The Three Faces of Measurement

Frank Federico

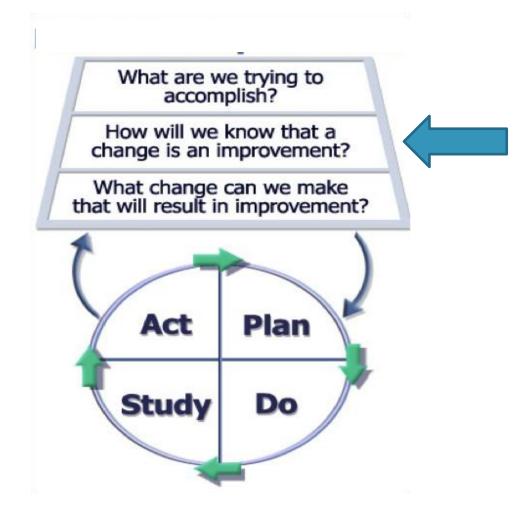


Objective

- Describe the difference between measurement for learning and measurement for reporting
- List three types of measurement in quality improvement



Model for Improvement





Discuss at Your Tables

There have been a number of delayed discharges from you hospital. After a gap analysis, it was determined that the delays resulted form delays in communication between the laboratory and the clinicians. You have been asked to improve communication between the laboratory and clinicians.

What data do you need?

How much data do you need?

Where will you find these data?



Discussion at Your Tables

- How many collect Key Process Indicators (KPI)?
- How much data are collected in order to prepare the report?
- Who collects that data?
- How old are the data before they are reviewed?
- What happens next?



The Three Faces of Performance Measurement

Aspect	Improvement	Accountability	Research
Aim	Improvement of care (efficiency & effectiveness)	Comparison, choice, reassurance, motivation for change	New knowledge (efficacy)
Methods: • Test Observability	Test observable	No test, evaluate current performance	Test blinded or controlled
• Bias	Accept consistent bias	Measure and adjust to reduce bias	Design to eliminate bias
Sample Size	"Just enough" data, small sequential samples	Obtain 100% of available, relevant data	"Just in case" data
Flexibility of Hypothesis	Flexible hypotheses, changes as learning takes place	No hypothesis	Fixed hypothesis (null hypothesis)
Testing Strategy	Sequential tests	No tests	One large test
Determining if a change is an improvement	Run charts or Shewhart control charts (statistical process control)	No change focus (maybe compute a percent change or rank order the results)	Hypothesis, statistical tests (t-test, F-test, chi square), p-values
Confidentiality of the data	Data used only by those involved with improvement	Data available for public consumption and review	Research subjects' identities protected

Lief Solberg, Gordon Mosser and Sharon McDonald. The Three Faces of Performance Measurement: Improvement, Accountability and Research. *Journal on Quality Improvement* vol. 23, no. 3, (March 1997), 135-147.



Ideas for System Improvement: The Crucial Role of Data





You can't fatten a cow by measuring it....but you can't reach your goal without measurement

Commitment to data that is

- Simple (set of core measures) that everyone uses, has high value
- Easy to collect and report
- Tracks intermediate and outcome metrics
- "real time", accurate, complete
- Transparent/observable
- accountable



Every Measure Must Have An Operational Definition...

description, in quantifiable terms, of what to measure and the steps to follow to measure it consistently.

- It gives communicable meaning to a concept
- Is clear and unambiguous
- Specifies measurement methods and equipment
- Identifies criteria

Please Share...

- Examples of process measures
- Examples of outcome measures
- Examples of balancing measures



Types of Measures	Description	The Surgical Sight Infection FOM
Outcome	The voice of the customer or patient. How is the system performing? What is the result? Is our improvement work making a meaningful impact?	Surgical Sight Infection Rate 1 0
Process	The voice of the workings of the process. Are the parts or steps in the system performing as planned. Are we on track to improve?	Percentage of appropriate prophylactic antibiotic selection. Percentage of on time administration of prophylactic antibiotics. Percentage of a safety climate score great than 4.
Balancing	Looking at a system from different directions or dimensions. What happened to the system as we improved the outcome and improvement measures? Are we producing perverse unintended consequences in our efforts to improve? What other factors may be affecting results?	Patient satisfaction Cost per case





PDSA Measures

Guide Learning about our testing.

Process Measures

Guide Learning about how our testing is improving reliability of the process.

Outcome Measures

Guide Learning about how the reliability of the process is achieving our aim.



OUTCOME MEASURES

AIM

OUTCOME MEASURES

DETAILS

a) Decrease
stillbirths by 40%
(b) decrease birth
asphyxia by 30 %
(c) decrease
newborn mortality
due to birth
asphyxia by 30 %
over 18 months in
all participating
hospitals

Fresh Stillbirth rate

No. of fresh still birth in facility during month/ Total No. of births (live birth + still birth) in facility

OPERATIONAL DEFINITION

Need to identify fresh still birth

Incidence of birth asphyxia

No. of babies born with birth asphyxia in facility during month/ Total No. of live births in facility Need to define birth asphyxia

Proportion of newborn deaths due to birth asphyxia

No. of newborn deaths due to birth asphyxia in babies born in the facility during month/ Total No. of newborn deaths in facility

Need to define birth asphyxia

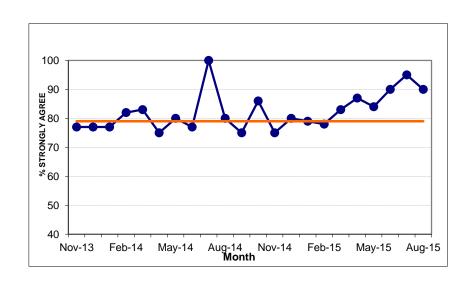
Caesarean section as a proportion of total deliveries

No. of caesarean section in the facility during month/ Total No. of deliveries (vaginal + caesarean) in facility



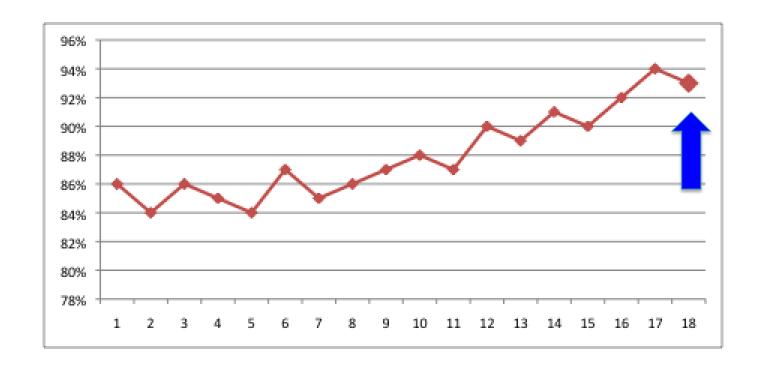
Run Charts

- Power of data graphed over time
 - Allows you to "see" variation
 - Useful tool for identifying whether special causes are present
 - Is the process "in control" i.e. predictable
- Easy to interpret





Display of Data





Pepper ... And Salt

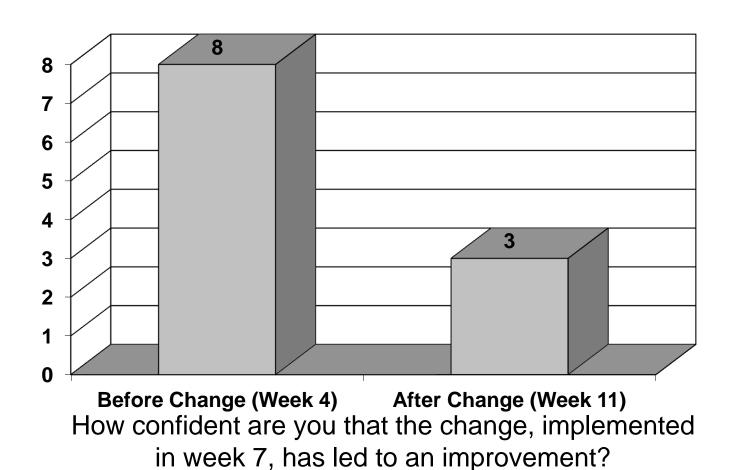
THE WALL STREET JOURNAL



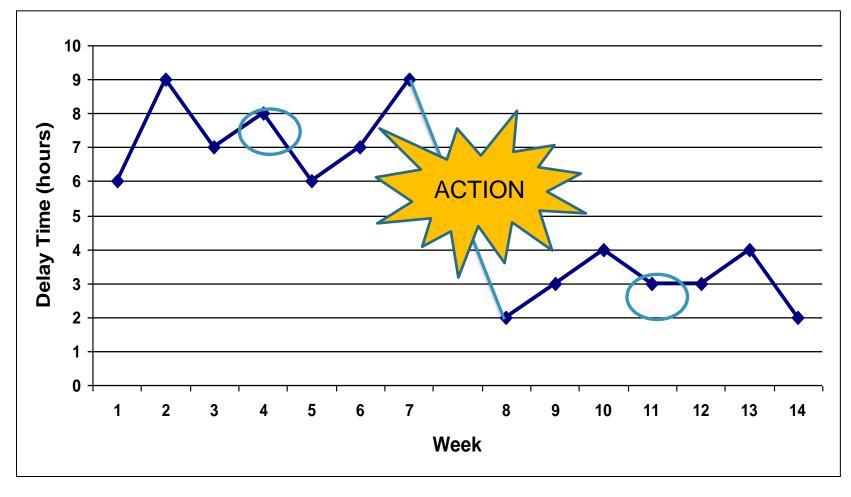
"I wouldn't celebrate quite yet, the graph is sideways."



Decrease in Delay Time (Hours)

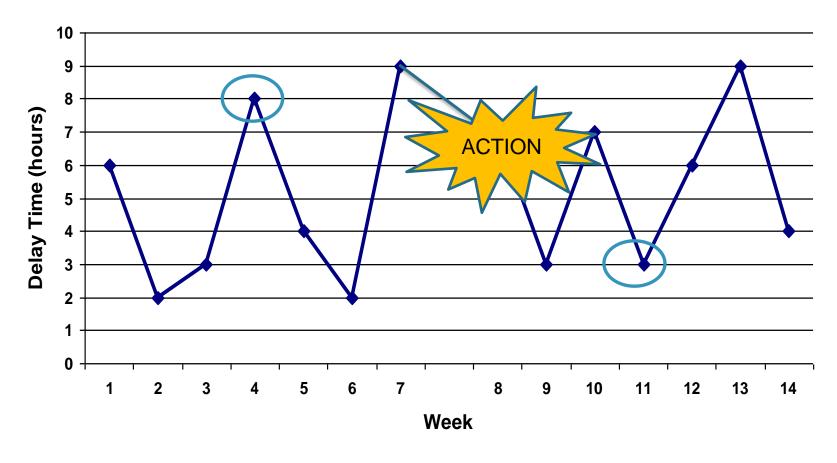


Scenario One



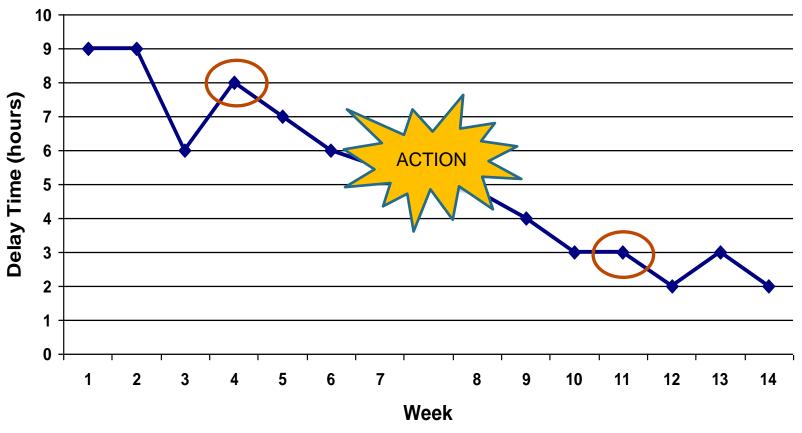


Scenario Two





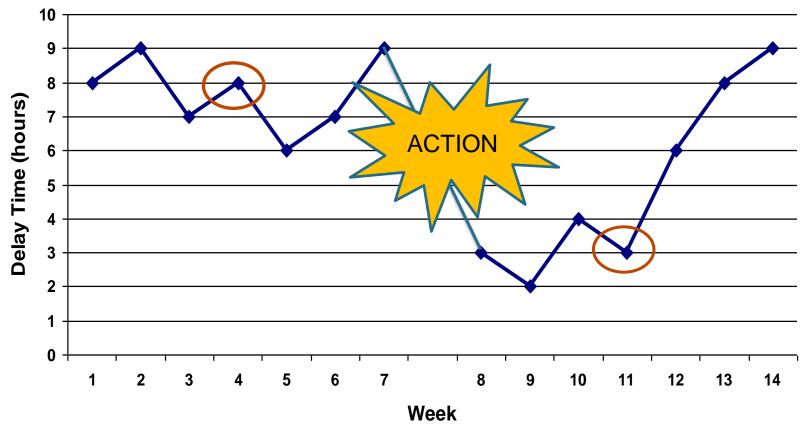
Scenario Three

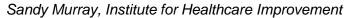






Scenario Four







Questions? Comments

