FR12- Demonstrating Improvement in Pain Management Through a Novel, International Collaborative Approach to QI

Friday, March 23
1:30 PM- 3:00 PM

Session Description

This session will present the results of a 2-year improvement project to improve pain management for LTC residents among 12 senior care organizations in Canada and the United States. Beginning in January 2014, the Seniors Quality Leap Initiative (SQLI) initiated an improvement project to improve site and average performance on a number of quality improvement measures related to pain in LTC. Using the evidence-based InterRAI Clinical Assessment Protocol (CAP) for pain as well as the Registered Nurses Association of Ontario (RNAO) best practice guideline for pain, the SQLI developed a method to conduct an in-depth gap analysis based on best practice to develop an improvement plan based on individual gaps. This novel, collaborative approach is the first of its kind in the long-term care sector.

Learning Objectives
Define the organizational based interventions that have shown to lead to significant improvement in quality measures related to pain in LTC in both Canada and the US.
Describe the best practice approaches to pain management in post-acute and LTC,
Describe the elements of the gap analysis and how it can be applied other quality improvement projects in the LTC sector.
Identify strategies, resources and supports necessary to drive change and success and the impact of this quality improvement approach on LTC policy.

Presenter(s): Jennifer Plant, MSC; Paul Katz, MD, CMD; Tammy Retalic, MS, RN

Presenter(s) Disclosures: All speakers have reported they have no relevant financial relationships to disclose.
Demonstrating Improvement in Pain Management Through a Novel, International Collaborative Approach to QI

Tammy Retalic, Chief Nursing Officer and Vice President of Patient Care Services, Hebrew SeniorLife, Boston, Massachusetts
Jennifer Plant, Director, Clinical Practice, Perley and Rideau Veterans’ Health Centre, Ontario, Canada
Dr. Paul Katz, Florida State University College of Medicine

Learning Objectives
By the end of the session, participants will be able to:
1. Define the organizational based interventions that have shown to lead to significant improvement in quality measures related to pain in LTC in both Canada and the US.
2. Describe the best practice approaches to pain management in post-acute and LTC
3. Describe the elements of the gap analysis and how it can be applied other quality improvement projects in the LTC sector.
4. Identify strategies, resources and supports necessary to drive change and success and the impact of this quality improvement approach on LTC policy.

What is the Seniors Quality Leap Initiative?
- Active community of practice
- 13 high performing long term care/post acute care organizations across Canada and the United States
- 10 Strategic and Academic partners to advance SQLI’s mission and vision
- Commitment to using and sharing quality improvement data to drive improvements

Our vision and mission
- Our vision is to become North America’s leading post-acute and long-term care provider consortium for benchmarking clinical quality standards that reflect advancing innovative change ideas to raise the bar for excellence throughout our industry.
- Our mission is to enhance the quality of life and quality of care for seniors by utilizing a structured approach to quality and performance improvement and disseminating recommendations to the broader post-acute and long-term care sector.

Strategic Directions (2016-2019)
- Exchange and benchmark performance data as it relates to quality of care and quality of life for seniors
- Test, design and adopt a collaboratively derived approach for performance improvement
- Identify and undertake initiatives designed to make improvements in quality of care and quality of life for seniors using evidence-based practices
- Broadly disseminate SQLI consensus-based recommendations for improvement across the post-acute and long-term care sector
- Support a culture of innovation that consistently seeks to identify, test, evaluate and develop innovative solutions that have the potential for significant healthcare and economic impact in partnership with the Centre for Aging and Brain Health Innovation (CABHI)

Speaker Disclosures
Dr. Paul Katz no conflict of interest, no financial interests
Tammy B. Retalic no conflict of interest, no financial interests
Jen Plant no conflict of interest, no financial interests
Exchange and Benchmark Performance Data

- SQLI measures and benchmarks organizational and SQLI average performance on a 28 quality of care indicators derived from the InterRAI minimum data set.
- All indicators are risk adjusted.

Through our ongoing review of performance data (MDS), we began to identify an opportunity for improvement:

- In 2014, the collaborative identified significant variation in SQLI members' performance on pain.
- None of our “high performing” organizations were better than the top 20% reference group.
- SQLI average performance on % of residents with worsened pain was worsening.

Impact and Relevance

- Pain affects approximately 80% of older adults living in long-term care and is a frequently seen symptom in residents with dementia.
- Pain is often ineffectively managed in residents with cognitive impairment.
- Under-assessed, uncontrolled pain impacts resident quality of life; chronic pain is associated with the worst quality of life compared to other chronic diseases.

Taking a systematic approach to improvement

- Reduce the % of residents with pain at an organizational level.
- Reduce the variation in pain performance across participating SQLI organizations.
- % of residents with pain.
- % of residents with severe pain.
- % of residents with continuous pain.
- % of residents with worsened pain.

Our novel, collaborative, evidence-based approach

- Review evidence based practices.
- Complete survey.
- Identify organizational gaps.
- Develop quality improvement plans.
- Report on progress.

Gap analysis

- Consider interventions that will address noted gaps.
Applying the Hierarchy of Effectiveness to develop quality improvement plan

What were Hebrew SeniorLife’s Pain Practice Gaps?

• Training & Education
• Cultural & Spiritual Considerations
• Use of Alternative Therapies

How Did We Approach Improvements?

Considerations:

• Existing Quality Improvement Projects and infrastructure- Prioritizing
• What Quality Improvement framework would be utilized?
• What changes would we focus on considering the hierarchy of effectiveness?

The 5 Why Approach

Example: The Washington Monument is deteriorating

1. Why is the monument deteriorating?
   Because harsh chemicals are used.

2. Why are harsh chemicals used?
   The harsh chemicals are needed to clean the bird droppings. There are a lot of birds. Chemicals are used to clean the monument.

3. Why are there a lot of birds?
   Because the birds eat the spiders. There are a lot of spiders.

4. Why are there a lot of spiders?
   Because the spiders eat the gnats. There are a lot of gnats.

5. Why are there a lot of gnats?
   Because the lights at dusk attract the gnats.

Solution:
   Turn the lights on ½ hour later

Hebrew SeniorLife Challenges

• Lower effectiveness changes still needed to be implemented
• Policy revisions needed to balance the reality of practice and resources
• Training was much more involved than initially anticipated
• Ongoing monitoring needed to be identified to ensure effectiveness of plan and sustainability
Perley Rideau Burning Platform

- Poor performance as compared to SQLI peers and peers in our region
- In June 2015, the Canadian Institute for Health Information (CIHI) released a report on 9 quality indicators for Long Term Care
- The report received media coverage by the Ottawa Citizen, where the Perley Rideau was identified as being the “best” at reducing the use antipsychotics, and the “worst” related to assessing and managing pain

Improvement Levers

- Guided by improvement science
- Project lead with QI expertise
- Interprofessional approach
- Accountability and reporting
  - Peers (SQLI)
  - Leadership
  - Board

The Quality Improvement Approach

1. The Right Team
   - Assemble a Quality Improvement Team
   - Develop a charter
   - Understand the resident experience

2. Diagnostic: Understand the Problem
3. Design and Test Change (PDSA)
4. Implement and Sustain
5. Spread

The Right Team

- Assemble a Quality Improvement Team
- Develop a charter
- Understand the resident experience

Staff Engagement

Champions say “YES” to Practice Change to Improve Resident Care

If changing your practice meant better care for your residents, would you do it?
Meet a team of passionate individuals who say “Yes!”

The Resident Experience

- 89 year old female resident
- Moderate cognitive impairment
- Has lived at the Perley Rideau for 14 months
- Veteran Resident
- Prefers to have pain with function
- True partner in care
- Values autonomy and “control”
- Due to her level of function, it was not easy to see pain
- Treatment options presented did not leverage non-pharmacological approaches to pain
The Diagnostic

- Understand the Problem and the System
- Utilize any tools that fit
- Use various QI methodologies to understand some of the root causes (process mapping or value stream mapping, gap analysis, 5 whys, fishbone)
- Analyze existing data to identify opportunities
- Understand the voice of the resident
- Understand the system

Understand Current State - Gap analysis

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<tr>
<th>Site</th>
<th>Policy</th>
<th>Environment Guidelines</th>
<th>OOS Infection</th>
<th>Transfer</th>
<th>Staff of Care</th>
<th>Cultural and Spiritual Considerations</th>
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Consider interventions that will address noted gaps

Understanding Current State

Our Aim

By March 31st 2018, to reduce the percentage of residents who have pain (facility wide) to 6.5%, according to MDS reports in PointClickCare
**Design and Test Change**

- Design and Test Change Identify Change Concepts and Ideas
- Consider a Kaizen
- Begin testing through PDSA (Plan-Do-Study-Act)
  - Allows trial and error on a small scale
  - Allows for refinement and builds confidence in the change

**Select Change Ideas**

- **AFFINITY DIAGRAM**
  - Categories of ideas from all sources

- **IMPACT/EFFORT MATRIX**
  - Prioritize ideas based on impact and effort

**Hierarchy of Effectiveness**

- **Focusing Functions**
  - Assessment questions for focus functioned for a response regarding individual preferences
  - Non-pharmacological intervention list built in care plan library

- **Evaluation and compostion**
  - Standardized assessment of MMSE assessment tool for nursing
  - Hip and wrist protect for falls

- **Simplification and standardization**
  - Standard assessment and schedule
  - Pain Mapping and Diary

- **Checklists and double checks**
  - Comfort Care Reviewing high risk standard list

- **Explore and expand**
  - Policy updates and minor changes to reflect change

- **Education/Inservice**
  - New education materials
  - Education module for Staff
  - Share performance data

- **Slip and slide**
  - Change ideas that were tested are now implemented

**Test Change Ideas**

- Plan, Do, Study, Act (PDSA cycles) are used to test change ideas through small tests of change
- One change idea may undergo several PDSA cycles to refine the idea before applying it to the entire organization

**Implement and Sustain**

- **Implement and Sustain**
  - Change ideas that were tested are now implemented

**Sustainability Model**

- **Implement and Sustain**
  - Change ideas that were tested are now implemented
Spread

• Spread
• Successful ideas are implemented on a broader scale

Summary - Our Improvement Journey

• Establish a performance management & measurement system
• Focused priorities, aligned work, clear accountabilities
• SQLI
• Invest in leadership and staff development
• Apply Quality Improvement Science
• Research, innovate and apply best practice
• Manage change
• Build the right kind of culture!

Results to-date – continuous pain

The SQLI Value Proposition

• Allows for peer to peer comparisons of quality measures and the benchmarking of best practices
• Fosters the development of new and innovative approaches to quality and improvement specifically to PA-LTC
• Provides unique networking opportunity for leaders in senior care
• Facilitates novel research and educational initiative through diverse membership including strategic and academic partners
• Integrates quality of life measurement into performance scores
• Sustains a data repository with universal experts in health policy, research and patient care
• Showcases national and international experts in health policy, research and patient care
Summary

- SQLI is a novel, data driven, community of practice that leverages the collective expertise of its constituent members in order to enhance both quality of care and quality of life.
- Recognizing variations in practice among consortium members, a gap analysis is a useful first step in identifying practice opportunities unique to each organization.
- Changes in policy and practice locally benefits performance of the "whole."

More information about SQLI

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