

REVIEW

Age and Ageing to introduce a new category of paper: healthcare improvement science

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Key points

- Quality in Healthcare means:
 - safer
 - effective
 - patient-centred
 - timely
 - efficient
 - equitable
- Improving quality needs a scientific approach
- This is core business for most readers of Age and Ageing.
- We will describe what potential authors and readers can expect from the newly launched QI section of the Journal.

Why do we need improvement science?

- Despite efforts, there is a gap between what *should* happen and what *does* happen.
- There is variation which suggests it *can* happen
- Making things work *against the grain* may not last
- Research based “interventions” sometimes obscure the context and success factors, which may vary in translation
- Healthcare is not Toyota and methods are now adapting and developing in healthcare settings

Why do we need papers on it in AA?

- BGS members are doing improvement
- Trainees are required to do it, (well or badly)
- Experience and Conference abstracts show quality is variable and methods chosen not always suitable
- There is some good and relevant work published elsewhere
- There is an appetite: papers are being submitted

What type of activities could you report?

1. With a focus on change and how it happened

- Developing and implementing a new service
- Introducing a new process/system into a service
- Improving the performance of an existing service
- Investigating the value of aspects of the service

What type of activities could you report?

2. With a focus on how QI methods work, or not

- Describing how you understood your care processes
- Approaches to involving patients in QI, especially if frail or cognitively impaired
- Exploring how best to apply PDSA in clinical settings
- Investigating various ways of presenting and analysing data

Methods you may use

- Improvement models
- Process mapping
- Experience based design (PPEI)
- Driver or Action Effect Diagrams
- PDSA
- Statistical process control analyses

Guidance you *could* use for the QI

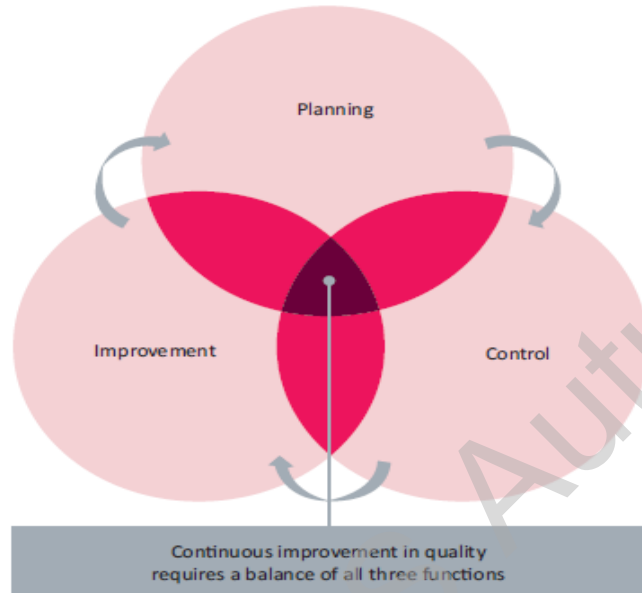


Fig 1. The Juran trilogy.

Leatherman s et al . Future Hospital
Journal 2016: 3(3):182-7

to develop an effective approach to improving quality. How these functions are currently discharged within the NHS, and the extent to which there is an appropriate balance between

Box 1. Modified NHS Quality Framework.

1. **Set direction and priorities** – new
Setting clear quality priorities and an agenda for the system based on policy initiatives from the Mandate and other national reports (eg State of Care), and desired outcomes and performance data.
2. **Bring clarity to quality**
Setting standards for what high quality care looks like across all specialties.
3. **Measure and publish quality** – combined
Harnessing information to improve quality of care through performance and quality reporting systems that provide feedback to providers of care at systemic, institutional or individual levels, and information to users and commissioners of services for accountability and choice.
4. **Recognise and reward quality**
Recognising and rewarding improvement in the quality of care and service through financial and non-financial recognition (eg enhanced reputation or prestige).
5. **Safeguard quality**
Regulation to improve healthcare, to guarantee minimum acceptable standards and to reassure the public about quality of care.
6. **Building capability** – updated
Improving leadership, management, professional and institutional culture, skills and behaviours to provide quality assurance and improvement.
7. **Stay ahead** – expanded
Developing research and innovation and planning to provide progressive, high-quality care.

Guidance you *could* use for the QI

NARRATIVE REVIEW



OPEN ACCESS

From tokenism to empowerment: progressing patient and public involvement in healthcare improvement

Josephine Ocloo,¹ Rachel Matthews²

BMJ Qual Saf 2016; 25: 626-632

Guidance you *could* use for the QI

SYSTEMATIC REVIEW



OPEN ACCESS

Systematic review of the application of the plan–do–study–act method to improve quality in healthcare

Michael J Taylor,^{1,2} Chris McNicholas,² Chris Nicolay,¹ Ara Darzi,¹
Derek Bell,² Julie E Reed²

BMJ Qual Safety 2014; 23: 290-98

British Geriatrics Society
Improving healthcare for older people

Age and Ageing

the international journal of the BGS

BGS

Guidance you *could* use for the QI

Statistical process control

Using statistical process control to
improve the quality of health care

M A Mohammed

To achieve continuous quality improvement "it is not enough to do
your best ..."

Qual Saf Health Care 2004; 13: 243-245

Other stuff you could read



International Journal for Quality in Health Care, 2016, 28(2), 150–165

doi: 10.1093/intqhc/mzv123

Advance Access Publication Date: 24 January 2016

Article

OXFORD

Article

Lean interventions in healthcare: do they actually work? A systematic literature review

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Int J Qual Health Care 2016:
28(2):15-165



Other stuff you could read

International Journal for Quality in Health Care 2014; Volume 26, Number 3: pp. 321–329
Advance Access Publication: 5 May 2014

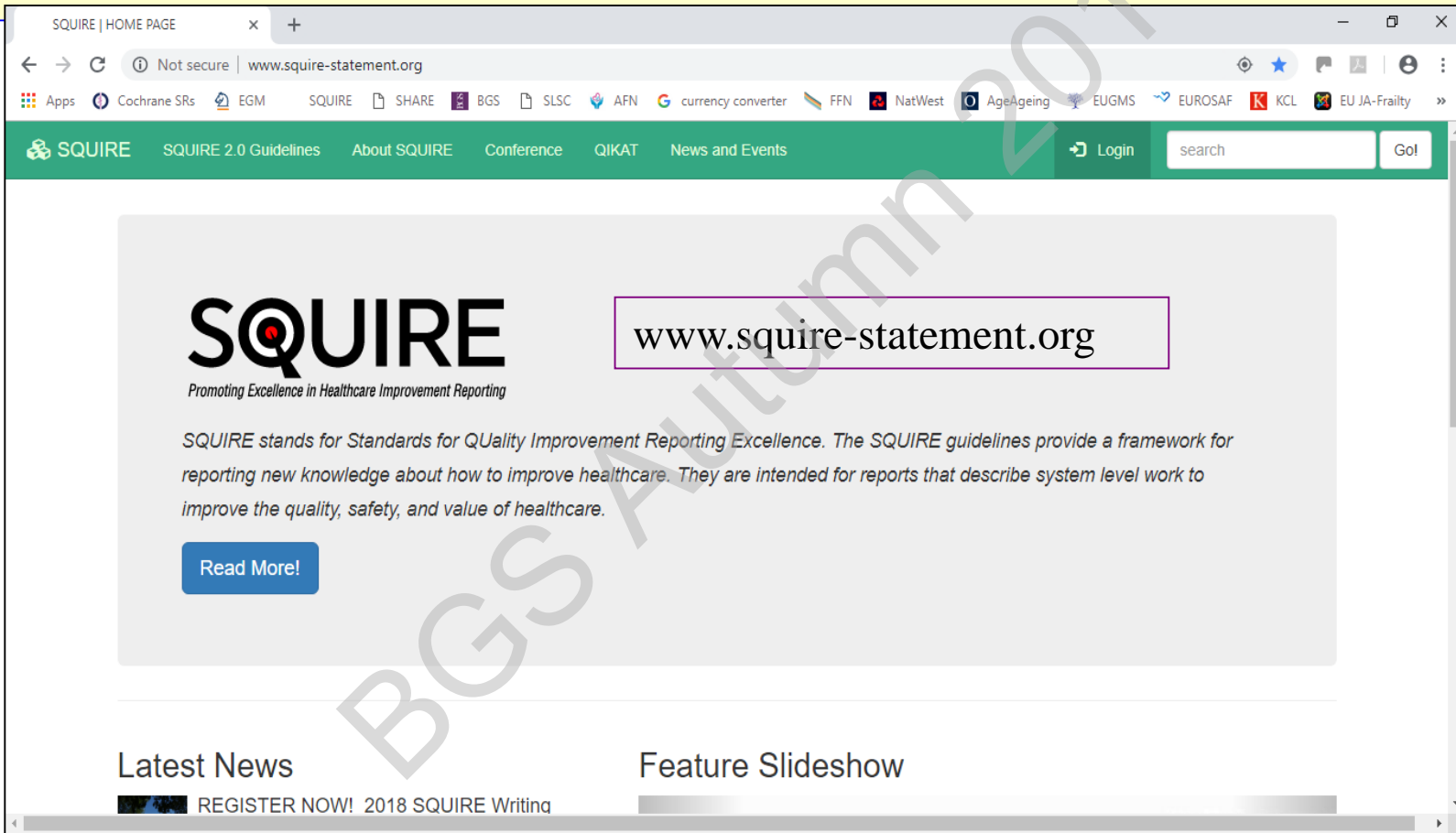
10.1093/intqhc/mzu047

Harnessing implementation science to improve care quality and patient safety: a systematic review of targeted literature

JEFFREY BRAITHWAITE¹, DANIELLE MARKS¹ AND NATALIE TAYLOR^{1,2}

Int J Qual Health Care 2014;26:321-329

Guidance you *should* use for the paper



The screenshot shows the homepage of the SQUIRE website. The browser's address bar displays "www.squire-statement.org". The website's navigation bar is green and includes links for "SQUIRE", "SQUIRE 2.0 Guidelines", "About SQUIRE", "Conference", "QIKAT", and "News and Events". A search bar with a "Go!" button is located on the right side of the navigation bar. The main content area features the SQUIRE logo, which consists of the word "SQUIRE" in a bold, sans-serif font with a red dot above the 'Q'. Below the logo is the tagline "Promoting Excellence in Healthcare Improvement Reporting". A purple-bordered box highlights the website URL "www.squire-statement.org". Below this, a paragraph explains that SQUIRE stands for Standards for Quality Improvement Reporting Excellence and provides a framework for reporting new knowledge about how to improve healthcare. A blue "Read More!" button is positioned below the paragraph. At the bottom of the page, there are two sections: "Latest News" and "Feature Slideshow". The "Latest News" section includes a banner that says "REGISTER NOW! 2018 SQUIRE Writing".

SQUIRE | HOME PAGE

Not secure | www.squire-statement.org

Apps Cochrane SRs EGM SQUIRE SHARE BGS SLSC AFN currency converter FFN NatWest AgeAgeing EUGMS EUROSAF KCL EU JA-Frailty

SQUIRE SQUIRE 2.0 Guidelines About SQUIRE Conference QIKAT News and Events Login search Go!

SQUIRE

Promoting Excellence in Healthcare Improvement Reporting

www.squire-statement.org

SQUIRE stands for Standards for Quality Improvement Reporting Excellence. The SQUIRE guidelines provide a framework for reporting new knowledge about how to improve healthcare. They are intended for reports that describe system level work to improve the quality, safety, and value of healthcare.

[Read More!](#)

Latest News

REGISTER NOW! 2018 SQUIRE Writing

Feature Slideshow

The SQUIRE Glossary

Revised Standards for Quality Improvement Reporting Excellence (SQUIRE 2.0) September 15, 2015

Text Section and Item Name	Section or Item Description
	<ul style="list-style-type: none">• The SQUIRE guidelines provide a framework for reporting new knowledge about how to improve healthcare• The SQUIRE guidelines are intended for reports that describe <u>system</u> level work to improve the quality, safety, and value of healthcare, and used methods to establish that observed outcomes were due to the <u>intervention(s)</u>.• A range of approaches exists for improving healthcare. SQUIRE may be adapted for reporting any of these.

Some terms defined in the SQUIRE Glossary

- Problem definition (and how you decided)
- Rationale (theories, assumptions etc)
- Context (structures, culture, patients etc)
- Intervention
- Measures and analysis
- Conclusions (and caveats)

Examples of SQUIRE in practice



OPEN ACCESS

Explanation and elaboration of the SQUIRE (Standards for Quality Improvement Reporting Excellence) Guidelines, V.2.0: examples of SQUIRE elements in the healthcare improvement literature

Goodman D et al BMJ Qual Saf 2016:

Thank you for listening

....any questions?