

A brief overview of quality-related methodologies

- **Quality Assurance (QA).** Checks objective conformance to an objective, predetermined standard. The check occurs at the end of production. Leadership interprets and applies the findings from the small percentage that were checked to improve production requirements and methods. Examples:
 - At the end of the line, expert engineers dismantle 1 new car in 10,000.
 - Closed and open chart audit by in-house surveyor.
 - **Examples in SUD arena:** Audit 1 closed chart per counselor per quarter. CEO conducts a pre-discharge exit interview of each patient. That would be a stretch-goal as it would happen with *every customer* (number and percentage completed) and include *subjective* content.
- **Continuous Quality Improvement (CQI).** While maintaining QA, add bottom-up innovation driven by inputs from internal customers (employees) and external customers (product users). Each opportunity is scored for cost (0-10) and expected quality impact (0-10). Leadership then prioritizes projects based on their quality/cost ratio. Finally, leadership selects change project opportunities, including a sequence and timeline of all projects chosen.
 - **Toyota:** Refined the Camry *for decades* to deliver customer desires and exceed their expectations. (Ford largely exited US passenger sedans).
- **Process Improvement (PI).** While retaining QA and CQI, add PI. Addresses efficiency and effectiveness of tasks and workflow, or big-picture or whole-process level change. Takes an opportunity or responds to a problem. May focus on the user experience or the staff experience as targets to improve.
 - **Watch waiting!** Oil change shop: no appointment necessary.
 - **Choices.** Grocery store: self and staff check-out options are available.
 - **Co-create the product** (e.g. salad bar, taco bar).
 - **Signage:** Re-write in 4th grade English with no technical lingo.
 - **Example in the SUD arena:** Warranty the service. Alumni can call to come back to visit or stay in the setting any time.
- **Performance Improvement (also abbreviated PI):** A large program-level or organization-wide change management project.
 - In a 9-12 month residential program, a goal was set to drop the AMA rate from 43% to a sustained rate under 15%. What previously worked in a shorter program didn't work in that longer program. Over 100 separate changes (PDSA cycles) only dropped the AMA rate to around 37%. Then one change dropped it below 15%, and it remained below 15% for years.
 - Tobacco-free project. An entire organization offering residential and outpatient primary SUD services was changed to a tobacco and smoke-free model of care.
 - Redesign of services at the program level to offer specialized methods for emerging adults (incorporating developmental psychology, relevant evidence-based clinical practices, etc.)

Helpful Hints, Do's and Don'ts, Lessons Learned

Leading a change process (from any QA, CQI, PI, or blended perspective) requires the capacity within the leaders to **tolerate discomfort**.

- The discomfort usually comes from **ambiguity** – lack of certainty about the value of a proposed change – or seeing errors or poor results as “**failures**” or “**mistakes**”, rather than opportunities for additional learning and even better, improved innovation.
- A low capacity to tolerate the discomfort and ambiguity of a change project leads to abandoning the project, and feeling better. This is the first example of a **lack of sustainability of a change** or of a longer **change project**.
- **3 types of staff:** early adopters, vocal opponents, silent resisters. Vocal opponents are *helpful*.

Change Management is bigger than, and outside of, QA, CQI and PI. The **life-cycle of a product** and the **stages of a project** must be understood, accounted for, managed. **Build the tension for change**.

- **Kodak** invented digital photography, but failed at Change Management.
- **Blockbuster** passed on digital streaming, due to being confident about the CQI of their product. They failed at Change Management.
- **Sears** remained committed to their stores, catalog, brand recognition, and mail-order service. They passed on developing a website for e-commerce. They failed at Change Management.
- **Tobacco-free change.** Two years after successful implementation, the steering committee had to re-convene to respond to emerging problems. Years later, the topic was added to all new-hire orientation. These actions helped during the “sustainability” phase.

Practical suggestions and principles:

- **Make a checklist** for a process **and embed it** in the work. The list then functions like a proactive **walk-through** and proactive supervisory guidance, promoting **fidelity** (QA). For example, build the checklist into the materials or forms that are already used.
- **Policies** are at the organizational-level and are immutable, like universal laws. They are directly tied to external regulations and performance standards. **Procedures** are the internal steps that staff follow, through a process, to **meet the intent** of the relevant policy. Procedures should be written practically and reflect a continuous, unbroken process, especially at the level of the patient’s experience. They should embed hints, do’s and don’ts, and the wise experience of more advanced employees.
- **Make your goal measurable.** Make one change at a time. Use “Plan, Do, Study, Act” for each change. Measure the impact of each change. Use **PDSA cycles** until you meet your goal. **Many changes** (PDSA cycles) might be needed to meet your goal.
- **Rapid change.** Don’t be afraid of a rapid change – you can always “change back”.
- **Pilot a change** in a small area. Make improvements to the change in PDSA cycles. Then roll out the much-improved version of the change across more areas in a large-scale change project.
- **If you think you’re going too slow, slow down.** A sense of urgency is a signal to be careful.
- **Don’t ask “what” to do. Ask “who to ask”** what to do.
- **Involve the customer** in *designing* the product or process (e.g. focus group). Staff are internal customers. Patients, alumni, and referral sources are external customers. People like **choices**, and like **co-producing** the product (salad bars, certain pizza shops, etc.).
- **The “one-pager”:** reduce your project to a single page summary, and distribute that.
- **“Complaints trickle up, leadership trickles down”.**
- **“Helpfulness” vs. “Satisfaction”?** Overall, in clinical work with people, rating **satisfaction** is less helpful than rating **how helpful** something was. Satisfaction is subjective; helpfulness is practical usefulness. Both have value.
- The divisions between the three methods of QA, CQI and PI can at times be somewhat arbitrary; **convene a leadership team** meeting that examines and manages them on a sustained basis.
- **Example: Printing** these 2 pages double-sided, and **laminating** and **3-hole punching** them, would be a living/breathing example of applying this material in a novel scenario. And they would then serve as an emblematic practical reminder, and an embedded enactment/metaphor.