



# Quality Indicators Project

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# Phase II mandate:

Define an international set of indicators that describe quality occupational therapy in an interdisciplinary practice context



# Objectives:

- Describe the quality indicators framework
- Outline the indicators implementation process
- Apply the indicators to different practice settings
- Receive feedback



# Project goal:

Develop a basket of quality indicators to provide a choice of measures to evaluate quality issues of highest priority



# Quality indicators:

- Measurement tools, screens or flags
- Used as guides to document, monitor, evaluate and improve quality of occupational therapy service



# Quality indicators:

- Provide summary information
- Allow generalizations
- Are context specific
- Have different purposes in different environments



# Quality of service:

Degree to which occupational therapy:

- Increases desired health outcomes;
- Reflects current professional knowledge;
- Reflects evidence-based practice.

(Adapted from Mainz, 2003).





# Quality of service goals:

- Improve population health outcomes;
- Enhance satisfaction; and
- Reduce costs.

(Berwick, Nolan & Whittington, 2008)



# Benefits for occupational therapy:

- Identify and measure the unique contribution of occupational therapy to different settings;
- Create the evidence base of the profession; and
- Assure value based and client-centered services.

(Leland et al, 2015)



# Indicator characteristics:

- Applicable to all occupational therapists;
- Inclusive of differing cultures and levels of economic development;
- Consistent with basic tenets of occupational therapy;
- Relevant from a population, organization, team or individual perspective



# Quality framework:

- Describes 56 generic quality indicators
- Organized in matrix model
- Guides selection of a coherent, relevant and balanced set of indicators



# Quality framework:

Dimensions define what is measured

Perspectives define how quality is measured



	Quality Perspectives		
	Structure	Process	Outcome
Quality Dimensions	Accessibility		
	Appropriateness		
	Effectiveness		
	Efficiency		
	Person-centredness		
	Safety		
	Sustainability		

# Quality dimensions:



Quality Dimensions	Accessibility	Ease in obtaining services
	Appropriateness	Right services, person, time, place
	Effectiveness	Evidence-based service only to those who benefit
	Efficiency	Optimal use of resources for maximum results
	Person-centredness	The experience of receiving service
	Safety	Reduction of risk and avoidance of harm
	Sustainability	Use of resources without compromising the health of current or future generations.

# Quality perspectives:



Quality Perspectives		
Structure	Process	Outcome
Environmental factors and resources	How service is delivered	Changes occurring because of service

# Structure indicators:

What things need to be in place?



Quality Dimension	Structure indicators
Appropriateness:	Percentage of occupational therapists that participate in continuing professional development to meet their education needs.



# Process indicators:

How is quality occupational therapy service delivered?



Quality Dimension	Process indicator
Efficiency:	Compliance with productivity expectations.

# Outcome indicators:

How will we know we have achieved our goal?



Quality Dimension	Outcome indicator
Safety:	The frequency of incidents involving a breach of duty of care to perform professional duties to the standard expected of a reasonably skilled occupational therapist.



<b>Structure</b>	<b>Process</b>	<b>Outcome</b>
Environmental factors and resources	How service is delivered	Changes occurring because of service



## Quality Indicator Implementation Process:

1. Describe the practice.
2. Understand the context.
3. Identify quality priorities.
4. Review practice in relation to quality dimensions.
5. Define practice specific SMART indicators.
6. Implement indicators and trend data.

# Step 1: Describe the practice:

- Mission
- Population served
- Services offered
- Practice location
- Setting
- Practitioners
- High risk, high volume or high impact activities



## Step 2: Understand the context:

Strengths	Weaknesses
Opportunities	Threats



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## Step 3: Identify quality priorities:

- Who?
- What?
- Where?
- Why?
- When?
- How?



## Step 4: Review practice in relation to quality indicators:

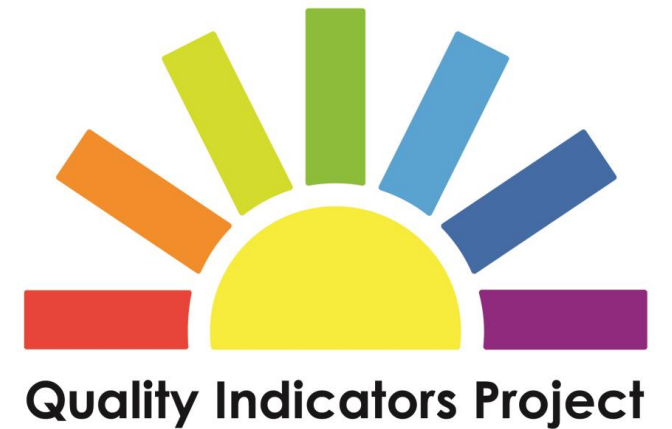
- What does quality look like?
- What things need to be in place?
- How should quality be provided?
- How will we know we have achieved our goal?





# Step 5: Define practice SMART indicators:

- **S**pecific
- **M**easurable
- **A**greed upon
- **R**elevant
- **T**imely



## Step 6: Implement indicators and trend data:

- What is the scope of the issue?
- What trends are evident?
- What is the impact of change?





## Case study:

1. Describe the practice.
2. Understand the context.
3. Identify quality priorities.
4. Review practice in relation to quality dimensions.
5. Define practice specific SMART indicators.
6. Implement indicators and trend data.

# Step 1: Describe the practice:

- Mission – Provide quality driver rehab services
- Population served – individuals with physical, mental health or cognitive issues
- Services offered – Driver rehab services
- Practice location – Large urban centre
- Setting – Community clinic
- Practitioners – Three occupational therapists



# Step 1: Describe the practice:

- High volume – Older adult assessments
- High risk issues – Potential for crashes
- High impact activities – Potential for reduced community mobility



## Step 2: Understand the context:

<p><b>Strengths</b></p> <ul style="list-style-type: none"><li>-Services well regarded</li><li>-Experienced staff</li></ul>	<p><b>Weaknesses</b></p> <ul style="list-style-type: none"><li>-Long waiting list</li></ul>
<p><b>Opportunities</b></p> <ul style="list-style-type: none"><li>-New legislation</li></ul>	<p><b>Threats</b></p> <ul style="list-style-type: none"><li>-Shortage of occupational therapists</li></ul>



## Step 3: Identify quality priorities:

- Long wait times
- Staff shortages
- Inefficient referral procedures



# Step 4: Review practice in relation to quality indicators:

Quality Dimensions	Generic Indicators:	
	Accessibility	Availability of occupational therapists to provide occupational therapy.  Average wait time to access occupational therapy services.
	Appropriateness	
	Effectiveness	
	Efficiency	
	Safety	



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## Step 5: Define practice SMART indicators:

- *The average time for older adults to be seen for a driving assessment after a referral is received.*



## Step 6: Implement indicators and trend data:



- Average wait time dropped by 50% from 120 to 60 days
- Improved efficiency and satisfaction with services
- Measures of appropriateness, effectiveness and safety remained unchanged



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# Questions?

# Exercise:

- Define an indicator for a priority quality issue faced in practice





## Exercise Process

1. Choose a quality priority faced in practice.
2. Briefly describe the context of the issue.
3. Review the issue in relation to quality dimensions.
4. Define a SMART indicator to monitor the quality priority.

# 1. Identify a quality priority:

- What factors influence quality of service?
- How can the strengths be used to address quality opportunities?
- How can risks and threats to service quality be avoided?



## 2. Briefly describe the context of the issue:

### Strengths

What is done well?  
What unique services are provided?

### Weaknesses

What concerns have been identified?

### Opportunities

Unmet needs?  
System priorities?

### Threats

Obstacles?  
Expected changes?

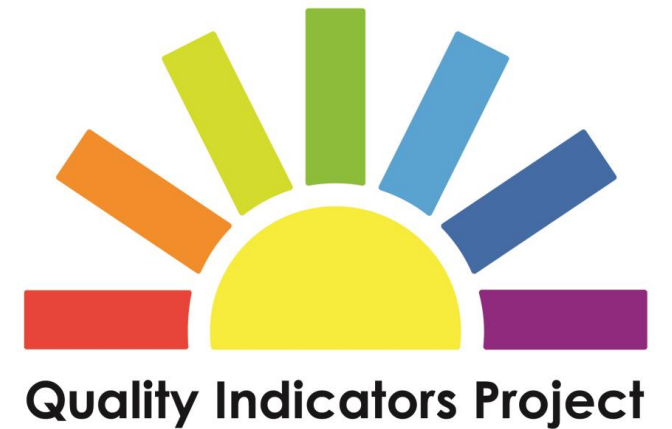
# 3. Review issue in relation to quality dimensions:

Quality Dimensions	Accessibility	Ease in obtaining services
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## 4. Define a practice specific SMART indicator

**S**pecific  
**M**easurable  
**A**greed upon  
**R**elevant  
**T**imely





## Exercise Process

- |    |   |
|----|---|
| 1. | Choose a quality priority faced in practice.<br><b>Five minutes</b>             |
| 2. | Briefly describe the context of the issue.<br><b>Five minutes</b>               |
| 3. | Review the issue in relation to quality dimensions.<br><b>Ten minutes</b>       |
| 4. | Define a SMART indicator to monitor the quality priority.<br><b>Ten minutes</b> |

# Project next steps:

- Consultation study
- Pilot trial



# Feedback questions:

1. How useful is the quality indicator framework?
2. Are there any gaps/areas lacking clarity?
3. What types of resources are necessary to help with use in occupational therapy practice?
4. Other comments?



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