

ACG GI Practice Toolbox

Quality Improvement Projects in Your Practice

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INTRODUCTION:

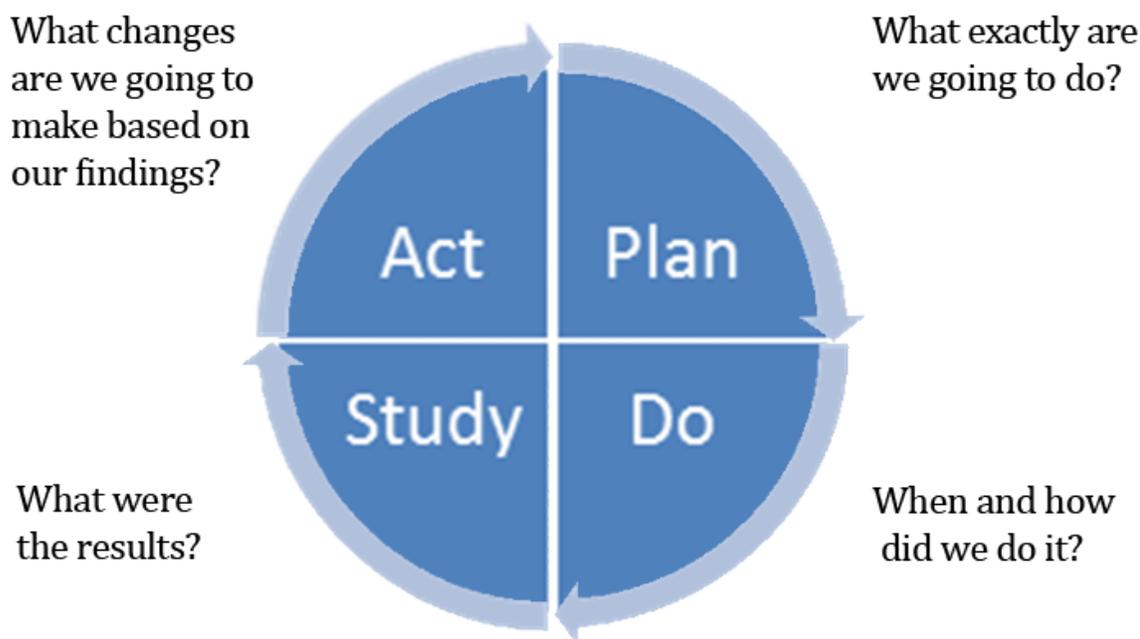
Quality care in medicine can be best defined as care that is efficient, timely, safe, cost effective, patient centered, and equitable. Working to improve the quality of care that is provided in your medical practice is very important as it can improve patient outcomes, reduce cost, differentiate you from your competition, and improve reimbursement as a part of the new MACRA laws.

TOPIC OVERVIEW:

In order to enhance the quality of care provided by you and your partners, one must work to implement a quality improvement (QI) program into your practice. This typically involves a step by step process that first starts with introducing this concept to your partners. The importance of improving quality of care must be discussed and a physician champion should be chosen to lead the charge. Barriers to initiating a QI program must be identified early and plans to overcome them need to be formulated. This includes cultural, human resources, information technology (IT), and process barriers.

A simple methodology for quality improvement is the PDSA model which stands for Plan, Do, Study and Act. The QI programs should focus on what is to be measured, valid benchmarks against which to compare yourself (often available via our professional societies), a process to be put into place to execute the plan including clear understanding of assignments and goals of each person in the process, a method to measure (typically supported via IT) and should include a structured non-threatening method to report results. Identifying gaps in your care and barriers to providing high quality care is crucial. Once this is done, a plan should be implemented to improve on the areas that require intervention. This process, typically referred to as the plan, do, study, act (PDSA) model, can be applied to all areas of your practice and is shown below.





PRACTICAL SUGGESTIONS AND EXAMPLES FOR YOUR PRACTICE:

1. Implement a QI program for colonoscopy. Specifically measure quality parameters such as withdrawal time, adenoma detection rates (ADR) for patient undergoing average risk screening colonoscopies, cecal intubation rates, and bowel prep quality. Track these metrics using GIQUIC interfacing with your endoscopy endo writer system. Have a project manager run the calculations and distribute the results to the group members every 3-4 months. Identify the lower performers. Work to improve performance via educational videos, discussions with higher performers, etc.
2. Start a disease management program in your practice for patients with chronic and debilitating conditions like inflammatory bowel disease (IBD) or liver disease. Have a check list of items required to be done or evaluated on each patient (for example annual flu shots, DEXA scans for screening, colonoscopy timing for dysplasia, number of biopsies done during those colonoscopies, appropriate pre biologic therapy initiation labs, monitoring protocols for those on medications such as 6 MP, etc..). The check list hopefully can be implemented in your EMR and reviewed with every visit. Also you can have personnel in charge of running a data base of all your patients with a certain medical condition and track if the quality metrics are being pursued and monitored.
3. Put hard stops in your EMR or endo writer to ensure documentation of key quality indicators. For example, in our practice you are not able to complete your colonoscopy report until the bowel prep quality is documented. This can be done with almost any quality indicator you can think of for any disease state if your EMR or endo writer will allow it.

RESOURCES:

1. Three Faces of Quality Course American Association of Physician Leadership
<https://shop.physicianleaders.org/products/three-faces-of-quality-may>
2. Implementing Quality Improvement Programs in Your Practice Lecture, Mike Morelli, MD, FACP, ACG 2015 Annual Meeting
3. Maximizing Quality in Your Practice and Making it Pay Off White Paper, David A. Johnson, MD, FACP, http://gi.org/wp-content/uploads/2013/08/2013-08_ACG_WhitePaper_Maximizing_Quality_in_Your_Practice.pdf

