Creating a Quality Improvement Project With Your Flu Data

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Objectives

- Describe the link between quality reporting and quality improvement
- List the steps for creating a quality improvement study
- Use your facility’s HCP* Influenza Vaccination data reported in NHSN** to create a quality improvement study

*Healthcare Personnel  
**National Healthcare Safety Network
• Many quality reporting programs require facilities to gather and report HCP Influenza Vaccination data to NHSN.

• Data are essential to quality improvement.

• Quality improvement studies are often required for certification, accreditation, and/or as part of internal quality programs.
You Submitted the Data...Now What?

• Review previous seasons’ NHSN HCP Influenza data and ask:
  – What do you observe about your rates?
  – What are your initial thoughts about improving compliance for the next reporting season?

• Make these “thoughts” a topic for your quality meetings.
Starting Steps

• You have just taken the first steps in developing a quality improvement study!
• Begin to organize and document your actions.
• Be consistent with any applicable requirements for certification or accreditation.
Step 1: Describe the Purpose of Your Study

• Describe the problem and why it is important.

226,000 hospitalizations

49,000 deaths

1 CDC. “Vaccine-Preventable Adult Diseases.” http://www.cdc.gov/vaccines/adults/vpd.html
Step 2: Establish Your Goal

• Use benchmarks to establish your facility’s goal(s)
  – Healthy People 2020 goal of 90 percent HCP influenza vaccination³
  – HSAG can provide customized reports for your facility with benchmarks.

• Create a goal statement that is SMART.
  – Example: During the 2016–17 influenza season, XX% of eligible HCP will receive the influenza vaccine.

S.M.A.R.T. =
• Specific
• Measureable
• Attainable
• Relevant
• Time-bound

Step 3: Describe Your Data

• Describe the data being used in your study.
  – Data as specified by the reporting requirements
  – Describe the numerator and denominator categories

• Describe how data are collected, by whom, and what tools are used.
  – Data collection form available on the NHSN website
  – Employee Vaccination Tracking Sheet (can be provided by HSAG)
Describe Your Data: Denominator Categories

**Employee HCP**
- Staff on facility payroll

**Licensed Independent Practitioners**
- Physicians, advanced practice nurses, and physician assistants affiliated with the facility, but not on the payroll

**Adult Students, Trainees, and Volunteers**
- Adult students, trainees, and volunteers age 18 or older who are affiliated with the healthcare facility, but are not directly employed by it
Describe Your Data: Numerator Categories

- Vaccinations received at the facility
- Vaccinations received outside of the facility
- Medical contraindications (i.e., severe allergic reaction to the vaccine/vaccine component or history of Guillain-Barre Syndrome within 6 weeks of previous influenza vaccination)
- Declinations
- Unknown status
Step 4: Analyze Your Data

• Review previous influenza season NHSN data.
  – Describe the findings.
  – How close are the results to established goal/benchmark?
  – Which HCP groups offer the greatest opportunity to improve?

• Presenting data graphically may be helpful.
  – HSAG can provide assistance.

• After review of the data, identify opportunities for improvement for next influenza season.
Step 5: Design and Implement Interventions

PDSA Cycle

Plan
What small change(s) could be made to increase vaccination among HCP?

Do
Test the implemented change(s).

Study
Did the intervention work? What issues/barriers were encountered?

Act
Make modifications to the intervention(s) and consider implementing on a larger scale.
Step 5: Design and Implement Interventions (cont.)

- Examples of solutions and strategies
  - In-service education
  - Provide the vaccine in-house at no cost.
  - Workplace immunization policies
- Post information
  https://www.hsag.com/QIFluData
**Example: PDSA to Improve**

**Plan**
- QI team plans to test a combined approach that includes a staff in-service and offers the vaccine on-site at no cost.

**Do**
- Facility orders vaccine to be administered on-site by staff nurse volunteers. Facility hosts a one-time in-service.

**Study**
- Only 20 percent of eligible HCP attended the in-service; 10 percent received the on-site vaccine. Feedback indicates HCP were too busy to attend an in-service and it was difficult to coordinate times with nurses for the vaccine.

**Act**
- The team proposed to put in-service content in print and electronic materials available on-demand. The team also recommended a sign-up sheet for specific times to receive the vaccine.
Step 6: Re-measure, Re-analyze the Data

Gather → Analyze → Improve
Step 7: Share Your Results

• Report your findings to:
  – Staff
  – Leadership
  – Facility’s governing body

• Reinforce the need for continued quality improvement efforts.
Conclusion and Reminders

• Though your study may be complete, continue to report HCP vaccination data to NHSN.
• These steps are a basic approach to any quality improvement programs/projects.
• Stay tuned for more tutorials to help you get the most from your data!
HSAG is here to help!

For additional assistance with developing your quality improvement study, please contact Mary Ellen Wiegand, RN, LHRM, CASC, CNOR HSAG Quality Improvement Specialist

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