

# ESRD NETWORK 13

Serving Arkansas, Louisiana & Oklahoma Renal Communities



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## CONTINUOUS QUALITY IMPROVEMENT (CQI)

Continuous Quality Improvement (CQI) is a method of continuously examining processes and making them more effective. The principles of CQI stem from work by W. Edwards Deming, PhD, a statistician who revolutionized management theories in Japan and the United States. The principles are:

- A strong focus on customers/patients;
- Continuous improvement of all processes;
- Involvement of the entire organization in the pursuit of quality;
- Use of data and team knowledge to improve decision-making.

If the renal community accepts the Institute of Medicine (Medicare) definition of quality of care as “the degree to which health services for individuals and populations increase the likelihood of desired health outcomes and are consistent with current professional knowledge” (Lohr, 1990), then continuing to implement and refine CQI methods within dialysis units is critical to their success. Quality can also be defined as exceeding expectations.

CQI is the idea to raise the level of care—no matter how good it may already be—through a continuous search for improvement. CQI asks managers, providers and other staff members not just to meet the standards but rather to exceed them—indeed, to raise the norms. CQI seeks to keep raising the level of care—no matter what its current level. The CQI process should continue even after changes have been made.

Patient outcomes are the primary reason for health care. Outcomes are of increasing interest and important to many parties, including payers, consumers, accrediting groups, survey and certification bodies. Performance improvement based on outcome data is strongly supported by CMS. It is imperative that we, as ESRD health care providers, continue to work toward the betterment of ESRD patient outcomes. The ultimate goal is to improve patient care and outcomes for **all** ESRD patients.

Process is the major focus of CQI, since improving the way things are done typically improves results. A process is usually made up of several steps. All of these steps are interdependent and when done properly lead to favorable/desired outcomes.

The CQI model requires that you identify your aim (i.e., what you want to accomplish or change), your criteria for judging whether improvements have been made and the changes you plan to make. You can bring about the desired changes using the plan-do-study-act (PDSA) cycle:

- **PLAN:** analyze the process, determine what changes would most improve the process, and establish a plan for making the improvement;
- **DO:** put your change into motion on a small scale or trial basis;
- **STUDY:** check to see whether the change is working;
- **ACT:** if the change is working, implement it on a larger scale. If the change is not working, refine it or reject it and begin the cycle again.

## PROCESS IMPROVEMENT STEPS USING THE PDCA MODEL

<p><b>Plan</b></p> <ul style="list-style-type: none"> <li>○ Access current processes</li> <li>○ Determine responsibility for the project</li> <li>○ Gather baseline data (quality indicators, baseline measures)</li> <li>○ Examine benchmarks and set goals</li> <li>○ Determine root cause(s)</li> <li>○ Formulate action plan</li> <li>○ Train</li> </ul>	<p><b>Do</b></p> <ul style="list-style-type: none"> <li>○ Implement action plan</li> <li>○ Make adjustments as needed</li> <li>○ Gather and organize data</li> <li>○ Train</li> </ul>
<p><b>Check</b></p> <ul style="list-style-type: none"> <li>○ Compare new data to baseline</li> <li>○ Compare actual performance to goals</li> <li>○ Make adjustments as needed</li> <li>○ Is significant gap(s) remain, re-examine root causes, formulate revised action plan and return to the Do step</li> <li>○ Train</li> </ul>	<p><b>Act</b></p> <ul style="list-style-type: none"> <li>○ Standardize effective changes</li> <li>○ Use data and improved outcomes to promote changes</li> <li>○ Set up quality indicators and continue to measure periodically</li> <li>○ Celebrate</li> <li>○ Assess to identify other gaps.</li> </ul>

The PDCA cycle is designed to facilitate the CQI process. The PDCA cycle is not a strict format for change, but a format with the necessary steps for change may occur. A number of tools are available to promote the CQI process. All tools have different formats, but they share a common goal of providing a structured and organized approach to the CQI process. They consist of a series of interrelated activities designed to: 1) identify problems and improvement opportunities; 2) identify and implement solutions and strategies; and 3) evaluate results. The tools stimulate learning and action, assist in identifying and analyzing various procedures and help monitor the effectiveness of any quality improvement plans put into place.

Change is so difficult that people must believe it is necessary!! (Unknown)