



# Welcome

## CQII Training of Quality Leaders Program

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# Picture Consent



- You allow NQC to take pictures from our training events and to post them on our NQC websites, social media platforms, and NQC marketing materials for an undetermined period of time.
- You have the right to revoke your consent for pictures that are publicly posted.
- At no time, individual names will be used to identify you, unless you sign the appropriate release form.

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# **Module 01 – Day 1**

**8:00 – 8:45 am (45 min)**

## **Welcome to Training Program**

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# Agenda – Day 1

- 8:00 Welcome and Introduction Day 1
- 8:45 Game: Survive on the Moon
- 9:30 Communication Style Assessment
- 10:45 Effective Leadership Strategies
- 12:00 Lunch
- 1:00 Traffic Jam
- 1:30 Successfully Planning and Managing QI Projects
- 3.30 Managing a Quality Management Committee
- 4:30 Mini-Presentations: Quality Improvement Leadership
- 5.00 Aha! Moments & Evaluations
- 5:30 Adjourn

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# Agenda Highlights – Day 2 and Day 3

## **Day 2: 8:00am – 6:00pm**

- Warm-up – Group Activity
- Building Effective QI Teams
- Meeting Effectiveness and Facilitation Skills
- Quality Management Program Assessment/Action Planning
- Action Planning
- Mini-Presentations (Nightmares)

## **Day 3: 8:00am – 3:00pm**

- Change & Resistance
- Spreading and Holding the Gains of Improvements
- Generating Organizational Support/Enthusiasm for QI
- Next Steps
- Aha! Moments, Celebration

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# Participant Introductions

At your table...

- Name and agency
- Session hopes and concerns
- What talents do you bring to this training?

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# Faculty Introductions

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## Four Corners Warm-up Activity

For each of the 3 questions, move to join the group that most describes you. Introduce yourself to a few people. Look to see who/how many are in the OTHER groups.....

- 1) Main Funding Source: Part A/B/C + AETC/D
- 2) Background: Clinical Provider/Administrator/QM Manager/Case Manager-Social Worker
- 3) QI Competency: Practically Clueless/Learning the Ropes/Intermediate/Expert



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# Quiz

(and practice with the remotes...)

# Audience Response System (ARS)

- I will open polling. Green “go” signal and vote counts will be visible on the top right area of the screen.
- Choose your vote and push the appropriate button.
- If you change your mind, select a different option (ARS only counts the most recent choice).
- Leave the remote on the table ....



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What type of facility or organization  
do you work in?

- A. Local health dept**
- B. State health dept**
- C. Community health center**
- D. CBO/ASO (non-clinical)**
- E. University**

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What in YOUR OPINION should be the number one improvement priority for HIV care and services in your program ?

- A. Retention in care/svs
- B. Pap test rates
- C. Transition from testing to care
- D. Waiting time to receive svcs
- E. Subs Abuse/Mental health screening or treatment
- F. other

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## Details.....

- Talent Pool
- Ground Rules
- Parking Lot
- Facilitator Guide
- Contact List Update
- Guidance: Say your name before using the mic...
- Guidance: Use different facilitators and provide constructive feedback...
- Volunteers for Mini-Presentations
- Permission to pick a different table each day

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*Excellent firms don't believe in excellence - only in constant improvement and constant change.*

***-Tom Peters***

So let the learning begin...

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# National Quality Center (NQC)

212-417-4730

NationalQualityCenter.org

Info@NationalQualityCenter.org

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# Sources

- (1) Joint United Nations Programme on HIV/AIDS (UNAIDS) and World Health Organization (WHO) (2008). North America, Western and Central Europe: AIDS epidemic update regional summary. 1-2.
- (2) Divisions of HIV/AIDS Prevention National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention.  
<http://www.cdc.gov/hiv/topics/aa/index.htm>
- (3) US Centers for Disease Control and Prevention (2007b). *HIV/AIDS surveillance report: cases of HIV infection and AIDS in the United States and dependent areas, 2005*. Vol. 17. Revised June 2007. Atlanta.
- (4) US Centers for Disease Control and Prevention (2006). Revised recommendations for HIV testing of adults, adolescents, and pregnant women in health-care settings. *Morbidity and Mortality Weekly Report*, 55 (14): 1-17.
- (5) Crum NF et al. (2006). Comparisons of causes of death and mortality rates among HIV-Infected patients. Analysis of the pre-, Early, and late HAART (highly active antiretroviral therapy) eras. *Journal of Acquired Immune Deficiency Syndromes*, 41: 194-200.
- (6) Until There's a Cure Foundation. (2003).  
<http://www.until.org/statistics.shtml?gclid=CNzr2Irgn5UCFQObFQodZgSvjA>





**Module 02 – Day 1**  
**8:45 – 9:30 am (45 min)**

## **Game: Survive on the Moon**

Source: July 1999 issue of the NightTimes

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# Overview

- Introduction to NASA Game Scenario
- Individual Ranking
- Group Discussion and Ranking
- Debriefing

Who in the room has  
spent some time on the  
moon?

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# NASA Game Scenario

‘You are a member of a space crew originally scheduled to rendezvous with a mother ship on the lighted surface of the moon. However, due to mechanical difficulties, your ship was forced to land at a spot some 200 miles from the rendezvous point. During reentry and landing, much of the equipment aboard was damaged and, since survival depends on reaching the mother ship, the most critical items available must be chosen for the 200-mile trip. Below are listed the 15 items left intact and undamaged after landing. Your task is to rank order them in terms of their importance for your crew in allowing them to reach the rendezvous point.’

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## Recovered Items

- Box of matches
- Food concentrate
- 50 feet of nylon rope
- Parachute silk
- Portable heating unit
- Two .45 caliber pistols
- One case of dehydrated milk
- Two 100 lb. tanks of oxygen
- Stellar map
- Self-inflating life raft
- Magnetic compass
- 5 gallons of water
- Signal flares
- First aid kit, including injection needle
- Solar-powered FM receiver-transmitter

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# Individual Ranking

- What are the most important items?
  - 3 minutes
  - Using the Reporting Form, place the number 1 by the most important item, the number 2 by the second most important, and so on through number 15 for the least important

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# Group Ranking

- Group Discussion
  - Form Groups: 8-10 individuals
  - Assignment: one facilitator, one observer and a recorder
  - 20 minutes
- Ranking
  - Discuss the ranking of the recovered items in the group and develop one ranking
  - Using the Reporting Form, place the number 1 by the most important item, the number 2 by the second most important, and so on through number 15 for the least important

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# Scoring

- For each item, mark the number of points that your score differs from the NASA ranking, then add up all the points. Disregard plus or minus differences. The lower the total, the better your score.
  - Example: Box of matches – Individual Ranking 5 and NASA Ranking 10; count 5 points
  - Score the individual and group rankings

# Answers to the Survival on the Moon Exercise

Item	NASA Ranking	NASA's Reasoning
Box of matches	15	Virtually worthless -- there's no oxygen on the moon to sustain combustion
Food concentrate	4	Efficient means of supplying energy requirements
50 feet of nylon rope	6	Useful in scaling cliffs and tying injured together
Parachute silk	8	Protection from the sun's rays
Portable heating unit	13	Not needed unless on the dark side
Two .45 caliber pistols	11	Possible means of self-propulsion
One case of dehydrated milk	12	Bulkier duplication of food concentrate
Two 100 lb. tanks of oxygen	1	Most pressing survival need (weight is not a factor since gravity is one-sixth of the Earth's -- each tank would weigh only about 17 lbs. on the moon)
Stellar map	3	Primary means of navigation - star patterns appear essentially identical on the moon as on Earth
Self-inflating life raft	9	CO <sub>2</sub> bottle in military raft may be used for propulsion



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# Answers to the Survival on the Moon Exercise

Magnetic compass	<b>14</b>	The magnetic field on the moon is not polarized, so it's worthless for navigation
5 gallons of water	<b>2</b>	Needed for replacement of tremendous liquid loss on the light side
Signal flares	<b>10</b>	Use as distress signal when the mother ship is sighted
First aid kit, including injection needle	<b>7</b>	Needles connected to vials of vitamins, medicines, etc. will fit special aperture in NASA space suit
Solar-powered FM receiver-transmitter	<b>5</b>	For communication with mother ship (but FM requires line-of-sight transmission and can only be used over short ranges)

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# Scoring

- 0 - 25 excellent (*true survivor...*)
- 26 - 32 good
- 33 - 45 average
- 46 - 55 fair
- 56 - 70 poor (*suggests use of Earth-bound logic...*)
- 71 - 112 very poor (*you're one of the casualties of the space program!*)

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# Debriefing

- Compare individual and group rankings
  - How many are better off? Why did more survive? What were the factors for higher group survival?
- Team dynamics - report from observer
  - How did the group work together? Why did the group work well (or not)?
  - What were the group dynamics that positively contributed to a higher survival? How did you embrace the diversity of opinions?
  - How did you contribute to the team? What role did you assume during the game?
- Feedback from the facilitator/feedback to the facilitator

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# Reflections

What are the lessons learned from this game? How can a group reach a common goal?

- Teamwork can produce better results than individual work, especially when faced with complex issues
- Healthy team dynamics are critical to team work and development; the role of the group leaders/facilitators is important
- It is important to take the time to obtain all team members' views and perspectives
- A benefit of teamwork is often the diversity in culture, opinion and experience

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**Module 3 – Day**  
**9:30 am – 10:15 am (45 min)**

**Communications Styles Assessment**

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## Learning Objectives:

- Allow individuals an opportunity to gain insights as to how others see them
- Show insights into communications style and building trust and issues which disrupt group effectiveness and trust
- Help participants identify ways to adapt to others in order to build more effective relationships

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# Hypothesis

About half the people you interact with are turned off by their perception of your communication style in relationship to theirs....



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# Brief History of Typing\*

- **Adickes: @1907**  
Types: dogmatic, agnostic, traditional and innovative
- **Kretschmer: @1920**  
Abnormal: hyperesthetic, anesthetic, melancholic, hypomanic
- **Adler @1920**  
Mistaken goals: recognition, power, service, revenge
- **Spangler @1920**  
Values: religious, theoretic, economic, artistic
- **Jung @1920**  
Types: Introversion, extroversion, judgment (T F), perception (S N)  
(many have built from Jung)
- **Hippocrates: 460-377 BC**  
Types: choleric, phlegmatic, melancholic, sanguin
- **Plato : @ 340 BC**  
Types: Artisan Guardian  
Idealist Rational

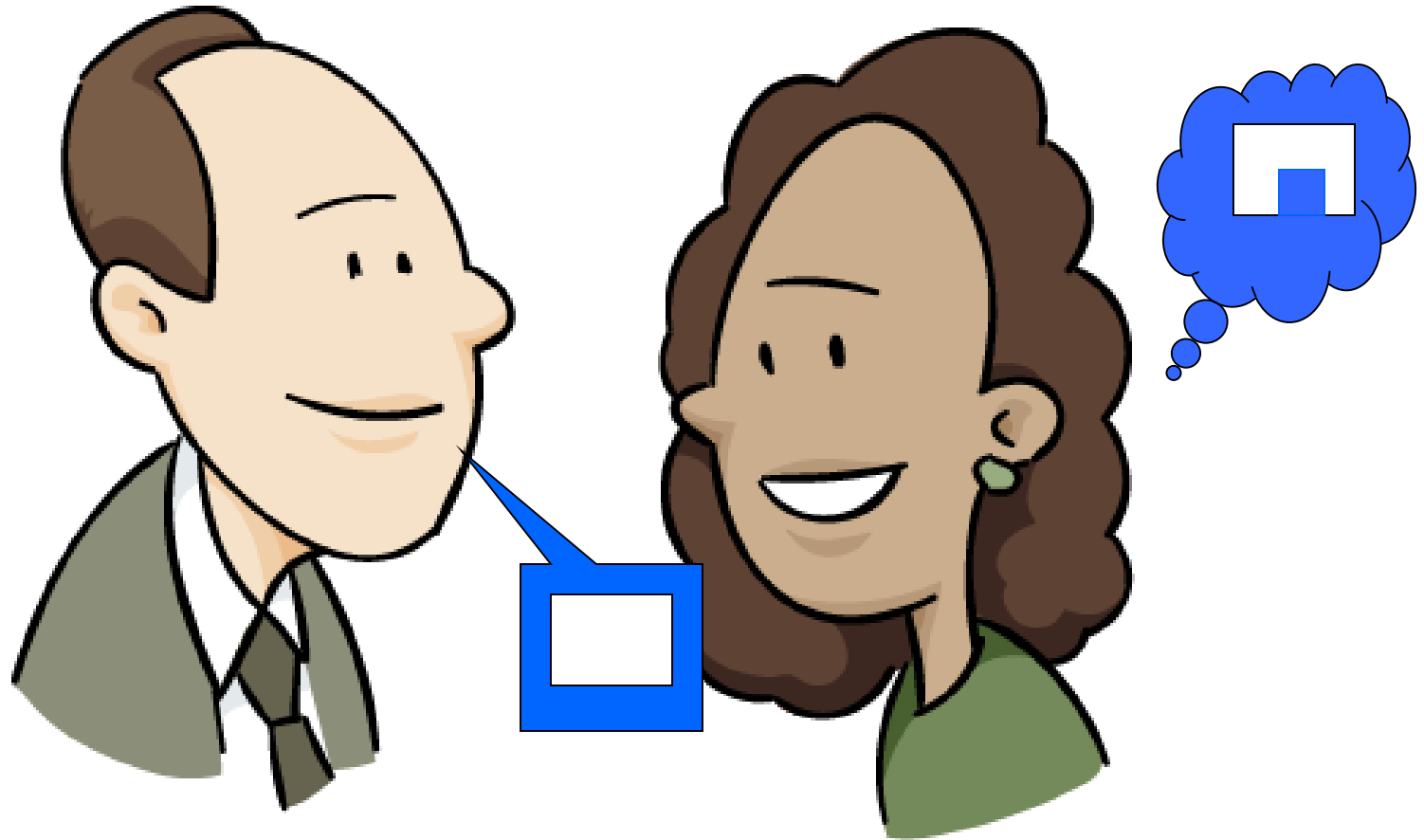
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advantages

disadvantages

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# How Misunderstanding Happens



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# Diversity...

“ These, then are some of the basic principles of ecology—  
interdependence, recycling, partnership, flexibility, diversity  
and as a consequence of all those, sustainability”

pg. 304

The Web of Life

Fritjof Capra

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Every view should flower, for every view is some what flawed.

paraphrased from  
Rewiring the Corporate Brain  
Dana Zohar

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## Points To Ponder

1. Everyone exhibits patterns of behavior that can be identified and responded to in order to achieve better relationships
2. There are patterns in how people build interpersonal trust
3. No one can do much about how others act, but we can alter our own behaviors to be more effective
4. Last person to understand your impact on others is YOU
5. We are all someone else's "difficult person"
6. Any strength overused becomes a limitation!

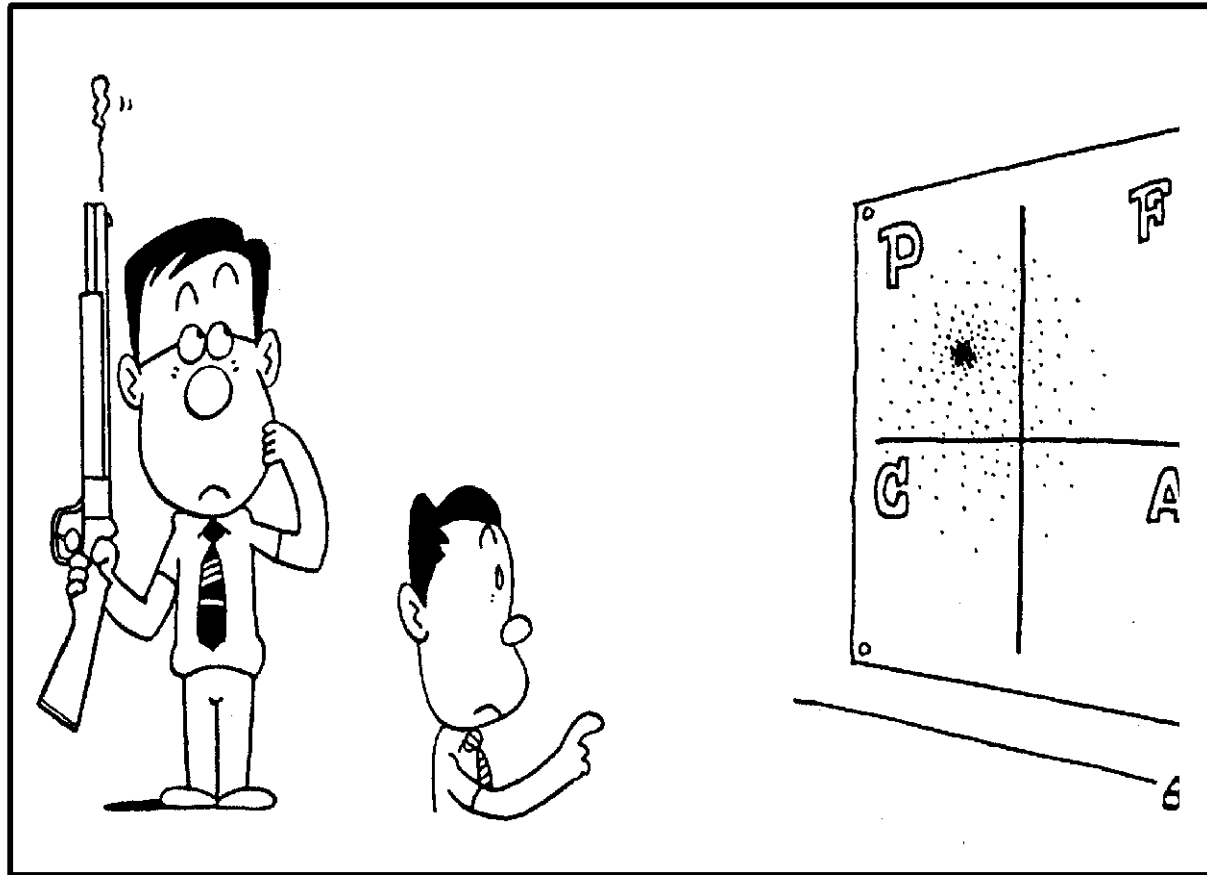
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## EXERCISE:

### Behavior Style Inventory

1. Use the Behavior Style Inventory Form (pg. 4 in HoH or pg.58 in TQL Guide) and circle 1 word from each line (row) which most closely describes you at work Complete all 15 lines (rows) rapidly
2. Tally the number at the bottom for each column of circled words
3. Plot your data on the graph provided (Behavior Style Inventory Graph) (pg. 5 in HoH or pg. 59 in TQL Guide)
4. Identify your primary style(s) as instructed by the facilitator

# Behavioral Tendencies - The Shotgun Effect

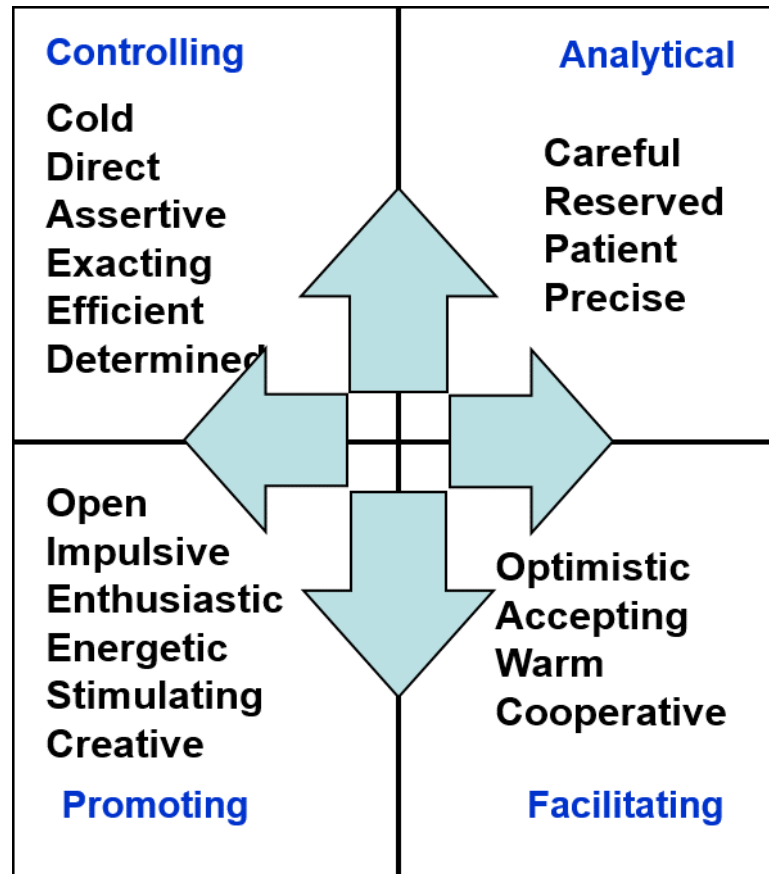




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# Behaviors Associated with Each Style

## As Other Styles See Them



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# How Each Communication Style Goes About Getting What It Wants!

<b>CONTROLLING</b>  <b>Efficiency</b>  Job done right, and on time	<b>ANALYTICAL</b>  <b>Knowledge/Logic</b>  Having the necessary information
<b>Social Skills</b>  Wins people over through their charm  <b>PROMOTING</b>	<b>Friendship</b>  Warmth, Closeness, Affection, Love  <b>FACILITATING</b>

# ...shares time with

<b>CONTROLLING</b>  <b>Useful People</b>	<b>ANALYTICAL</b>  <b>Knowledgeable People</b>
<b>Interesting Fun Loving People</b>  <b>PROMOTING</b>	<b>Everyone!</b>  <b>FACILITATING</b>



What about  
styles & trust ?

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# Elements of Trust

Reliability

“What I say I’ll do and  
what I do are the same.”

Candor/Congruence

“What I say and what I mean  
are the same.”

Openness

“I’ll tell you who I am and  
what I’m about.”

Acceptance

“Who you are is okay with me.  
I don’t wish to change you.”

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# Ability for Trust-Building

<b>Controlling</b>  + _____  - _____	<b>Analytical</b>  + _____  - _____
  + _____  - _____  <b>Promoting</b>	  + _____  - _____  <b>Facilitating</b>

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# Ability for Trust-Building

<b>Controlling</b>  <b>+ Candor / Congruence</b>  <b>- Acceptance</b>	<b>Analytical</b>  <b>+ Reliability</b>  <b>- Openness</b>
  <b>+ Openness</b>  <b>- Reliability</b>  <b>Promoting</b>	  <b>+ Acceptance</b>  <b>-Candor &amp; Congruence</b>  <b>Facilitating</b>

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# Adaptability – authentically

- The willingness and ability to temporarily change communication behavior in order to meet the communication needs of others and to build trust
- The ability to relate to people in a way which considers their needs and perspectives at least as important as yours



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# Personal Responsibility and Trust...

Spend a few minutes reflecting on the following

- When I participate in QI activities in the future I will assist in building an atmosphere of trust by.....
- And I will avoid ...

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# Styles Summary

- It's not who you are, but how you are seen by others as a result of what you do
- Styles are a **pattern or trend** we exhibit to “most people, most of the time”
- Styles are our way of communicating our needs to others
- We all exhibit **some characteristics of each style** and tend to **favor one** style over others
- We each tend to like our own style; we believe our approach to life is appropriate and productive 😊

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## Styles Summary

- ▼ We often forget that **different people have different perceptions** of the world
- ▼ There is no correlation between style's likelihood of success; no one style is better or worse than another, only different
- ▼ **Differences** between styles can cause communication and relationship **difficulties**. **They can also improve the odds for sustainability .....**

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## Discussion

Working in groups of 2 or 3,  
discuss how will you use the information  
we just covered in this module to improve  
your interactions with key  
QI stakeholders?

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# References

Howick Associates, Communicating for Results course for teams. For more information see: [www.howickassociates.com](http://www.howickassociates.com)

Howick Associates, Assessment Services, see [www.howickassociates.com](http://www.howickassociates.com)

Reid, Roger H. and Merrill, David, W. Personal Styles & Effective Performance ISBN 0-8019-6899

Katherine Briggs and Isabel Briggs Myers: @1943  
MBTI: Myers Briggs Type Indicator 16 types based on expansion of Jung

David Keirsey and Marilyn Bates: @ 1955  
The Keirsey Temperament Sorter 16 types Jung-Myers typology

Fritjof Capra pg. 304 The Web of Life

[Rewiring the Corporate Brain](#) Danah Zohar

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Groovy ... It's Break Time Man!  
Volunteers for Mini Presentations please see faculty (Kevin)



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**Module 04 – Day 1**  
**10:45 – 12:00 pm (75 min)**

**Effective Leadership Strategies to Improve HIV  
Care**

**“Does Leadership Really Matter?”**



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## Learning Objectives: You will learn about...

- If Leadership really does matter in QI
- An effective framework for looking at leadership
- Which leadership behaviors matter most in a QI environment
- Ideas on which leader behaviors you could do more of and less of in a quality environment
- Ideas on how to influence the leader behaviors of other leaders, regardless of position

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# HIDDEN IN PLAIN VIEW: BARRIERS TO QUALITY IMPROVEMENT

**DESPITE A VAST AMOUNT OF KNOWLEDGE** about the technical methods of improving quality and safety in health care, rates of success have been highly variable within and across organizations.<sup>1-7</sup> In our work with many health care leaders and organizations, our observation has been that relational rather than technical issues are the most common barriers to improvement.

Neil J. Baker, MD, Anthony Suchman, MD, and Diane (Robbins) Rawlins, MA | Mar 2016 American Association for Physician Leadership

(<http://www.physicianleaders.org/news/plj-articles/2016-march-april/2016/03/04/hidden-in-plain-view>)

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# Moments of Truth: Part 1

## Exercise

1. Spend a few minutes reflecting on a critical leadership “moment of truth” using the worksheet provided.
  - pg. 7 in HOH
  - pg. 69 in TQL Guide
2. Identify the incident and what you did.
3. Fill out **ONLY ☺** the **first two sections** of the “Moment of Truth Worksheet”.

## Moment of Truth:

- *Any episode in which other people come into contact with any aspect of your leadership practices and form an impression from them.*
- *A moment of truth for a leader is any aspect of his/ her routine that signals “that’s the way we do things around here.” For Leaders every interaction with another individual or group becomes a moment of truth.*

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# Leaders in the HIV Context

Points to Ponder:

- You are the quality leaders for your organization!
- If not you, then who?

Considerations:

- formal vs [and] informal leaders
- authority vs [and] influence
- leading up [and] down [and sideways]

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# Basic Framework

Leader as...

- Direction Setter
- Educator
- Facilitator

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# Leader as Direction Setter

## **Lead — To guide along a way**

- Help others understand the preferred future
- Supports proactive problem solving
- Is visible and available to QI teams
- Helps employees prioritize improvement efforts
- Models effective leadership behaviors
- Help teams with managing change

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# Leader as Educator

## **Consult — To promote learning**

- Help people understand the organization as a system
- Support teams in data based decision making
- Help teams discover the voice of the customer
- Links QI team efforts to the larger organization
- Teach, promote and role model effective team skills

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# Leader as Facilitator

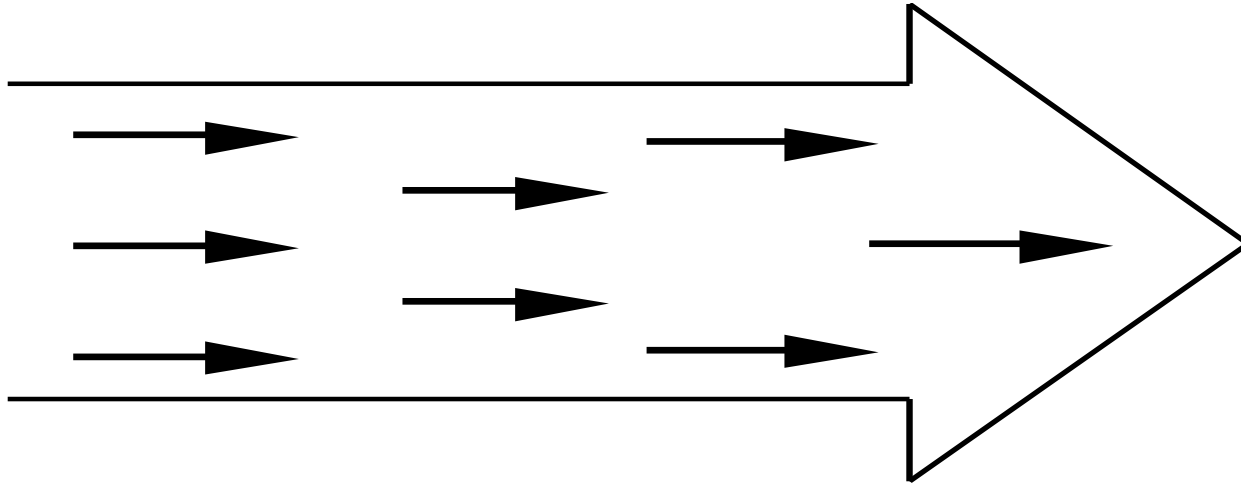
## **Facilitate — To make improvement easier**

- Provides QI teams the necessary resources
- Brings people together to share [learn and act]
- Helps managers coordinate improvement efforts across departments
- Removes organizational barriers to effective performance
- Builds a collaborative work environment



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# Effective Leaders Create Alignment



## Alignment

A condition in which a group of people share a **common understanding** of a vision and set of strategies, **accept** the validity of that direction, and are **willing** to work toward making it a reality.

*A Force For Change*  
*John P. Kotter*

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# Aids to Alignment

1. A clear strategic direction around quality
2. Communicating the quality direction in a way that makes sense to the listener
3. Frequent repetition of the QI strategy being used to achieve increased quality
4. Consistent demonstration of appropriate QI behavior by individuals in leadership positions
5. Candid feedback to individuals and groups to assist everyone in staying "on course"

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# Exercise

## Self Assessment

1. Spend a few minutes reviewing the 2 columns of behaviors.
  - pg. 8 in HOH
  - pg. 70 in TQL Guide
2. Identify behaviors **you** personally need to do more often and behaviors you need to avoid.
3. Select one you would like to improve and list a few ideas you could test.
4. Pair share with your neighbor your ideas and see what suggestions they might have.

## Leadership Development

1. Discuss at your table ideas to positively influence others around improving leadership for quality in your organizations.
2. Be prepared to share 1 strategy from your group.

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## Moments of Truth – Part 2

1. Locate the “moments of truth” worksheet you worked on earlier.
2. In light of our discussion and reflection, identify what you would do differently with that type of incident going forward, should something similar occur again.

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## Words from a Quality Leader

“The problem now is very clear: The buck stops not with the workforce, but with governance and senior leadership. The improvements will happen because of senior leadership, or not at all.”

-Don Berwick

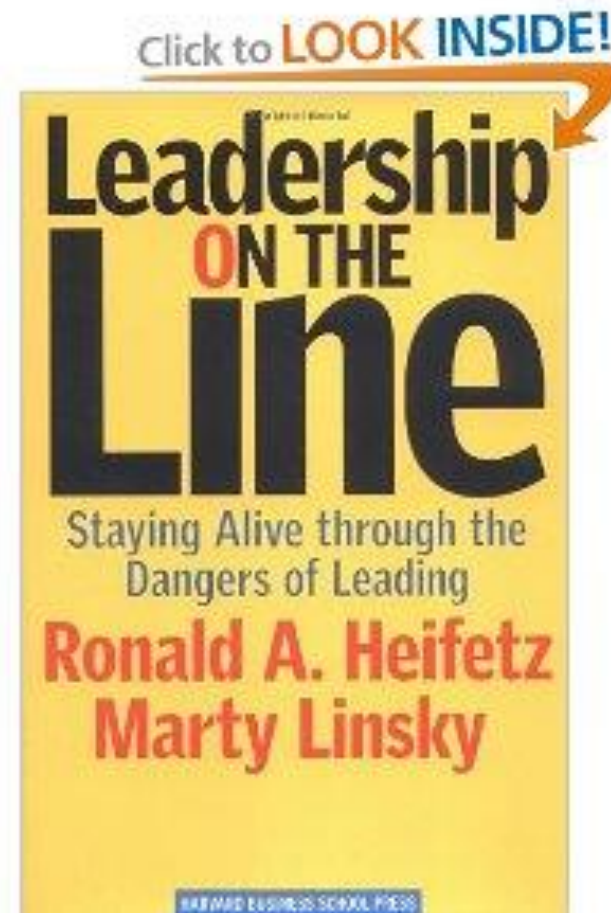
**Your Reactions.....**

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Leadership Without Easy Answers by  
Ronald Heifetz Hardcover \$22.66 (1998)

Leadership on the Line: Staying Alive  
through the Dangers of Leading by  
Ronald Heifetz and Martin Linsky  
Hardcover \$19.47 (2002)

The Practice of Adaptive Leadership:  
Tools and Tactics for Changing Your  
Organization and the World by Ronald  
A. Heifetz), Marty Linsky, Alexander  
Grashow Hardcover \$15.12 (2009)



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# Get Up on the Balcony!







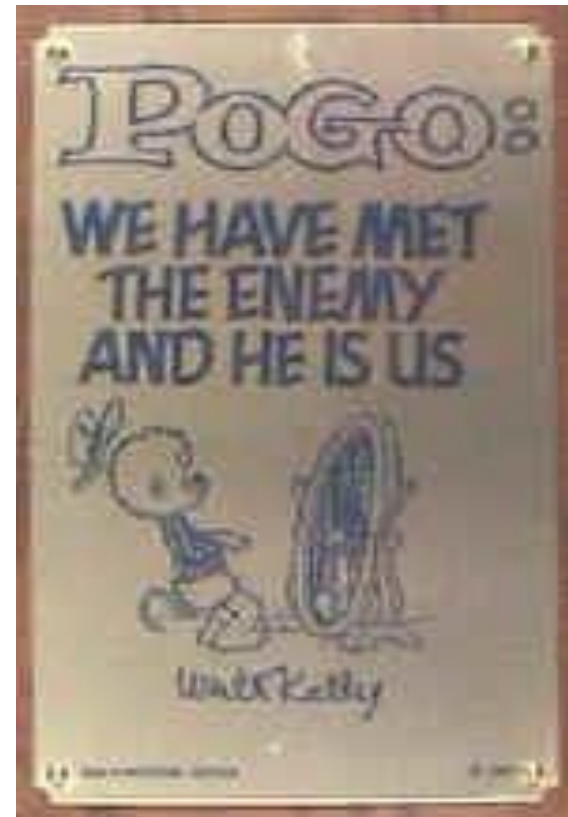
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up and down up and down



## get on the balcony

“The most difficult part [of the balcony view] is to notice what you do yourself ...so you might imagine looking down on the room from a sky camera and seeing yourself as merely another player in the game “ n pg. 52



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# Never Lead Alone!



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**heroic suicide ....**

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# allies

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# confidents





Man

Turtle

Gator

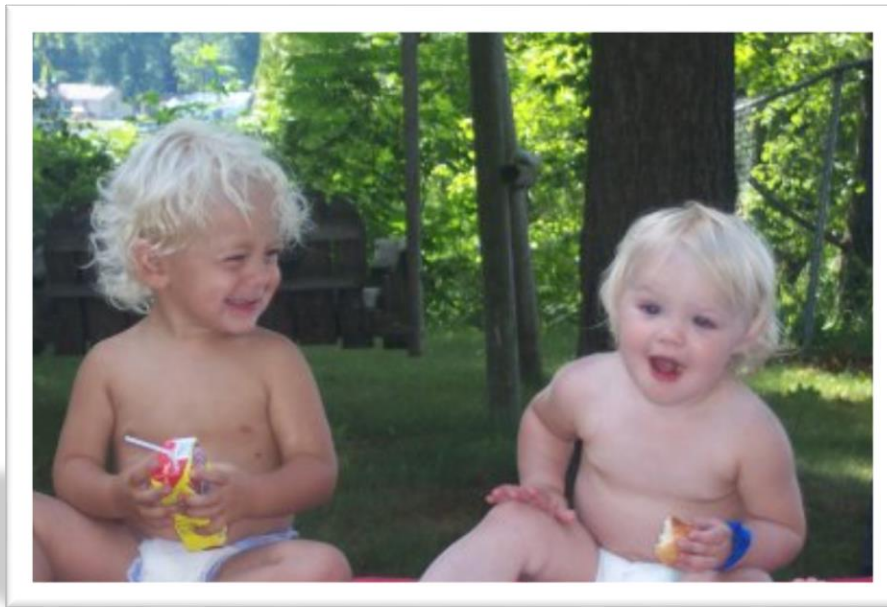






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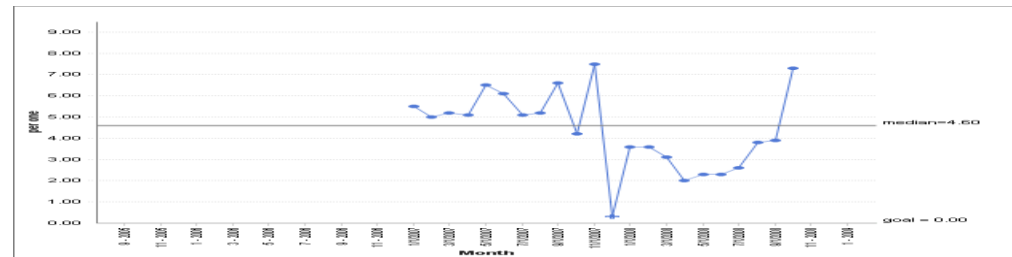
# Confidents



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# Confidents





Of course, measurement is a profoundly useful device, but it cannot tell us what makes life worth living. (pg. 212)

# MYTH OF MEASUREMENT



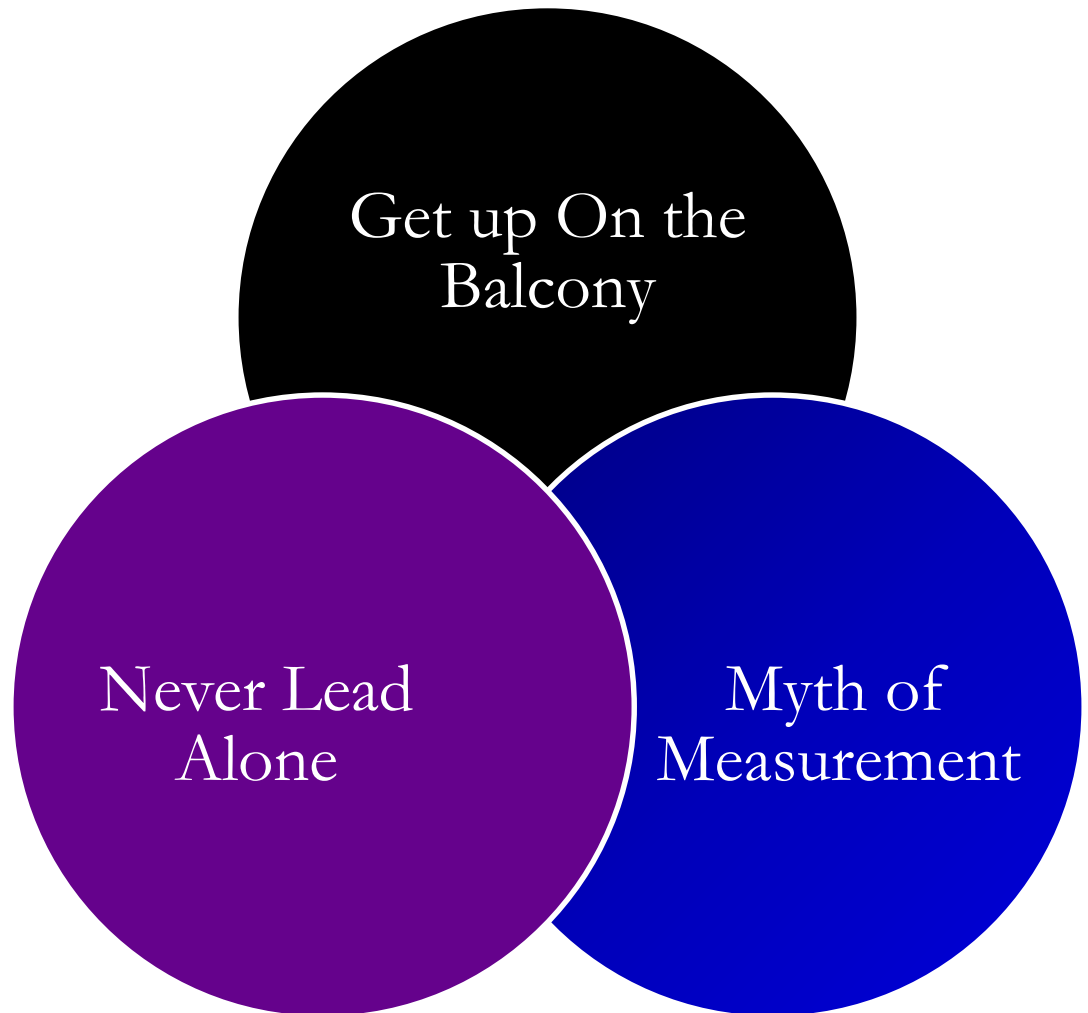
## **Hallowed Ground**

Meaning can not be measured. (p.212)

# Leadership on the Line

Exercising  
leadership can get  
you into a lot of  
trouble.

Page 2



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# Staying Alive

May you enjoy with a full heart the fruits of your labor.  
The world needs you.

Pg. 236

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# References

- Berwick, Donald M. MD, MPP, and Thomas W. Nolan, "Physicians as Leaders in Improving Health Care: A New Series in the Annals of Internal Medicine." *Ann Intern Med.* 1998;128:289-292
- Clemmer, Terry P. MD et. al., "Cooperation: The Foundation of Improvement." *Ann Intern Med.* 1998;128: 004-1009.
- Nolan, Thomas W., "Understanding Medical Systems," *Ann Intern Med.* 1998;128:293-298.
- Plsek, Paul. "Innovative Thinking for the Improvement of Medical Systems." *Ann Intern Med.* 1999;131:438-444.
- Reinertsen, James L. "Physicians as Leaders in the Improvement of Health Care Systems, *Ann Intern Med.* 1998;128: 833-838.
- Caldwell, C. "Mentoring: The Evolving Role of Senior Leaders in a TQM Environment." *Quality Management in Health Care.* 1993. Vol 1. No 2. pp. 13-21.
- Reinertsen, James, Michael Pew and Thomas W. Nolan. "Executive Review of Improvement Projects: A Primer for CEOs and other Senior Leaders." Can be accessed at <http://www.ihl.org/IHI/Topics/LeadingSystemImprovement/Leadership/Tools/ExecutiveReviewofProjectsIHI+Tool.htm>
- Kotter, John P. *Leading Change.* Boston, MA: Harvard Business School Press, 1996.
- Neil J. Baker, MD, Anthony Suchman, MD, and Diane (Robbins) Rawlins, MA | Mar 2016 American Association for Physician Leadership (<http://www.physicianleaders.org/news/plj-articles/2016-march-april/2016/03/04/hidden-in-plain-view>)

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# Let's Do Lunch!





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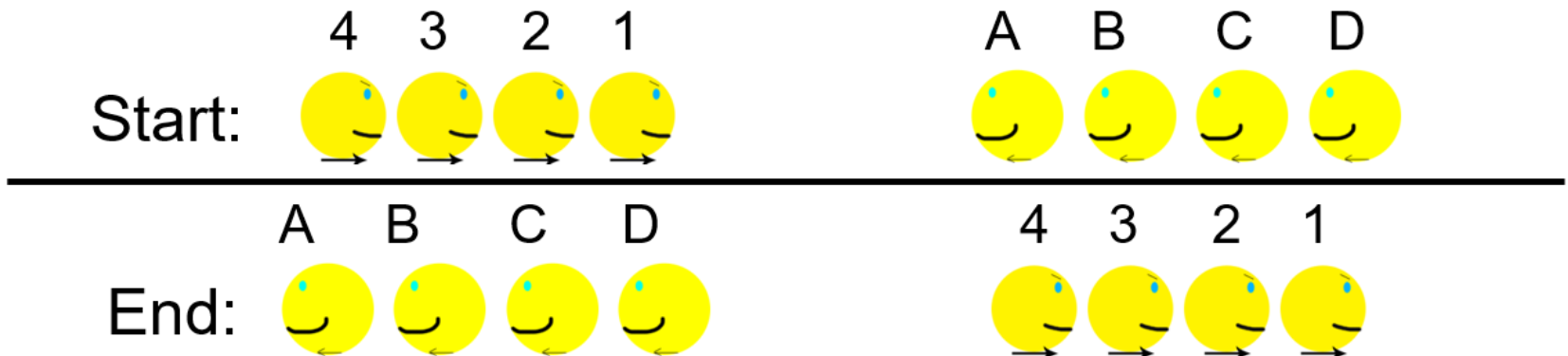
# Group Activity

## Traffic Jam

# Traffic Jam Instructions

## Steps:

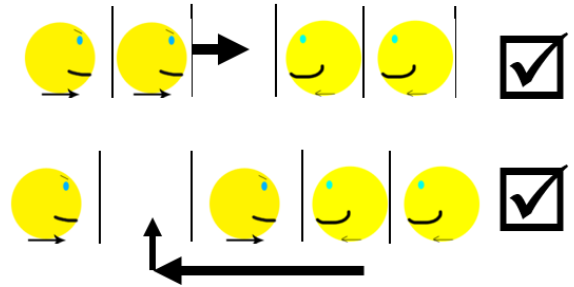
- Each team divides into 2 equal groups, each group facing each other within the provided spaces
- The goal is to move each group to the other side while adhering to the established rules
- The group that is quickest, wins



# Traffic Jam Rules

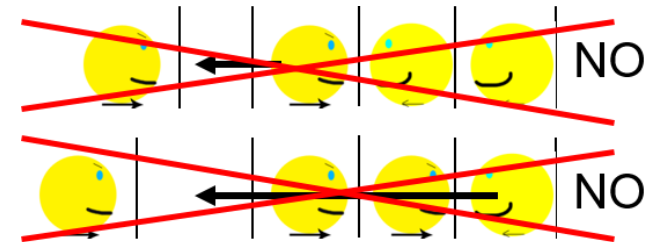
## You can...

- Move into an empty space in front of you
- Move around a person who is facing you into an empty space
- The order of participants within their respective group must remain the same



## You can not..

- Move backwards
- Move around a person who is facing the same direction
- Make a move with two people at the same time



**ALL other moves are illegal and will require each team to assume the original starting positions.**

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# Activity De-brief

- What behaviors helped the group complete the activity?
- What behaviors hindered the group?
- What could the group have done differently to improve their performance?
- How does this experience relate to your work with QI teams? What can we learn?

---

**Module 13 – Day 1**  
**1:30 pm—3:00 pm (90 minutes)**

**Successfully Planning and Managing  
Quality Improvement Projects**

**“A journey of a thousand miles  
must begin with a single step”**

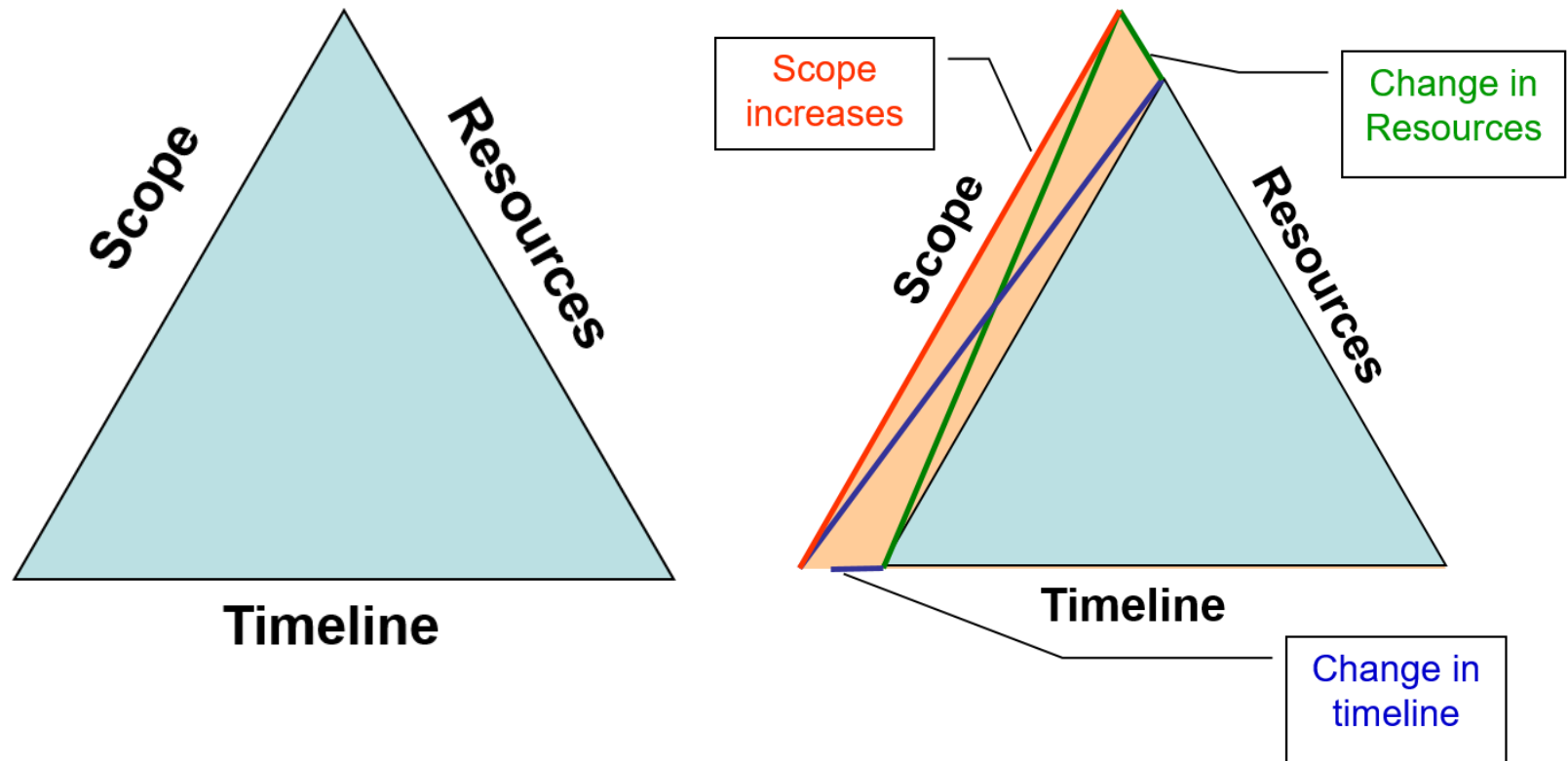
**-Lao Tzu**

---

# Objectives

- Create an opportunity for participants to discuss experiences in planning and managing QI project from their respective organizations
- Create a forum to discuss opportunities to improve project planning and management effectiveness
- Increase the confidence of participants around project planning and management for quality improvement
- Identify steps to initiate a quality improvement project, including how to define the project scope using a team charter
- Understand the importance of roles and responsibilities for each project, task assignments and risk analysis

# 3 Dimensions of Project Management



---

## Table Discussions

Spend the next 7-10 minutes discussing at your tables your experiences with project planning and management either in your current organization or elsewhere.



---

# Use These Framing Questions as a Guide

- What project planning and management approach do you use in your organization? How does it work?
- What works particularly well with your current approach?
- What isn't working well with your current approach?
- What changes to project planning and management are you considering making?
- What pitfalls would you suggest others avoid around project planning and management?

# Planning and Managing QI Projects: What It Is...

A statement  
of what must  
be achieved

Detailed  
steps  
of what must  
be done to  
achieve the  
desired  
outcome

A schedule  
for each step  
and how long it  
is likely to take

Indication of  
who will be  
responsible  
for making sure  
each step is  
completed

Clarification  
of the  
resources  
needed

---

# Project Planning and Management: What It Does

Establishes clear expectations

Assigns roles and responsibilities

Sets and communicates key milestones

Can be used for monitoring the progress

Translates concepts and ideas into actions and tasks

Links clearly to organization mission, strategy and QM

---

# Action Planning: Getting Started

- Clarity on resources
- Reasonable time frame
- Goal setting
- Stakeholders
  - Buy-in
  - Alignment
  - Expectations
- Time sensitivity
  - Concrete short-term steps
  - Competing forces and priorities

## ***Getting Started Checklist:***

- ☐ Resources align with scope
- ☐ Time allowance adequate for success
- ☐ Clear goals and objectives
- ☐ Alignment of stakeholder expectations
- ☐ Realistic planning process

---

# Writing a Team Charter

Why?

- Clarify and focus the team's direction and scope of work
- Create a standard document for communicating what the project is
- Refocus team efforts if a team gets stuck on a specific issue
- Educate new team members coming on board during the project cycle

---

# Project Charter

- Date
- Title of project
- Problem statement
- Improvement goal/aim statement
- Team members and roles
- Other (constraints, ground rules, resources)

---

# Aim Statement Example

- Aim

The clinic will improve care of HIV/AIDS patients by focusing on education, prevention, and early intervention.

Our goals include:

- 80% of patients with at least one visit every three months
- 85% of patients with documented medication education/adherence counseling
- 90% of applicable patients with PCP/MAC prophylaxis

- Team

- Team Leadership: *Primary Care Physician and Nursing Director*
- Technical Expertise: *Senior Physician*
- Day-to-Day Leadership: *Program Manager*
- Additional team members: *Nurse, Case Manager, Clerical staff*

*Source: "HIV/AIDS Disease," produced by the Institute for Healthcare Improvement in partnership with HRSA/HAB, 2002*

## Scenario:

---

# The Emerald City Linkage to Care Project

In the Emerald City EMA, 7,000 PLWHA are served by the Ryan White HIV/AIDS Program system, including a Part C with 2 clinic sites, 3 other medical sites that get Part A and B support, A Part D that serves Green youth, and 2 other agencies with Part A funding that provide case management. The Oz AETC provides training for the region, including providers at Kaiser Oz.

A cross-Parts QM Committee for the City has formed and gets regular performance reports from all the Ryan White HIV/AIDS Program providers. The ECQMC notes worrisome performance on the HAB retention in medical care indicator; only 74% across all agencies.

At a meeting facilitated by chairman C. Lion, the Part A recipient, the Committee decides to organize all the Parts behind a joint QI project on this topic. A project team headed by W.W. West (the Part B rep) is delegated to further refine and develop this idea into a charter for the full Committee to consider.



---

# Group Exercise 1: Project Charter

- Step 1: Identify a facilitator
- Step 2: Discuss the scope of the project and complete the Project Team Charter (Project Scope - Group Exercise 1)
- Step 3: Be prepared to discuss your Project Team Charter with the large group
- Step 4: Provide feedback to the facilitator (2 min)

---

# Discussion

- What are the benefits of having a clear and concise Team Charter for your QI project?

# Planning and Managing QI Projects: What It Is...

A statement  
of what must  
be achieved

Detailed  
steps

of what must  
be done to  
achieve the  
desired  
outcome

A schedule  
for each step  
and how long it  
is likely to take

Indication of  
who will be  
responsible  
for making sure  
each step is  
completed

Clarification  
of the  
resources  
needed

---

# Task Identification

Defined as...

...a detailed list of all the tasks and activities of a project, including the resources needed, arranged in a logical sequence

---

# Developing a Task List

1. Define the boundaries of the QI project
2. Brainstorm with others using sticky notes all the major “pieces” of the project
3. Arrange in logical manner
4. Determine what’s missing; add/delete as necessary
5. Review with others to ensure accuracy

---

## Group Exercise 2: Tasks and Responsibilities

- Step 1: Identify a facilitator
- Step 2: Brainstorm the major activities to plan the first year of the Emerald City Linkage to Care project. Consider the following elements: stakeholder (including consumer) buy-in, reporting back on data and activities, training and communication with agencies, identifying and spreading best practices, etc...
- Step 3: Capture the tasks and activities on Post-it notes and arrange them in sequential order with rough dates.
- Step 5: Provide feedback to the facilitator (2 min)

---

# Defining Key Roles and Responsibilities

**Responsibility Grid (RACI)**

Project Activity and Tasks	Names				

---

# Discussion

What are the benefits of having a clear and concise list of tasks and responsibilities for your QI project?



---

# Action Planning: Step by Step

1. Assess key tasks

2. Confirm skills required

3. Build your team

4. Define the tasks in more detail

5. Establish the interrelationships among the tasks

6 Identify the milestones

7. Communicate the draft plan

8. Evaluate the draft plan against the resources you have

9. Get your entire action plan approved

---

# Evaluate the Plan against Available Resources

Thinking in the following categories may help:

- 1. Personnel
- 2. Equipment
- 3. Facilities
- 4. Materials and Supplies
- 5. Information Technology
- 6. Access to Expertise
- 7. Time
- 8. Money

---

# Effort — Duration Conversion

A Formula for Duration:

$$\text{Duration} = \frac{\text{Effort Estimate} + \text{Delay}}{(\text{Total Hours per day})}$$

---

# Estimating

*“My estimates are never wrong ...  
it’s my actuals that are!”*

---

# Estimating Table

Activities and Tasks	Time Estimation	Assumptions

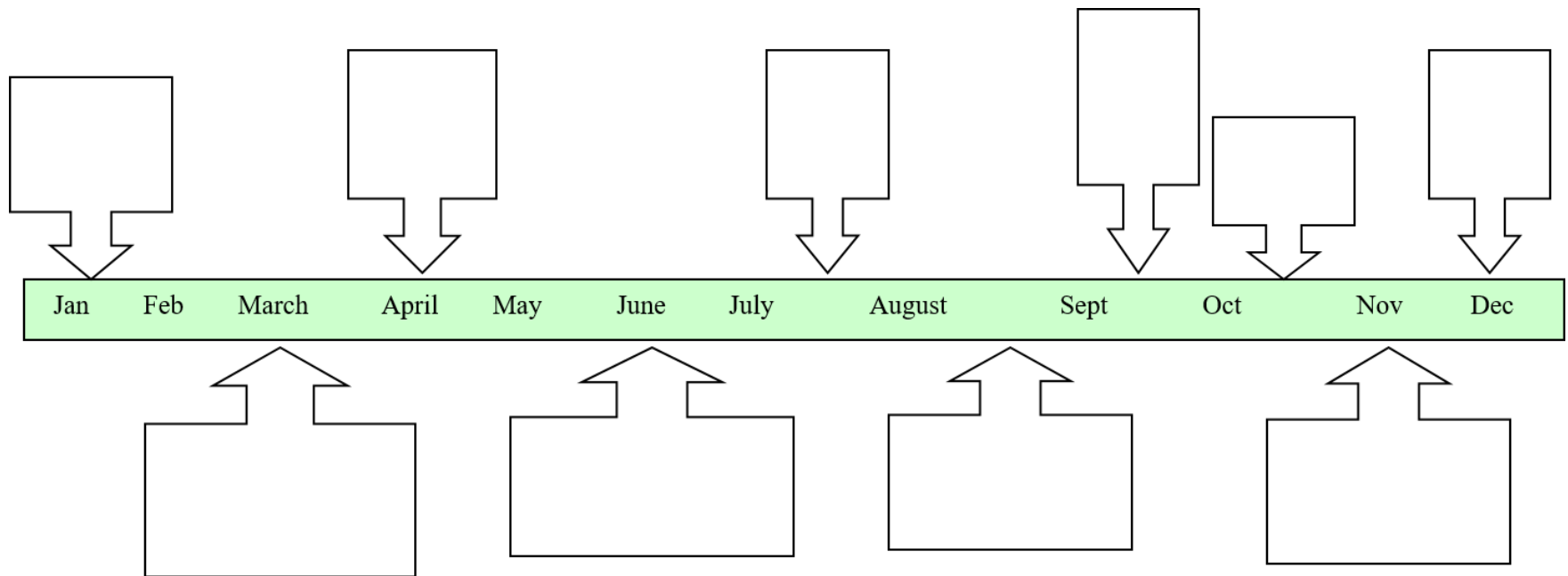
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# Discussion

What are the benefits of having identified how much time major project tasks for your QI project will take?

---

# Example: Annual QM Timeline Template Format



# Develop an Action Plan

## GOAL: ESTABLISH AN EFFECTIVE HIV QUALITY MANAGEMENT PROGRAM

2005 - 2006

ACTIVITY	WHO	JUN	JUL	AUG	SEPT	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY
Revise HIV quality management plan	John	X	X										
Develop annual quality workplan	John		X	X	X								
Prepare planning information (data collection, program assessment/evaluation, organizational priorities, HRSA grant) – for bimonthly meeting.	Mindy			X	X	DUE							
Review HIV quality management plan. Make changes if needed	Mindy					X	DUE						
Discuss and set annual goals	John		X			X	DUE						
Monitor implementation of plan Revise as needed	Committee			X				X				X	
Evaluate quality management program	Committee												X
Quality improvement project teams – at bimonthly meetings	Committee		X		X		X		X		X		X
Program goals	Committee		X				X						X
Annual organizational assessment	Committee	X											



---

# Executing Your Action Plan

Create the infrastructure to get the job done:

- Meetings
  - Routine meetings of the implementation team
  - Periodic meetings with leadership
  - Meetings with other stakeholders
- Reports, helpful because they:
  - Impose a deadline
  - Convey discipline
  - Encourage reflection
  - Help assess progress
  - Acceptable communication tool for stakeholders
- Supportive culture

---

# Monitoring and Communicating Progress

- Monitor data at least quarterly and when possible monthly
- The improvement team consider the data at least monthly at one of their team meetings
- Accelerate change by using the data real time to guide your PDSA cycles
- Communicate milestones to stakeholders
- Better to over communicate than under
- Praise achievements, celebrate successes

---

# Project Monitoring

- Frequently track the progress of the project
- Check-in with people about half way between meeting to see if the task will be completed on time

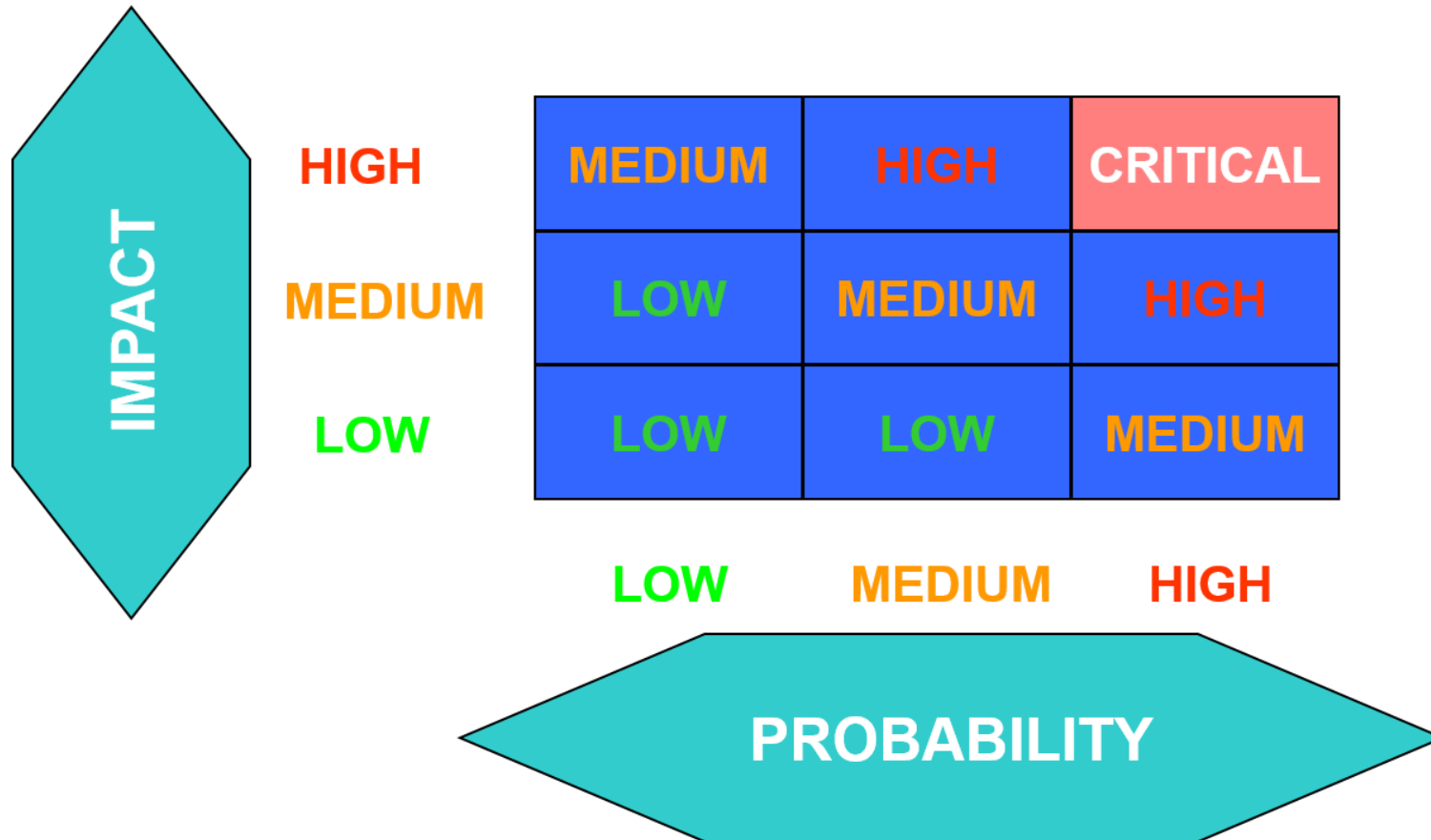
Who (name)?	Is going to do what?	By When?	Completed

---

# Risk Analysis: Why Consider Risks?

- There is always the chance something will go wrong
- It is wise to consider:
  - What might go wrong?
  - What we can do to minimize?
    - Probability of problem occurring
    - Impact if problem does occur

# Assigning Priorities



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# Post Implementation Evaluation

- Were the QI project objectives achieved?
- Were the benefits received?
- What should we do differently when conducting the next QI project?

---

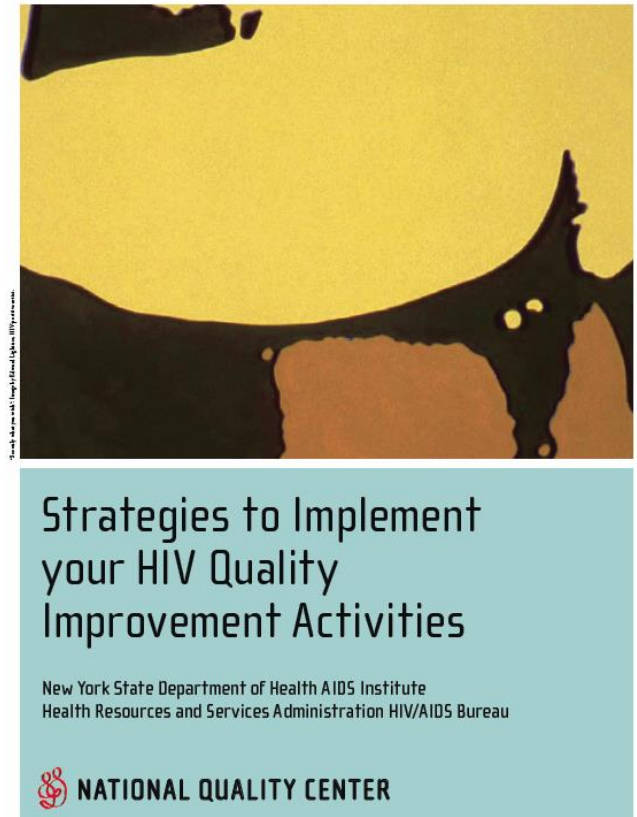
“A good plan implemented today is better than a perfect plan implemented tomorrow.”

-George Patton

---

# NQC Resource

- NQC Guide: *'Strategies to Implement your HIV Quality Improvement Activities'*
- Purpose: to facilitate the translation of strategic and operational quality priorities into effective improvement actions
- Guide includes: real world examples, practical suggestions, short statements from providers in the field, actual tools, take home messages and resources





Break time .....



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**Module 07 – Day 1**  
**3:30pm - 5:00pm (90 min)**

Managing a Quality  
Management Committee

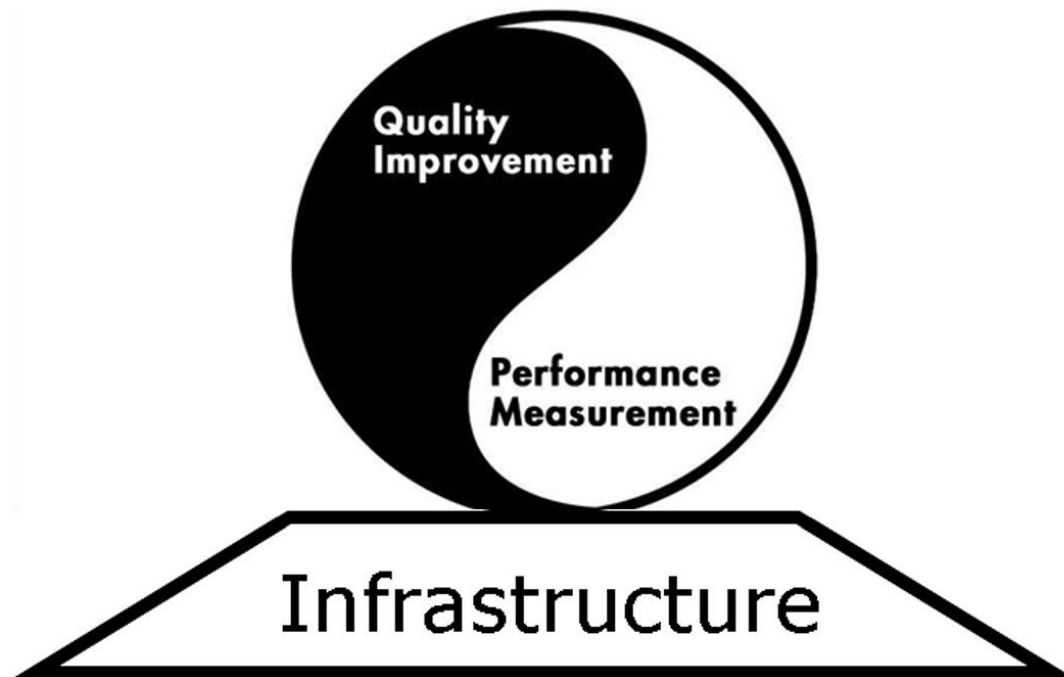
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# Learning Objectives

- Learn more about the key functions of the quality management committee to build an infrastructure for quality improvement
- Assess your organization's quality management committee and realize opportunities for improvement
- Learn proven strategies to improve the effectiveness of a quality management committee
- Increase confidence in supporting and improving the effectiveness of your quality management committee
- Move theory to action through the development of an action plan

---

# Quality Improvement Activities Are Supported by a Quality Infrastructure



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# Quality Management Committee

---

**How many of you have a QM Committee?  
How long has it been in existence?  
Advice to the Group?**



---

# A Quality Management Plan?

## Is it working well?



---

# How many of you love your Committee Meetings? Why or Why not?





---

# Individual Assessment Exercise

- Spend 5 minutes working individually on a rapid assessment of your organization's quality management committee
- Use the provided assessment tool, 'Quality Management Committee Assessment Tool'

Page 13 in HOH: page 86 and 87 in TQL Guide

---

## Small Group Discussions

1. Move to a “Part” table to join others doing work similar to yours.
2. Identify a facilitator in your group
3. Spend the next 30 minutes at your table identifying and discussing strategies to improve the effectiveness of quality management Infrastructure
4. Be prepared to share one tip for success and one question you all have regarding QM Infrastructure, QM Committee’s Plan, Meetings, Membership etc

---

# Use These Framing Questions as a Guide

- What strategies do you use in your organization to successfully support your quality management committee?
- Why do you believe they work particularly well?
- What isn't working well? Where have you struggled?
- What improvements to your quality management committee are you considering making?
- What pitfalls would you suggest others avoid with their quality management committee?

---

# Developing Your Action Plan

- Spend the next 5 minutes individually developing an action plan to improve the effectiveness of your quality management committee
- Consider your:
  - Strategies
  - Action Items
  - Accountabilities
  - Timeframes
  - Resources

---

# **In closing**

**More help.....**

---

# Resources

- ‘HIVQUAL Workbook’ A guide for HIV providers to learn about quality management and quality improvement. A publication of the New York State Department of Health, AIDS Institute, 2006
- Technical Assistance Manual, HRSA HIV/AIDS Bureau
- Part-specific Quality Program Assessment Tools
- And all the slides in this manual!

---

# The Quality Management Committee

- Builds the HIV program's capacity and capability for quality improvement
- Involves program leaders and other key staff to cement their personal commitment to quality
- Feeds and focuses the quality work, in order to make it sustainable and effective
- In a large organization, links the HIV quality program with the organization's overall quality program

---

# Roles in the Quality Management Committee

- Committee Chairperson
- Members
- Facilitator
- Note Taker
- Subject Matter Experts
- Guests/Observers



---

# Who Might Be on the Committee?

## For a Teaching Hospital (HIV Caseload: 700)

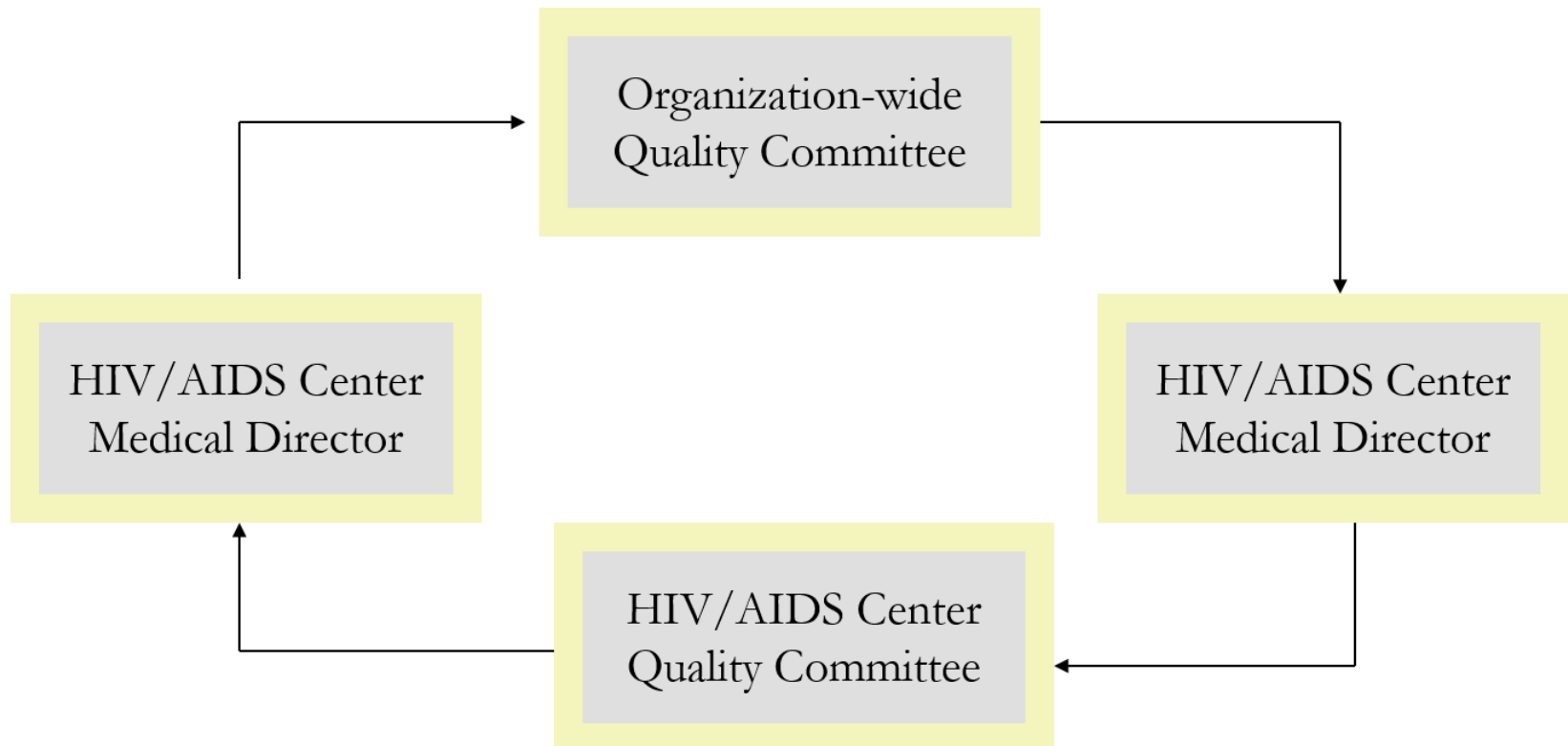
- Chief of Infectious Diseases
- AIDS Center Administrator
- Director of Ambulatory Care
- Director of Quality Improvement
- Director of Nursing
- AIDS Center Nurse Practitioner
- Clinic Coordinator for Case Management
- Senior Staff Nurse
- Patient Representative
- Part D Provider

## For a Neighborhood Health Center (HIV Caseload: 100)

- Medical Director
- Senior Staff Nurse
- HIV Nurse
- Case Manager
- Patient Representative

---

# Sample Organizational Chart for Quality in a Large Facility



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# How To Select Appropriate Committee Members

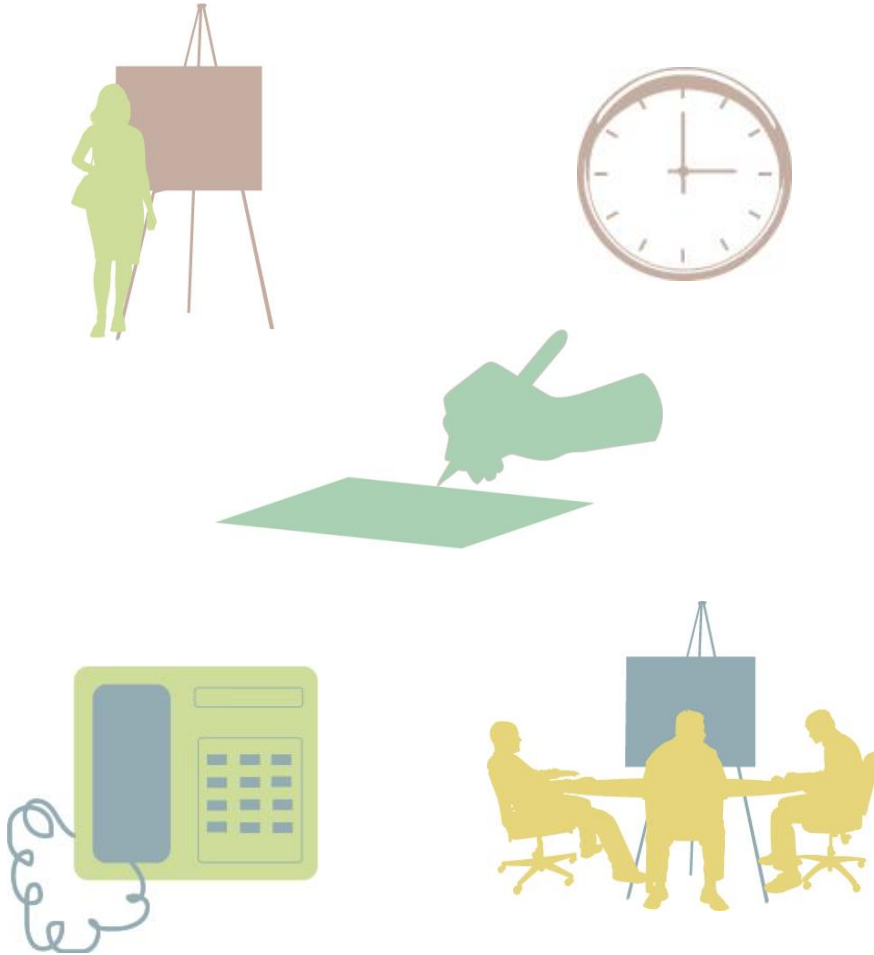
- Build a cross-functional group; draw from different service areas in the clinic
- Visualize a vertical/horizontal slice of your organization
- Identify individuals who are potential influencers and can get things done
- Start with a small group who are most critical to success
- Include patients and/or stakeholders on the committee
- Keep everyone informed
- Identify a person who will facilitate the meeting

---

# How Would You Involve Providers and Consumers?


- Reach out to HIV providers who are opinion leaders for others and involve them in the committee
- Potentially let these providers chair the quality committee (Part A, Part B)
- Have consumer(s) on the committee (invest in them...)
- Ask the providers for their priorities for the committee and align annual goals with their interests
- Form subcommittee(s) and ask them to chair these groups
- Set clear expectations for their attendance and work involvement

# Getting Committee Work Done



- Identify a chair for the committee
- Set meeting frequency and duration
- Document your progress
- Establish communication channels
- Train committee members on quality improvement

# Example of Documentation: Committee Minutes

 **Toolbox:**  
Quality Improvement Committee Minutes

QUALITY COMMITTEE MEETING	
DATE	December 20th, 2005
MEMBERS PRESENT	Victoria S (chair) Catherine G; Hannah W; Daphnee C; Sheldon M; Barbara W; M A, MD; Tom D; Janet W; Isaac K; Leona W; Peter S; Clyn
CALL TO ORDER AT	8:00am
MEETING WAS ADJOURNED AT	8:00am
MINUTES FROM LAST MEETING	Reviewed and Approved
ANNOUNCEMENTS	None
QUALITY COMMITTEE MINUTES	
TOPIC/AGENDA	DISCUSSION
• Pediatrics	• Discussion of the Annual Medical Review for the growth/... ...will be followed up by the ...minutes. Actions regarding PPD testing ...to be discussed by the program's leadership. Follow-up by Susan A
	• It was suggested that a meeting take place between Catherine G, Barbara W and Christine S to review the review tool and to discuss the presentation of the results. Follow-up by Catherine G
	• The results of an Annual Medical Review were presented. It was discussed that the indicators used in the review tool are based from OASIS Standards. It was also discussed that as of 11/30 MMTP began working jointly with CTRPS. The results of a Counseling Admission Review were presented indicating low compliance rates for agreement for testing (25%), completed within five week of entrance (20%). Orientation completed and signed w/in 30 days (87%). It was discussed that there was additional information added to the interviewing process and the conversation.
	• It was suggested that we go beyond what OASIS asks for in indicators and include HIV testing and Hepatitis indicators to the review tool. It was discussed that there should be automatic referrals for HIV counseling and test- ing (for new admission to program and to annual review). Follow-up by Susan G
SUBMITTED BY:	Daphnee C, December 27th, 2005

**COOL TOOLS!**

---

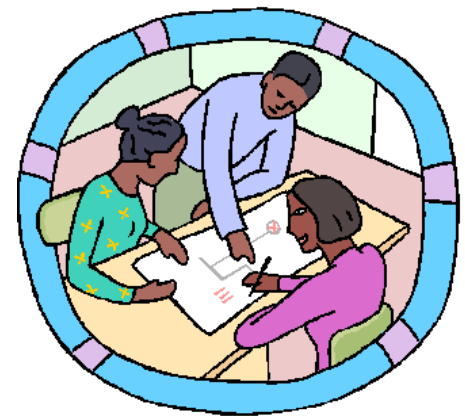
# Responsibilities of the Quality Management Committee

- Strategic planning
- Facilitating innovation and change
- Providing guidance and reassurance
- Allocating resources
- Establishing a common culture

---

# Strategic Planning

- Develops the HIV quality management plan
- Prioritizes goals and projects
- Outlines the quality program infrastructure
- Identifies performance measures
- Plans for program evaluation





---

# How to Develop a Quality Management Plan

- Gain consensus on an overall planning approach
- Develop an annual planning calendar, which culminates in the annual meeting
- Break the annual meeting agenda into smaller steps and conduct a series of short planning meetings
- Use a small group of 2-3 individuals to assist with agenda preparation
- Prior to the annual meeting, gather and distribute background information & draft recommendations
- Develop goals using that are SMART

---

# Rules for Goal Setting – SMART Goals

## **Specific**

Well defined, clear and unambiguous

## **Measurable**

- Know if the goal is obtainable and how far away completion is
- Know when it has been achieved - something you can count

## **Agreed Upon**

Agreement with all stakeholders what the goals should be

## **Realistic**

Within the availability of resources, knowledge and time

## **Time Based**

Achievement by a certain date

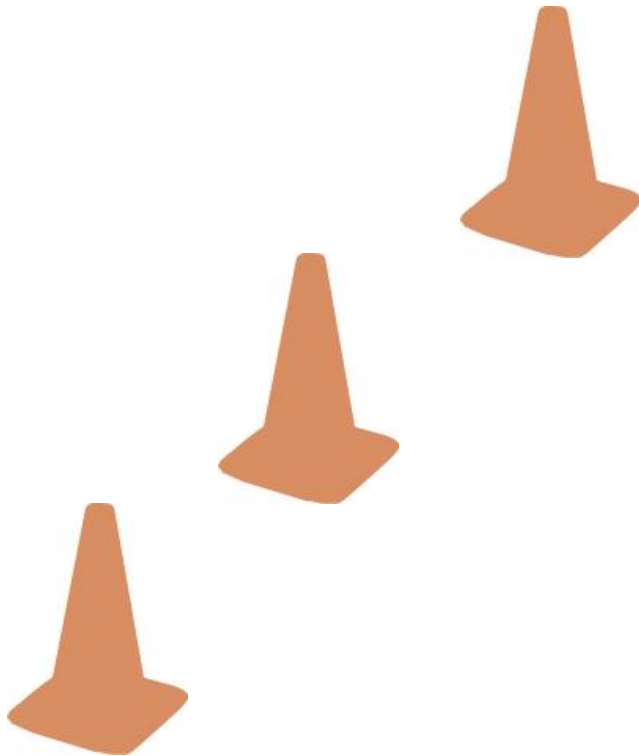
---

# Responsibilities of the Quality Management Committee

- **Strategic planning**
- **Facilitating innovation and change**
- **Providing guidance and reassurance**
- **Allocating resources**
- **Establishing a common culture**

---

# Facilitating Innovation and Change



- Removes barriers to making and sustaining improvements
- Prepares staff for change
- Promotes communication: gives everyone at the facility a voice in the quality management program

---

# Providing Guidance and Reassurance

- Oversees the progress of quality activities
- Helps quality improvement teams in their work
- Supports changes that result from quality improvement projects
- Listens, observes, responds to staff concerns

---

# Allocating Resources

- Makes staff time available for quality committee meetings and quality improvement project team work
- Ensures that staff has the tools, knowledge and data necessary to participate in quality improvement work

---

# Establishing a Common Culture

- Demonstrates a true commitment to the quality program
- Successful buy-in to the quality program means “not to get people to do what they are told but to do what they are not told”

---

# First Quality Committee Meeting of the Year

- Briefly review QI core components:
  - Performance Measurement
  - Quality Improvement
  - Quality Program Infrastructure
- Review program's data and benchmarking data
- Choose 1-2 annual QI goals and assign roles and responsibilities



---

## In Closing: Characteristics of a Strong Quality Committee

- **Multidisciplinary Representation**  
including consumers
- **Regular Meetings**  
with good attendance
- **Visible Trajectory of projects**  
from planning to doing to evaluating
- **Lessons Learned**  
are documented and built upon

---

**Module 8 – Day 1**  
**5:00pm – 5:30pm (30 min)**

**Mini-Presentations: Leaders and Leading**

---

# Module Objectives

- Create a forum for participants to discuss their personal experiences of quality leadership
- Develop ideas for middle level leaders to work with roadblocks or resistance created by formal leaders
- Reinforce that great learning and personal improvement comes from our experiences
- Increase the confidence participants have in facilitating groups and quality improvement teams

---

# Mini-Presentations

5 people have volunteered to share with the group an experience of quality leadership they have had, or witnessed, or are struggling with now.

---

# Potential Topics

- When were the leadership dynamics in your quality committee or team most challenging for you? What made it that way? How did you overcome them?
- Who is the best or worst quality leader you have worked with? Why?
- Do you have an example how you engaged your senior non-HIV leadership around quality?
- Do you have a “leading from the middle” challenge now? What advice can you ask for from your peers?

---

# On Failure...

*“I have not failed. I've just found 10,000 ways that won't work.”*

Thomas Alva Edison

*“I've missed more than 9000 shots in my career. I've lost almost 300 games. Twenty-six times I've been trusted to take the game winning shot and missed. I've failed over and over and over again in my life. And that is why I succeed.”*

Michael Jordan

---

Sharing of Aha! Moments &  
Day 1 Evaluation

**Module 09 – Day 1**  
**5:00—5:30 pm (30 min)**

---

## Highlights & Aha! Moments

- What have been some of your personal highlights or Aha! Moments from today's session?
- Use the next 2 minutes to reflect on today, identify a few ideas



---

The way the course was delivered today was an effective way for me to learn.

- A. Strongly Disagree
- B.
- C. Agree
- D.
- E. Strongly Agree

---

The agenda and content for today was logically organized.

- A. Strongly Disagree
- B.
- C. Agree
- D.
- E. Strongly Agree

---

Overall, I was satisfied with the session facilitator(s).

- A. Strongly Disagree
- B.
- C. Agree
- D.
- E. Strongly Agree

---

My knowledge and/or skills increased as a result of  
today.

- A. Strongly Disagree
- B.
- C. Agree
- D.
- E. Strongly Agree

---

How ready are you to facilitate a quality management committee and/or quality improvement team?

- A. Not Ready
- B.
- C. Mostly Ready
- D.
- E. Very Ready

---

How ready are you to conduct an organizational assessment of the QM program?

- A. Not Ready
- B.
- C. Mostly Ready
- D.
- E. Very Ready

---

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# Reference Materials

- Aguanno, Kevin (2005). Managing Agile Projects. Oshawa, ON: Multi-Media Publications Inc.. [ISBN 1-895186-11-0](#).
- Baars, Wouter (2006). [Project Management Handbook \(open source\)](#), version 1.1, Edita-KNAW. [ISBN 90 6984 496 6](#).
- Berkun, Scott (2005). Art of Project Management. Cambridge, MA: O'Reilly Media. [ISBN 0-596-00786-8](#).
- Brooks, Fred (1995). The Mythical Man-Month, 20th Anniversary Edition, Addison Wesley. [ISBN 0-201-83595-9](#).
- [[Flyvbjerg, Bent, 2006). "[From Nobel Prize to Project Management: Getting Risks Right.](#)" [Project Management Journal](#), vol. 37, no. 3, pp. 5-15. | Comninos D &, Frigenti E]] (2002).
- The Practice of Project Management - a guide to the business-focused approach. Kogan Page. [ISBN 0-7494-3694-8](#).
- Heerkens, Gary (2001). Project Management (The Briefcase Book Series). McGraw-Hill. [ISBN 0-07-137952-5](#).
- International Project Management Association (2006). ICB - IPMA Competence Baseline, Version 3.0, IPMA. [ISBN 0 9553213 0 1](#).
- Kerzner, Harold (2003). Project Management: A Systems Approach to Planning, Scheduling, and Controlling, 8th Ed., Wiley. [ISBN 0-471-22577-0](#).
- Chamoun, Yamal (2006). Professional Project Management, THE GUIDE, 1st.Edition, Monterrey, NL MEXICO: McGraw Hill. [ISBN 970-10-5922-0](#).



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# Reference Materials

- Lewis, James (2002). Fundamentals of Project Management, 2nd ed., American Management Association. [ISBN 0-8144-7132-3](#).
- Meredith, Jack R. and Mantel, Samuel J. (2002). Project Management : A Managerial Approach, 5th ed., Wiley. [ISBN 0-471-07323-7](#).
- Project Management Institute (2003). A Guide To The Project Management Body Of Knowledge, 3rd ed., Project Management Institute. [ISBN 1-930699-45-X](#).
- Stellman, Andrew and Greene, Jennifer (2005). Applied Software Project Management. Cambridge, MA: O'Reilly Media. [ISBN 0-596-00948-8](#).
- Thayer, Richard H. and Yourdon, Edward (2000). Software Engineering Project Management, 2nd Ed., Wiley-IEEE Computer Society Press. [ISBN 0-8186-8000-8](#).
- Whitty, S. Jonathan (2005). [A Memetic Paradigm of Project Management](#). International Journal of Project Management, 23 (8) 575-583.
- Whitty, S.J. and Schulz, M.F. (2007). [The impact of Puritan ideology on aspects of project management](#). International Journal of Project Management, 25 (1) 10-20.
- Pettee, Stephen R. (2005). [As-builts – Problems & Proposed Solutions](#). Construction Management Association of America.
- Verzuh, Eric (2005). The Fast Forward MBA in Project Management, 2nd, Wiley. [ISBN 0-471-69284-0](#) (pbk.).
- Woolf, Murray (2007). Faster Construction Projects with CPM Scheduling, 1st, McGraw-Hill. [ISBN 978-0-07-148660-6](#).

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