QI 104: The Life Cycle of a Quality Improvement Project

Lesson 1: The Four Phases of a Quality Improvement Project

- The life cycle of an improvement project has four phases:
  1. **Innovation** — *coming up with new ideas for changes*. This is the phase in which teams brainstorm good ideas for changes to test.
  2. **Pilot** — *testing a change on a small scale*. In this phase, you test changes through PDSA cycles that gradually build knowledge.
  3. **Implementation** — *making the change the new standard process in one defined setting*. This phase includes **hardwiring**, the steps we take to prevent us from slipping back to the comfortable position after we identify a better way of doing something.
  4. **Spread** — *implementing the change in several settings*. In the final phase of an improvement project, you’ll be widely sharing an innovation — perhaps even sharing it across a vast hospital network.

- The “**Improvement Project Roadmap**”, a series of checklists from IHI Faculty Richard Scoville and IHI, reminds you of specific thinking and specific actions associated with each of the four phases.

Lesson 2: Spreading Changes

- Sociologist Everett Rogers identified five characteristics of ideas that spread naturally:
  1. **Relative advantage**. “Is this idea clearly better than what’s in place? How will this make things better than they are now?”
  2. **Compatibility**. “Is this idea consistent with the way we currently function?”
  3. **Simplicity**. “Is this idea going to be easy to learn and use?”
  4. **Trialability**. “Will people have a chance to test this idea in a safe setting?”
  5. **Observability**. “Will we be able to observe the results of the idea relatively quickly?”

- Based on the characteristics of spreadable innovations, organizations and spread teams can use a **New Idea Scorecard** to help assess the relative ease or difficulty they’re likely to experience in spreading an innovation.

- IHI’s Framework for Spread identifies seven key components to consider for a large-scale spread effort:
  - **Leadership**: Setting the agenda and assigning responsibility for spread
  - **Setup for Spread**: Identifying the target population and the initial strategy to reach all sites in the target population with the new ideas
  - **Better Ideas**: Describing the new ideas and evidence to “make the case” to others
  - **Communication**: Sharing awareness and technical information about the new ideas
  - **Social System**: Understanding the relationships among the people who will be adopting the new ideas
  - **Knowledge Management**: Observing and using the best methods for spread as they emerge from the practice of the organization
  - **Measurement and Feedback**: Collecting and using data about process and outcomes to monitor and make adjustments to the spread progress
Between February 2005 and April 2008, Seton Family of Hospitals in Greater Austin, Texas, participated in the early stages of an innovative program from the Robert Wood Johnson Foundation (RWJF) and IHI called Transforming Care at the Bedside (TCAB). By following IHI’s Framework for Spread, Seton Family spread the TCAB approach from an initial medical-surgical pilot unit at Seton Northwest Hospital to 21 units across eight hospitals in their system.