

Building Robust Improvement Infrastructure

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Agenda

2

- Personal reflection
- The ideal and the reality
- Evolution of population care at KP
- KP's method for improvement
- Discussion

Takeaways

3

- Be disciplined about training, tools, language and measurement
- Frequent interaction with leadership at all levels
- Everyone starts where they are, and no place is perfect



Not Your Father's Practice

4

Public Health
Accountability Registries
Patient Safety Health
Outpt Safety Net Decision Support Medical Care
Clinical Practice Guidelines Algorithms Presenteeism EMRs
Medical Neighborhood Technovigilance Population Care
Proactive Office Encounters HIT Mass Customization
Regulatory Science Disease Management Quality Demonstration
Disparities Pt-Centered Medical Home EBM
Clinical Trials Panel Management Managed Care
Centers of Excellence Absenteeism
Social Determinants Feedback VBID
Triple Aim



Roles

5

- Shaman
- Healer
- Doctor
- Partner/Guide



Uncomfortable Roles

6

- Provider
- Risk Exposure Unit
- Actuary

And lastly...



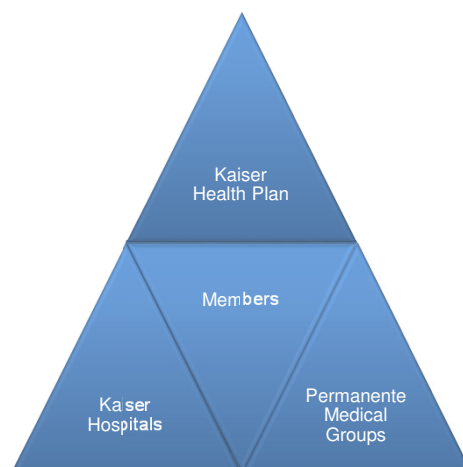
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Drive-Thru Health Care: How McDonald's Inspired An Urgent Care Gold Rush

“...quest to make M.D.s wielding stethoscopes as accessible as **baristas** at Starbucks....”

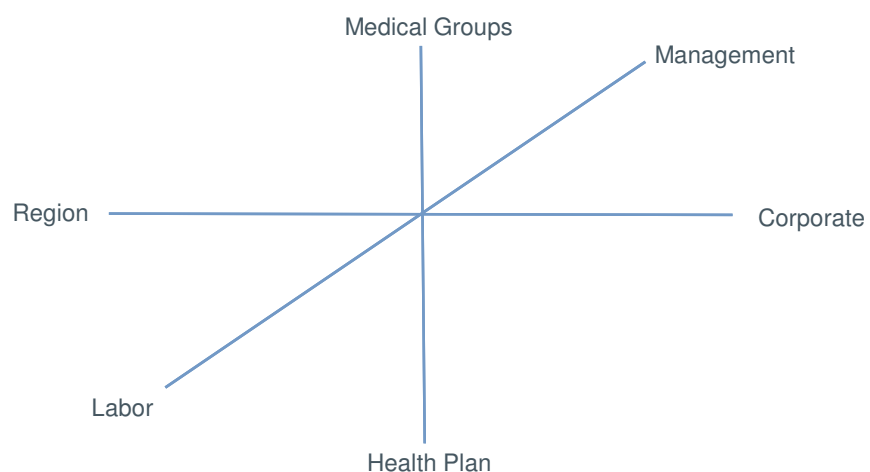


KP Structural Alignment



Axes of....Tension

9



Enlightened Leaders: Out of strife..

10

The Care Management Institute (CMI)

- A Joint Health Plan, Permanente Medical Group entity to improve member care
- Founded in 1997




11

CMI Focus over the Years

- Clinical Practice Guidelines
- Measurement and Feedback
- Disease Management
- Models of Care
- Quality Demonstration
- Collaboration with Research Units
- Needs of similar groups of patients
 - Frailty/ Advanced Illness
 - Transitions in Care
- KP Method for Improvement
- Population Care
 - Population segmentation with Person-oriented integration
- Health of the Population



12



care management | institute

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About CMI
Our approach
Our work
CMI news
Contact us

Our work


- Advanced Illness
- Behavioral Health
- Breastfeeding Support
- Cardiovascular Health
- Hospital to Home Transitions
- Hypertension Control

Our work

CMI was created to help Kaiser Permanente improve quality of care and health outcomes for members by developing resources and programs that can be implemented throughout the organization. Our portfolio of care management programs has ranged from improving health care delivery for the chronically ill to integrated cardiovascular disease prevention. Each year we select specific opportunities for concentration. Nationwide networks originating with CMI then form a chain of care delivery improvement.



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The Time was Right...

13

- Clinical Trials
- Biostatistics
- Clinical Epi
- Clinical Practice Guidelines
- Regulatory Science
- Evidence Based Medicine
- HIT and Registries
- Personalized/Precision Medicine
- Social Determinants of Health

*Episodic to
Continuous
Care*

*Art to
Science*



**Population
Health**



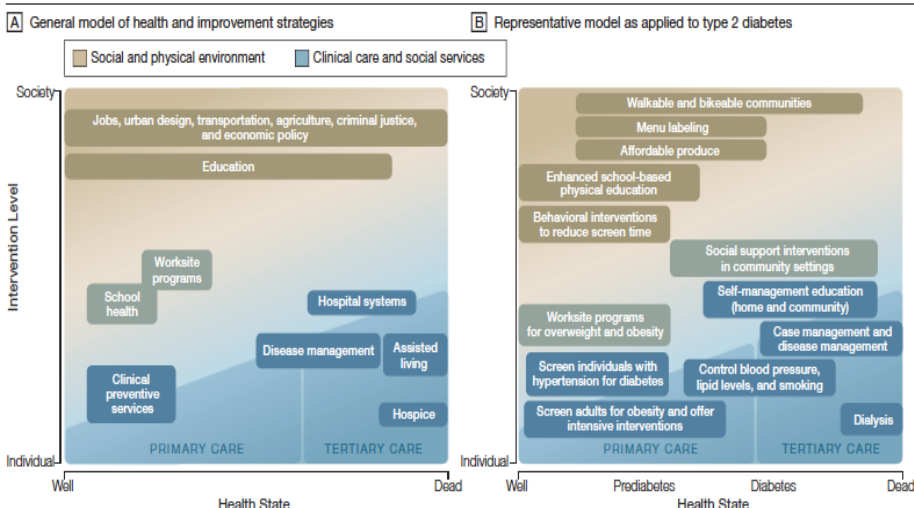
Public Health and Medical Care: Putting them together for Population Health

14

(and explaining it to doctors!)

Figure. The Spectrum of Health and Strategies to Improve It

Fielding and Teutsch- JAMA 305:20, 2011



Population Segments, not always by ICD code

15

- Healthy
- Maternal and infant
- Acutely ill, but mostly curable
- Chronic with adequate function
- Stable with significant disability (often not elderly)
- Short period of decline, near death (mostly cancer)
- Intermittent exacerbations and sudden death (mostly heart and lung failure)
- Long dwindling course (mostly frailty and dementia)

Source: "Using Population Segmentation to Provide Better Health Care for All: The 'Bridges to Health' Model," J. Lynne et al, *The Milbank Quarterly*, 85; 2, 2007.



From Science to Team Implementation

16

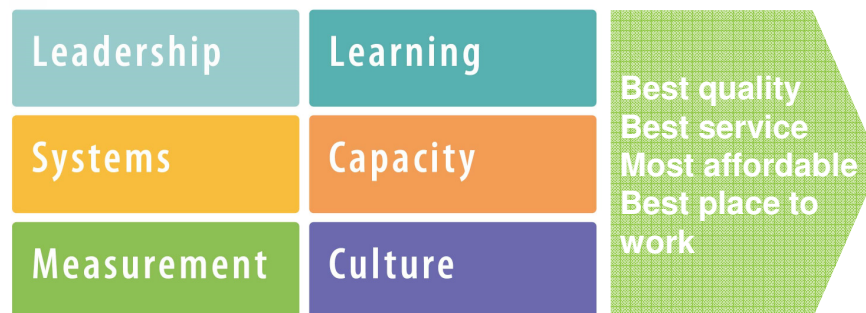


KP Performance Improvement: History 17

- The CEO who mandated TQM training for all
 - Ten years went by.....
- The Labor Management Partnership
 - Concentration on frontline staff
- Then the docs got interested!
 - Parallel course for docs



KP needs to build capability in these six areas in order to achieve breakthrough performance 18



KP's Quality Improvement Journey: Method for Improvement

19

2005-2007

- Established strategic partnership with IHI
- Develop enterprise quality strategy
- Assess baseline capability to improve
- Establish KP's big dots and "Big Q"
- Some best performance in KP and high variation

2008-2010

- Develop Improvement Institute
- Hire master black belt mentors
- Adopt IHI's execution model in medical centers
- Focus on alignment, portfolio management, achieving scale
- Deepen commitment to analytics, evaluation, research
- KP HealthConnect fully implemented, optimizing
- Targeted participation in IHI programming

2011-Beyond

- Focus on technology integration, informatics and improvement at scale
- Develop deep capability at regional levels
- Expand capability to operate as a learning organization via networks and Knowledge Management
- 4 part series published in the Joint Commission Journal
- KP NCQA results, Medicare Stars best in class performance across KP
- Focus on total health

How many?

20

KP's Performance Improvement System

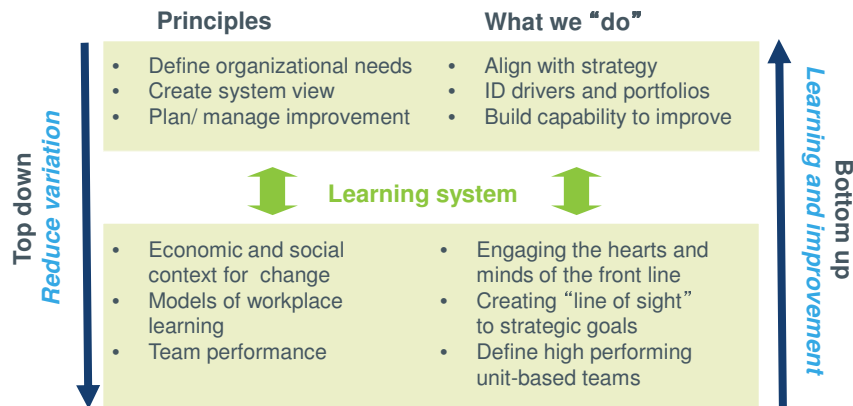
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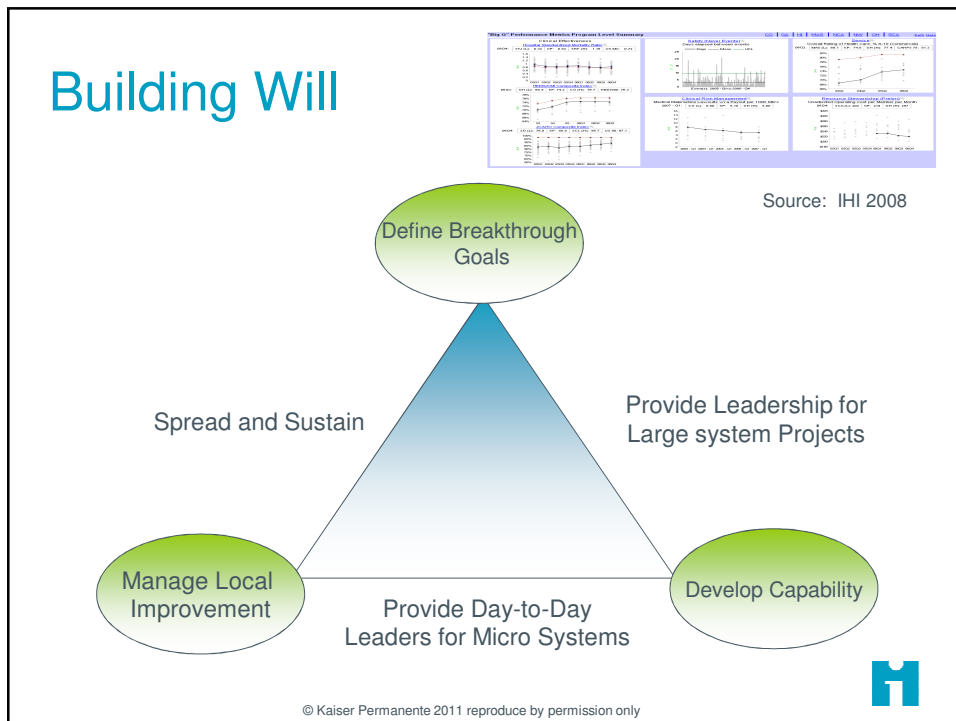
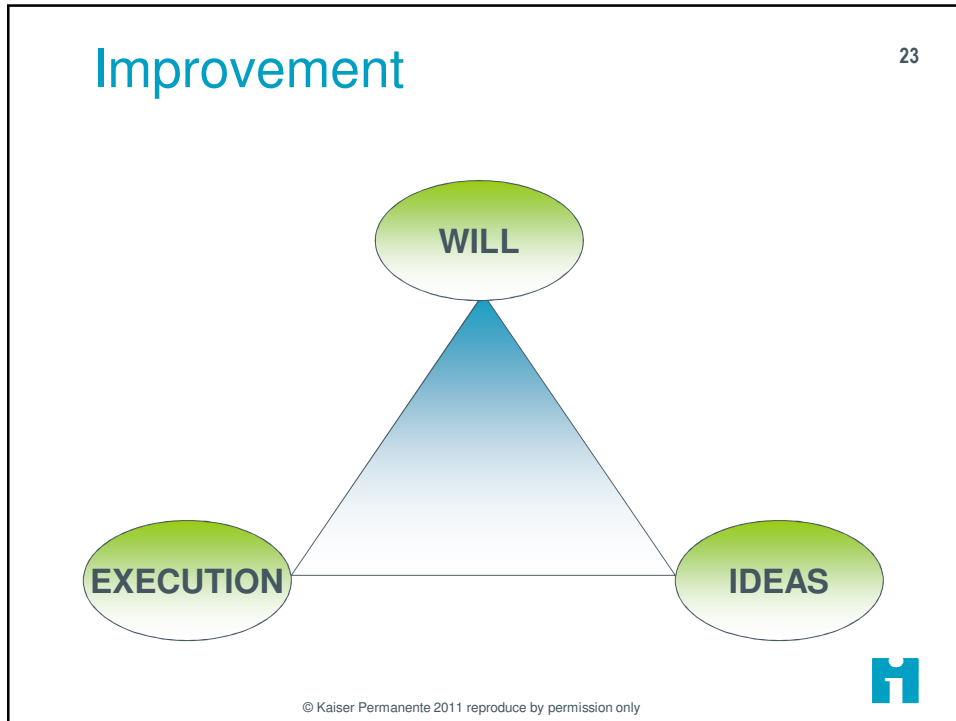
AIM:

Assist regions and facilities in developing, testing and implementing a KP-wide performance improvement system that builds the capacity to execute on high priority initiatives in each Kaiser Permanente region by 2010



22





Will: From Strategy to Execution

25

Big Aim

Strategy

Dashboard

Targets

Building Capacity to Improve by Developing our Skills

26

- Used common language for the organization based on MFI, Lean, Six Sigma

Charter

- ▶ What are we trying to accomplish?
- ▶ How will we know that change is an improvement?
- ▶ What change can we make that will result in improvement?

Assess

Develop/
Identify Change

Test

Implement/ Control

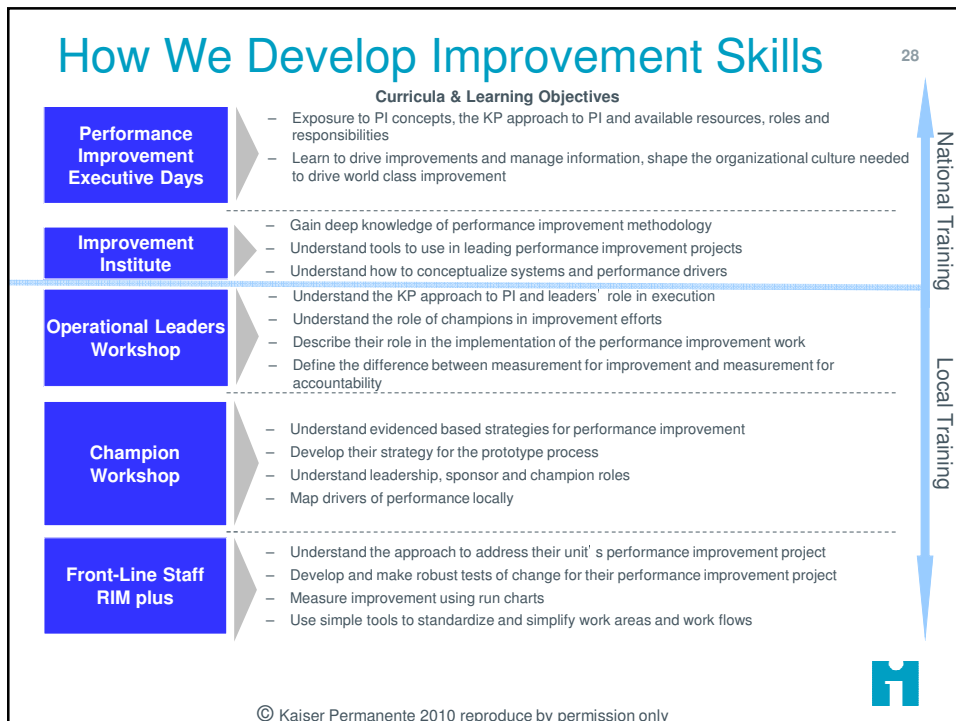
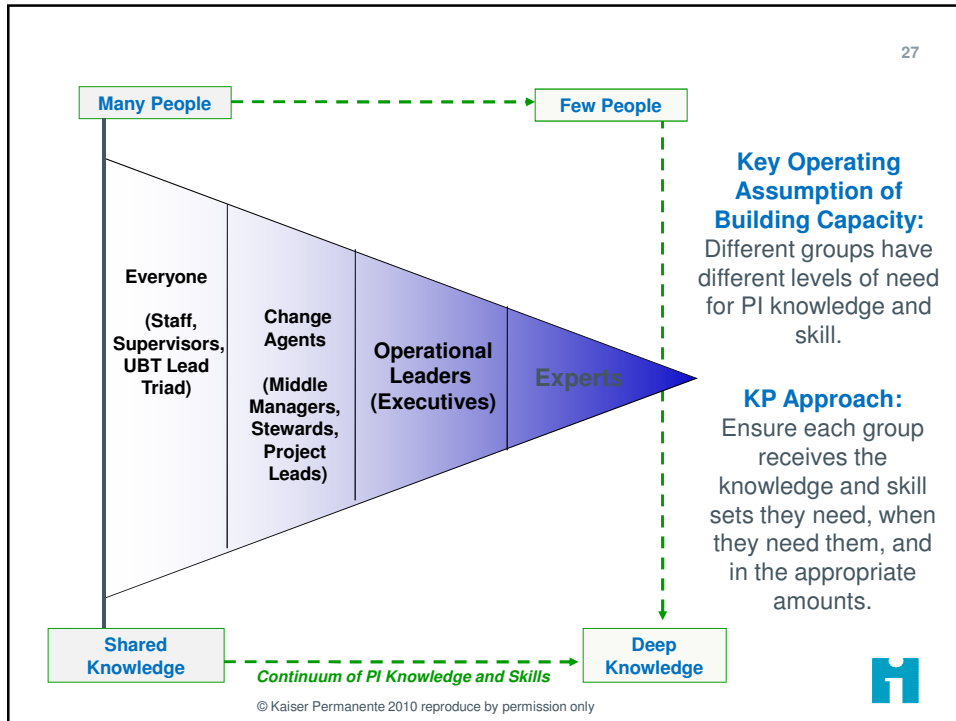
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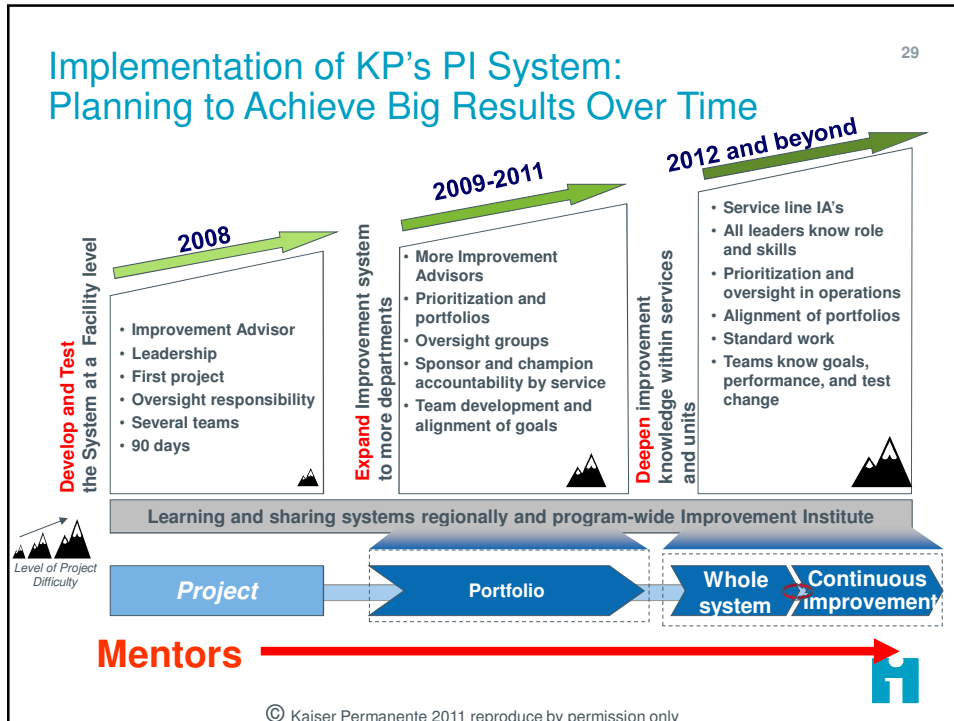
- ⇒ Process map
- ⇒ VOC
- ⇒ MVS

- ⇒ Standardize and simplify:
 - 5s
 - Remove waste
 - Cause/effect
 - CPI
 - FMEA
- ⇒ Apply evidence based practice
- ⇒ Just do it

- ⇒ Process capability
- ⇒ Managing variation
- ⇒ Process controls
- ⇒ Sustain
- ⇒ Spread plan

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Moving Forward...

30

- Use your assets
- Identify your gaps
- Fill those gaps
- Provide frequent feedback
- Connect 'heart' and 'head'
- Be resilient

Thrive!

Discussion

31

