

Performance Improvement: What is it? How to measure it? Can it be measured? A brief tutorial for a residential treatment program.

Performance improvement (PI) activities come in all shapes and sizes. On a given day, there will be many PI activities ongoing in all healthcare organizations.

In the “purest” sense, PI relates to a process improvement, such as improving the admission process with a goal of decreasing the waiting time for admission. Improvements in processes are measurable, and PI implies that these measurements will be made.

Another example would be to improve an aspect of the care delivery system. Such PI activities may include specific process improvements involving various staff throughout the organization and the state system. There may be improvements possible in “subsystems” such as the screening/assessment process, the treatment planning process, reassessments, service delivery systems, and discharge planning. *PI teams using the PDCA process and PI tools such as flowcharting, brainstorming, cause and effect diagrams, could be working on each system, or a prioritization process may have occurred which identified priority systems for initial work.* All PI projects should be approved and monitored by the PI Committee who would ensure that adequate resources are available to work on the prioritized improvement projects.

PI can be focused on organizational systems, or on departmental or divisional systems. PI teams can be comprised of staff from different divisions, or may be comprised of staff within a division.

The Joint Commission standards for Performance Improvement provide a good overview of what PI is. “PI is a continuous process. It involves measuring the functioning of important processes and services, and, when indicated, identifying changes that enhance performance. These changes are incorporated into new or existing work processes, products or services, and performance is monitored to ensure that the improvements are sustained.”

PI focuses on outcomes of care, treatment, and services. Leaders establish a planned, systematic and organizationwide approach to PI which is outlined in a PI plan for the organization.

Leaders set priorities for PI and ensure that the disciplines representing the scope of care, treatment, and services across the organization work collaboratively to plan and implement improvement activities.”

The fundamental components of PI include:

- Measuring performance through data collection,
- Assessing current performance, and
- Improving performance.

Examples of organizational priorities for PI and departmental PI for state residential treatment program.

Focus area	Organizational	Departmental/divisional
Admission process	UM program. Appropriate admissions. Increase admissions by 1%.	Initiate family contact by Social Work during admission process. Improve admission process, including communications with LME's.
Redesign care delivery model	Clearly define performance expectations and expected outcomes for patients with new delivery model.	Monitor staff performance relating to changed performance expectations.
Improve data systems	Develop long range data systems plan.	Install upgraded PC's in all clinical areas.
National Patient Safety Goals (NPSG)	Organize Patient Safety Committee and provide data support.	Each department will focus on NPSG's that apply to that department

Possible data to be collected, analyzed, and displayed:

- # of admissions
- % of appropriate admissions
- % of patients meeting goals
- % of patients satisfied with program
- % of patients who leave with out completing program

Data on performance for all NPSG.