



Trinity Health

Utilizing the 5 Why's For Effective PI

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Many process improvement ideas were discovered by mistake.

Let's talk about assumptions...



Anchoring bias.

People are **over-reliant** on the first piece of information they hear. In a salary negotiation, whoever makes the first offer establishes a range of reasonable possibilities in each person's mind.



Availability heuristic.

People **overestimate the importance** of information that is available to them. A person might argue that smoking is not unhealthy because they know someone who lived to 100 and smoked three packs a day.



Bandwagon effect.

The probability of one person adopting a belief increases based on the number of people who hold that belief. This is a powerful form of **groupthink** and is reason why meetings are often unproductive.



Blind-spot bias.

Failing to recognize your own cognitive biases is a bias in itself. People notice cognitive and motivational biases much more in others than in themselves.



Choice-supportive bias.

When you choose something, you tend to feel positive about it, even if that **choice has flaws**. Like how you think your dog is awesome – even if it bites people every once in a while.



Clustering illusion.

This is the tendency to **see patterns in random events**. It is key to various gambling fallacies, like the idea that red is more or less likely to turn up on a roulette table after a string of reds.



Confirmation bias.

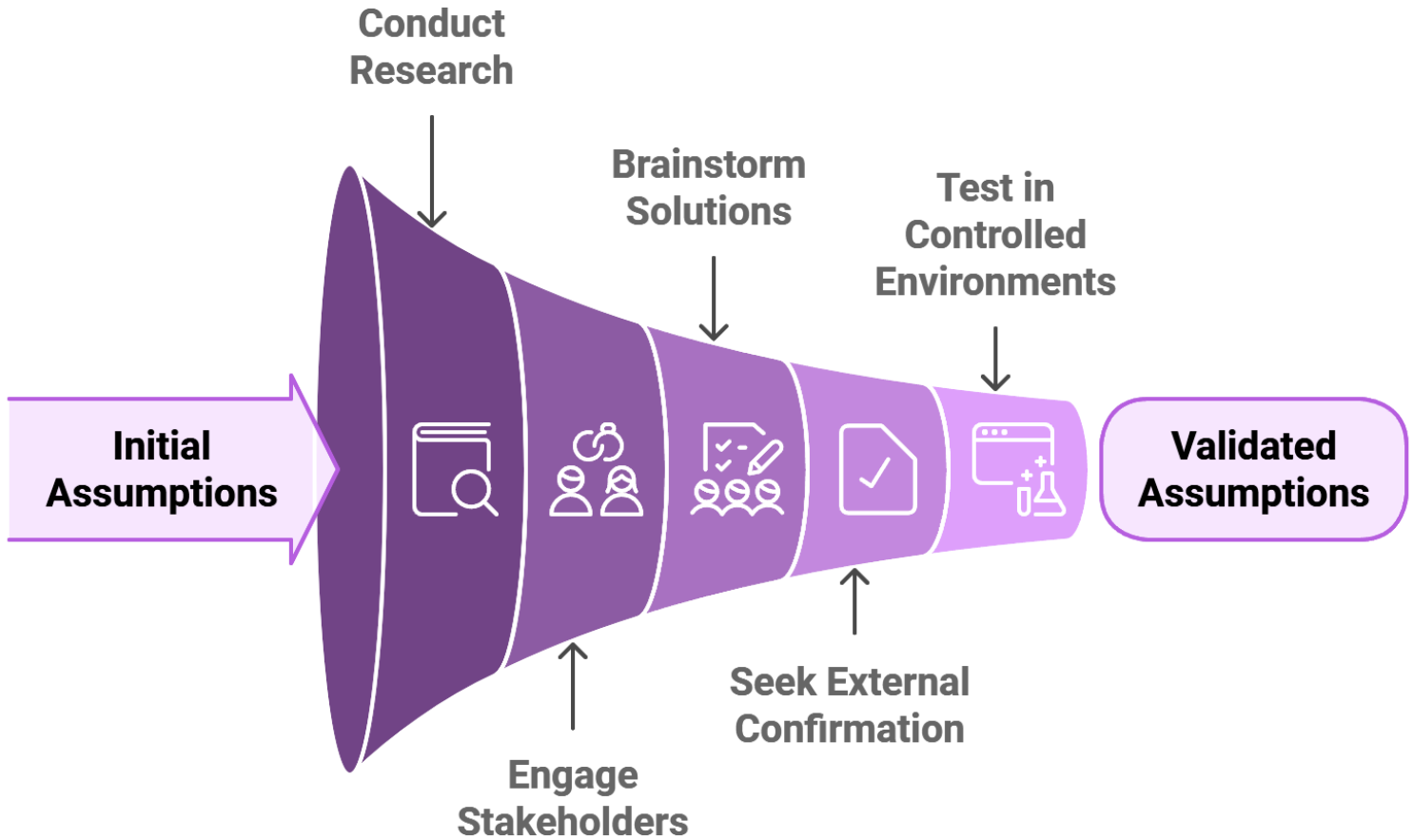
We tend to listen only to information that confirms our **preconceptions** – one of the many reasons it's so hard to have an intelligent conversation about climate change.



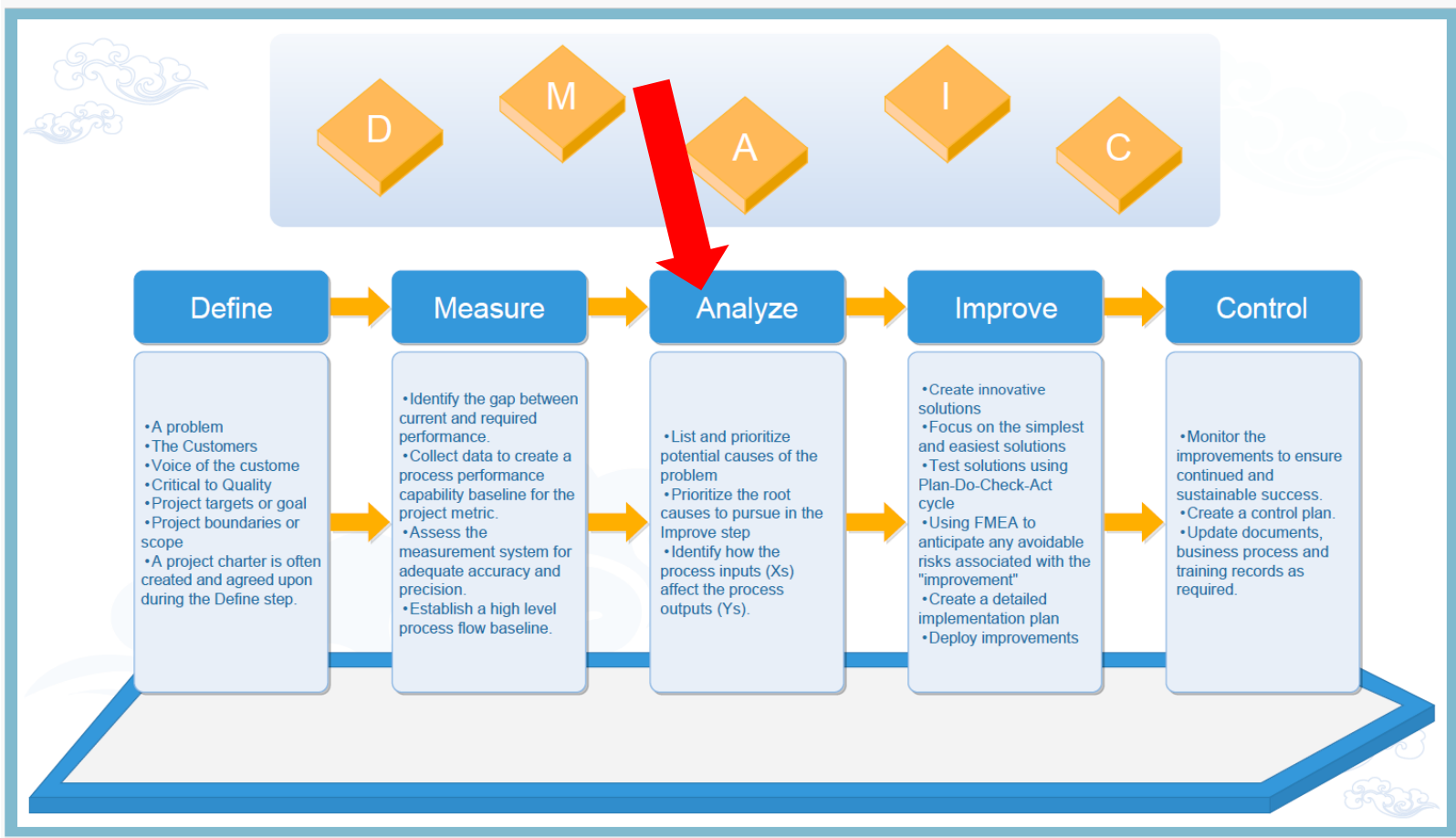
Conservatism bias.

Where people favor prior evidence over new evidence or information that has emerged. People were **slow to accept** that the Earth was round because they maintained their earlier understanding that the planet was flat.





DMAIC



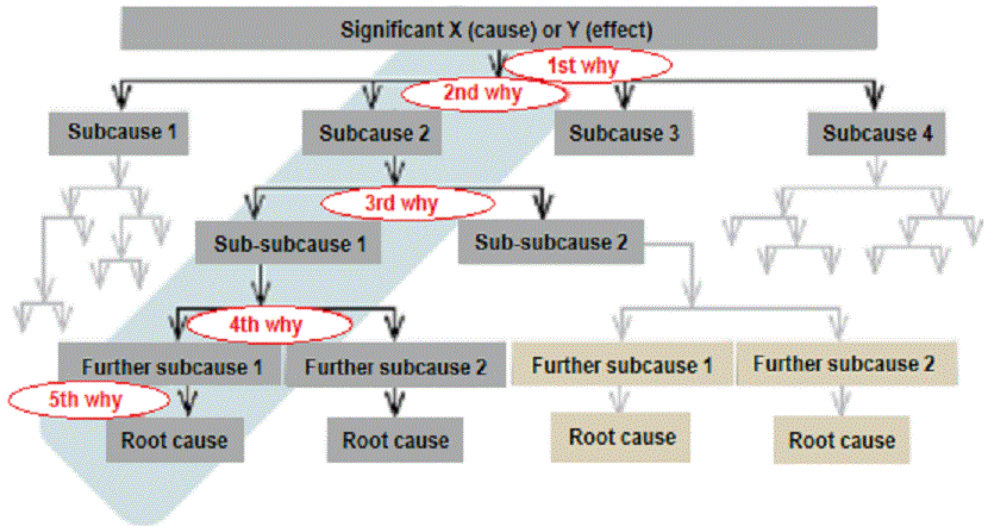
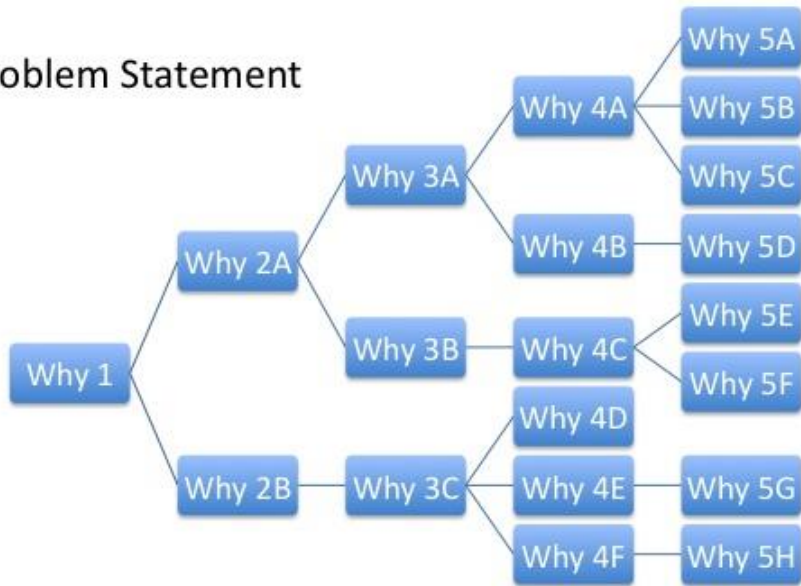
WHY?



WHY?



Problem Statement



5 Why Example: 90-Day TKA ED Visits- What we turned in...

5-why template

THGH TKS 30-day post-op ED visits are 0.7% above MARCQI collaborative average, and 1.57% higher than the MARCQI target for extra credit.

Why is this happening? What is causing it?

1. TKA post-op patients are presenting to the ED for follow up care.

Why is that?

2. Patients are unclear where to present when they have issues after surgery.

Why is that?

3. There are no options for urgent follow up near their home listed on discharge form.

Why is that?

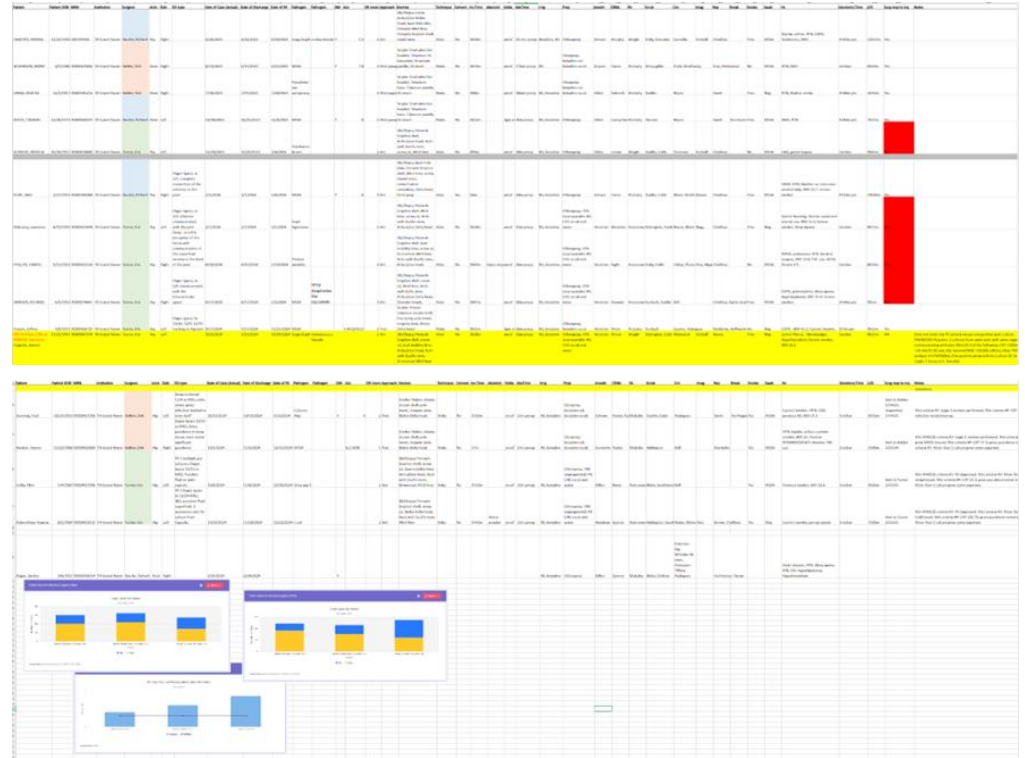
4. Discharge instructions direct them to OAM urgent care or standard urgent care.

Why is that?

5. Review of 90-day visits showed that most visits could have been accommodated by an urgent care.

Root Cause of the problem: Increasing numbers of patients are presenting for surgery from very rural areas with limited resources, or other counties that do not have the specific resources listed on the discharge form.

Going Deeper



5 Whys- Best Practice

- Assemble the right team
- Define the problem clearly and STATE IT
- Stay fact-based in the “whys” and countermeasures
- Know when to stop
- Monitor effectiveness



We're All In This Together



- Select individuals with varied experience and viewpoints on the problem

Key Stakeholders

Please list the names, titles and roles of all members of the QI team for this initiative:

Name

Heather Ruffin

Dr. Dirk Bakker

Kelli Kilpatrick

Joy Gornick-Maycroft

Karla Gonzalez

Lynn Vandyke

Dr. Rick Baszler

Title/Site Role

CDA/Clinical Quality Improvement Specialist

MARCQI Champion/Orthopaedist/Chief of Surge

Case Management/Orthopaedic Liaison

OPS Manager

Surgical Services/PAT Manager

Manager of Utilization Review and Case Manage

Orthopaedist

QI Project Role

Coordinator/PI Lead

Project Champion/Senior Leadership Sponsor/Liaison to OAM

Education/Project Liaison to OAM

Project Support

Project Support

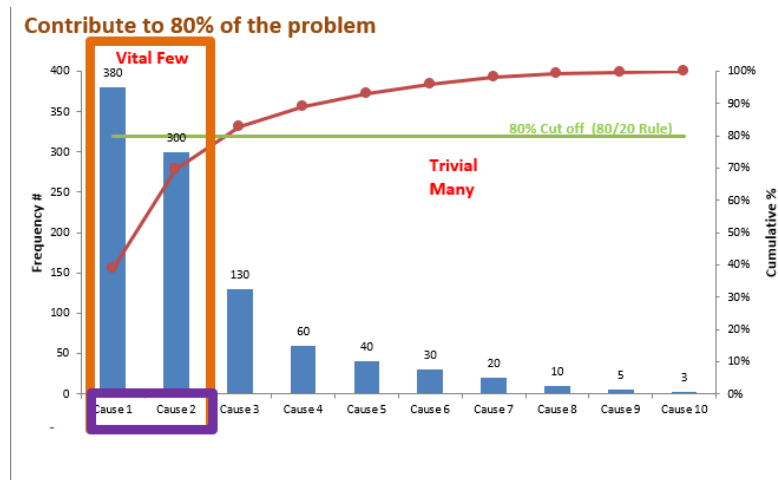
Project Support

Project Support

What's Your Problem?

THGH TKA 30-day post-op ED visits are 0.7% above MARCQI collaborative average, and 1.57% higher than the MARCQI target for extra credit.

Define your problem: your team should Formulate a short and specific statement to describe either the Problem to address or the opportunity to improve practice.



Leave Your Bias At The Door- 5 (or more) Whys

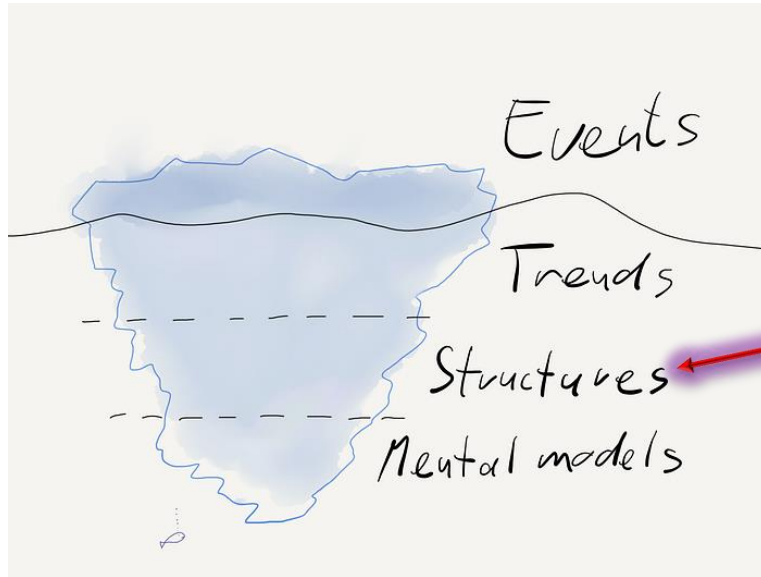


- If asking 'why' alone is not prompting enough discussion, consider using the following prompts:
 - What events lead to this issue? What conditions allow this to occur?
 - What other problems occur at the same time as the main problem?
 - Will the problem still exist if we correct or eliminate this factor?
 - Have we considered factors related to:
 - Organizational resources – staff and technology?
 - Infrastructure – policies and processes?
 - Staff knowledge and skills?
 - Organizational culture and climate?
 - Stakeholder partnership and engagement?

SMART Goals

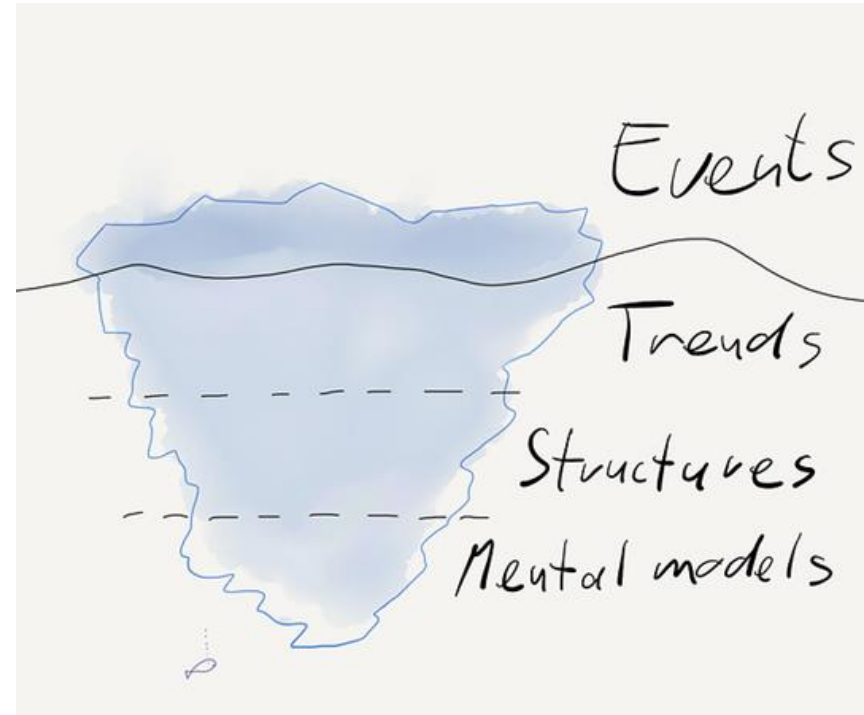
	S	Specific: The goal must be very specific and grounded in something that's significant to you.
	M	Measurable: The goal must have some sort of measurement (days, pounds, miles, etc.).
	A	Achievable: The goal must be realistic and reasonable.
	R	Relevant: The goal must relate to what you're hoping to accomplish.
	T	Time-bound: The goal must have a timeframe and that timeframe must be reasonable.

All Right Stop... But When Do I Stop?



1. **events** — “what happened?”
2. **trends** — “does this event fit into a trend or pattern?”
3. **systemic structures** — “what causes these trends and events to emerge?”
4. **mental models** — “what assumptions, beliefs and values give rise to the structures?”

- Thoughtfully categorize the answers for the “whys” into one of the 4 levels.
- Be a bulldog and do not stop until your “whys” are at least at level 3, but ideally at level 4.
- If answers take you shallower, instead of deeper, this is where you may need to add subsets and fork your questions to unearth multiple underlying causes.
- Ask questions that take the conversation deeper. To get to level 2, ask things like “How often does this occur?” To get to level 3, ask “Is this always the process followed?” To get to level 4, ask “Do you agree with this process?”
- Don't be afraid for the conversation to go off the rails. Being factual is not always the goal. Mental models are where things become less factual, but more valuable.

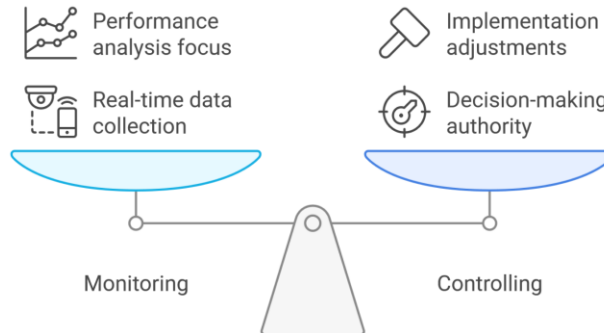


Don't Stop Believing...or Monitoring



SIX

Relationship between Monitoring and Controlling Functions



Continuous Improvement and Monitoring Progress

Foster a Culture of Continuous Improvement

Implement Lean Principles

02

01

03

Set Clear Goals and Metrics

Conduct Regular Audits and Assessments

04

05

Embrace Technology and Automation

Encourage Feedback and Collaboration

06

07

Monitor Industry Trends and Best Practices

Have you selected a *ROOT* cause
and *ACTIONABLE* interventions?