



QUALITY 101

Part 3 – March 10, 2026
Susan Runyan
Runyan Health Care Quality Consulting

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Check In

2

Displaying Data

3

Displaying Data



Allow comparisons, assessment of change, trends



Understand/describe variation



Tips

- Keep original question in mind
- Address specific audience
- Privacy/HIPAA
- Tell entire story

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Tables

Sometimes a table is all you need

- Avoid clutter
- Keep things simple

Clarity is important

- Make labels and titles descriptive
- Order data logically
- Include only necessary information

XYZ Facility	
Physician Type	Number
Family Practice	6
Internal Medicine	5
OBGYN	4
General Surgery	3
Cardiology	2
Pediatrics	2

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Graph Types

Consider

What's the question?

Who's the audience?

What's the essential information?



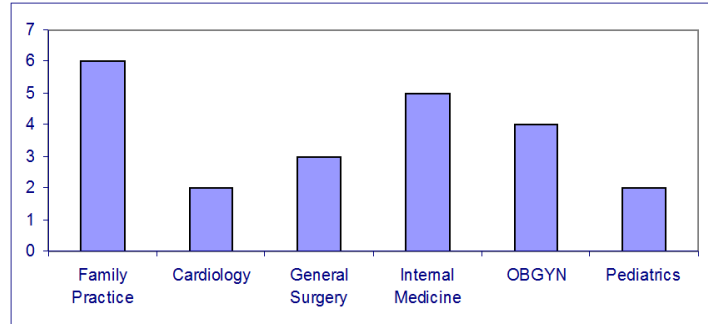
May need more than one graph

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Graphs

Consider

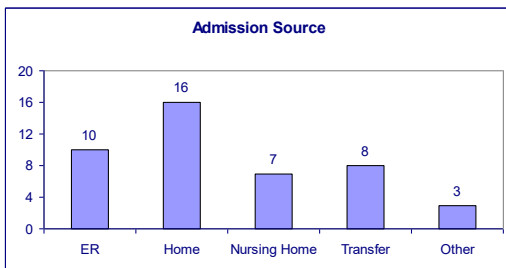
- Displaying all data or simply summarizing information
- Form of data to display (number, percent, precision)
- Type of graph to best display the data



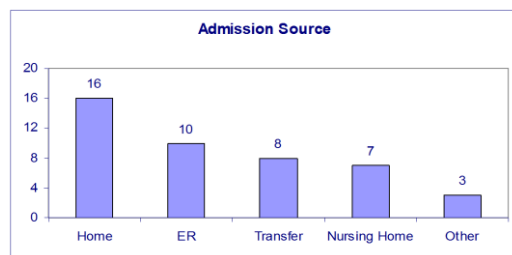
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Bar Graph

BAR GRAPH

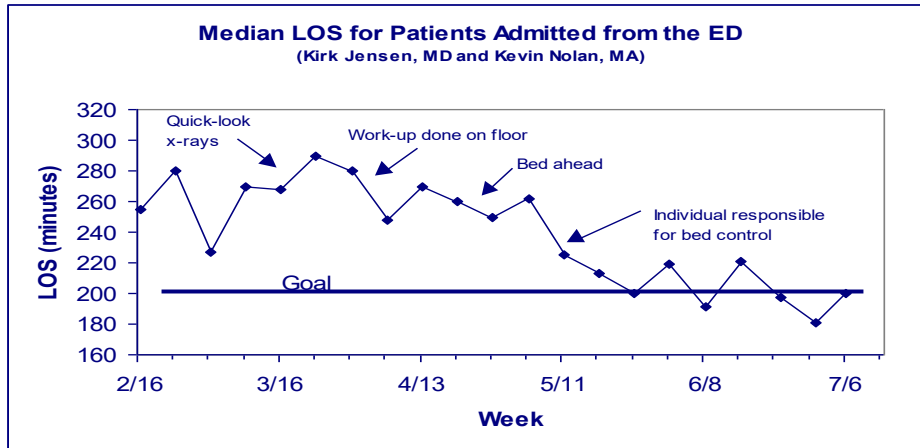


PARETO CHART



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Run Chart



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Resource

Institute of Healthcare Improvement (IHI)

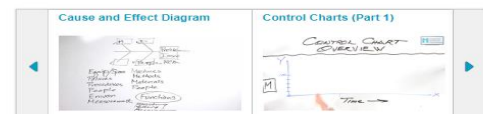
- Quality Improvement Essentials Toolkit
- <http://www.ihl.org/resources/Pages/Tools/Quality-Improvement-Essentials-Toolkit.aspx>

DOWNLOAD DOCUMENTS

- 📄 QI Essentials Toolkit (complete)
- 📄 Cause and Effect Diagram
- 📄 Driver Diagram
- 📄 Failure Modes and Effects Analysis (FMEA) Tool
- 📄 Flowchart
- 📄 Histogram
- 📄 Pareto Chart
- 📄 PDSA Worksheet
- 📄 Project Planning Form
- 📄 Run Chart and Control Chart
- 📄 Scatter Diagram
- 📄 Kit de Ferramentas Essenciais para Melhoria da Qualidade (português)

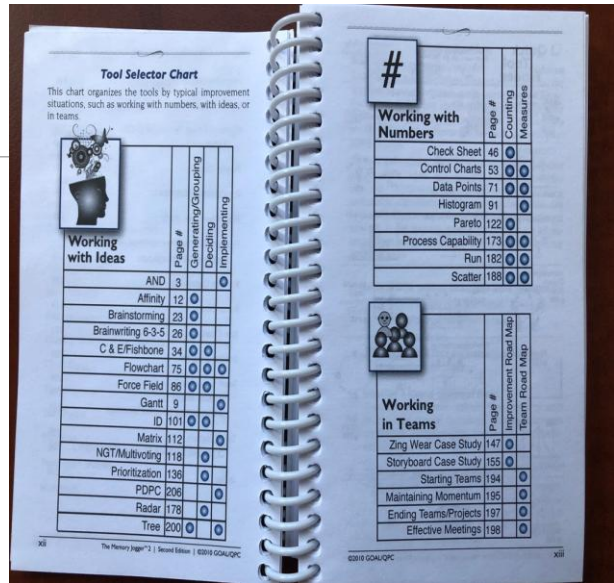
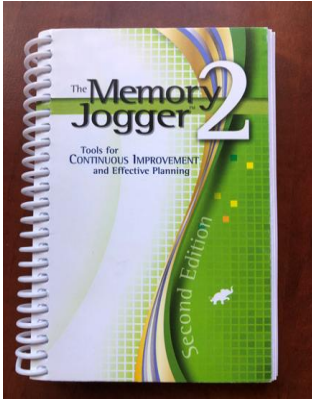


QI TOOLS "HOW-TO" VIDEOS



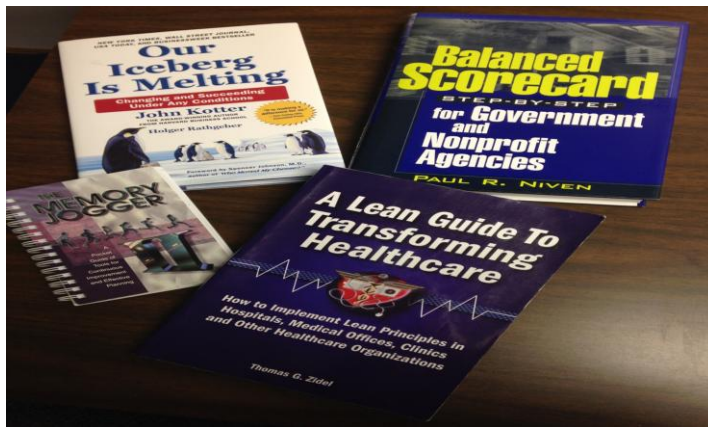
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Resource

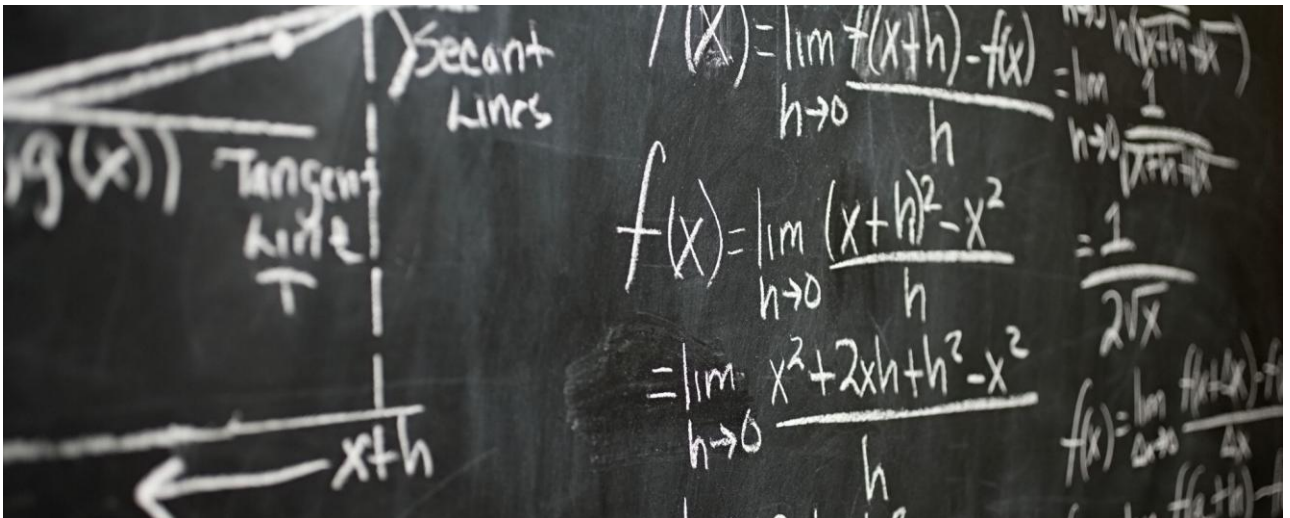


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Print Resources



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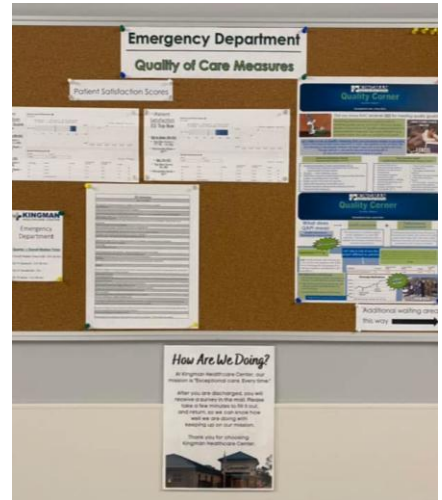
Examples

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Quality Boards

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Quality Boards

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Quality Boards

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Great Catch and Quality Awards

Congratulations to Carla for being our January "Great Catch" Award Winner. It's Carla's hard work and diligence in Patient Access, that is appreciated by everybody. You Rock Carla. #patientsafety #patientexperience #greatcatch #rockregionalhospitalderby



Congratulations to our November Great Catch Award winner, Courtney in Radiology!
Her fast actions in recognizing a serious patient condition helped save a patient's life. It doesn't get any more incredible!

Congratulations Courtney! Thank you for being the best part of Rock Regional!



I have competitive dept managers so I'm hopeful the results will be what I need them to be 🙏



At Weiser Memorial Hospital, we strive for **QUALITY** and continue to work to improve our level of **CARE**

WHAT WE ARE DOING WELL

PREVENTION OF ADVERSE DRUG EVENTS

National average: **98%**
WMH average: **99%**

- Opioid (narcotics) safety
- Anticoagulant (blood thinners) safety
- Glycemic (sugar) management



ANTIBIOTIC STEWARDSHIP

Antibiotic resistance - what you can do:

Antibiotic resistance happens when bacteria change and become resistant to the antibiotics used to treat the infections they cause.



- 1** Only use antibiotics when prescribed by a certified health professional
- 2** Always take the full prescription, even if you feel better
- 3** Never use leftover antibiotics
- 4** Never share antibiotics with others
- 5** Prevent infections by regularly washing your hands, avoiding contact with sick people and keeping your vaccinations up to date

Source: www.who.int/news-room/fact-sheets/detail/antibiotic-resistance

WHAT WE CAN IMPROVE

COMMUNICATION ABOUT MEDICATIONS

Our goal: **Exceed the National and State averages**



How you can help us

As a patient, you should see or hear the nurse:

- 1** Check your name and date of birth
- 2** Offer an education sheet if medication is new
- 3** Tell you what medicine they are giving you
- 4** Tell you what it's for (in language you understand)
- 5** Tell you what the possible side effects are
- 6** Use a bar code scanner to scan the medication AND your wrist band
- 7** Ask what questions you have

IF YOU DON'T EXPERIENCE THIS EVERY TIME, THEN SAY SOMETHING!



Quality During a Disaster Response

THE EMERGENCY PREPAREDNESS TEAM IS THE LEADER THROUGH ANY DISASTER



Emergency Preparedness Team initiated response:

- Activating the pandemic plan for our community and people we take care of before Covid became a crisis in Idaho
- Doing patient and visitor screening
- Providing PPE for those in our facilities
- Establishing alternative waiting areas for patients with respiratory symptoms
- Providing infection prevention training for our staff
- Relocating registration to a single entry
- Starting supply conservation
- Providing external education to community regarding the virus
- EPT committee meeting weekly to maintain effectiveness
- Reducing or eliminating meetings. Meeting virtually and practicing social distancing
- Continuing an environment of care safety rounds
- Encouraging daily leadership huddles
- Participating in regional coalition calls and weekly CEO update calls
- Providing external data reporting
- Continuing hospital functions, and caring for as many patients as we feel safety permits

Doing the right thing for our patients, community and customers, and those who serve them.

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SAFETY In the areas of • Risk • Respiratory Therapy and Pulmonary Rehab • RN Case Mgmt • Facility Operations • Pharmacy • Hospital Nursing • Infection Control • Environmental Services • Quality	EFFECTIVENESS In the areas of • Therapy Services • Revenue Cycle • Radiology • PDI Case Mgmt • Behavioral Health • Patient Access • Medical Records • Materials Mgmt • Laboratory • IT • Finance • Clinics	TIMELINESS In the areas of • Radiology • Behavioral Health • Facility Operations • Surgery • Medical Records • Materials Mgmt • IT • Billing/Coding	PATIENT CENTERED In the areas of • Risk • Radiology • RN Case Mgmt • Patient Access • Surgery • Hospital Nursing • Laboratory • Environmental Services • Dietary • Clinics	EMPLOYEE SATISFACTION In the areas of • Marketing and Communications • Human Resources • Administration
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PHARMACY Decreased number of expired medications in med carts	RADIOLOGY Decreased number of repeat radiology exams in both the hospital and clinic	IT Working to decrease amount of time for hospital ticket closure	CLINICAL NURSING Increased number of fall risk assessments done on patients over 65	MARKETING AND COMMUNICATIONS Sending out newsletters each quarter to increase internal communication
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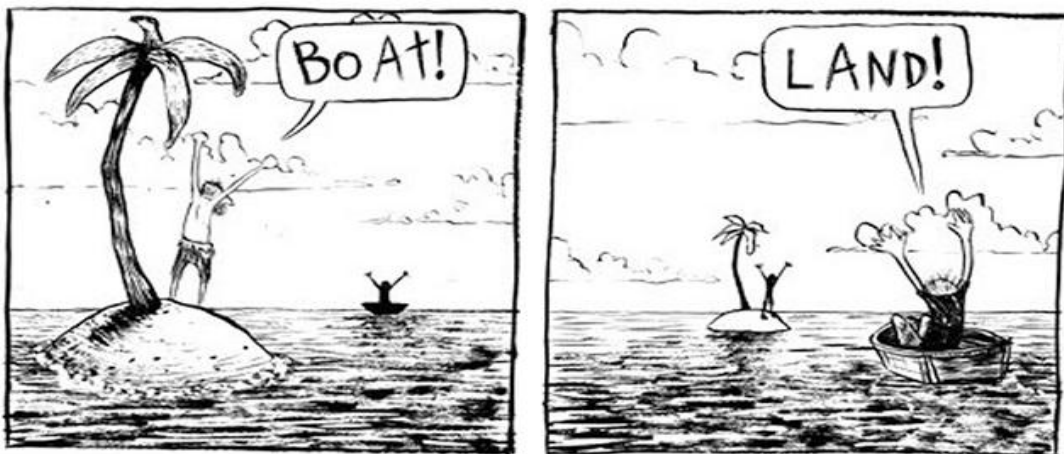
Celebrate Accomplishments

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Focus on the Future

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Perspective...

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RHCs In a Quality Program

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Where do
errors or
delays happen
most often?

QUALITY REVIEW
ISN'T ABOUT
CATCHING MISTAKES
– IT'S ABOUT
PREVENTING THEM

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Not Looking for Perfection

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Quality Improvement Project Examples

- Annual wellness exam, timing, and reminder
- Create a Patient and Family Advisory Council (PFAC) for their clinic/community
- Review the Care Transition process for improvement opportunities
- Create a Care Transition process
- Reduce no-call/no show appts
- Reduce complaints/concerns about lack of testing follow-up
- Improved Care Coordination with hospital/ED for patient follow-up
- Increase any one of their patient experience scores

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20 minutes of doing something is more valued than 20 hours of thinking about doing something

Spending ten minutes clearing off one shelf is better than fantasizing about spending the weekend cleaning out the basement

Do
Something –
Take
Action

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Selecting QI Projects

Not every identified issue deserves a full project

Prioritize based on impact, regulatory requirements, and resources

For example, a project to reduce duplicate records might have a bigger organizational impact than a minor formatting issue

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Sustaining and Reviewing Projects



QI projects aren't meant to last forever. Monitor until you see stable improvement, then decide whether to continue or shift focus.



If results plateau, either 'do' something additional or decide you have met the goal then celebrate success and move on.



Document outcomes so the improvement becomes part of your department's culture.

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Shine a Light – Show Support



**By shining your
light on the
road ahead,
you are helping
others see
their way too.**

-UNKNOWN

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What Now?

Pick one area in your department and ask: How can we make this better?

Quality becomes everyone's job when each person takes ownership.



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What quality challenges do you see most often in your clinics?

Name _____
Signature _____
Date _____

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QUESTIONS

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HOMEWORK

- Do you have a team (even one other person) you can invite to the table?
- Explore an improvement opportunity you would like to work on
- Schedule your April 1:1 zoom w/ Susan Runyan - we will flush out your project
- Bring your PDSA (or one of the examples I shared that you want to test drive)
- Over the next two sessions (May 12 & June 2) – we will share project updates



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Quality 101

Upcoming Sessions



April individual clinic zooms



Part 4: May 12 @ 1000



Part 5: June 2 @ 1000

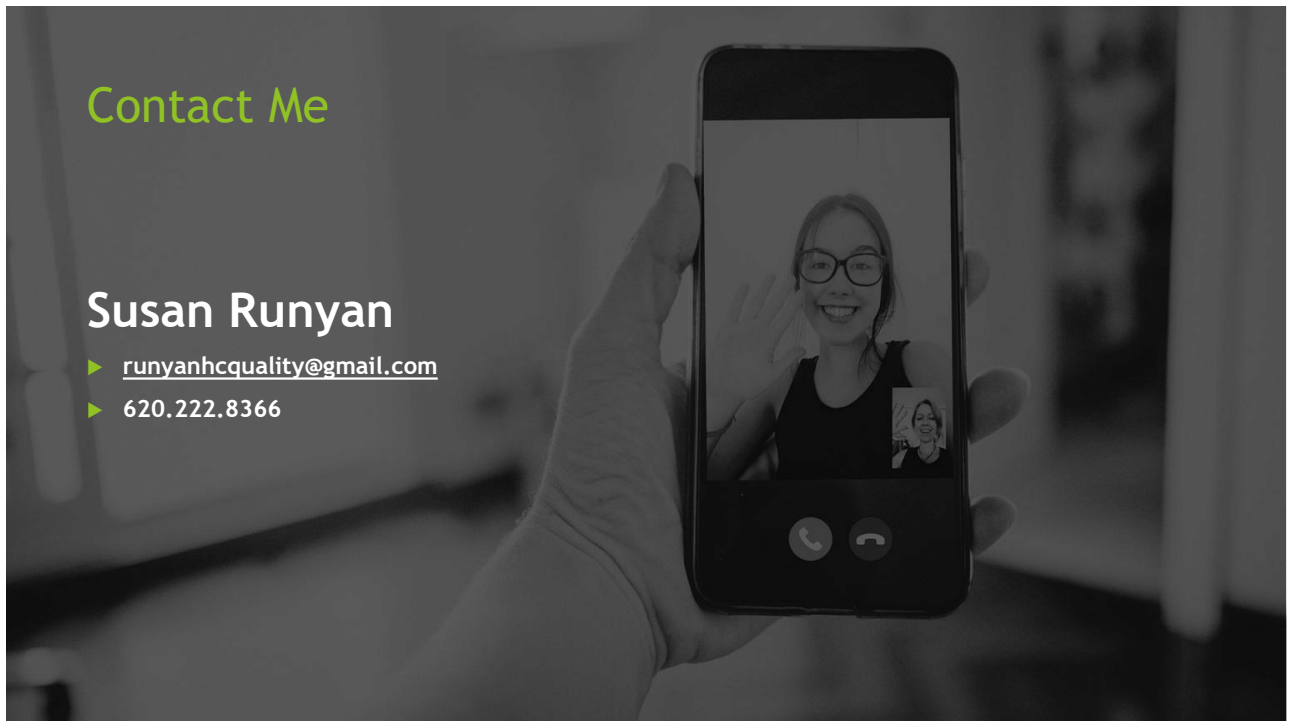
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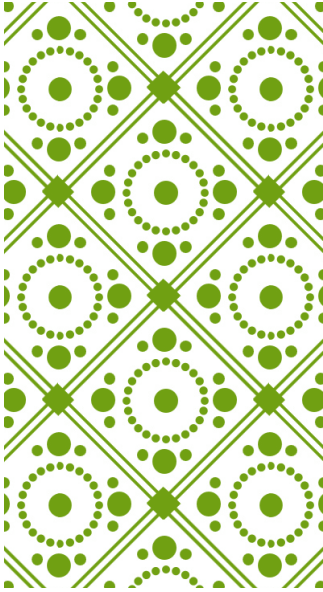
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