


Roles and Responsibilities

Quality Improvement/
Outcomes Committee
Meeting, 3/29/07



Definitions

- **Quality Improvement:** learning what you are doing well, and doing it even better; learning what isn't working and making it better
- **Outcomes:** benefits or changes as a result of the project
- **Evaluation:** Using information to make judgments, changes, or improvements in a project





Committee's Job is to Ask 3 Questions

1. **What happened?**

Were steps in the project completed as planned?
Were goals met?

2. **So what?**

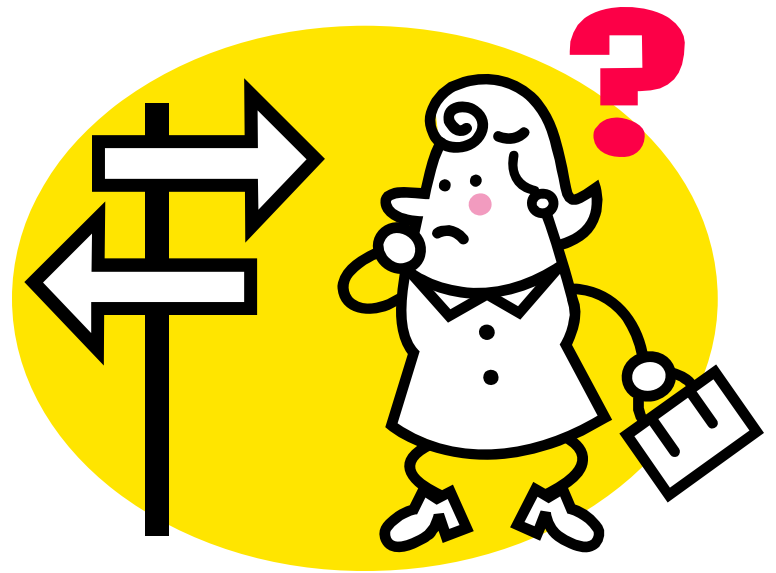
Does this make sense? Why is this important? How can people use this information?

3. **Now what?**

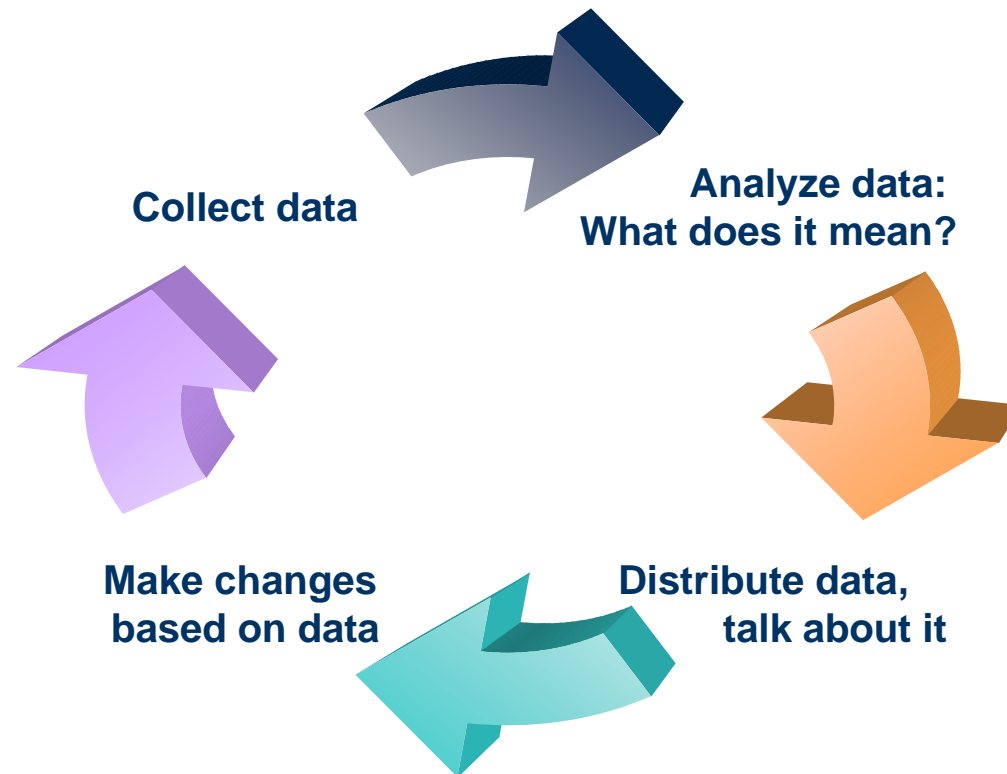
Who should know this information? What changes should happen to make improvements?

Data: The MOST Important Tool

- Data is INFORMATION... numbers, words, or stories
- Data helps us:
 - Understand what's going on
 - Make decisions
 - Figure out needs
 - Advocate for change
 - Gain support for a project



Process of Using Data for Evaluation



Getting Data for Evaluation

- Interviews, focus groups
- Surveys, questionnaires, assessments
- Observation
- Use data that's collected for another purpose



When looking at data, ask...

1. Where does the data come from?

Who is asking the question, and who is answering?

Example:

Consumers may answer questions differently depending on who asks them (their psychiatrist vs. a peer).

Clinical teams might answer a question differently from consumers.

Example:

If you want to know about cancer risks from smoking, are you going to ask tobacco companies or independent scientists and physicians?

When looking at data, ask...

**2. How many people are included?
How many people answered a question?**

This is called “N”.

**Example: $N = 1$ means that 1 person responded.
 $N = 100$ means that 100 people responded.**

Results might not be reliable if:

- **a small number of people are included in the data (a small N)**
- **a large number of people didn't answer a question**

Other questions...

- Are there trends or patterns in the data?
- Are there increases or decreases over time?
- Are there groups that are similar or different?

Other questions...

- How did you come to this conclusion?
- What else could this mean?
- What data did you use to make this decision?
- How can you use this information?
- What does this mean in plain English?
- I don't understand – can you explain in another way?

What is an Average?

Average describes the middle.

Add all the numbers in a group together and divide by how many numbers are in the group.

Example: average years at Mayview

- Bob: 3 years
- Jean: 15 years
- Dolores: 7 years

$$\text{Average} = (3 + 15 + 7) / 3 = 8.3 \text{ years}$$

What is a Percent (%)?

Percent means “per hundred.” 10% is just another way of saying “ten out of a hundred.”

Example:

How long have consumers been at Mayview?

- 23 out of 52 people (44%) have been at Mayview 5 years or less
- 27% have been at Mayview 5-10 years
- 29% have been at Mayview more than 10 years

$$23/52 \times 100 = 44\%$$

Example: Data presented in words

The 52 people selected for assessments have been at Mayview an average of about eight years.

Example: Data presented in a table

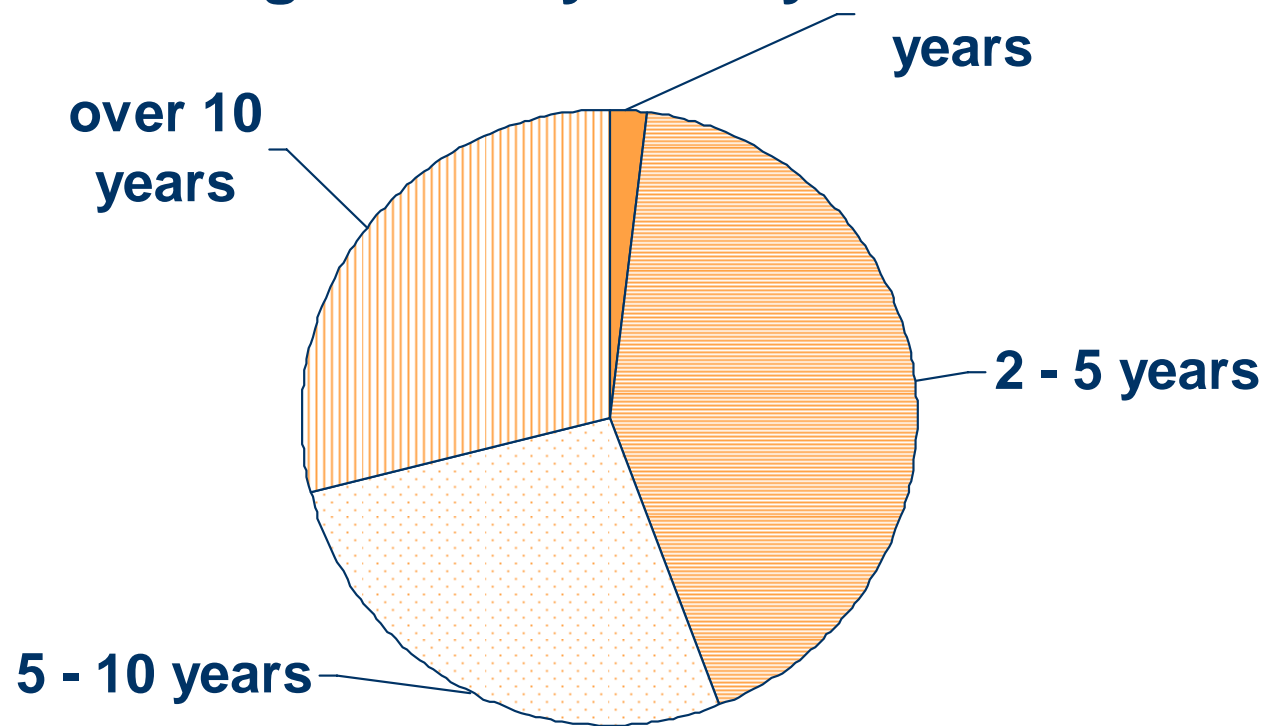
Length of Stay at Mayview State Hospital	Number of People	Percent (%) of People
Under 2 years	1	2%
2 to 5 years	22	42%
5 to 10 years	14	27%
Over 10 years	15	29%
Total	52	100%

N = 52

2% = 1 out of 52

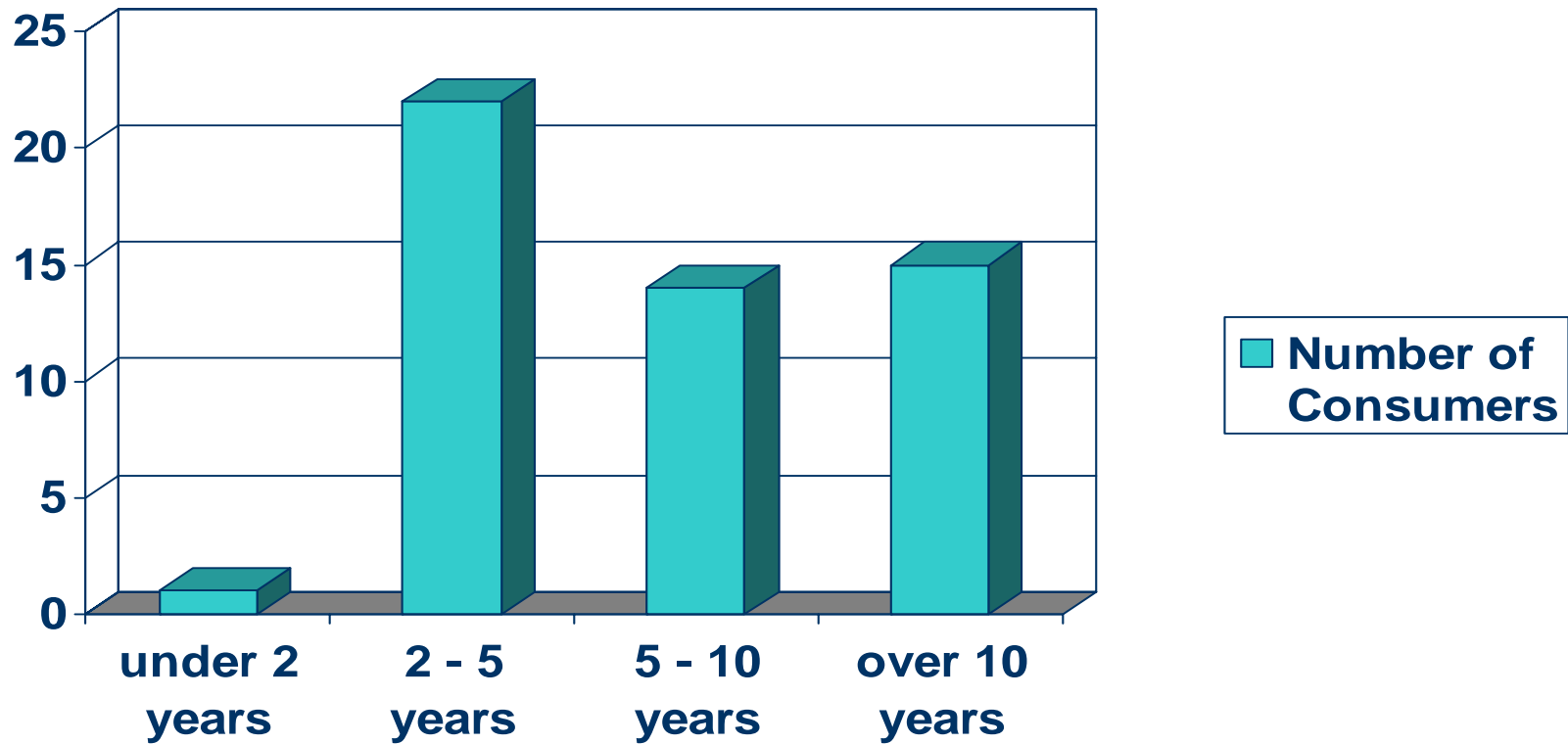
Example: Data presented in a pie graph

**Consumers Selected for Assessments, by
Length of Stay at Mayview**



Example: Data presented in a bar graph

Consumers Selected for Assessments, by Length of Stay at Mayview



Mayview Project Outline

Steps



Goals



Outcomes

Assessments

- Consumers say what they want and need in the community
- Families suggest what their family members at Mayview need
- Clinical teams give treatment history, make recommendations

Community Support Plans (CSPs)

- The consumer, family members, advocates, treatment team, community providers, county meet about consumer's wants and needs, explore options, and develop a CSP
- Facilitators run the CSP meetings, make sure people follow up and that consumer's needs and wishes are the backbone of the plan

People are discharged

- With complete, individualized plans
- With services and supports in place

Counties have resources people need

Counties develop resources:

- Based on needs in CSPs
- Based on county knowledge of resource needs

People succeed in the community

- People receive support they need and want
- People have safe, stable housing
- People are involved in activities that are important to them
- People are satisfied with their services, quality of life
- People don't need to go back to the hospital
- What else do you think should be on this list?

The Committee's First Task is to...

Develop a Quality Management Plan.

- What happened? So what? Now what?**
- A plan for evaluating how the Mayview project is going**
- Using data from different parts of the project**

Quality Management Plan

Activities → **Achievements** → **Outcomes**

Assessments

People are
discharged

People succeed in
the community

Community Support
Plans (CSPs)

Counties have
resources people need