



"Partners in Perinatal Quality"

May News

Quality Tip: Setting the Aim

The **AIM** is sometimes called the **Charter** or **Opportunity Statement**. It describes the scope of an improvement effort, as viewed by the organization and the team/individual striving for improvement.

Some features of the AIM statement are as follows:

- The name of the process, service or product to be changed
- The subsystem or Microsystems within which the change is to take place
- The recipient or customer receiving the benefit of the improvement
- The boundaries of the effort (starts at _____ and stops at _____)
- The objective, numerical goal or anticipated outcome
- Time frame—key milestones and completion date

An early team task is to agree on the AIM. Every meeting should include a review of the aim statement, "Remember, we're here to reduce line infections by 50% within 12 months," and then a review of progress quantitatively over time. It is acceptable to tweak the aim, as the team learns more about their work.

Construction of the AIM can follow this thought process:

An opportunity exists to (improve, redesign-name of process) _____
for _____ (the customer). The process starts at _____
and ends at _____. Success will be measured by
achieving _____ (outcome) by _____ (date).

Example:

An opportunity exists to improve nutrition practices for our NICU infants, beginning within 6 hours of birth. Success will be measured by an increase in the number of babies exclusively fed by human milk at discharge and other indicators of adequate

hydration and nutrition. Our goal is to increase human milk feeding by 50% by year-end.

Current thinking has encouraged use of “**stretch goals**,” since many improvement efforts of the past have barely exceeded the status quo. However, the stretch goal is not the measure of success—i.e., you either meet it or you don’t (a yes/no measure). The measure of goodness is as much improvement as you can possibly accomplish.

For more on “**Setting the Aim**” & “**Tips for Setting Aims:**”
http://www.tipqc.org/quality_improvement.htm

Project Highlights

1. NICU--Admission Temperature Project

The **20 NICU hospital teams** participating are:

Baptist Hospital, Nashville
Baptist Memorial for Women, Memphis
Centennial Hospital, Nashville
East Tennessee Children’s Hospital, Knoxville
Holston Valley Medical Center, Kingsport
Jackson-Madison County General Hospital, Jackson
Johnson City Medical Center, Johnson City
LeBonheur Children’s Medical Center, Memphis
Maury Regional Hospital, Columbia
Methodist Hospitals—Germantown & South, Memphis
Middle Tennessee Medical Center, Murfreesboro
Monroe Carell Jr. Children’s Hospital, Nashville
Nashville General Hospital (Meharry), Nashville
Parkridge East Hospital, Chattanooga
St. Francis Hospital, Memphis
St. Mary’s Health Center, Knoxville
TC Thompson Children’s Hospital, Chattanooga
The Med, Memphis
UT Medical Center, Knoxville

- The **first phone huddle** featured information on establishing the team, the aim, and measures. Hospital participating teams will be able to join the listserv and receive the secure website for additional information.

- Upcoming **phone huddle #2** will be on May 27, 2009 at 2 PM CST, featuring information on Run Charts & Analysis.
- 2. OB—Reducing Elective Deliveries before 39 Weeks**—project committee has formed; an initial local pilot in Davidson County is beginning under the leadership of Dr. Frank Boehm

Projects Being Developed

- 1. NICU—Human Milk Feeding Project**—being led by The Med, with the support hospital being Monroe Carell Jr. Children’s Hospital.
- 2. NICU—Nosocomial Infection Reduction**—being led by East TN Children’s Hospital, with the support hospitals being Jackson-Madison and Johnson City.
- 3. OB—Breastfeeding Awareness Campaign**—being led by OB Committee at the Annual Meeting.

We continue to seek Subject Matter Experts for each of the above mentioned projects.

For more information: <http://www.tipqc.org/Projects.htm>

Regional Meetings

Please join the staff of TIPQC and the Regional Advisory Committees (RAC) for the Regional Learning Session:

CQI Education #2 With Temperature Project Examples

Please feel free to join us for these meetings at the location nearest you! The meeting will begin at 8:15 with a continental breakfast and the opportunity to visit with the local RAC. The training, “Management of Organizational Culture & Change” will begin at 9 AM, followed by the Admission Temperature Hospital Teams Meeting until 2 PM. As a light lunch will be served, RSVPs will be required by June 16, 2009, sent to: Brenda.Barker@TIPQC.org.

Chattanooga - Monday, June 22
Johnson City - Thursday, June 25
Knoxville - Friday, June 26
Memphis - Monday, June 29

Nashville - Wednesday, July 1

For the entire agenda, please go to: <http://www.tipqc.org/Meetings.htm>

"This activity has been approved for AMA PRA Category 1 Credit." Sponsored by the Vanderbilt School of Medicine, Department of Neonatology.

Regional Advisory Committee (RAC) Meetings

All five of the state perinatal regions have Regional Advisory Committees. For upcoming meetings, please see <http://www.tipqc.org/Calendar4-2009.htm>.

On Going Project Highlights

Submit your success stories so we can spotlight your work!

Watch the web for updates on all projects throughout the month.

www.TIPQC.org

Sincerely,
Brenda Barker, MEd
Peter Grubb, MD
M. K. Key, PhD