

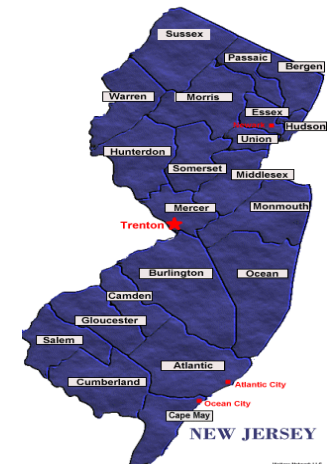
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# Quality Improvement Strategy

## New Jersey



EHDI State Coordinator Meeting  
March 11, 2015  
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# Our NICHQ Experience

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Love / Hate



(great outcomes / a lot of work)

# **Improvement Through Active Stakeholder Participation**

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- **Why was this strategy tested?**

History has shown that without stakeholder team participation & buy-in, QI initiatives lack follow through. We need a committed, active NICHQ Team.

- **What was the process for identifying the strategy?**

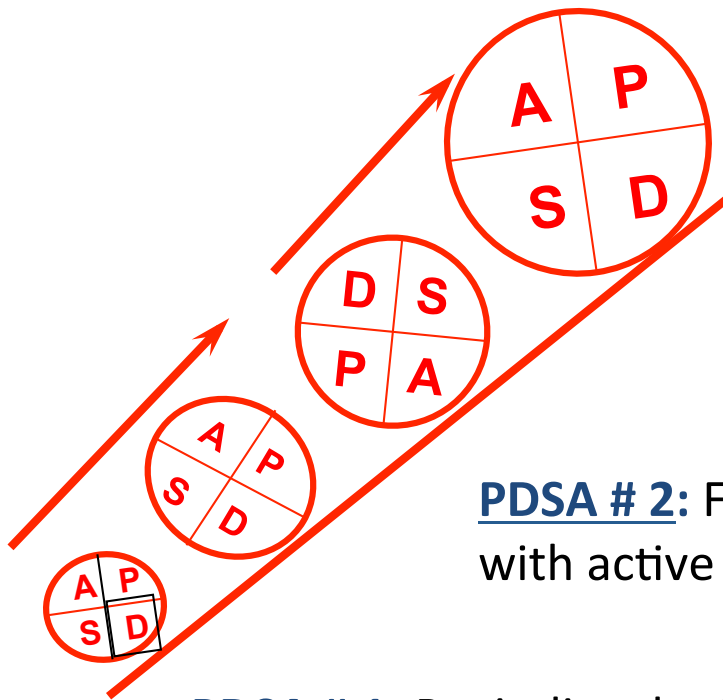
Collaborative brainstorm on why QI initiatives don't get far off the ground.  
Need to start from scratch and form an active & effective team.

- **What is the potential for the strategy to improve LTFU/D?**

Building an active team is rudimentary & foundational step in order to act on PDSA cycles to improve infant LTFU/D.

# PDSA cycles

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**PDSA #3**: New Jersey QI Stakeholders Committee(NJQISC) with it's Focus Teams (sub-committees)

**PDSA # 2**: Fill the Roles of non-respondents with active team members

**PDSA # 1**: Revitalize the NICHQ QI team

# PDSA #1

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- **Plan-** Continue with the multidisciplinary NICHQ QI team: Needed to determine who was truly interested in being active and who was not. Poll members for time of day/day of week preference for meetings.
- **Do-** Contacted members through email. Non-respondents were attempted to be contacted twice
- **Study-** The roles that non-respondents were important and needed to be filled with active participants.
- **Act- Adapt.** Need to recruit new members for those roles

# PDSA #2

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- **Plan-** Need to recruit new members to fill critical roles with in the NICHQ QI team
- **Do-** Recruitment was via email to hospital contact list, other statewide contacts and recommendations from current members
- **Study-** Critical roles were filled with participants willing to be apart of the team and active.
- **Act- Adapt.** Those participants desired a team focus corresponding to their expertise and system involvement, with less scheduled meetings for the entire team.

# PDSA #3

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- **Plan-** Form a multidisciplinary umbrella team New Jersey QI Stakeholders Committee(NJQISC) in order to have more focused sub-teams. The entire team is currently a 38 member (multidisciplinary) team, consisting of a Core Team, Audiology Team, and the Entire extended team.
- **Do-** NJQISC conference calls for the entire team only occur bimonthly. To build team involvement, we request volunteers to take roll, write meeting summaries, act as a “Tone Keeper”. Emailing the agenda and meeting handouts are important organization anchors that acknowledges the valuing team member’s time is being used for an efficient meeting. The focus teams can meet more often or more informally to work PDSAs
- **Study-** Conference call attendance, *participation in the focus teams*, & understanding
- **Act- Adopt.** Will develop next month’s agenda, send out follow-up information, update progress on work plans.

# Moving Forward

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- **Next PDSA Cycle?**

- Make sure all Team Members have gone through EDHI 101 & PDSA 101
- Establish additional Focus Teams and ensure there is Parent Infusion: Medical Home, Audiology, EI, Hospital Referral Follow-up.

- **Overall what have you learned from testing this strategy?**

Make meeting time use for the team members as efficient as possible and group like minded / motivated individuals together.

- **What advice would you give to other states who want to test this strategy?**

When forming a motivated team or revitalizing an existing team, it is important to make sure that the participants are valued and have an active role. Having focus teams is an effective approach to achieve that, in that they are more agile in size and have more visibility for the team members' accomplishments.

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# Our NJ Dream Team!

