

Sustainability of Quality Program

Participant training objectives:

- To understand the importance of sustainability to the long-term success of the HIV quality program.
- To consider how to help improve program sustainability

Target audience:

Staff involved in evaluating the HIV quality program

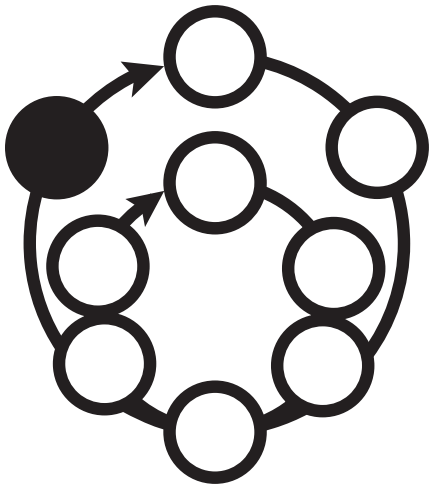
Type of exercise:

Quiz; individual and group exercise, 60 minutes

Key concepts:

Strategies for strengthening program sustainability include:

- Communicating program success
- Remeasuring performance
- Building quality into daily work life



The Big Picture:

In the HIVQUAL model, sustainability efforts are prominent during the program evaluation phase when the program's current effectiveness and future direction are considered. A sustainable program is one that avoids the pitfall of "two steps forward, one step back." Its staff members are fully invested in the program's overall strategy and work together to implement, monitor, and maintain quality improvements across the facility.

SESSION AT-A-GLANCE	WHO	HOW LONG
1. Welcome, Learning Objectives, Agenda	Facilitator	5 minutes
2. Group Exercise: Quiz	Facilitator	30 minutes
3. QI Background: Strategies for Program Sustainability	Participants	10 minutes
4. Learning Transfer: Worksheet	Participants	10 minutes
5. Wrap-up	All	5 minutes
		60 minutes

Materials

For this group learning session, you will need the following materials:

- Participant handouts:
 - Quiz
 - Learning Transfer Worksheet
 - Copy of slide presentation
- Overhead projector/LCD panel (optional)
- Wipeboard/chalkboard (optional)

Photocopy the Quiz, Learning Transfer Worksheet, and slide presentation for each participant.

Prepare your presentation slides for display:

- Photocopy the slides, or write the slide content on transparencies or on flipchart paper.
- For display using an LCD panel, enter the content into a computer file.

Preparation

To prepare for the group learning session, complete the following tasks:

Familiarize yourself with the session's structure and content:

- Read through the Group Exercise notes in their entirety, including the exercise answer key, presentation slides, and participant handouts.
- Practice the presentation outlined in the Group Exercise notes.

Prepare the training room.

- Arrange the tables and chairs in a circle or square shape, if possible.
- Set up and test equipment (e.g. overhead projector), if applicable.
- Make sure you have enough chalk or wipeboard markers, if applicable.

Notes

Sustainability of Quality Program: Group Exercise

Welcome and Introductions

To begin the group learning session, welcome participants and thank them for their participation. If necessary, ask individuals to introduce themselves to the group.

Learning Objectives

Tell participants that by the end of the session they will:

- Understand the importance of sustainability to the long-term success of the HIV quality program
- Have at least one idea for how to help improve program sustainability

Agenda

Provide a brief description of the session's primary components:

- Group exercise on promoting sustainability in an HIV care facility
- Presentation on key strategies for achieving program sustainability
- Learning Transfer Worksheet to help generate practical ideas for enhancing program sustainability on-the-job

Getting Started

Divide the participants into teams of roughly equal size, 4-6 people per group. You can assign participants to teams yourself or ask them to count off by a given number and form teams with other participants who have the same number.



Quiz Group Exercise

Distribute the Quiz face down to each participant and provide directions for completing the exercise:

- Complete the quiz individually. (10 minutes)
- Review the quiz as a team and reach consensus on each answer. (10 minutes)

Call time after the first 10-minute interval and remain available to answer questions for teams and facilitate the process. Assist teams who have problems getting started or become stuck on a particular point.

Reporting Back

Call time after the second 10-minute interval. Read each question out loud and then alternate between teams for responses. If a team's response differs from yours, ask for the members' rationale. Then provide the rationale given in the answer key, keeping in mind that the ultimate goal is to discuss sustainability, not to defend any particular response.

Use the questions to engage participants in a discussion. Be aware that more than one answer could be right.


Quality Improvement Background

Distribute a copy of the slides to each participant for note taking and/or future reference.




Introduce the three primary strategies for strengthening program sustainability:


- Communicating program success
- Remeasuring performance
- Building quality into daily work life

 **Communicating program success.** Explain the importance of communicating successes of the HIV quality program to widen the program's base of support. Techniques include:

- Develop system for staff reward and recognition
- Champion staff through internal and external promotion of success stories
- Exchange "best practices" with other HIV programs

 **Remeasuring performance.** Explain that the program must maintain its improvements in order to sustain itself long-term. Therefore, it is important to:

- Remeasure performance at pre-established intervals
- Review measurement data regularly
- Respond to subpar performance in an immediate and systematic manner

 **Building quality into daily work life.** Explain that all staff members must be part of the quality improvement program and, in order to succeed, the quality program needs to take root through their involvement. Techniques include:

- Make quality improvement part of staff members' job descriptions
- Incorporate quality concepts into training for new staff members
- Provide ongoing quality training opportunities for existing staff

- Provide opportunities for staff to participate in quality improvement projects
- Incorporate best practices identified during quality projects into daily processes

Learning Transfer Getting Started

Distribute the Learning Transfer Worksheet and give participants 5 minutes to complete it.

Debrief

If time permits, ask participants to individually share one area in which they are doing well and one area in which they could improve.

Finally, ask participants to select one area that requires improvement and to write down one or more things they could do in the next month to enhance program sustainability.

Wrap-up

Ask participants to provide feedback on whether or not they have achieved the objectives introduced at the beginning of the group learning session:

- To understand the importance of sustainability to the long-term success of the HIV quality program
- To have at least one idea for how to help improve program sustainability

Schedule an informal follow-up session with any participant(s) who has not reached the objectives.

Sustainability of Quality Program: Quiz

Instructions:

Circle the answer that reflects the most effective means of promoting sustainability in an HIV quality program.

- 1) After 10 months of work, your GYN team presents its successes: the GYN rate improved to 98% and remained between 95%-100% during the last 4 months. Subsequently, the team decides to
 - a) drop the weekly measurements.
 - b) switch to quarterly measurements.
 - c) keep monthly measurements.
- 2) Early in a project to improve adherence, your improvement team members report that—despite several minor problems in the data collection process—they discovered that only 45% of patients take the appropriate antiretroviral medications. You decide to
 - a) share the data with staff.
 - b) improve the data collection process before providing the information to staff.
 - c) dismiss the team.
- 3) After a successful PPD improvement project, team members discuss how to assess future PPD rates to ensure that the improved rate is maintained. The members decide that the rate should be routinely monitored by
 - a) the PPD team.
 - b) the clinic manager.
 - c) an assigned member of the PPD team.
- 4) As the manager who reviews your clinic's monthly quality reports, you notice that the reported patient waiting time (relatively low at less than 15 minutes) is inconsistent with few anecdotal stories about patients' frustration with long waiting times over the past few months. You decide to
 - a) remeasure the waiting time every time you hear a complaint.
 - b) change the intervals of measuring waiting time from monthly to weekly.
 - c) trust the monthly report and try to help those who complain.
- 5) At the beginning of this year the GYN exam score was at 95%. Because of the high rate, the GYN team stopped meeting but continued to measure the GYN rate monthly. Over the last 6 months it declined. At what point do you re-start the GYN team?
 - a) 90%.
 - b) 80%.
 - c) not enough information to tell.
- 6) Following a year-long improvement project which significantly increased patient adherence rates, you hire a new case manager. When do you provide the new staff member with quality-related information?
 - a) after the staff member expresses an independent interest in quality.
 - b) during the staff member's initial training and orientation.
 - c) when, and if, the adherence rates begin to decline.

- 7) An HIV quality improvement team completes a successful pilot of a new patient check-out procedure. During the facility's annual quality meeting, to which all departments are invited, you decide to present the team's
- a) improvement rates only.
 - b) improvement rates and the details of the new procedure.
 - c) patient check-out goals for the following year.
- 8) Your HIV quality improvement team recently worked on improving patients' medication adherence notes. Which of the following steps seems most important in sustaining the team's adherence gains?
- a) write an article for publication in the hospital newsletter.
 - b) change job descriptions to reflect quality team recommendations.
 - c) award all members of the quality team.
- 9) Over 5 years of development work, your HIV quality program has realized substantial gains in patient care and enjoys strong staff support. During the annual summer picnic, you typically take 15-20 minutes to recognize the program's successes. This year you decide to
- a) present the program's past gains and reward appropriate staff members.
 - b) replace the program success stories with a raffle due to lower gains than last year.
 - c) reduce the program recognition to a 5-minute summary of the previous year.
- 10) Your head nurse, who has been actively involved in the HIV unit's quality program, was recently promoted to a different position. When writing the job description for the open position, you stress the importance of the quality program by stating
- a) "occasional quality projects may be required."
 - b) "quality training provided."
 - c) "expected to incorporate quality practices into daily responsibilities."

Sustainability of Quality Program: Learning Transfer Worksheet

Instructions:

Assess your actions as leader in your facility's HIV program.
Using the information from today's session, complete the grid
below and briefly describe your strengths and weaknesses.

	DOING WELL	NEED TO DO BETTER
COMMUNICATING PROGRAM SUCCESS <ul style="list-style-type: none"> • Staff recognition • Promotion of success stories • Exchange of best practices 		
REMEASURING PERFORMANCE <ul style="list-style-type: none"> • Remeasure performance • Review data regularly • Respond to subpar performance 		
BUILDING QUALITY INTO DAILY WORK LIFE <ul style="list-style-type: none"> • QI in staff job descriptions • QI training for new staff • Training for existing staff • Staff participation in QI projects • Incorporate best practices 		

Sustainability of Quality Program: Answer Key

- 1) After 10 months of work your GYN team presents its successes: the GYN rate improved to 98% and remained between 95%-100% during the last 4 months. Subsequently, the team decides to
- a) drop the weekly measurements.
 - ✓ b) switch to quarterly measurements.
 - c) keep monthly measurements.

Rationale:

It is important to remeasure performance after initial improvements. However, the intervals may lengthen as performance is sustained.

- 2) Early in a project to improve adherence, your improvement team members report that—despite several minor problems in the data collection process—they discovered that only 45% of patients take the appropriate antiretroviral medications. You decide to
- ✓ a) share the data with staff.
 - b) improve the data collection process before providing the information to staff.
 - c) dismiss the team.

Rationale:

Quality activities must be shared with every staff member to help gain staff support, even if there are minor glitches in the quality improvement process. Waiting for the perfect data collection process might delay the project indefinitely.

- 3) After a successful PPD improvement project, team members discuss how to assess future PPD rates to ensure that the improved rate is maintained. The members decide that the rate should be routinely monitored by
- a) the PPD team.
 - b) the clinic manager.
 - ✓ c) an assigned member of the PPD team.

Rationale:

It is most efficient for one staff member involved with the original improvement project to remeasure performance.

- 4) As the manager who reviews your clinic's monthly quality reports, you notice that the reported patient waiting time (relatively low at less than 15 minutes) is inconsistent with few anecdotal stories about patients' frustration with long waiting times over the past few months. You decide to
- a) remeasure the waiting time every time you hear a complaint.
 - b) change the intervals of measuring waiting time from monthly to weekly.
 - ✓ c) trust the monthly report and try to help those who complain.

Rationale:

Quality improvements are most meaningful when they are measurable. It is important to trust your staff members' quantitative data over anecdote, while still addressing any confirmed complaints on a case-by-case basis.

- 5) At the beginning of this year the GYN exam score was at 95%. Because of the high rate, the GYN team stopped meeting but continued to measure the GYN rate monthly. Over the last 6 months it declined. At what point do you re-start the GYN team?
- a) 90%.
 - b) 80%.
 - ✓ c) not enough information to tell.

Rationale:

Given most facilities' limited resources, not every decline in performance warrants team involvement. The exact point at which the team should reconvene, however, is dependent on a variety of variables including the facility's resource availability and improvement priorities.

- 6) Following a year-long improvement project which significantly increased patient adherence rates, you hire a new case manager. When do you provide the new staff member with quality-related information?
- a) after the staff member expresses an independent interest in quality
 - ✓ b) during the staff member's initial training and orientation
 - c) when, and if, the adherence rates begin to decline

Rationale:

To integrate quality improvement into staff members' daily responsibilities, new staff members should receive quality-related information as soon as possible to build quality improvement into the work culture.

- 7) An HIV quality improvement team completes a successful pilot of a new patient check-out procedure. During the facility's annual quality meeting, to which all departments are invited, you decide to present the team's
- a) improvement rates only.
 - ✓ b) improvement rates and the details of the new procedure.
 - c) patient check-out goals for the following year.

Rationale:

Sustainability is strengthened by promoting internal success stories and sharing best practices with other departments.

- 8) Your HIV quality improvement team recently worked on improving patients' medication adherence notes. Which of the following steps seems most important in sustaining the team's adherence gains?
- a) write an article for publication in the hospital newsletter.
 - ✓ b) change job descriptions to reflect quality team recommendations.
 - c) award all members of the quality team.

Rationale:

While all three responses contribute to sustainability, changing job descriptions is most likely to alter the way in which services are delivered, thereby sustaining gains over the long term.

9) Over 5 years of development work, your HIV quality program has realized substantial gains in patient care and enjoys strong staff support. During the annual summer picnic, you typically take 15-20 minutes to recognize the program's successes. This year you decide to

- ✓ a) present the program's past gains and reward appropriate staff members.
- b) replace the program success stories with a raffle due to lower gains than last year.
- c) reduce the program recognition to a 5-minute summary of the previous year.

Rationale:

To capitalize on the facility's strong program support, it is important to continue communicating the program's success and rewarding staff.

10) Your head nurse, who has been actively involved in the HIV unit's quality program, was recently promoted to a different position. When writing the job description for the open position, you stress the importance of the quality program by stating

- a) "occasional quality projects may be required."
- b) "quality training provided."
- ✓ c) "expected to incorporate quality practices into daily responsibilities."

Rationale:

New staff members should immediately sense the day-to-day importance of quality improvement to help build the program's sustainability.