

## Western Technical College

## 10530161 Health Quality Management

## **Course Outcome Summary**

### **Course Information**

Description	Explores the programs and processes used to manage and improve healthcare quality. Addresses regulatory requirements as related to performance measurement, assessment, and improvement, required monitoring activities, risk management and patient safety, utilization management, and medical staff credentialing. Emphasizes the use of critical thinking and data analysis skills in the management and reporting of data.
Career Cluster	Health Science
Instructional Level	Associate Degree Courses
<b>Total Credits</b>	3
Total Hours	72

#### **Pre/Corequisites**

Prerequisite 10530163 Healthcare Stats & Analytics

#### Textbooks

*Quality & Performance Improvement in Health Care: A Tool for Programmed Learning, Revised.* 7th Edition. Copyright 2019. Shaw, Carter. Publisher: American Health Information Management Association. **ISBN-13**: 978-1-58426-633-1. Required.

Health Information Management Technology: An Applied Approach with Student Member Package - Bundled with AHIMA/WHIMA Membership. 6th Edition. Copyright 2020. Sayles, Nanette B. Publisher: American Health Information Management Association. **ISBN-13:** 978-1-58426-774-4. Required.

#### **Learner Supplies**

Internet and E-mail access, Microsoft Office (Word, PowerPoint, Access, Excel). Free access with Western student email address from <u>https://login.microsoftonline.com/.</u> Vendor: To be discussed in class. Required.

#### **Success Abilities**

- 1. Live Responsibly: Foster Accountability
- 2. Refine Professionalism: Improve Critical Thinking
- 3. Refine Professionalism: Participate Collaboratively

#### **Program Outcomes**

- 1. HIT Apply data governance principles to ensure the quality of health data
- 2. HIT Apply informatics and analytics in data use

#### **Course Competencies**

#### 1. **INVESTIGATE** performance improvement principles, models, tools and considerations

#### **Assessment Strategies**

- 1.1. Quality gurus presentation
- 1.2. Legislation research and wiki
- 1.3. PI models research
- 1.4. QI tools demonstration (brainstorming, nominal group technique)

#### Criteria

- 1.1. you examine the concept of quality and its importance in healthcare
- 1.2. you examine performance improvement principles
- 1.3. you investigate goals, purposes and features of performance improvement models
- 1.4. you investigate quality monitoring and reporting tools
- 1.5. you identify criteria for selecting an improvement project

#### **Learning Objectives**

- 1.a. Summarize historical events that have contributed to modern performance improvement programs
- 1.b. Explain how key legislation has influenced healthcare quality initiatives
- 1.c. Describe how key individuals and organizations have shaped the theory and developed models for use in performance improvement activities
- 1.d. Identify the steps in organization wide and team-based performance improvement cycles and explain how they interrelate
- 1.e. Compare features of various PI Models
- 1.f. Differentiate between organization-wide performance improvement activities and team-based performance improvement activities
- 1.g. Identify performance measures in a PI cycle
- 1.h. Identify customers for monitored processes in a PI cycle
- 1.i. Identify customer requirements with respect to outcomes in a PI cycle
- 1.j. Determine whether outcomes of the current process meet customer needs in a PI cycle
- 1.k. Describe effective use of teams in performance improvement activities
- 1.I. Compare the roles of leader and team members in performance improvement
- 1.m. Summarize the contributions that team charters, team roles, ground rules, listening, and questioning can make to improve the effectiveness of performance improvement teams

#### 2. UTILIZE data analytics for decision support, strategic initiatives, and research

#### **Assessment Strategies**

- 2.1. QI tools demonstration to analyze a process for variation
- 2.2. HIM department dashboard assignment

#### Criteria

- 2.1. you conduct data mining activities
- 2.2. you use decision support tools
- 2.3. you recommend solutions for quality management and performance improvement
- 2.4. you draw conclusions from data analytics related to strategic initiatives and research

#### Learning Objectives

- 2.a. Create appropriate graphic displays for a given set of data
- 2.b. Apply performance improvement tools to analyze data for decision making
- 2.c. Differentiate between common and special cause variation
- 2.d. Appraise the uses and value of predictive analytics in healthcare

#### 3. **REPORT facility-wide outcomes data (internally & externally)**

#### **Assessment Strategies**

- 3.1. Oral, written or graphic assessment
- 3.2. QI tools demonstration to communicate performance improvement activities
- 3.3. QI tools demonstration to monitor customer satisfaction

#### Criteria

- 3.1. you identify internal and external reportable measures
- 3.2. you prepare reports for monitoring performance
- 3.3. you prepare reports for decision making

#### **Learning Objectives**

- 3.a. Identify internal and external reportable measures
- 3.b. Apply performance improvement tools to communicate outcomes
- 3.c. Interpret facility-wide outcomes data
- 3.d. Differentiate between internal and external customers
- 3.e. Assess reasons why customer perspectives are important to the performance improvement process
- 3.f. Demonstrate effective methods to measure customer satisfaction

#### 4. **EVALUATE** utilization data for patterns, trends and opportunities for improvement

#### **Assessment Strategies**

- 4.1. QI tools demonstration for optimization of health care (critical pathway, utilization review)
- 4.2. QI tools demonstration for monitoring utilization (benchmarking, variance reports)
- 4.3. QI tools demonstration to identify problems or demonstrate compliance with regulations in patient care (required reviews and criteria sets for accreditation)

#### Criteria

- 4.1. you explain the historical development and goals of utilization management
- 4.2. you outline the utilization management structure and process
- 4.3. you differentiate between the various types of utilization management reviews
- 4.4. you investigate tools and techniques that contribute to the efficient use of resources in the provision of patient care
- 4.5. you draw conclusions based on utilization data

#### Learning Objectives

- 4.a. Explain what is meant by continuum of care
- 4.b. Illustrate the historical development of utilization management
- 4.c. Describe the purpose and goals of UM
- 4.d. Describe components of a UM program (preadmission authorizations, utilization review, discharge planning)
- 4.e. Apply tools and techniques for efficient use of patient resources
- 4.f. Differentiate intensity, severity, appropriateness and discharge indicators
- 4.g. Examine efforts to achieve equilibrium between quality and cost of healthcare despite competing viewpoints of the patient, payer, purchaser, physician and healthcare organization
- 4.h. Explain the different type of payment denials
- 4.i. Discuss the role of UM team members
- 4.j. Analyze UR data to form conclusions
- 4.k. Demonstrate methods by which healthcare organizations monitor and improve the quality of patient care
- 4.I. Explain how National Patient Safety Goals interface with the PI cycle during the patient care process
- 4.m. Analyze how patient centered care impacts patient outcomes
- 4.n. Determine roles that clinical practice guidelines and evidence-based management play in standardizing

patient care

# 5. EVALUATE risk management/patient safety data for patterns, trends and opportunities for improvement

#### **Assessment Strategies**

- 5.1. QI tools demonstration for identifying risks (occurrence screens, incident reports, safety data sheets)
- 5.2. QI tools demonstration to identify causes of a problem (cause and effect diagram)
- 5.3. QI tools demonstration to monitor risk (database)

#### Criteria

- 5.1. you explain the historical development and goals of risk management
- 5.2. you outline the risk management structure and process
- 5.3. you differentiate between the approaches to risk reduction
- 5.4. you investigate methods for risk identification
- 5.5. you investigate tools and techniques to manage loss prevention and reduction
- 5.6. you draw conclusions based on risk data

#### **Learning Objectives**

- 5.a. Identify various approaches used by health care organizations use to prevent and control infectious disease
- 5.b. Illustrate the historical development of risk management in health care
- 5.c. Describe the purpose and goals of RM
- 5.d. Describe components of a RM program (steps)
- 5.e. Describe approaches to risk reduction used by healthcare organizations
- 5.f. Demonstrate methods used to identify risk
- 5.g. Apply PI tools to investigate risk
- 5.h. Draw conclusions based on risk data
- 5.i. Apply PI tools to report risks
- 5.j. Discuss the role of RM team members
- 5.k. Identify risk management activities of government and other regulatory agencies (OSHA, Worker's Comp, accrediting agencies)
- 5.I. Differentiate the role of the FDA and DEA in drug regulation
- 5.m. Describe patient safety issues and legal consequences associated with medication errors and adverse drug events
- 5.n. Discuss components of a safe medication management system
- 5.0. Explain the process and purpose of medication reconciliation as a risk management tool
- 5.p. Describe the key programs and plans that are part of improving a healthcare organization's environment of care
- 5.q. Model safety program procedures relevant to the work of the HIT

#### 6. EVALUATE performance data for patterns, trends and opportunities for improvement

#### **Assessment Strategies**

- 6.1. Dashboard analysis activity
- 6.2. Performance improvement plan evaluation

#### Criteria

- 6.1. you determine the scope of the performance improvement
- 6.2. you compile appropriate data from various sources
- 6.3. you organize data in a usable format
- 6.4. you compare and analyze performance data
- 6.5. you summarize findings of the data analysis
- 6.6. you provide recommendations for improvement opportunities

#### Learning Objectives

- 6.a. Describe the role of the board and CEO in performance improvement
- 6.b. Explain the relationship of strategic planning to performance improvement

- 6.c. Describe the components of a healthcare organization's PI plan
- 6.d. Explain how a healthcare organization prioritizes improvement opportunities
- 6.e. Perform data collection, organization, analysis and summarization for the scope of a PI process
- 6.f. Recommend improvements based on analysis of PI data
- 6.g. Examine reasons why a healthcare organization would evaluate its own PI plan

#### 7. EXAMINE the organization's accreditation, licensure and credentialing processes

#### **Assessment Strategies**

- 7.1. Accreditation survey activity (data gathering and analysis)
- 7.2. Core measure comparison activity
- 7.3. Analysis of legislation related to quality improvement

#### Criteria

- 7.1. you identify accrediting and licensing requirements and standards
- 7.2. you collect data for required monitoring activities
- 7.3. you report results of the review in compliance with accreditation/licensing requirements
- 7.4. you summarize the credentialing process
- 7.5. you outline the medical staff appointment/reappointment process
- 7.6. you examine delineation of clinical privileges
- 7.7. you examine peer review process

#### **Learning Objectives**

- 7.a. Examine data sources used in the physician appointment/reappointment process
- 7.b. Summarize the physician credentialing process
- 7.c. Describe the process of clinical privileging
- 7.d. Recognize organizations and agencies used for source verification
- 7.e. Describe the performance improvement perspectives of accreditation certification and licensure
- 7.f. Summarize the approach of accreditation, certification and licensure agencies to the site visit and survey
- 7.g. Explain what is meant by "deemed status"
- 7.h. Collect data for required monitoring activities
- 7.i. Explain the relationship of data quality to business intelligence
- 7.j. Justify the use of technology as a PI program resource, how info systems impact quality
- 7.k. Identify organizations that provide standards for quality measurement
- 7.I. Explain how failure to meet expectations can create risk for the health care organization and providers
- 7.m. Assess the impact of immunity from liability on the effectiveness of peer review
- 7.n. Apply PI tools to identify and report adverse and sentinel events
- 7.o. Compare quality improvement, research and public health activities