



***Governance Intensive:  
The Board's Evolving Role  
in Quality Oversight***

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## **Today's Objectives**


- Examine how older adult services organizations are defining, measuring and reporting quality
- Learn what innovative boards and leadership teams are doing to support a culture of quality
- Discuss tools and techniques to support the board's oversight of quality

*Discussion question: What do you hope to get out of today?*

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### Why Boards Should Care about Quality

"I ask boards to please examine the myth that American healthcare is the best in the world. It isn't. And that your healthcare organization is approximately as good as it could be, because it isn't." *Donald Berwick, MD, Former Administrator Centers for Medicare & Medicaid Services*



#### Why Measure Quality?

- ✓ Measures drive improvement
- ✓ Measures inform consumers
- ✓ Measures influence payment

Taken from National Quality Forum's The ABCs of Measurement"

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## Quality Oversight

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*Be the driver – quality is ultimately the board's responsibility:*

- Ensure effective mechanisms are in place to measure, monitor, maintain, and improve quality and service excellence.
- Approve any quality assurance/performance improvement (QA/PI) plans and goals, monitor performance, and exercise accountability.
- Understand the variety of external accountabilities facing the organization: public reporting requirements, agencies overseeing accreditation and licensing, etc.

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## Healthcare Quality Defined



- **Safe** and avoids inflicting injuries from the care that is intended to help.
- **Effective** by providing services based on scientific knowledge to all who could benefit and refraining from providing services to those not likely to benefit, thus avoiding underuse and overuse, respectively.
- **Person-centered** by providing care that is respectful of and responsive to individual's preferences, needs, and values and ensuring that a person's values and wishes guide all clinical decisions.
- **Timely** and reduces waits and sometimes harmful delays for both those who receive and those who give care.
- **Efficient** by avoiding waste of equipment, supplies, ideas, and energy.
- **Equitable** by providing care that does not vary in quality because of personal characteristics such as age, gender, ethnicity, geographic location, and socioeconomic status.

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Adapted from: *Crossing the Quality Chasm: A New Health System for the 21st Century*, Institute of Medicine, National Academy Press, 2001

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## What's the Board Supposed to Do about Quality? – Start Simply

- Formally establish strategic goals for quality improvement for the organization
- Monitor quality indicators
- Require progress reports on corrective action on quality/safety problems
- Consider forming a board quality committee

Great Boards Practice NIFO\* and GEPO\*\*.

\* *Nose In, Fingers Out*

\*\* *Good Enough, Press On*

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## What to Look for in Benchmarks and Dashboards

- Benchmarks are useful – to a point. Beware “Cream of the Crap”.
- Dashboards generally 1-page, color-coded, trended with comparative measures, summarize the big picture.
- “Big Dots” are the handful of key indicators that really matter, such as
  - Quality of Care (e.g., hospital readmissions, fall skin integrity)
  - Quality of Life/Customer Experience
  - Employee Satisfaction



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Quality  
Custom  
Employ

## Quality Oversight is not about finding fault....

*The single greatest impediment to  
error prevention is “that we punish  
people for making mistakes.”*

Dr. Lucian Leape, Professor, Harvard School of Public Health in  
testimony before Congress on Health Care Quality Improvement

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## Just Culture

Just culture is the process, the concept, of attempting to manage human fallibility through system design and behavioral choices that we have within our organization.

Just culture has been successful at a number of different organizations. One airline cut its maintenance errors by 50%, while another airline reduced its ground damage by 50%. A hospital's hand hygiene compliance rate went from 65 % to 95 % and it was attributed directly to the work done around just culture.

*Excerpted from: Basic Concepts of a Just Culture, published in the Winter 2009 Federation Forum Magazine.*

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## Board Practices to Enhance Quality Oversight

### Choose Directors with the “Right Stuff”

- A few “quality experts”
- The ability to understand clinical information
- The willingness to raise constructive questions

### Take charge of the board's quality agenda

- Start with orientation and never stop educating
- Assess your organization's improvement priorities
- Set aside time to talk about quality: Board/committee
- Adopt board goals around quality
- Build an annual board/committee work and education plan



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## Board Practices to Enhance Quality Oversight

### Make quality a strategic priority

- *Make quality a pillar of the strategic plan*
- *Understand the business case for quality*
- *Approve measurable, big dot, multi-year and annual goals*

### Exploit the power of information

- *Set the bar high*
- *Promote transparency*
- *Design the dashboard around strategic goals*
- *Monitor all aspects of quality*



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## Board Recruitment, Orientation, Education

- Help new board members understand their quality responsibilities
- Participate at least annually in education on national trends in quality of care
- Review the organization's quality performance by comparing current performance to its own historical performance, to standards, and to the competition
- Devote a part of each meeting and retreat to quality education
- Include clinicians on the board and its committees
- Add board and committee members with quality and process improvement expertise

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## Case Study: One Board's Journey

### Work to Increase Understanding and Engagement

- Over the past few years there has been a shift in focus – integrating quality, strategic and financial planning
- Organizational dashboard includes metrics for clinical quality, service excellence and cost
- The board meetings include in-person quality presentations with time for questions and discussion
- Presentations are a mix of customer or resident stories, updates on quality improvement initiatives, and educational topics identified by the staff and board members

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## Up Next: A Networking Lunch (and Assignment)

### Please consider doing the following over the lunch break:

1. Find someone you don't already know
2. Introduce yourself, including how long you've been on the board, and your professional background
3. Explain why you choose to serve on the board and share the best part about being a board member at your organization

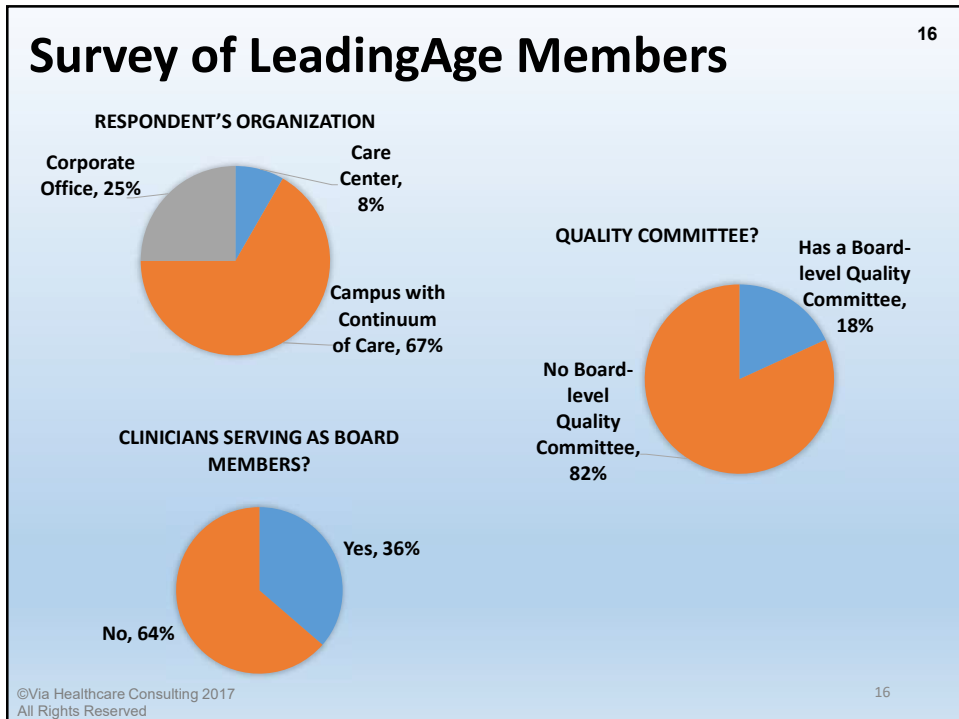
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*Emerging Trends from  
LeadingAge Minnesota Member  
Survey and Interviews*

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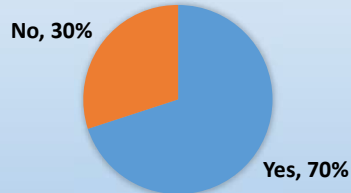
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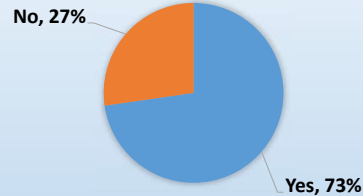


## What Does the Board Look At?

BOARD'S REGULAR AGENDA INCLUDE STANDING ITEM ON QUALITY?



ARE QUALITY OR PERFORMANCE EXCELLENCE METRICS REGULARLY REVIEWED BY THE BOARD?



Metrics reviewed include:

- Customer satisfaction/experience
- Safety
- Employee satisfaction/experience
- Cost
- Healthcare outcomes

## Sample Dashboard

Target key

Better Than Expected
  Expected
  Worse Than Expected
  N/A

### Financial

1 <sup>st</sup> Qtr.	2 <sup>nd</sup> Qtr.	3 <sup>rd</sup> Qtr.	4 <sup>th</sup> Qtr.	YTD	
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Performance against Budget
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Census
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Cash Flow
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Expense Management

### Quality

1 <sup>st</sup> Qtr.	2 <sup>nd</sup> Qtr.	3 <sup>rd</sup> Qtr.	4 <sup>th</sup> Qtr.	YTD	
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Hospital Readmissions
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Resident Visits to the Emergency Department
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Pain Management
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Falls with Injury
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Skin Integrity
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Resident Quality of Life
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Resident Family Recommend
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Residents with Pneumonia
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Compliance with Flu Vaccine
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Medication Errors
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Call Light Response < 5 minutes

### Staff/Workforce

1 <sup>st</sup> Qtr.	2 <sup>nd</sup> Qtr.	3 <sup>rd</sup> Qtr.	4 <sup>th</sup> Qtr.	YTD	
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Turnover All Staff
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Turnover Staff RNs
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Employee Satisfaction
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Staff Training
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Employee Engagement Indicator
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Total FTEs per Resident

## Up Next: Breakout Group Discussions

Please review directions on handout and answer  
the following questions:

1. Where would you say your organization is on its quality or performance excellence journey?
2. What kind of information does your board receive about the organization's quality, performance excellence or related topics? What kind of information would you like to receive on quality?
3. In which areas of performance excellence or quality oversight would you most like to receive additional training or education?
4. Do you have any suggestions for other LeadingAge members who are looking to enhance their board's effectiveness in quality oversight?