

CHNC CIQI New Project Support Expectations & Guidelines

Collaborative Initiatives in Quality Improvement (CIQI) Leadership:

Children's Hospitals Neonatal Consortium's (CHNC's) mission is to improve the quality of care for high risk infants by providing a platform to improve quality and outcomes across Level IV neonatal intensive care units (NICUs) for medically complex infants. Since its launch in 2010, the CHNC CIQI team has implemented CIQI projects which improved CLABSI and peri-operative outcomes for this demographic of patients across the U.S. and Canada.

When initiating a national CIQI project, prospective leaders need to be aware that these projects also require a significant amount of time, training, planning, and resources. The goal of the CIQI Leadership team is to empower CHNC members to lead QI collaboratives by providing:

- Mentors for CIQI success
- Blueprint for best practice collaborative structure
- Resources for implementation

Rights & Obligations

- CIQI Steering Committee is in place to
- Help support individuals interested in leading a quality improvement project.
- Apply for CHNC CIQI Support:
 - New CIQI Project Application:
<https://www.surveymonkey.com/r/8D7XRQS>
 - Refer to CHNC CIQI Life Cycle of a Project
- Only CHNC centers invited to participate
- Single center IRB approval required for collaborative
 - Additional local site IRB vs. QI approval varies based on center requirements
- Presentation Expectations
 - Collaborative leaders will present at CHNC Annual meeting and update to CIQI Steering Committee twice yearly
 - Regional or Local Presentation
 - PMT should be notified for all these regional presentations for center specific data
- Publication expectations
 - Authorship on publications related to the CHNC/CIQI Quality Collaborative requires longitudinal meaningful participation on the Project Management Team.

- Includes regular attendance and participation during project calls, off line work, substantial contribution to project development, implementation, and analysis.
 - Final authorship adjudicated by the CIQI Steering Committee.
 - Teams are encouraged to publish local improvement *after* the initial full QI collaborative work has been published.
- Ensure that all project participants have signed the CHNC Data Use Agreement

Collaborative Project Structure Expectations

- **CHNC CIQI has followed the IHI Model for Improvement as the framework to guide improvement work**
 - **SMART Aims** – must be specific, measurable, achievable, realistic, and timely
 - **Develop Driver Diagram or similar graphic tool**
 - To explore and display the possible cause of certain effects and provide a road map to keep the project on track.
 - Multiple Driver Diagrams may be necessary if project has distinct outcomes.
 - **Model for Improvement: PDSA Cycle Testing-**
 - The “Model For Improvement”, developed by The Associates in Process Improvement (API), also known as PDSA:

Model for Improvement



Developed by Associates in Process Improvement

- Plan/Do/Study/Act (PDSA) small rapid tests of change should be utilized before implementing wider change. PDSA is an inexpensive, low-disruption, best practice means for testing change

on a small scale before rolling out large-scale changes that impact many people and systems.

- **Outcome Measures**
 - Outcome Measures state the impact of interventions on the patient population.
- **Process Measures**
 - Process measures outline the steps being implemented to affect the desired outcome.
- **Balancing Measures**
 - Balancing Measure will help identify potential unintentional consequences (negative or positive) to determine if this is an acceptable side effect, given the degree to which the outcome is achieved.
- **Project Management Team**
 - Project Management Team (PMT) should be comprised of at least 6-10 interdisciplinary members from different CHNC centers, and disciplines to provide content expertise and design, develop and implement the project.
- **Faculty Advisors**
 - Members of the Project Management team who serve to help 1-3 local teams navigate their way through the project
 - Expectations: review barriers, suggest solutions, provide guidance and support and connect with other local teams to share solutions
- **Clinical Practice Recommendations (CPR):** A document written based on rigorous systematic review of published medical literature and made available to all teams.
 - Teams may adapt project recommendations according to their own local protocols, the CPR insures that all team members have evidence for best practices and framework that includes all metrics.
- **Collaborative Communication Structure**
 - **Monthly PMT Meeting** for project organization and feedback
 - **Monthly Collaborative Meetings** for all participating centers to include project updates, data sharing, QI education and team feedback
 - **Huddles Calls** scheduled for real time sharing success and barriers on a related project topic
 - **Faculty Advisor Meetings** to discuss how best to offer support, encourage, and guide to teams individually & collectively. Meetings will also identify struggling teams, and discuss ways FA's can guide them to increased compliance and success.

Resources for Implementation

- **Support from Quality Improvement Project Manager**
- **Velos**
 - CHND data should be used for outcomes.
 - While formulating your project, please be mindful of how you project Outcome Measures, should:
 - Utilize the existing CHNC data
 - Add to existing CHNC Data
 - Benefit CHNC members sites and organization
- **IHI project site or alternative source** (i.e. process measures)
 - IHI is the platform that CHNC has used to collect and analyze CIQI process measures.
 - Allows for instant access to team data by that Team's Leaders as well as CIQI Leaders
 - Facilitates involvement of Faculty Advisors to help mentor and advise teams on their progress in implementing Process Measures
- **CHNC Webex platform**
 - Supported by CHNC
- **CHNC Survey Monkey**
 - Tool for evaluation of collaborative meetings

Project Scope

- Please refer to *Life Cycle of a Project* presentation

Sustain

- Encourage centers to continue entering data
- Decreased number of monthly meetings during sustain period, then one final wrap-up at end
- Need plan to report on ongoing outcomes at the annual meeting