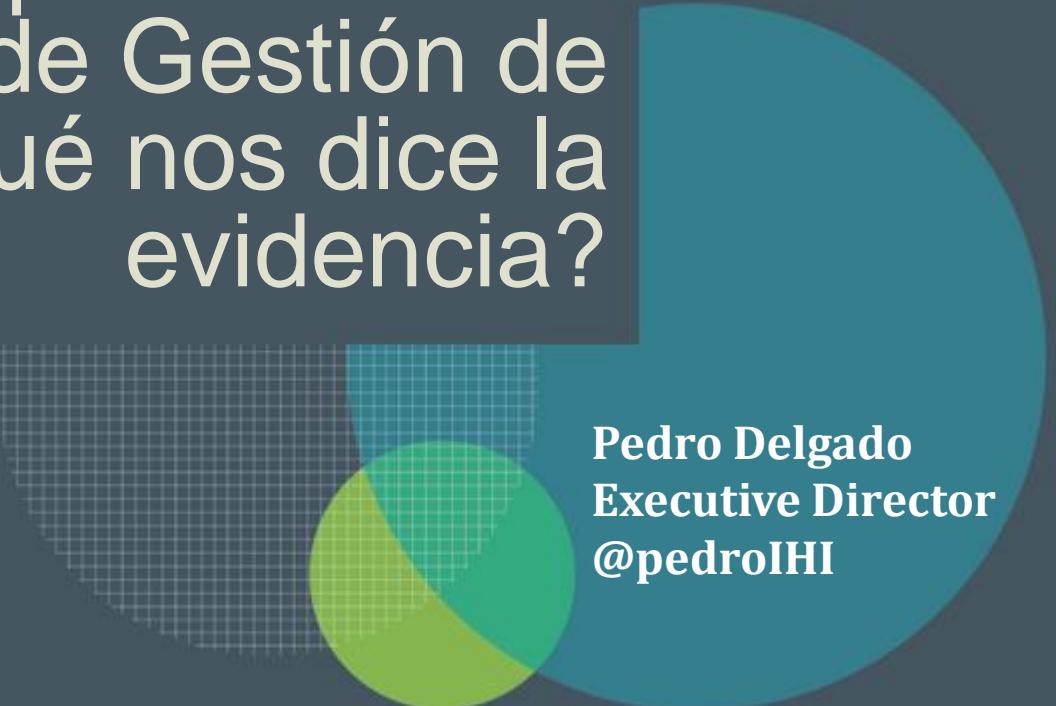


Estrategias efectivas de cambio en la implementación de Programas de Gestión de Calidad: ¿Qué nos dice la evidencia?



Pedro Delgado
Executive Director
[@pedroIHI](https://twitter.com/pedroIHI)

EI Norte

Innovation Series 2008



Seven Leadership Leverage Points

For Organization-Level Improvement in Health Care

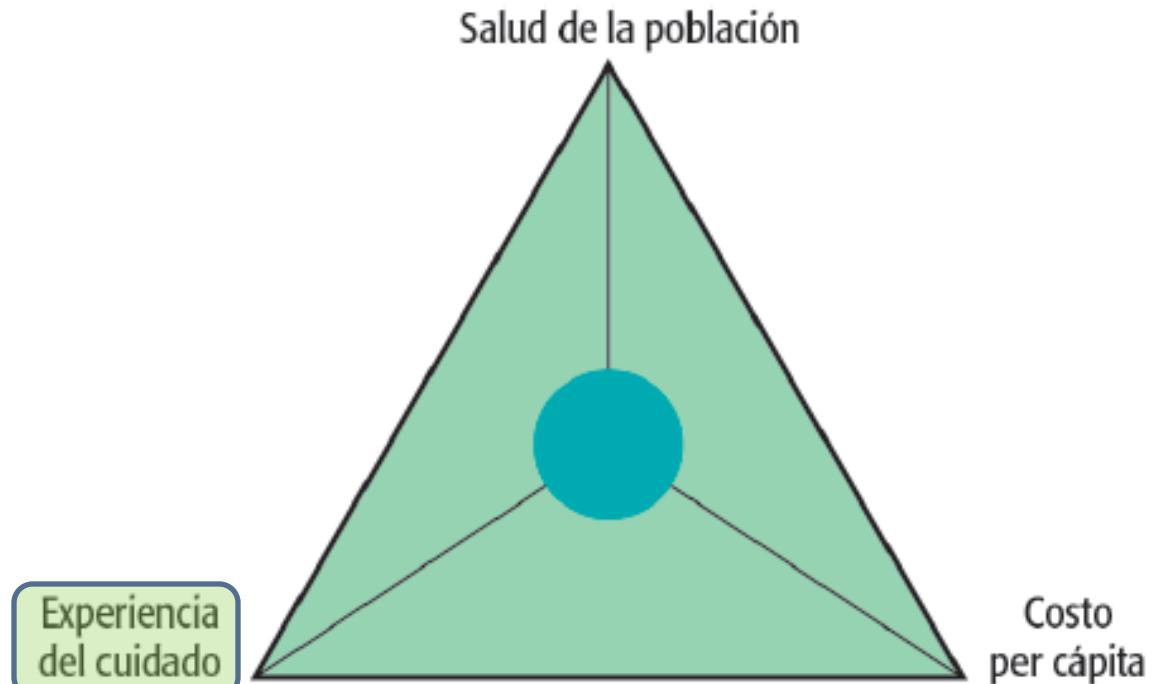
Second Edition

www.ihi.org



Norte: Triple Meta del IHI?

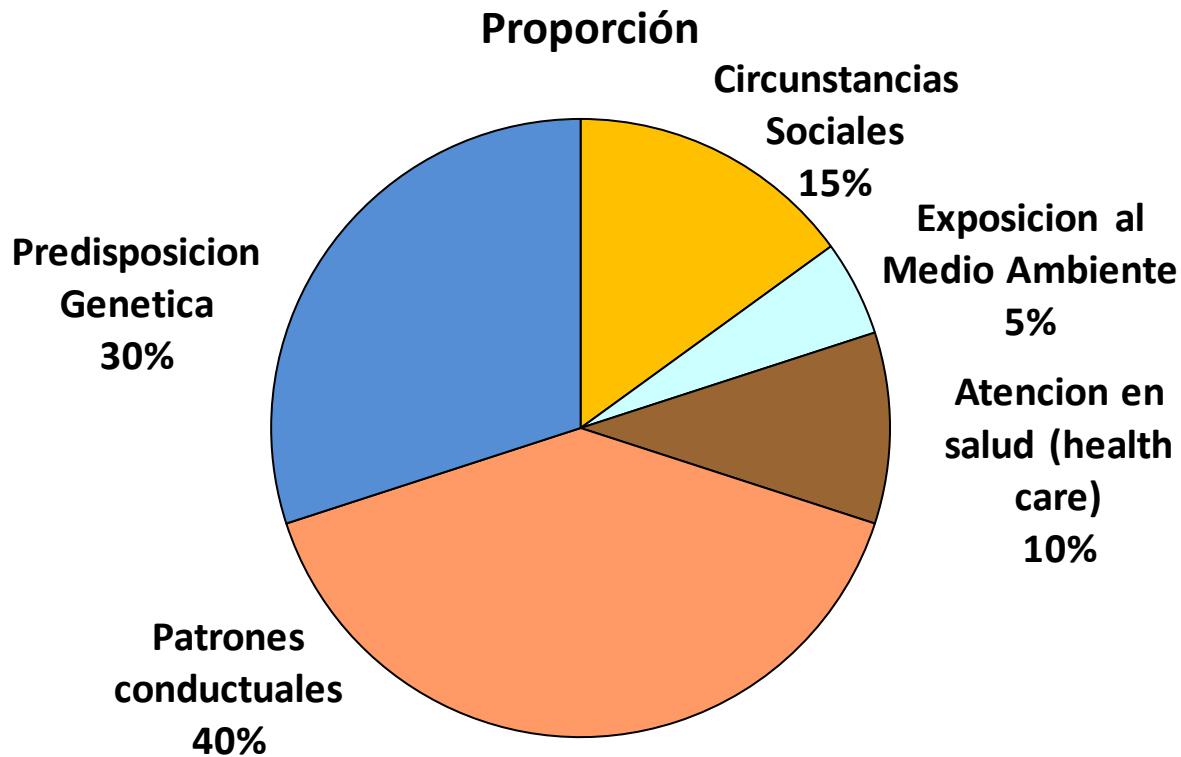
- Segura
- Oportuna
- Eficiente
- Eficaz
- Equitativa
- Centrada en el paciente



Advertencia:
El futuro requiere
paradigmas
distintos



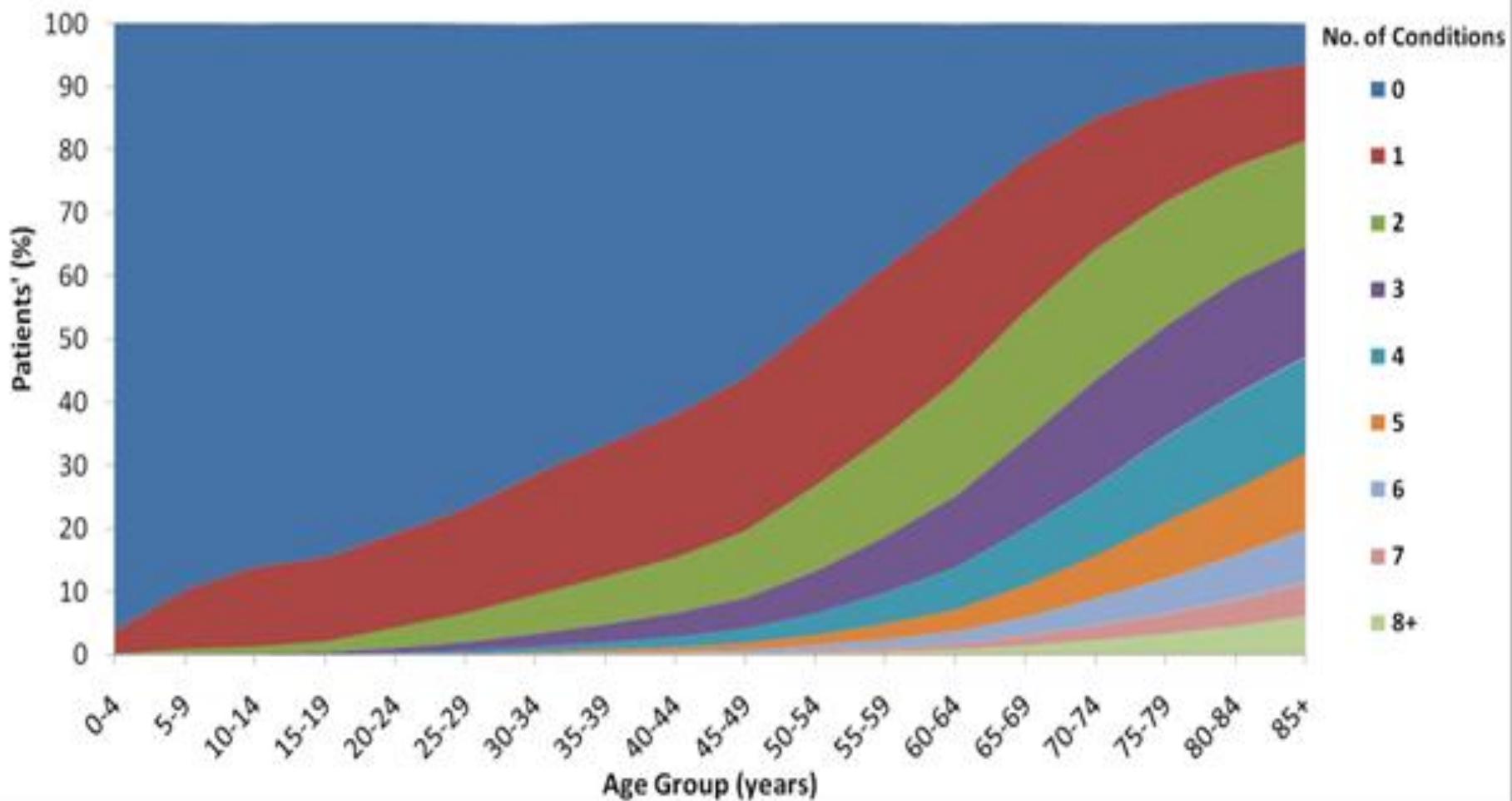
Determinantes de la Salud y su contribución a muertes prematuras



Adapted from: McGinnis JM, Williams-Russo P, Knickman JR.
The case for more active policy attention to health promotion. Health Aff
(Millwood) 2002;21(2):78-93.



Morbidity (number of chronic conditions) by Age Group



Source: The Scottish School of Primary Care's Multimorbidity Research Programme, 2010





Automated Hovering in Health Care — Watching Over the 5000 Hours

David A. Asch, M.D., M.B.A., Ralph W. Muller, M.A., and Kevin G. Volpp, M.D., Ph.D.

5000 horas
(tener v ser)





3 estrategias

1. Pacientes como activos
2. ‘Psicoterapia vs Psicofarmacología’
3. Transparencia





H



Effects of quality improvement in health facilities and community mobilization through women's groups on maternal, neonatal and perinatal mortality in three districts of Malawi: MaiKhanda, a cluster randomized controlled effectiveness trial

Tim Colbourne^{a,*}, Bejoy Nambiar^a, Austin Bondo^b, Charles Makwenda^b, Eric Tsetekani^b, Agnes Makonda-Ridley^b, Martin Msukwa^b, Pierre Barker^c, Uma Kotagal^d, Cassie Williams^e, Ros Davies^e, Dale Webb^f, Dorothy Flatman^f, Sonia Lewycka^a, Mikey Rosato^a, Fannie Kachale^g, Charles Mwansambo^h and Anthony Costello^a

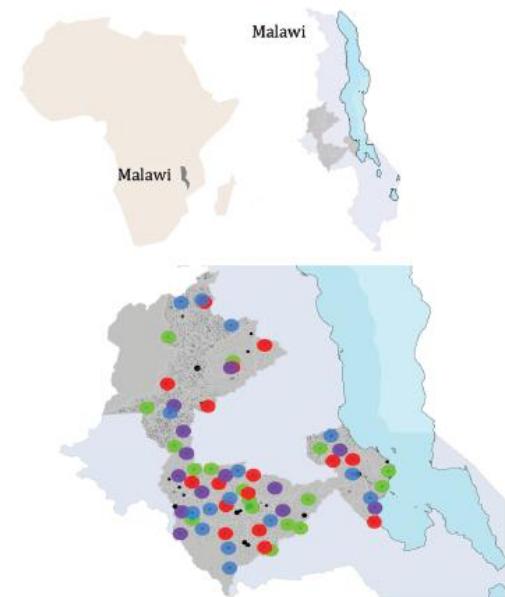
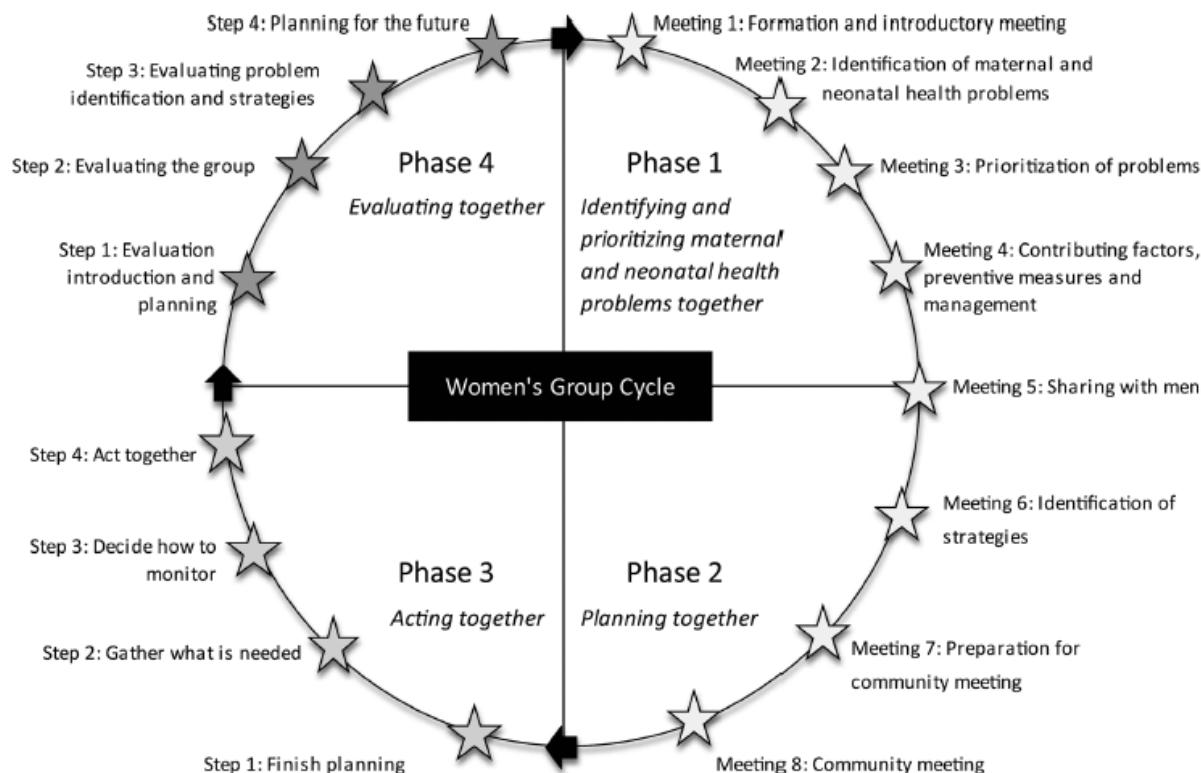


Figure 2. MaiKhanda Women's Group Action Cycle followed by the women's groups.

Intervención en centros de salud y en comunidad



Experticia local



Grupos de mujeres líderes

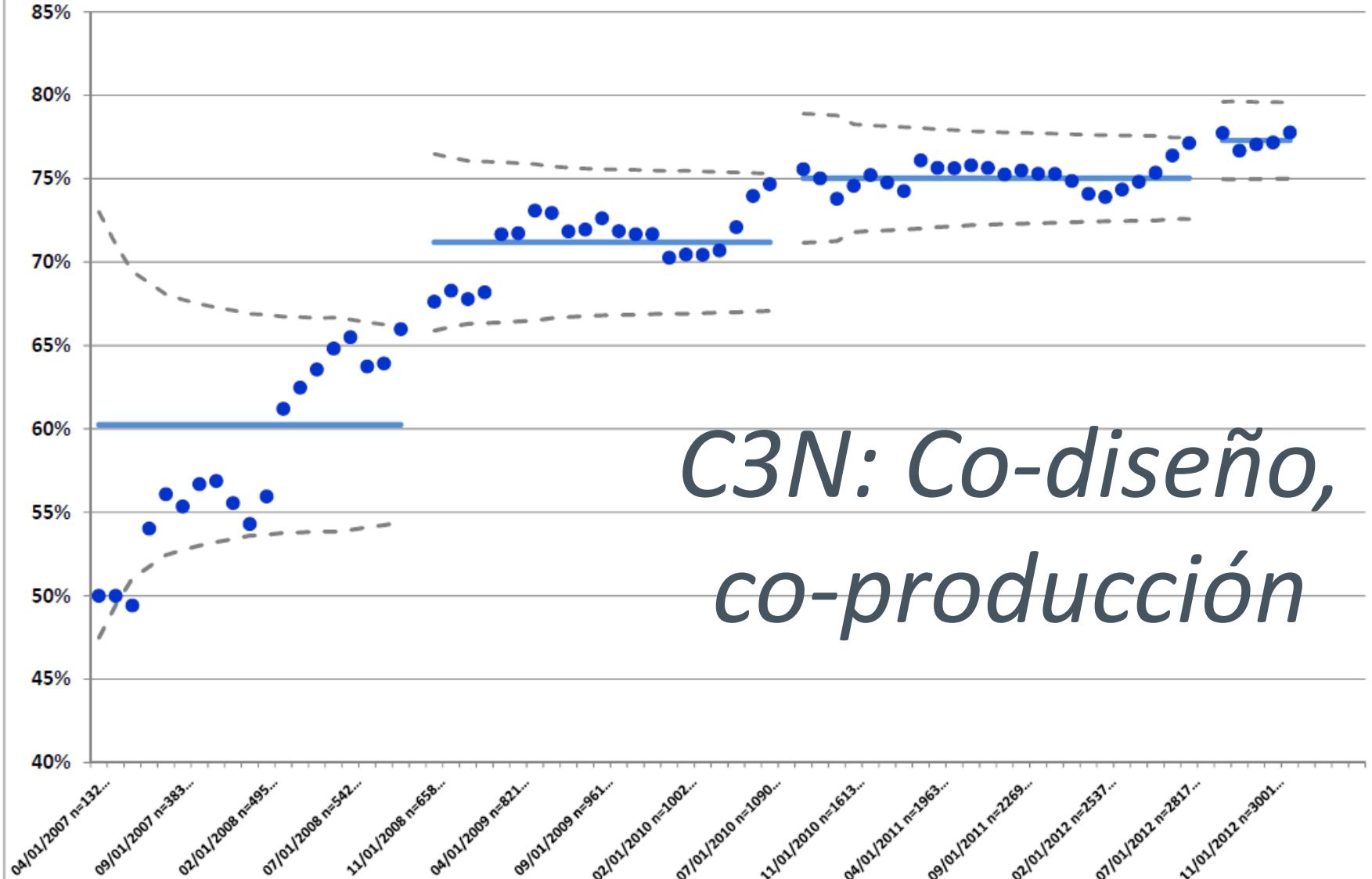


3 aprendizajes de Malawi

1. Las historias clínicas *son de los pacientes*, que le brindan acceso a los proveedores;
2. Sistemas confiables para recolectar y analizar datos para mejorar los procesos
3. El sistema de salud va mas allá de las paredes de los centros de salud u hospitales



Percent of IBD Patients in Remission (PGA)



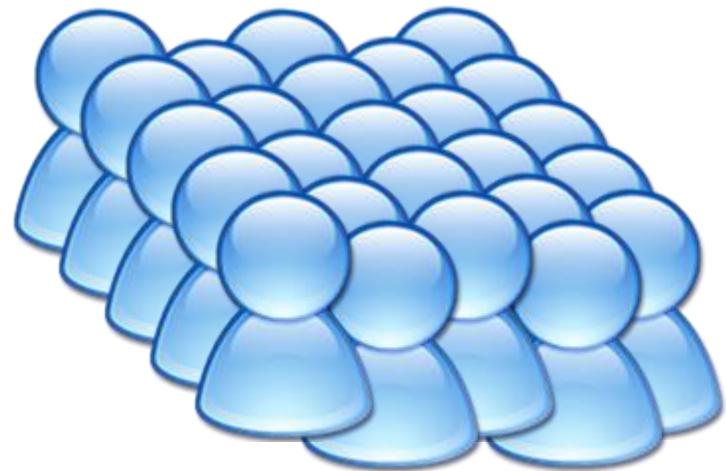
2. Psicoterapia v psicofarmacología

Un marco
Claridad de Norte
Formación en mejora continua



Epidemia de salud mental....

2007



Number of American adults receiving disability benefits because of MH disorders

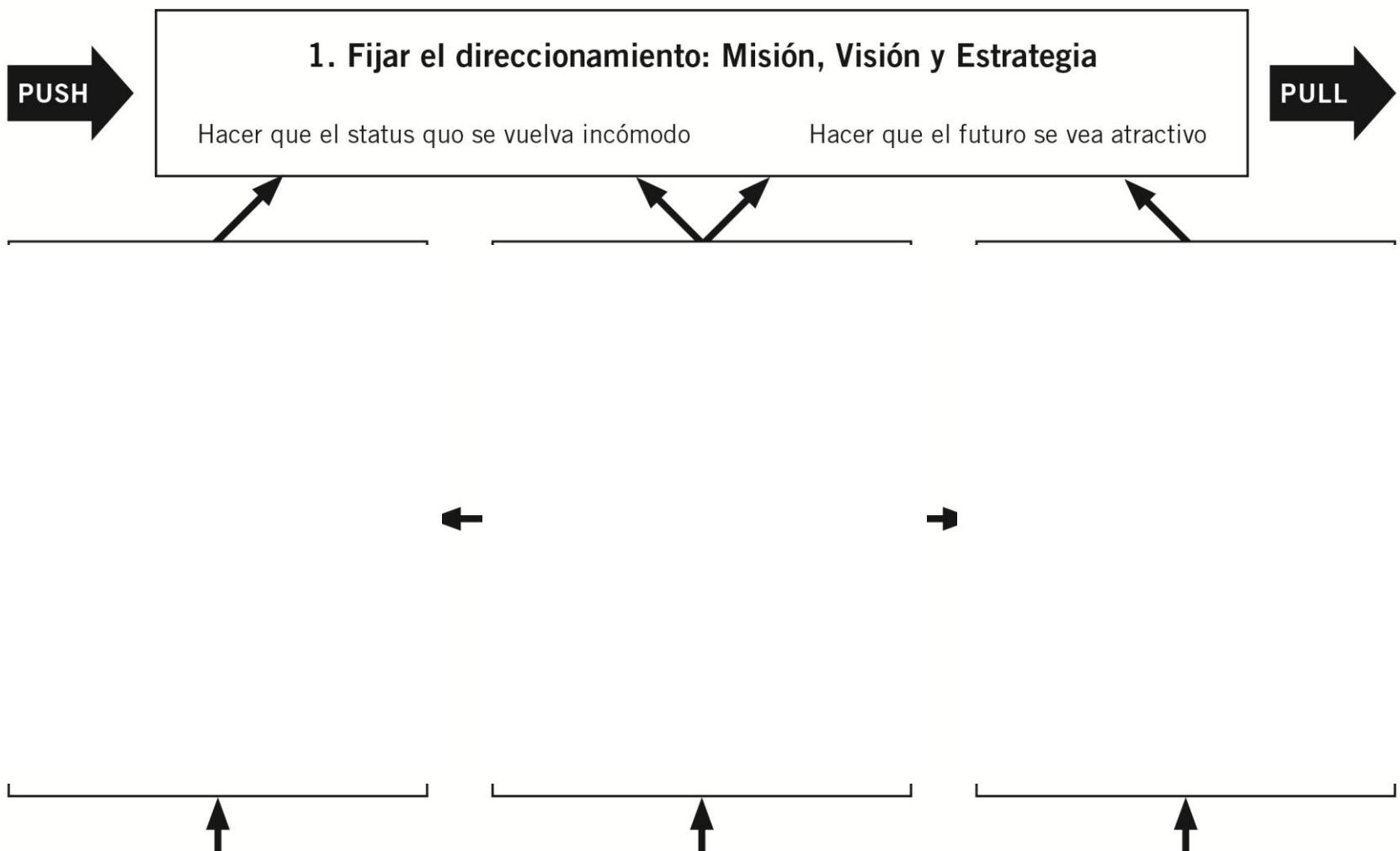
Epidemia de salud mental....

2007

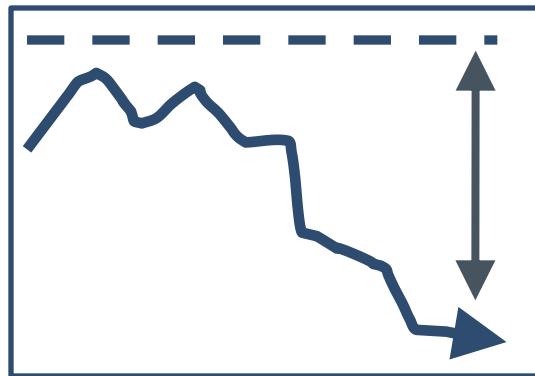
35X

Number of American children for whom MH disabilities were claimed





Implementación



La “Brecha”



EXITO / SOSTENIBILIDAD



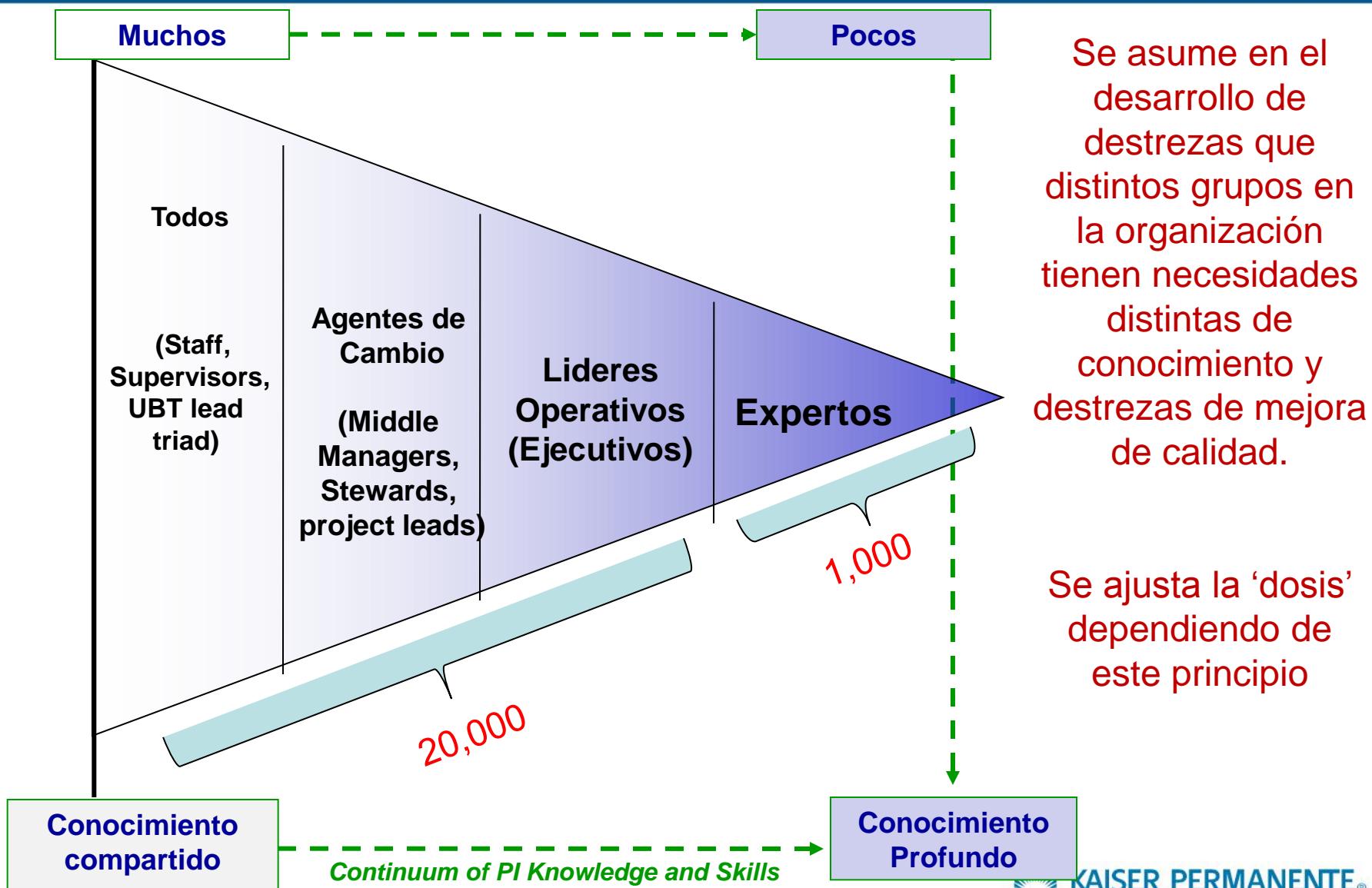
Enfoque en la implementación

- Medición (procesos y resultados) y sistema de aprendizaje, transparente
- Clara teoría del cambio, descrita en ‘driver diagrams’ a distintos niveles, con metas específicas (ambiciosas)
- ‘Todos a bordo’: alineación del sistema (políticas, macro, meso, micro; liderazgo comprometido)
- Capacitación en calidad y seguridad del paciente (destrezas a todo nivel)
- Diseño a gran escala desde el comienzo – expansión y sustentabilidad



DESARROLLO DE CAPACIDADES

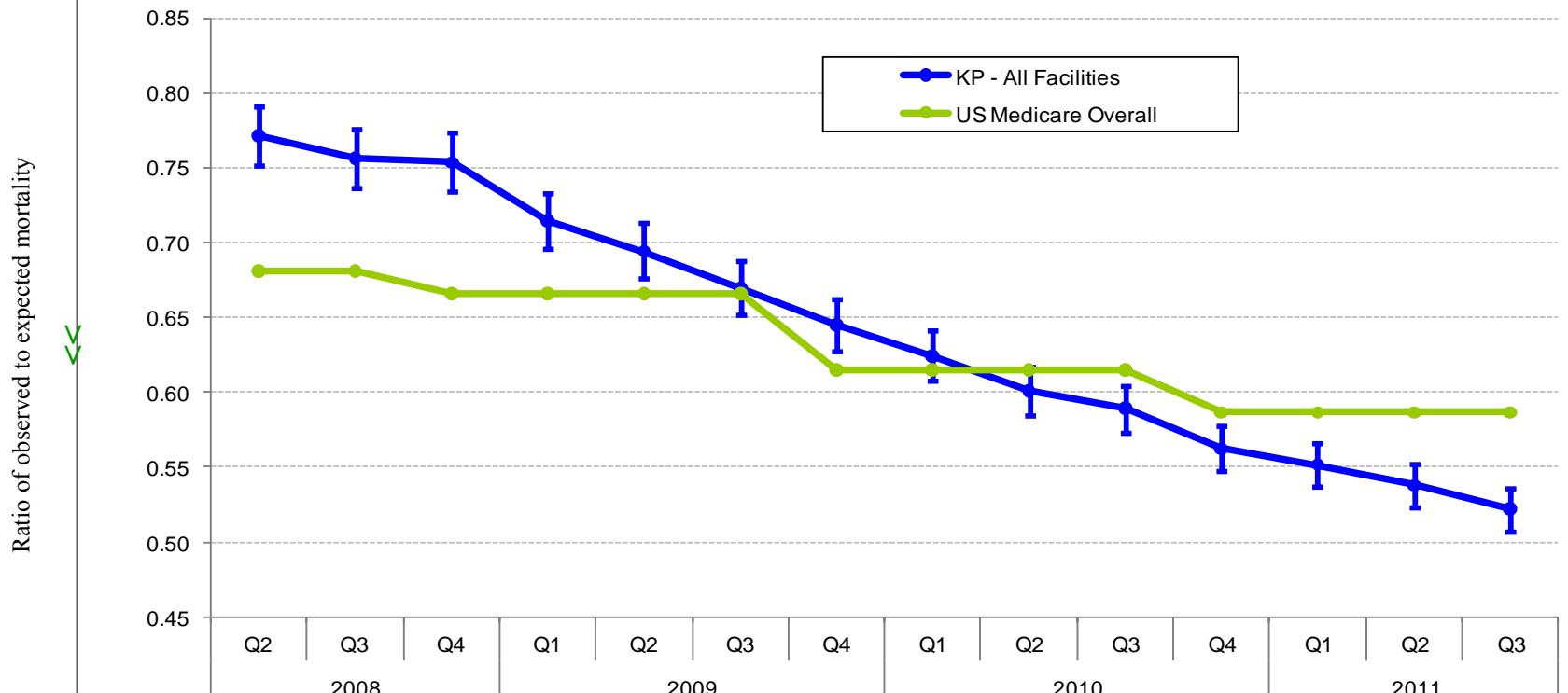
NATIONAL
Performance
Improvement



Reducción de mortalidad estandarizada

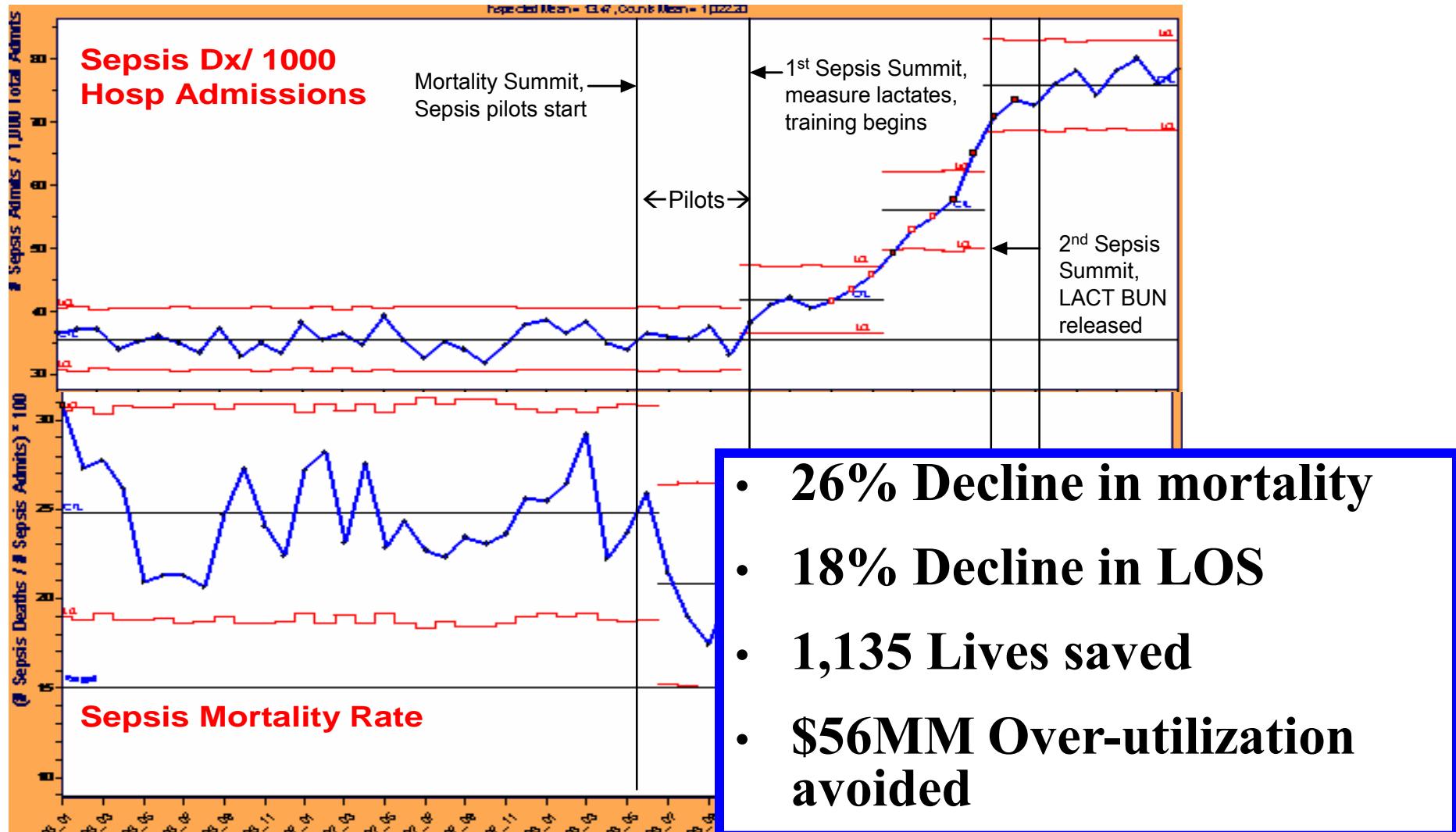
NATIONAL
Performance
Improvement

Inpatient Outcomes: Hospital Standardized Mortality Ratios

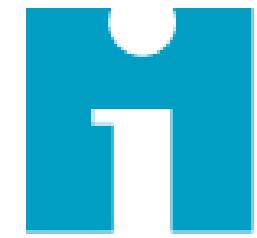


Reducción de Mortalidad por Sepsis Severa

NATIONAL
Performance
Improvement



*Mojarse los pies, comenzar a darle
forma a un futuro mejor*



Institute for
Healthcare
Improvement

Open School

www.ihi.org/openschool



Online Courses

Patient Safety

Topic Leader: Lucian Leape, MD, Adjunct Professor of Health Policy, Dept. of Health Policy Management, Harvard School of Public

PS 100: Introduction to Patient Safety

PS 101: Fundamentals of Patient Safety

PS 102: Human Factors and Safety

PS 103: Teamwork and Communication

PS 104: Root Cause and Systems Analysis

PS 105: Communicating with Patients About Adverse Events

PS 106: Introduction to the Culture of Safety

Quality Improvement

Topic Leader: Lloyd Provost, MS, Statistics Senior Improvement Advisor, Associate for Process Improvement

QI 101: Fundamentals of Improvement

QI 102: The Model for Improvement: Engine for Change

QI 103: Measuring for Improvement

QI 104: Making, Spreading, and Sustaining Improvement: How the Work Gets Done

QI 105: The Human Side of Quality Improvement

QI 106: Level 100 Tools

QI 201: Guide to the IHI Open School Improvement Practicum

Patient- and Family-Centered Care

Topic Leaders: James Conway, MS, Faculty,



CERTIFICATE OF COMPLETION

IHI OPEN SCHOOL FOR HEALTH PROFESSIONS

THIS CERTIFICATE IS AWARDED TO

James Smith

IN RECOGNITION OF SUCCESSFUL COMPLETION OF

THE BASIC CURRICULUM COMPRISING TWENTY-TWO HOURS OF ONLINE LEARNING IN THE AREAS OF

QUALITY IMPROVEMENT, PATIENT SAFETY, LEADERSHIP,
PATIENT- AND FAMILY-CENTERED CARE, AND
MANAGING HEALTH CARE OPERATIONS



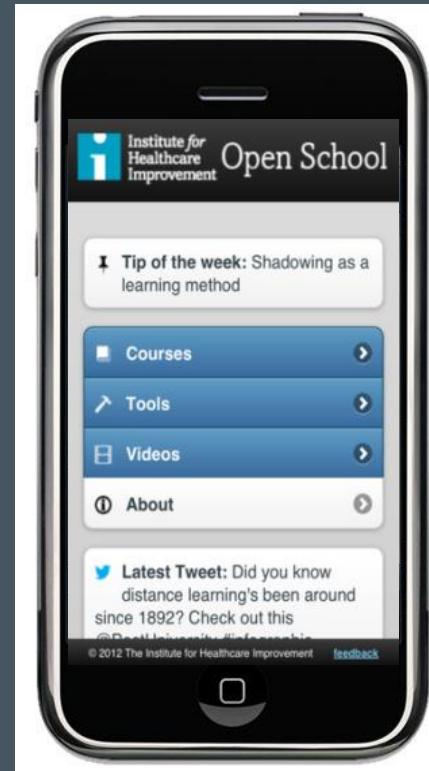
Maureen Bisognano

Maureen Bisognano
President and CEO
Institute for Healthcare Improvement

11/12/2012 4:30:44 PM

ff527bae-12eb-42c1-900e-b8398ef9f45a

Visit <http://courses.ihi.org>





Otorga el presente Diploma a

Joaquín Zarco Rábago

Por haber completado exitosamente el

*Diplomado “Mejora de la Calidad, Seguridad
del paciente y Liderazgo en Salud”*

Emitido en la Ciudad de Monterrey

El 16 de agosto de 2012



Dr. Jorge E. Valdez García
Director
Escuela de Medicina y Ciencias de la Salud
Tecnológico de Monterrey

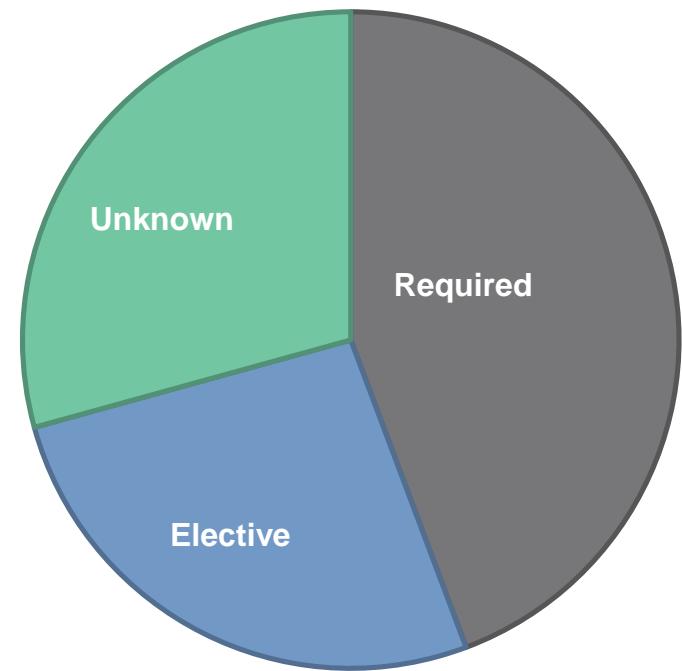
Dr. Germán Fajardo Dolci
Subsecretario de Integración y Desarrollo
del Sector Salud
Secretaría de Salud

Open School en el Curriculum

<http://www.ihi.org/offerings/IHIOpenSchool/Courses/Pages/OSInTheCurriculum.aspx>

- **62** universidades reportaron que exigen los cursos como requisito para graduacion
 - **30** requieren el Basic Certificate
- **37** ofrecen los cursos como **electivas**
- **41** centros academicos que no especificaron la manera de uso
- **60+** organizaciones de salud utilizan los cursos para entrenar residentes

IHI Open School en el Curriculum



University of Toronto



United Kingdom Chapter Congress



Asir Primary Healthcare Sector of Saudi Ministry of Health – Saudi Arabia



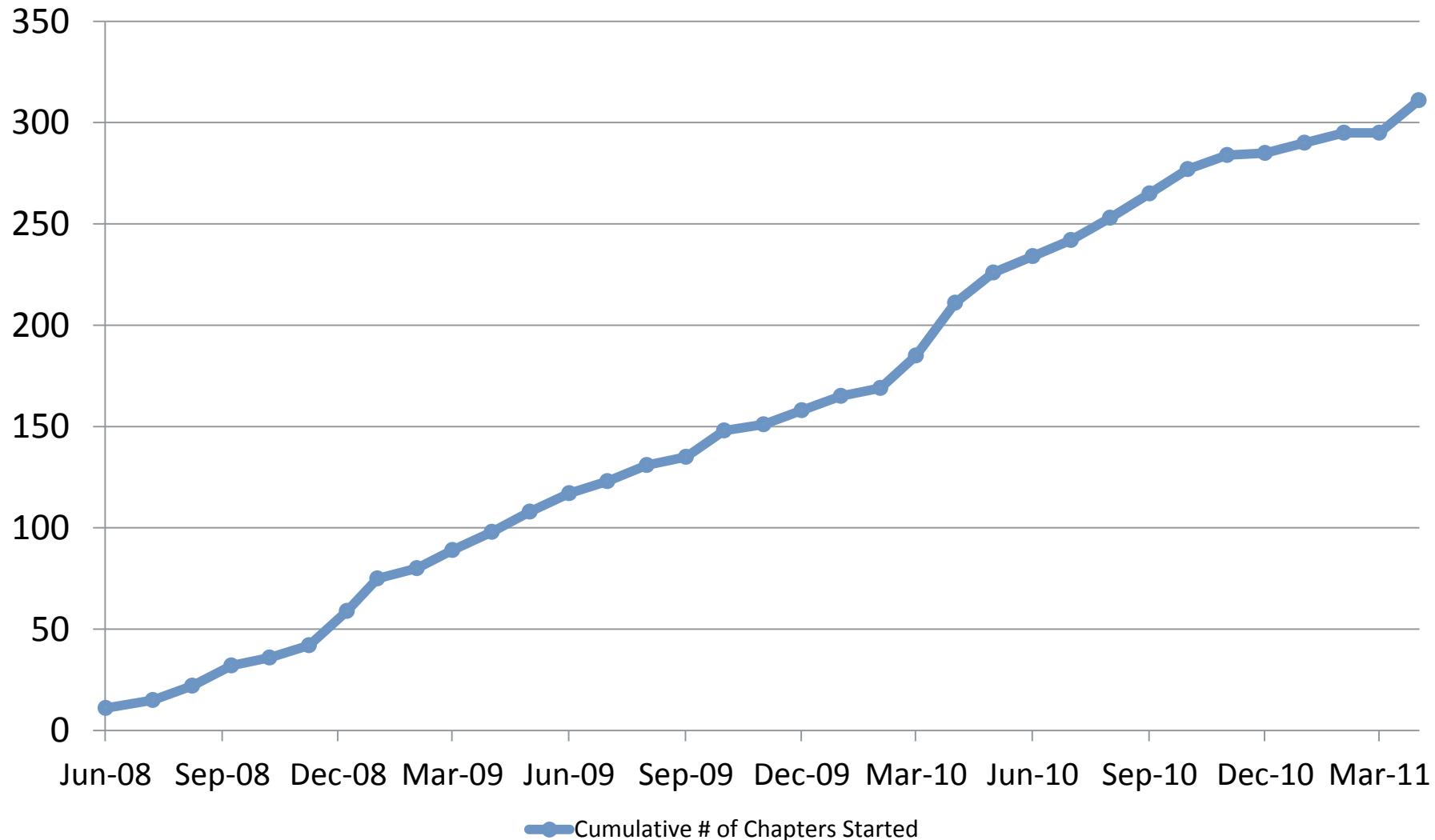
South Dakota Chapter



Muhimbili University of Health and Allied Sciences – Tanzania



de Capitulos



Expansión escalonada

CONTEXTO

- Ghana (33m, pobreza) 2008
- < 5 = 76/1000
- NCHS, MinSal, Gates-IHI

CONTENIDO

- MDGs:
mortalidad < 5

MECANISMO

- Iniciativa Nacional de 5 años (colaborativa y desarrollo de destrezas de mejora)
- Expansión nacional escalonada



Comienzo pequeño, rápida expansión con un 'paquete de cambio (change package)

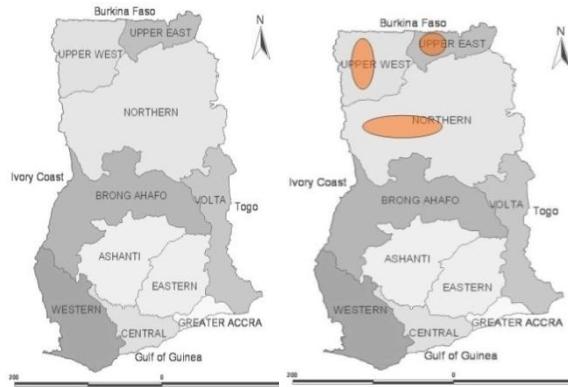
Total Pop'n: 350,000
Under 5 Pop'n: 60,000

5 million
500,000

11 million
1.7 million

11 million
1.7 million

22 million
3.3 million



Nov 2007

Jul 2008

Sept 2009

Oct 2009

Aug 2012

Jan 2013

Start-up:
months
1 – 8

Wave 1:
months
9 – 22

Wave 2:
months
23 – 63

Wave 3:
months
24 – 89

Wave 1R:
months
58 – 89

Wave 4:
months
63 – 89

*Referral project launch
41 Referral Teams

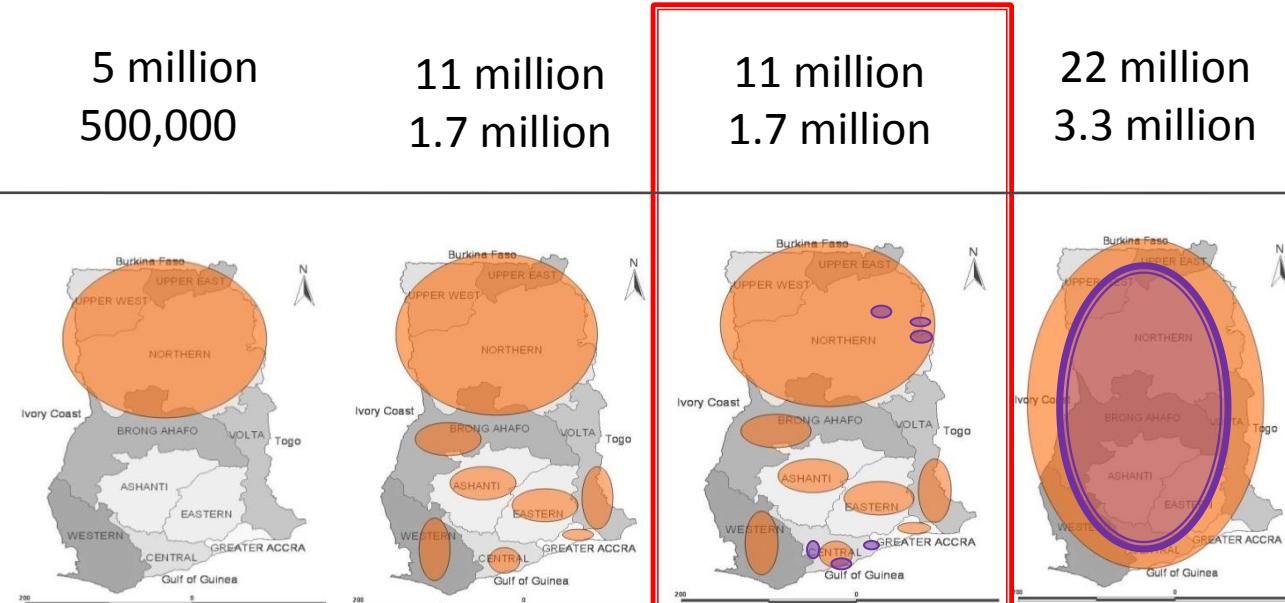
No of. QI Teams: 30

258

350

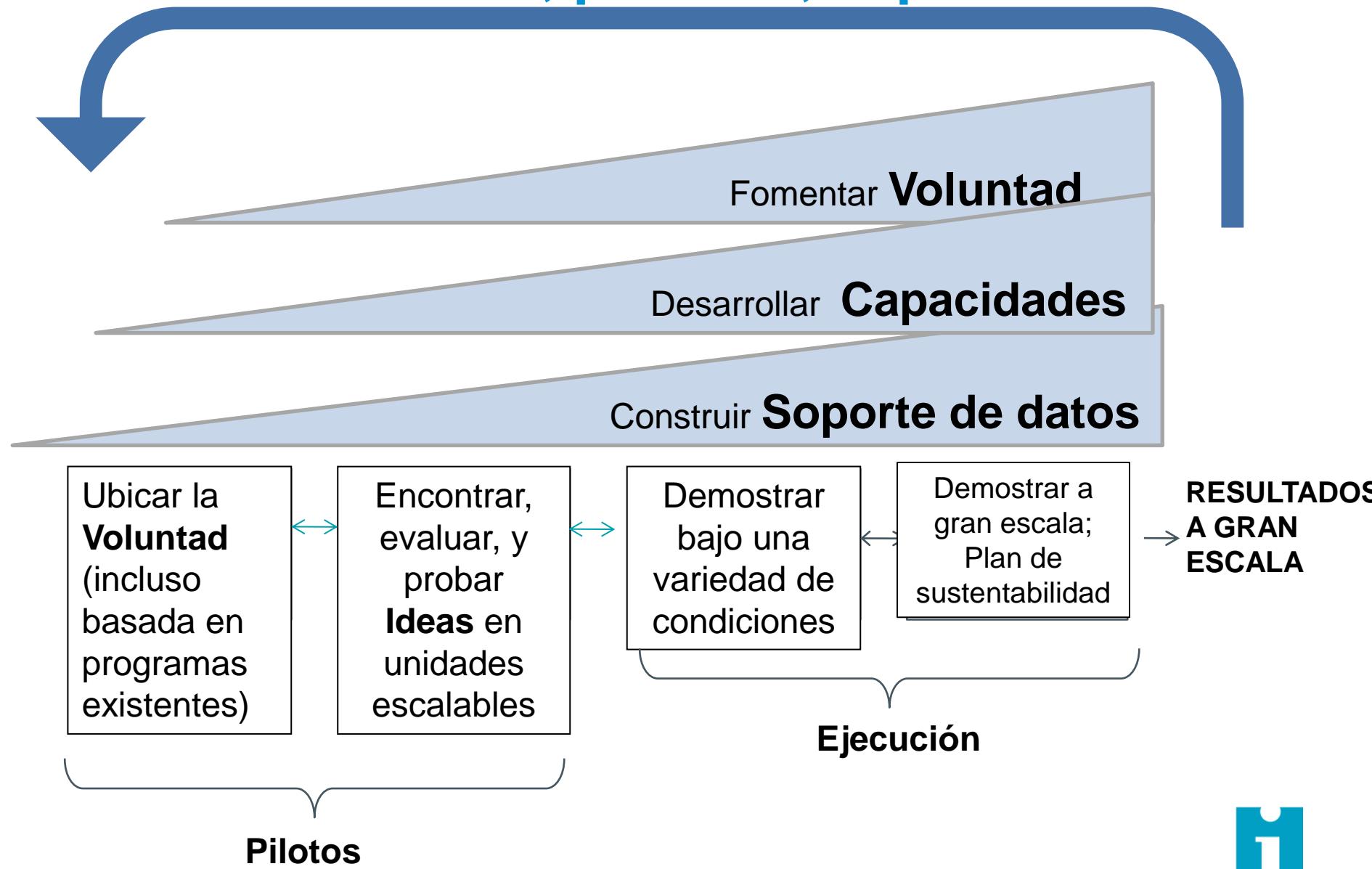
369

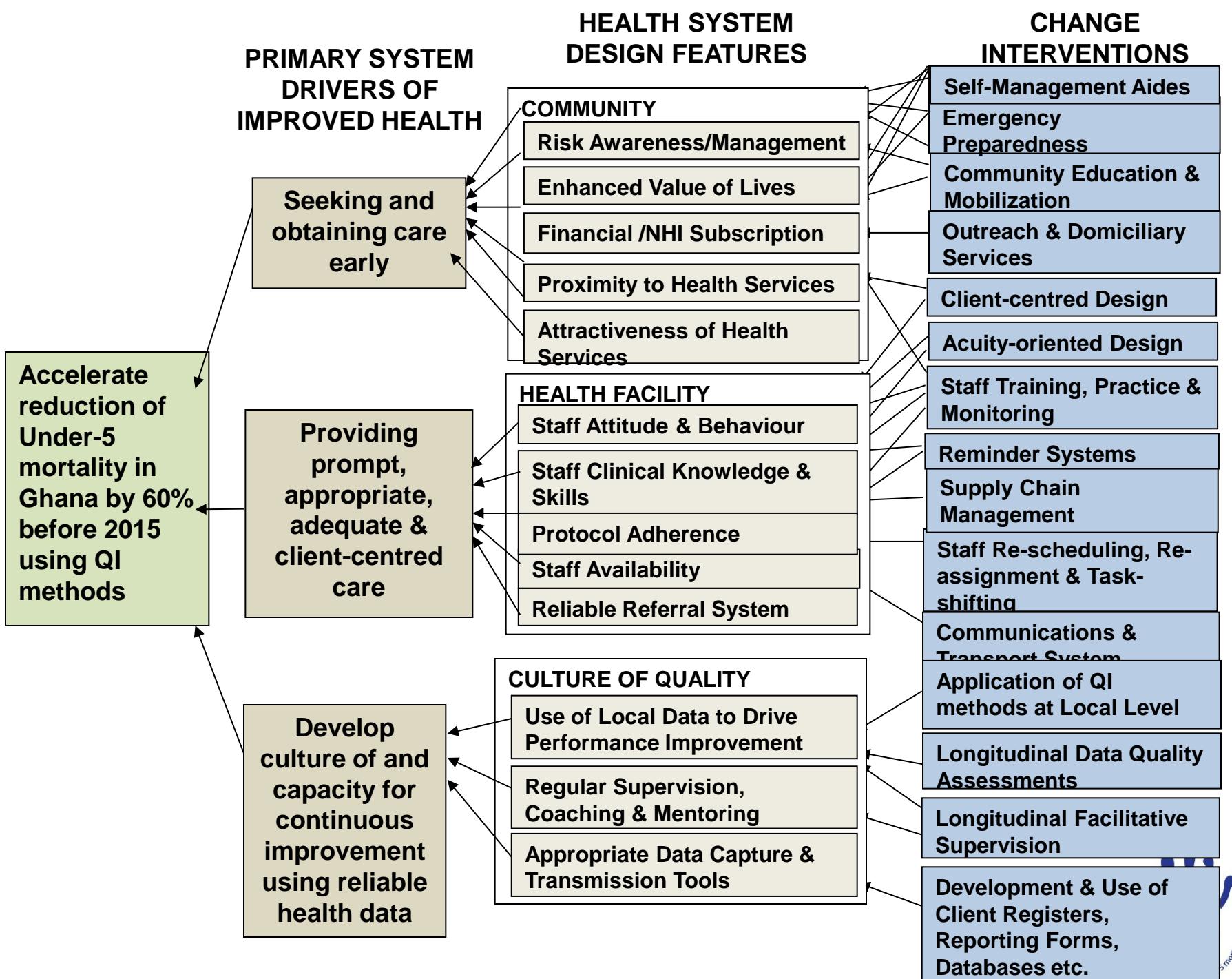
>1,046



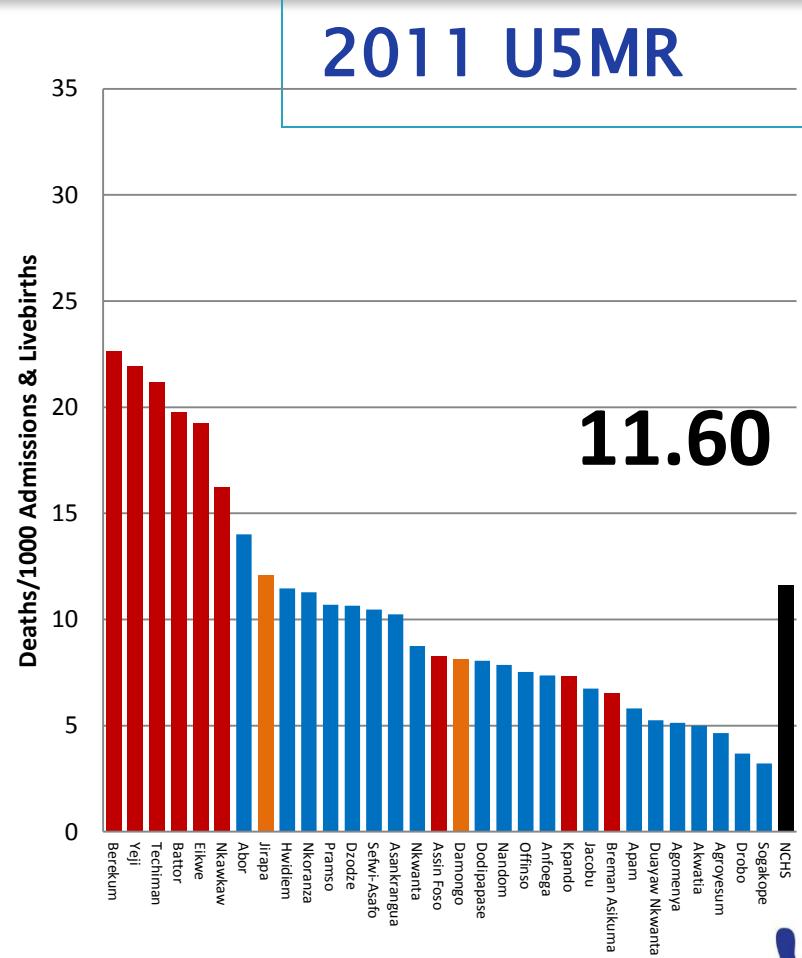
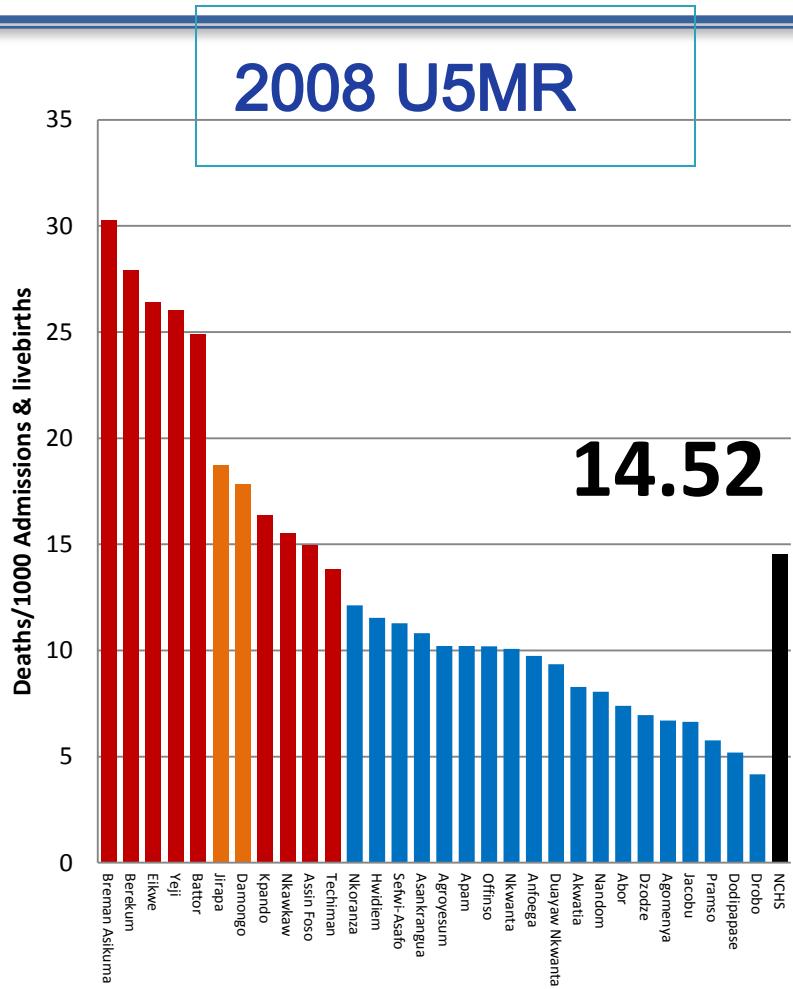
ership to reduce under 5 m

Cambio a gran escala: innovación, pruebas, expansión





Wave 3 NCHS Hospital Under 5 mortality



3. Transparencia



*“Busca utilidad, no
perfección, en la
medición”*

(“seek usefulness, not perfection, in the measurement”)

Nelson et al., *Building Measurement and Data Collection into Medical Practice; Annals of Internal Medicine*; 15 March 1998 ; Volume 128 Issue 6 ; Pages 460-466.



Reacciones a números inesperados

4 etapas de evolución...

- I. Los números son incorrectos
- II. Los números son correctos, pero en realidad no es un problema
- III. Los números son correctos, es un problema real, pero *no es mi problema*
- IV. Los números son correctos, y *es mi problema*

Con agradecimiento a Brian Jarman and Don Berwick



“No puedes imponer nada sobre nadie y esperar que estén comprometidos con ello”

Edgar Schein, Professor Emeritus
MIT Sloan School



Hospitales

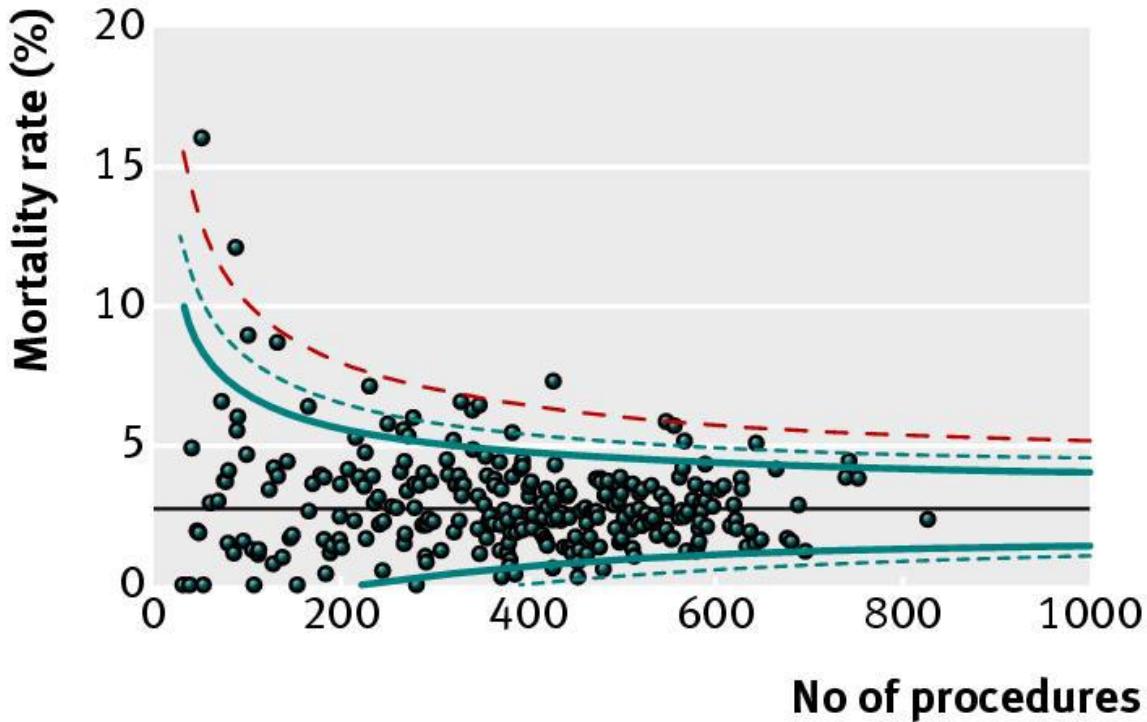
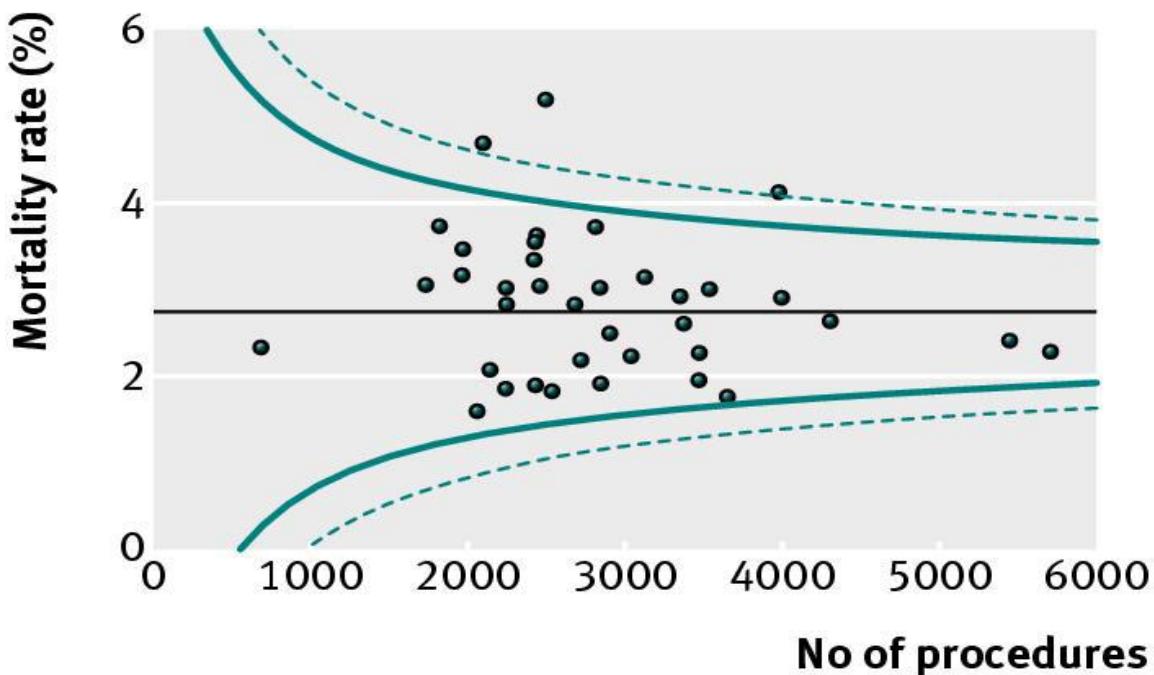
Cirugía cardiaca

NHS / 2.74

(2008-2011)

BMJ 2013;346:f1139 doi:
[10.1136/bmj.f1139](https://doi.org/10.1136/bmj.f1139)

Cirujanos



Transparencia – 30/06/2013

<http://www.nhs.uk/choiceintheNHS/Yourchoices/consultant-choice/Pages/consultant-data.aspx>

1. Adult cardiac surgery
2. Vascular surgery
3. Thyroid and endocrine surgery
4. Bariatric surgery
5. Interventional cardiology
6. Orthopaedic surgery
7. Urological surgery
8. Colorectal surgery
9. Upper gastrointestinal surgery
10. Head and neck cancer surgery

98%





Compromiso vs obediencia

Cambio basado en obediencia

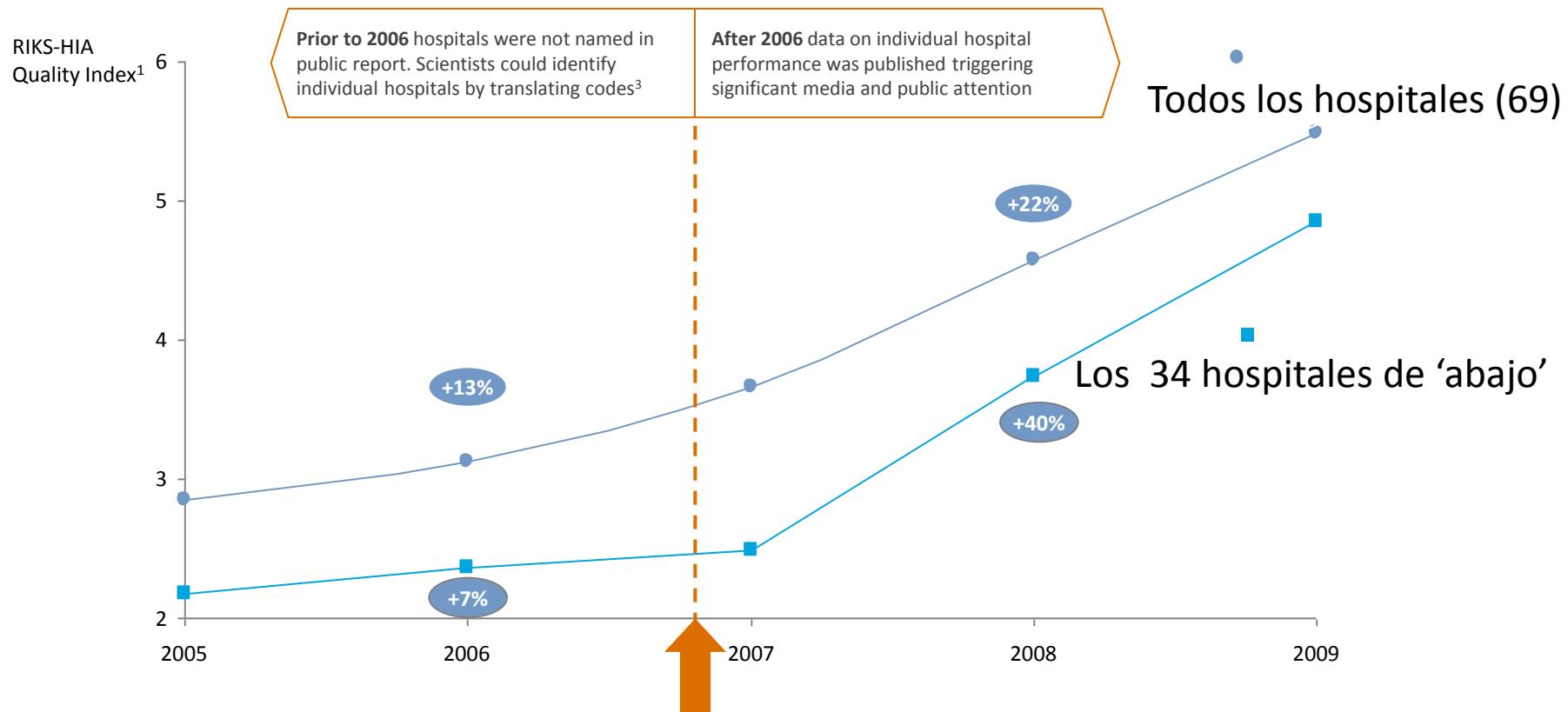
Un estándar mínimo de desempeño que todos deben alcanzar

Individuos son contables en un sistema de jerarquías, a través de gerencia del desempeño y mecanismos de monitoreo de cumplimiento

La amenaza de sanciones o pena profesional crea el ambiente hacia conseguir la meta

El efecto de la transparencia

Ejemplo: adopción de las guías para el tratamiento de síndrome coronario agudo



1. The quality index from RIKS-HIA measures Swedish hospitals adherence to national guidelines (best practice) regarding Acute coronary syndrome (ACS). The index is based on nine different process metrics which are described in the appendix. 2. Defined as hospitals given the three lowest grades when data became public for 2006 (0,5; 1,0; 1,5). 3. Data on individual hospital performance was first published in the 2006 RIKS-HIA annual report. From 2006 onwards the public and the media could easily access the data and compare individual hospital performance.

Source: RIKS – HIA Annual Reports 2005 – 2009, BCG Analysis



Resumen

Advertencia...y...

1. Pacientes como activos
2. ‘Psicoterapia vs Psicofarmacología’
3. Transparencia



Gracias

www.ihi.org



pdelgado@ihi.org
@pedroIHI