous debate about how health care should be financed. To provide a factual basis for the debate, in 1971 the Department of Health, Education, and Welfare (now the Department of Health and Human Services) funded the RAND Health Insurance Experiment, a 15-year, multimillion-dollar effort that to this day remains the largest health policy study in U.S. history. The study's conclusions encouraged the restructuring of private insurance and helped increase the stature of managed care.

Today, RAND Health's staff includes more than 170 experts, many of whom are nationally recognized. We also draw on the expertise of the entire RAND staff, who work in areas ranging from international policy and national security to civil justice, public safety, education, child policy, and science and technology.

Many of Rand Health's projects address current policy concerns, but we also work extensively on the scientific basis for improving service delivery, system performance, and organizational effectiveness. Sponsors of RAND Health's research and technical assistance include government agencies, foundations, and private-sector organizations. RAND Health's advisory board enriches our research agenda by adding their experience, perspective, and expertise. We disseminate our research findings broadly.

Additional information can be accessed at: <http://www.rand.org/health/>

Who Is at Greatest Risk for Receiving Poor-Quality Health Care?

<http://www.rand.org/news/press.06/03.15b.html>

<http://content.nejm.org/cgi/content/full/354/11/1147>

The **Pittsburgh Regional Health Initiative** was started by Paul O’Neill, former US Secretary of the Treasury and the CEO of Alcoa Steel. O’Neill launched a crusade at Alcoa to reduce errors in production and lost days due to injury to zero. He then used his Alcoa success to impact quality and safety in the healthcare industry in Pittsburgh and beyond. The PRHI is a physician-led collaboration and produces a useful publication documenting performance improvement success stories. Its website is also an excellent source of information and ideas.

Additional information can be accessed at: [www.prhi.org](http://www.prhi.org)

The **Agency for Healthcare Research and Quality (AHRQ)**, an agency of the US Department of Health and Human Services, was created in large part to reduce the historic 17-year delay the time from “bench to bedside”—from the time that researchers produce an answer or discovery until it is fully integrated into practice. AHRQ issues a publication highlighting process improvement and quality improvement research studies and expert advice.

Additional information can be accessed at: [www.ahrq.gov](http://www.ahrq.gov)

The **Institute for Healthcare Improvement (IHI)** was created by Don Berwick, M.D., a practicing pediatrician and now a nationally renowned performance improvement guru. IHI’s *100,000 Lives campaign* is a great example of how to accelerate QI and PI within individual hospitals. The Wisconsin Hospital Association is a 100,000 Lives partner. Berwick and IHI’s website is a wealth of information about specific success stories, expert guidance through its “STAT” calls, and general QI and PI resources.

Additional information can be accessed at: [www.ihl.org](http://www.ihl.org)

The **Joint Commission for the Accreditation of Healthcare Organizations’** mission is to continuously improve the safety and quality of care provided to the public through the provision of health care accreditation and related services that support performance improvement in health care organizations.

Additional information can be accessed at: [www.JCAHO.org](http://www.JCAHO.org)

The **Institute for Clinical Systems Improvement (ICSI)**, a collaboration of health care organizations, is an objective voice dedicated to championing health care quality and to helping its members identify and accelerate the implementation of best clinical practices for their patients. The ICSI program has four components: improvement commitment, scientific groundwork for health care, support for improvement, and the Minnesota health quality agenda.

Additional information can be accessed at: [www.icsi.org](http://www.icsi.org)

**Minnesota Community Measurement Project:** [www.mnhealth.org](http://www.mnhealth.org)  
*Measurement and reporting tools for primary care practices.*

**Wisconsin Collaborative for Healthcare Quality:** *The purpose of the Collaborative is three-fold:*

- *For a small group of culturally compatible providers and employers to work together to develop common measures of quality that have meaning and value to providers, payers and consumers*
- *To work together to share and develop "best practices" in a manner that improves healthcare outcomes*
- *To publicly share measurements and best practices in a manner that offers these as benchmarks for other health systems, government agencies, payers and consumers*

*The Collaborative is committed to broad participation in its efforts to create both meaningful measurements and best practices. As such, once the baseline measurements are chosen, the Collaborative will develop a mechanism by which other providers can participate in the measurement process and engage in shared process improvement and development/implementation of best practices.*

Additional information can be accessed at: [www.wiqualitycollaborative.org](http://www.wiqualitycollaborative.org)

**Wisconsin Association for Healthcare Quality**—The Association's mission is to advance quality in healthcare by promoting the use of the quality principle and practices in healthcare organizations and supporting the growth and development of healthcare quality professionals.

Additional information can be accessed at: <http://www.wahq.org/>

**Healthclick Wisconsin** is the first Web site to offer a centralized home for health care information for Wisconsin. Today, Healthclick Wisconsin links you to the Wisconsin Collaborative for Healthcare Quality, the Wisconsin Hospital Association's CheckPoint and PricePoint Web Sites. These sites contain current, reliable information about medical clinics and hospitals located throughout Wisconsin.

Additional information can be accessed at: <http://www.healthclickwisconsin.org/>

**The National Institute of Health Policy (NIHP)** is a not-for-profit, membership organization comprised of healthcare leaders throughout the Upper Midwest. Through leadership and vision, the NIHP provides a neutral forum for multi-stakeholder collaboration on complex healthcare policy issues. By bringing healthcare leaders, front-line staff and influential policy makers to the table, the NIHP members and staff explore these issues and find common-ground solutions to foster health system transformation.

In addition, the NIHP also acts as a resource for health policy information as well as a facilitator for information exchange in the UMW and other regions as well as with national policymakers. Member representation includes hospitals, clinics, doctors, health insurance plans, professional associations, employers and consumers.

The NIHP facilitates various activities to accomplish its objectives:

- convenes diverse groups to discuss critical and emerging health policy issues,
- collects and synthesizes policy analyses and research findings,
- creates non-partisan forums for dialogue and development of policy alternatives,
- develops innovative public education models to better inform the community about effective public policy in healthcare.

Additional information can be accessed at: <http://www.nihp.org/>

**The Institute of Medicine** provides science-based advice on matters of biomedical science, medicine, and health. A nonprofit organization specifically created for this purpose as well as an honorific organization, the IOM was chartered in 1970 as a component of the National Academy of Sciences.

The Institute provides a vital service by working outside the framework of government to ensure scientifically informed analysis and independent guidance. The IOM's mission is to serve as adviser to the nation to improve health. The Institute provides unbiased, evidence-based, and authoritative information and advice concerning health and science policy to policy-makers, professionals, leaders in every sector of society, and the public at large.

Additional information can be accessed at: <http://www.iom.edu/>

**National Commission for Quality Assurance (NCQA)** is an independent, 501(c) (3) non-profit organization whose mission is to improve health care quality everywhere.

Additional information can be accessed at: [www.ncqa.org](http://www.ncqa.org)

#### ***An Overview of Wisconsin Medicaid Quality***

by Marcia K. Hladilek, MPH; Marilyn J. Howe, MSN, RN; Richard M. Carr, MD, MS  
[http://www.wisconsinmedicalsociety.org/uploads/wmj/Hladilek\\_Howe\\_Carr103-3.pdf#search='Wisconsin%20Medicaid%20%26%20Quality'](http://www.wisconsinmedicalsociety.org/uploads/wmj/Hladilek_Howe_Carr103-3.pdf#search='Wisconsin%20Medicaid%20%26%20Quality')

**National Conference of State Legislatures** is a bipartisan organization that serves the legislators and staffs of the nation's 50 states, its commonwealths and territories. NCSL provides research, technical assistance and opportunities for policymakers to exchange ideas on the most pressing state issues. NCSL is an effective and respected advocate for the interests of state governments before Congress and federal agencies.

For information relating to *Wisconsin Quality* access:

<http://www.ncsl.org/programs/health/forum/quality/WI.htm#bot3>

**The Hospital Quality Initiative (HQI)**, like other **CMS quality initiatives**, consists of many facets. Its goals are to improve the care provided by the nation's hospitals and to provide quality information to consumers and others. CMS has several efforts in progress to provide hospital quality information to consumers and others and improve the care provided by the nation's hospitals. These activities build upon previous CMS and QIO efforts on behalf of Medicare beneficiaries and other adults to promote the best medical practices associated with certain clinical conditions. This page links to fact sheets, reports and other documents.

Additional information can be accessed at: <http://www.cms.hhs.gov/HospitalQualityInits/>

**CheckPoint** provides reliable data on 14 interventions that medical experts agree should be taken to treat heart attacks, heart failure and pneumonia, eight surgical services measures and five error prevention goals. These measures represent the beginning of more measures that will be added to this site in the future. The 128 hospitals reporting to CheckPoint provide care to more than 99 percent of the state's patient population. Wisconsin hospitals are committed to sharing information about the quality and safety of the health care services that they deliver in their communities. Additional information can be accessed at: <http://www.wicheckpoint.org/>

**The Quality Colloquium, The Leading Forum on Health Care Quality Enhancement & Medical Error Reduction:** <http://www.qualitycolloquium.com/>

**Wisconsin Forward Award: Recognizing the State of Excellence**—the Wisconsin Forward Award program was created in 1997 to promote significant achievements in continuous improvement and performance excellence—business practices that ensure the economic vitality of Wisconsin organizations and the communities they serve.

<http://www.forwardaward.org/>

### **Organizations with Expertise in Six Sigma & Lean**

**International Quality & Productivity Center, a Six Sigma & quality conference resource, provides information at:** <http://www.iqpc.co.uk>

**International Society for Six Sigma Professionals** provides PI information at: <http://www.issp.com/>

**American Society for Quality** provides QI and PI information at: <http://www.asq.org/>

**The Juran Institute** provides QI and PI information at: <http://www.juran.com>

**The Lean Enterprise Institute** is a nonprofit training, publishing, and research center, developing simple but powerful tools that enable you to apply a set of ideas known as lean manufacturing and lean thinking, based initially on the Toyota Production System and extended to an entire Lean Business System. Additional information can be accessed at: <http://www.lean.org/>

### **Six Sigma/Lean Success Stories:**

#### ***Raytheon***

[http://www.raytheon.com/about/r6s/r6s\\_success/](http://www.raytheon.com/about/r6s/r6s_success/)

#### ***Trinity Health: Mount Carmel***

*Six Sigma Beginnings & Success*

<http://trinity-health.org/initiatives/soulfulsix.shtml>

<http://www.bmgi.com/upload/presscoverage/99.pdf#search='Mount%20Carmel%20%26%20Six%20Sigma'>

#### ***Kentucky's Commonwealth Health Corporation Adopts Six Sigma***

[http://www.gehealthcare.com/twzh/prod\\_sol/hcare/pdf/ge00709.pdf#search='Health%20Care%20%26%20Six%20Sigma'](http://www.gehealthcare.com/twzh/prod_sol/hcare/pdf/ge00709.pdf#search='Health%20Care%20%26%20Six%20Sigma')

#### ***St. John Health pursues near perfection with launch of Six Sigma***

<http://www.stjohn.org/PressRelease.aspx?PressReleaseID=427>

#### ***St. John Health Pursues Near Perfection with Launch of Six Sigma to Provide Highest Quality Patient Experience***

[http://www.americanquality.com/artman/publish/printer\\_401.shtml](http://www.americanquality.com/artman/publish/printer_401.shtml)

#### ***Improving Patient Care through Six Sigma Patient Safety By Design***

[http://www.qiproject.org/target\\_quality/tq/TQ\\_Summer\\_2004.pdf#search='Health%20Care%20%26%20Six%20Sigma'](http://www.qiproject.org/target_quality/tq/TQ_Summer_2004.pdf#search='Health%20Care%20%26%20Six%20Sigma')

***Six Sigma: It's Not Just for Manufacturing***

<http://hbswk.hbs.edu/item.jhtml?id=3278&t=nonprofit>

***Six Sigma—Prescription for Success in Health Care***

[http://www.asq.org/pub/qualityprogress/directories/0903\\_Advertorial.pdf#search='Health%20Care%20%26%20Six%20Sigma'](http://www.asq.org/pub/qualityprogress/directories/0903_Advertorial.pdf#search='Health%20Care%20%26%20Six%20Sigma')

***Sharp HealthCare Uses Six Sigma Tools to Improve Quality***

<http://www.sharp.com/generalinfo/index.cfm?id=7402>

***Using Six Sigma to Increase Primary Care Office Efficiency***

[http://www.amga.org/Publications/gpj/articles/CoverStories/coverStoryJulAug02\\_gpj.pdf#search='Health%20Care%20%26%20Six%20Sigma'](http://www.amga.org/Publications/gpj/articles/CoverStories/coverStoryJulAug02_gpj.pdf#search='Health%20Care%20%26%20Six%20Sigma')

***Sewickley (PA) Valley Hospital—Six Sigma Success: 100% compliance in 3 months***

[http://www.findarticles.com/p/articles/mi\\_m0NUZ/is\\_5\\_11/ai\\_n6191069](http://www.findarticles.com/p/articles/mi_m0NUZ/is_5_11/ai_n6191069)

***Sewickley (PA) Valley Hospital--Transforming a Health System with Six Sigma***

[http://www.aha.org/hhnmag/jsp/articledisplay.jsp?dcrpath=HHNMAG/PubsNewsArticle/data/050419HHN\\_Online\\_Bakow&domain=HHNMAG](http://www.aha.org/hhnmag/jsp/articledisplay.jsp?dcrpath=HHNMAG/PubsNewsArticle/data/050419HHN_Online_Bakow&domain=HHNMAG)

***The American Hospital Association's Resource Center: Efficiency***

[http://www.aha.org/aha/resource\\_center/Bibliographies/Efficiency.html](http://www.aha.org/aha/resource_center/Bibliographies/Efficiency.html)

***Health Care Plagued by Poor Quality Control Should Follow Business Model***

<http://fusion.mssm.edu/media/content.cfm?storynum=12>

***The Use of Six Sigma in Health Care Operations: Applications and Opportunity***

<http://www.alliedacademies.org/pdf/temp/AHCM-awards.pdf#search='Health%20Care%20%26%20Six%20Sigma'>

***Healthcare Pioneers Adapt Lean Manufacturing Principles to Improve Costs and Care***

[http://www.advfn.com/news\\_healthcare-pioneers-adapt-lean-manufacturing-principles-to-improve-costs-and-car\\_11078258.html](http://www.advfn.com/news_healthcare-pioneers-adapt-lean-manufacturing-principles-to-improve-costs-and-car_11078258.html)

***Heart Failure Management at Valley Baptist - Harlingen Listed among Top 5 in United States***

<http://www.vbmc.org/about/news/05/heartFailureMgmt.htm>

***Stroke Unit at Valley Baptist 1st in Valley to be Certified by National Commission***

<http://www.vbmc.org/about/news/05/strokeUnitJCaho.htm>

***CONTINUOUS QUALITY IMPROVEMENT:***

***What Every Health Care Manager Needs to Know<sup>1</sup>***

By Leo Bennett MD and Lee Slavin MD MPH

<http://www.cwru.edu/med/epidbio/mphp439/CQI.htm>

***The Continuing Quest for Measuring and Improving Access to Necessary Care***

Edward L. Hannan

JAMA. 2000;284:2374-2376.

<http://jama.ama-assn.org/cgi/content/extract/284/18/2374>

**The Influence of Health Status, Age, and Race on Screening Mammography in Elderly Women**

Bynum et al.

*Arch Intern Med* 2005;165:2083-2088.

<http://archinte.ama-assn.org/cgi/content/abstract/165/18/2083>

**A qualitative examination of primary care providers' and physician managers' uses and views of research evidence**

Lorenz et al.

*Int J Qual Health Care* 2005;17:409-414.

<http://intqhc.oxfordjournals.org/cgi/content/abstract/17/5/409>

**Moving beyond Round Pegs and Square Holes: Restructuring Medicare To Improve Chronic Care**

Wolff and Boulton

*Ann Intern Med* 2005;143:439-445.

<http://www.annals.org/cgi/content/abstract/143/6/439>

**Ethnic Differences in Mortality, End-Stage Complications, and Quality of Care Among Diabetic Patients: A review**

Lanting et al.

*Diabetes Care* 2005;28:2280-2288.

<http://care.diabetesjournals.org/cgi/content/abstract/28/9/2280>

**Delivery of Preventive Services to Older Adults by Primary Care Physicians**

Pham et al.

*JAMA* 2005;294:473-481.

<http://jama.ama-assn.org/cgi/content/abstract/294/4/473>

**Noncardiac comorbidity increases preventable hospitalizations and mortality among medicare beneficiaries with chronic heart failure**

Braunstein et al.

*JACC* 2003;42:1226-1233.

<http://content.onlinejacc.org/cgi/content/abstract/42/7/1226>

**Presidential address: quality of cardiovascular care in the U.S.**

Beller

*JACC* 2001;38:587-594.

<http://content.onlinejacc.org/cgi/content/full/38/3/587>

**The Quality of Health Care Delivered to Adults in the United States**

McGlynn et al.

*NEJM* 2003;348:2635-2645.

<http://content.nejm.org/cgi/content/abstract/348/26/2635>

**Effect of the Transformation of the Veterans Affairs Health Care System on the Quality of Care**

Jha et al.

*NEJM* 2003;348:2218-2227.

<http://content.nejm.org/cgi/content/abstract/348/22/2218>

**Disparities in Use of Lipid-Lowering Medications Among People With Type 2 Diabetes Mellitus**

Safford et al.

*Arch Intern Med* 2003;163:922-928.

<http://archinte.ama-assn.org/cgi/content/abstract/163/8/922>

**Preventable Hospitalization Among Elderly Medicare Beneficiaries With Type 2 Diabetes**

Niefeld et al.

*Diabetes Care* 2003;26:1344-1349.

<http://care.diabetesjournals.org/cgi/content/abstract/26/5/1344>

**Identifying Potential Indicators of the Quality of End-of-Life Cancer Care From Administrative Data**

Earle et al.

*J Clin Oncol* 2003;21:1133-1138.

<http://www.jco.org/cgi/content/abstract/21/6/1133>

**The Continuing Quest for Measuring and Improving Access to Necessary Care**

Hannan

*JAMA* 2000;284:2374-2376.

**\*\*Subscribers to JAMA have access to this article.**

**The Emerging Imperative for Health Care Quality Improvement**

Kizer

*Acad Emerg Med* 2002;9:1078-1084.

<http://www.aemj.org/cgi/content/abstract/9/11/1078>

**Establishing Health Care Performance Standards in an Era of Consumerism**

Kizer

*JAMA* 2001;286:1213-1217.

<http://jama.ama-assn.org/cgi/content/abstract/286/10/1213>

**Overuse of Administrative Data to Measure Underuse of Care**

Hsu et al.

*JAMA* 2001;285:735-737.

**\*\*Subscribers to JAMA have access to this article.**

**Hidden Barriers to Improvement in the Quality of Care**

McNeil

*NEJM* 2001;345:1612-1620.

**\*\*Subscribers to NEJM have access to this article.**

Overall, this national policy trend indicates points to the urgent need for providers to take a leadership role in defining the direction of performance measurement and reporting. Improved performance can be dictated by external agents and environmental forces but can only be achieved through a concentrated, organized and collaborative effort from within the profession.