

The background features a light blue-to-purple gradient with several realistic water droplets of various sizes scattered across the surface. A faint, large circular graphic is centered behind the text.

ASKING THE RIGHT QUESTIONS FOR SUSTAINABILITY

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CEN, LSS-BBC

DISCLOSURE

I have no personal, professional, or financial conflicts to disclose.

OBJECTIVES

- Identify elements of the RIGHT question.
- Compare the use of words in different departments, for the RIGHT language.
- Identify the components for the RIGHT team.

RIGHT QUESTION

- **What** – identifies the element you want to have as the result.
- **How** – identifies the way it is documented and reported.
- **Who** – identifies the person/s responsible for education, documentation, analysis and reporting.
- **When** – identifies the interval for grouping the data.

RIGHT QUESTION

- What are you going measure? Volumes, visits, interventions, encounters, patients, or survey.
- How are you going to measure? Manual count, EHR, DRG's/APC's, ICD-10 code, or other calculation.
- Who is going to collect the data? Does it need analysis? Does it need validation? Who is responsible for collection/running the report/data analysis?
- When is it going to be collected? Daily, weekly, monthly, bi-monthly?

RIGHT QUESTION

- According to the CDC, use of electronic cigarettes has tripled among middle and high school students in the last two years from 2013-2014.
- 2.7.2 Implement innovative evidence-based strategies to reduce tobacco use.
- Acme hospital system is going to implement the 5A's model to address tobacco use in all of the school-based clinics over the next three years.
 - DY7 - Implement the program in three school-based clinics, establish a baseline for tobacco use, develop a documentation method for the 5 A's interventions, and validate the data collection method.
 - DY8 - Expand the program to seven additional clinics and reduce tobacco use by 5% of baseline.
 - DY9 - Expand the program to all clinics and reduce tobacco use by 10% of baseline.

RIGHT QUESTION

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- **What?** Users, interventions, documented education, successful quitters?
- **How?** EHR documentation, designated fields, ICU-10 code, APC's, or manual counts.
- **Who** provides the education? Who collects the data? Who analyzes the data? How is it validated?
- **When** is the data collected? Weekly or monthly?

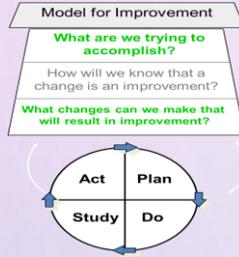
RACI CHART

RACI (Responsible Accountable Consulted Informed)

Rapid Cycle Improvement: Decrease Tobacco Use



RACI



Improvement Activities

Steps	What	Why	When	Who (Resources)					
1	Educate staff and prepare information	Instill staff knowledge	8/4/2017	I	C/I	C/I	A	C/I	R
2	Distribute information to patients	Increase patient knowledge	8/7/2017	R	R	C/I	A	C/I	I
3	Referral for Tobacco sussion session medications	Help to Reduce Tabacco Use	8/14/2017	I	A	I	R	I	I
4	Referral for Group meeting/educational session	Build relationships	8/21/2017	I	I	I	A	R	C/I
5	Sets follow-up for 3 months	Build accountability	8/28/2017	R	I	I	C/I	A	I
6	Educator meets all patients in registry yearly	Improve communication & patient engagement	9/15/2017	I	I	I	I	R	A

Legend:

- R** = Responsible: the person who performs the action / task
- A** = Accountable: the person who is held accountable for ensuring the action / task is completed
- C** = Consulted: the person(s) that must be consulted before performing the action / task
- I** = Informed: the person(s) who should be informed after the action / task has been performed

Steps in completing RACI form

- 1 Identify key activities (cycles for improvement).
- 2 Identify key resources.
- 3 With your team (key team players), identify who is responsible for each activity.
- 4 Continue with each role until you have completed the entire matrix.
- 5 Only one "R" per activity and only one "A" per activity. Several resources can appear in the inform "I" and consult "C" roles.

RIGHT QUESTION

- Start with the End in Mind
 - Visits, Patients, Hours, Increase/Decrease
- Data
 - Manual count, Tic sheet, IT, EHR, Third party
- Reporting
 - Responsible, Accountable, Project Review

RIGHT LANGUAGE

- In the last 5 years we have learned a different language. The language of initialism and acronyms.

- HHSC

- CMS

- DSRIP

- DY

- MLIU

- QPI

- IGT

- P4P

- P4R

- PY

- PBP

- UC

Savage Chickens

by Doug Savage



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TRouBLING TIMES AT THE SOCIETY
FOR THE PREVENTION OF ACROnYMS.

RIGHT LANGUAGE

This is the next new language you will need to know as we move forward.

- Cloud
- Closet
- EMR
- EHR
- PHR
- HIE
- MU/Mu
- PQRS/PQRST
- RAC
- Interoperability
- Mobile Health/mHealth
- TeleHealth
- Input
- Output
- Engagement
- Population Health/ PHM

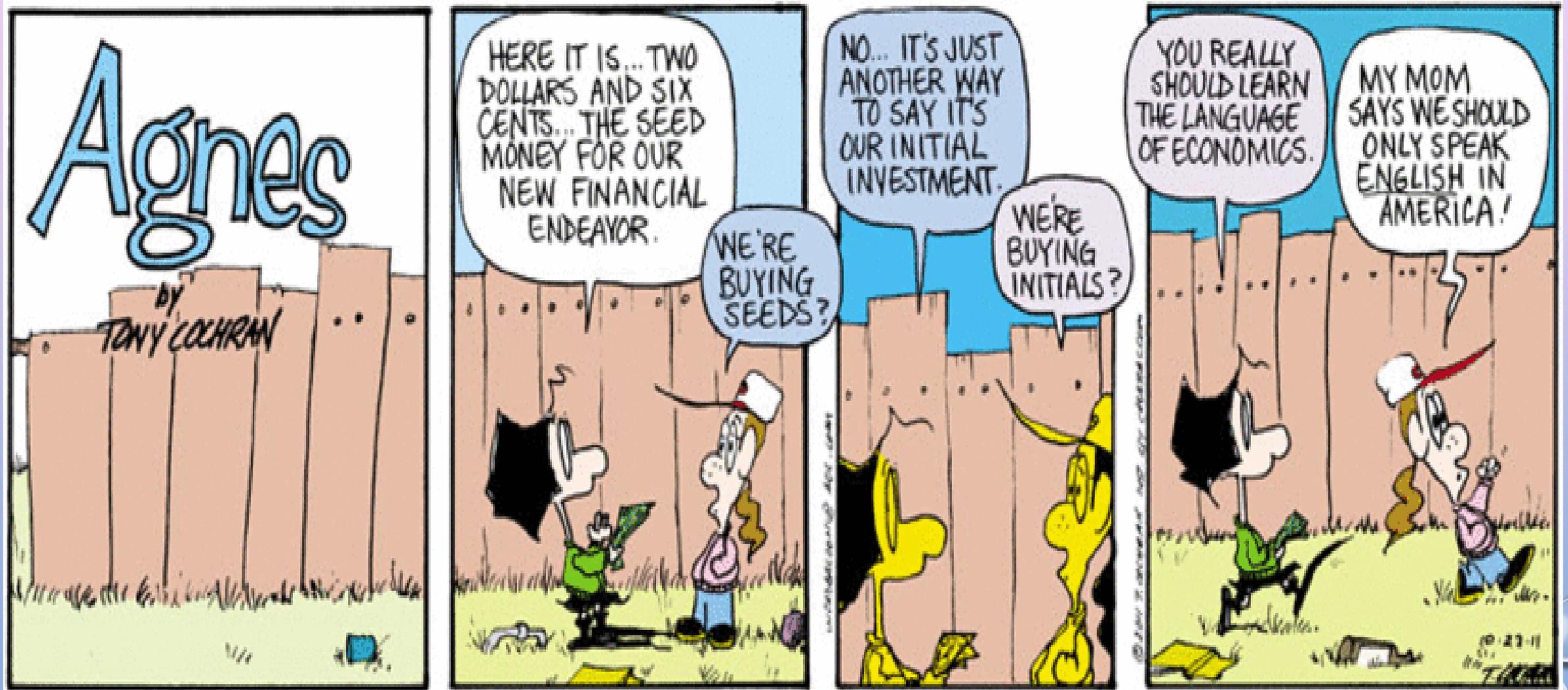
RIGHT LANGUAGE

- John, the info from the CMS on the BPM that includes the POS and LOS needs to be incorporated into the FOR in the overall plan.

RIGHT LANGUAGE

- John, the information from the Content Management System on the Business Process Module that includes the Point of Sale and Length of Service needs to be incorporated in to the Frame of Reference in the overall plan.
- John, the information from the Center for Medicare and Medicaid Services on the Blood Pressure Monitor that includes the Portable Oxygen System and Level of Service needs to be incorporated into the Financial Obligations Ratio in the overall plan.
- John, the information from the Color Management System on the Bytes per Minute that includes the Process Operating System and Loss of Signal needs to be incorporated into the Flight Operations Review in the overall plan.
- John, the information from the Case Management System on the Best Practice Model that includes the Point of Service and Length of Stay needs to be incorporated into the Format in the overall plan.

RIGHT LANGUAGE



RIGHT LANGUAGE

- Acronyms may be fast, but they can cause confusion
- History, profession, and experience are the frame of reference of the sender and receiver
- Confusion can cause delays, frustration, project failure, and audits

RIGHT TEAM

- Who do you need on your Team?
 - Executive/Leadership Champion -
 - Physician Champion-
 - Team Leader -
 - Team Members-
 - Stakeholders-
 - Nursing staff- Front Line Staff-
 - IT/Data Resources
 - Care Transition/Care Management-

RIGHT TEAM

- Who did you forget?
 - Ancillary Departments- Radiology, Respiratory, Lab, Physical Therapy, Social Services, Palliative Care, Pastoral Care, Dietary, Pharmacy
 - Finance/Materials Management
 - Additional Physician Champion or Physician Support
 - Provider Support
 - Clinic Staff
 - HIM/Coding
 - Access Services
 - Third Party Partners

RIGHT TEAM

- Executive Leadership – Accountability/Responsibility
 - Executive – Remove road block and barriers
 - Physician Champions – Peer communication
- Team Leader – Accountability/Responsibility
 - Team Leader – agenda, minutes, follow-up, project progress, and project reporting
 - Co-leadership – follow-up, follow-through, project reporting
- Team Members – Accountability/Responsibility
 - Attendance – be present
 - Assignments – tasks, research, reviews
 - Follow-up – respect deadlines

Asking Questions for Sustainability

- Right Question
- Right Language
- Right Team

Questions???

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➤ Thank You!