The QRC Coaching Academy
Lessons from the three first years

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About the QRC Coaching Academy

- Started in 2013 as part of the National Agreement on NQRs
- Collaboration between QRC Stockholm and Medical Management Center, Karolinska Institutet
- The QRC Coaching Academy consists of:
  - The course “QI supported by NQRs”, 15 HP
  - A leadership program (2014)
  - Measurement network
  - QINet

81 coaches
44 leaders
280 team members
37 organizations/departments
29 NQRs
The QRC Coaching Academy design

Effects for patients

<table>
<thead>
<tr>
<th>Team goals</th>
<th>Examples of clinical outcomes</th>
</tr>
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<tbody>
<tr>
<td>Reduce door-to-needle time acute stroke</td>
<td>Reduced door-to-needle time from 66 minutes to 22 minutes</td>
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<tr>
<td>Reduce nausea and vomit for children in chemotherapy</td>
<td>Started using VAS for nausea</td>
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<tr>
<td>Lower HbA1c for young people with diabetes type II</td>
<td>18 out of 24 patients showed decreased HbA1c value</td>
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<td>Improved care after myocardial infarction</td>
<td>More patients reached treatment targets for cholesterol and blood pressure treatment. More patients got follow up visits at the right time.</td>
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<tr>
<td>Improved patient participation on rheumatology</td>
<td>Increased part of patients report health status before the clinical visit, an increasing number of patients know WHY the report their health status, more doctors use the health status during the clinical visit.</td>
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Effect for coaches
Comparing cohort 1 and 2

<table>
<thead>
<tr>
<th>Quality improvement</th>
<th>p</th>
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<tbody>
<tr>
<td>Time for improvement work</td>
<td>0.04</td>
</tr>
<tr>
<td>Integration of improvement work and work with quality registries</td>
<td>0.02</td>
</tr>
<tr>
<td>Collaboration with other units in improvement work</td>
<td>0.06</td>
</tr>
<tr>
<td>Interprofessional collaboration</td>
<td>0.007</td>
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</tbody>
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<table>
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<tr>
<th>National Quality Registries</th>
<th></th>
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<tbody>
<tr>
<td>Actively working with output data from the quality registry</td>
<td>0.03</td>
</tr>
<tr>
<td>Actively using data from the quality registry in our improvement work</td>
<td>0.02</td>
</tr>
<tr>
<td>Time for working with the quality registry</td>
<td>0.04</td>
</tr>
<tr>
<td>Resources supporting work with the quality registry</td>
<td>0.02</td>
</tr>
<tr>
<td>Feel part of the work with the quality registry</td>
<td>0.06</td>
</tr>
</tbody>
</table>

Quality improvement
- Time for improvement work
- Participating in improvement work at the department
- Integration of improvement work and work with quality registries
- Collaboration with other units in improvement work

NQRs
- Actively working with output data from the quality registry
- Actively using data from the quality registry in our improvement work
- Time for working with the quality registry
- Resources supporting work with the quality registry
- Feel part of the work with the quality registry
Effects for leaders

The following aspects improved during the Leadership program

- At my clinic/department
  - we work actively with NQRs
  - we have the opportunity to affect the content of the QI
  - we integrate QI with our NQR(s)
  - we collaborate with other clinics/departments around QI
  - we actively combine outcome data and reports from the NQR in our QI

Roles in QI

- Knowledge and ability
  - How to initiate, manage, drive?
  - What theories, tools and methods to use?
- The combination of leader and coach
  - Enables leader to focus on strategies for QI
  - Enables coach to work operationally with QI
I have support from leadership regarding improvement work

**Baseline**

- Chef: 0% 6.30% 62.50% 31.30%
- Coach: 0% 10% 30% 60%
- Teammedlem: 0% 16% 44% 40%

**Follow up**

- Chef: 0% 0.00% 36.40% 63.60%
- Coach: 0% 0% 50% 50%
- Teammedlem: 2% 2% 55% 41%

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The QINet

- Based on participants needs and wishes
  - Aims to continue develop competencies in QI and support collaborative learning and knowledge exchange
- Moving from project thinking in QI
- Continous work merged into clinical practice
- For senior coaches and leaders
- Funding from Vinnova
  - Meetings, workshops, discussions
  - Seminars, study visits
- Creating nodes
The next steps

- Planning the next course
- Areas to explore further
  - Patient involvement
  - Work environment
- Cultivating network nodes and activities