Quadruple Aim Performance Process: Transforming Performance Improvement

February 11, 2019

Disclosures

- Presenter has no interest to disclose.

Abstract

The Defense Health Agency's (DHA) Assistant Director for Health Care Administration (AD HCA) will discuss the DHA's refreshed strategy and Quadruple Aim Performance Plan (QPP) process that the DHA is using to standardize performance across the Military Health System (MHS). The DHA recently updated its strategy to better reflect its key priorities and align more closely with the Quadruple Aim of Improved Readiness, Better Health, Better Care, at Lower Cost. The QPP encompasses multiple components of the DHA strategy and allows innovative problem solving to align military medical treatment facilities (MTF) with the DHA's Quadruple Aim strategy. Beginning with Phase 1 MTFs in FY19, each MTF transitioning to DHA will be required to submit a QPP Plan to the DHA to set priorities and improvement targets for the coming year. Topics covered in this session will include the DHA's strategy and key priorities, the process of developing and executing QPP business plans, guidance and training on the QPP, the critical initiatives that have been targeted for improvement, and the benefits of this new framework. The session will also include a discussion of how the QPP framework provides a systemic approach to problem solving and how the framework will be operationalized across the MHS.

Learning Objectives

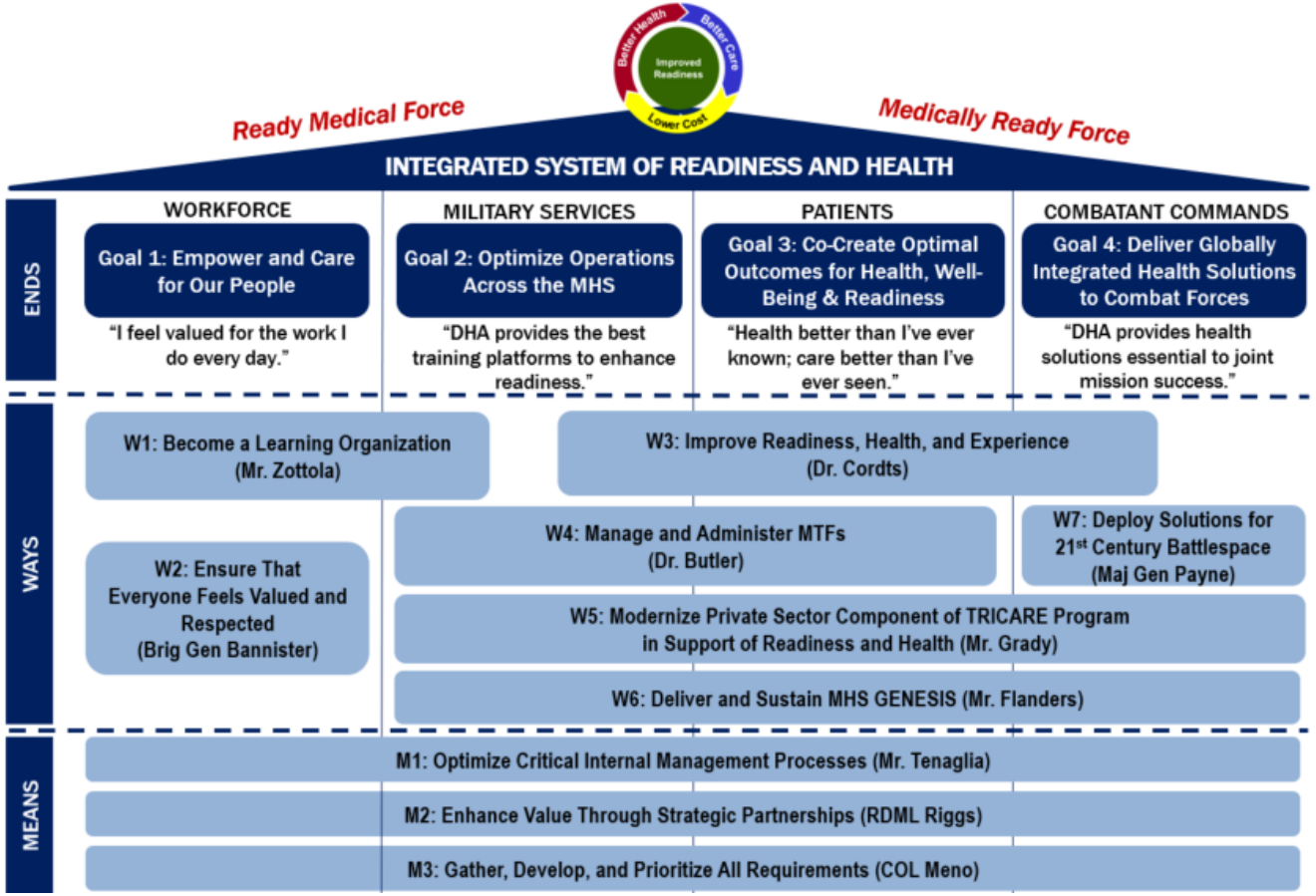
At the conclusion of this activity, the participant will be able to:

1. Describe the DHA's strategy and how it aligns to the Quadruple Aim of Improved Readiness, Better Health, Better Care, at Lower Cost.
2. Understand the Quadruple Aim Performance Plan (QPP) process and how it will standardize performance improvement across the MHS enterprise.
3. Discuss how QPP supports the DHA's efforts to become a High Reliability Organization and improve patient safety and quality of care.
4. Use the HSO framework to apply a systematic approach to problem-solving.

DHA Vision, Mission, and Strategic Roadmap

VISION: Unified and Ready…

MISSION: As a Combat Support Agency, the Defense Health Agency leads the MHS integration of readiness and health to deliver Quadruple Aim: increased readiness, better health, better care, and lower cost.



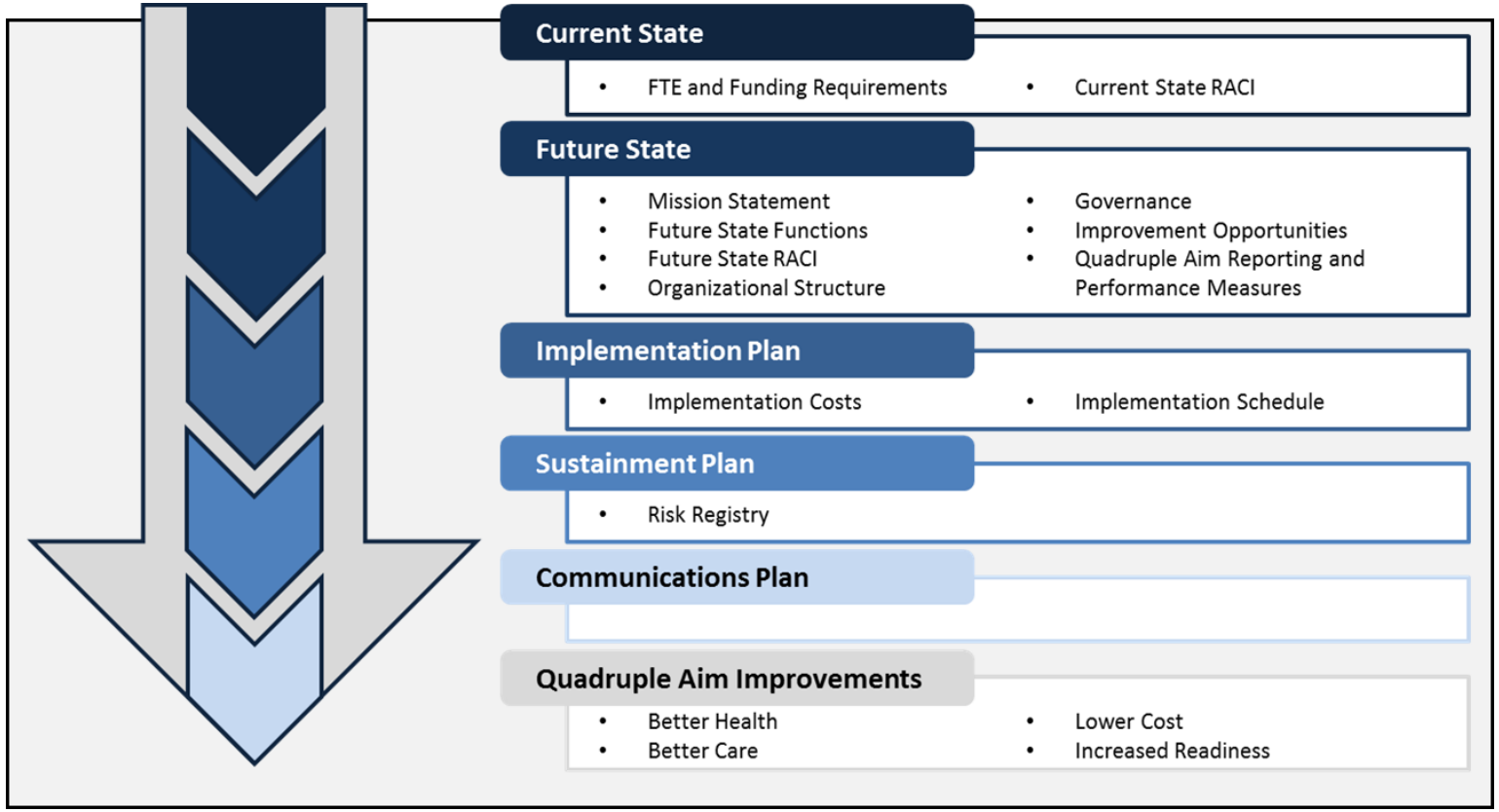
Background

NDAA FY17, Section 702 (e)(1) (Public Law 114-328) requires that DHA act as the single agency responsible for the administration of all MTFs

- **Current State**:
  - MTFs create business or performance plans using Service-specific guidance
  - Creates pockets of success, but also creates potential for conflicts in priorities across MTFs from different Services within the same market
  - MTFs do not operate together as an integrated system of readiness and health
- **Challenge**:
  - Reengineer the development process for Market performance plans
  - Achieve system wide Quadruple Aim performance improvement
  - Promote an integrated system (of systems) for readiness and health
- **Goal**:
  - Reengineer the development process for Market performance plans
  - Achieve system wide Quadruple Aim performance improvement
  - Promote an integrated system (of systems) for readiness and health
  - Unified military health command
  - Optimized operational coherence of over 40 functional capabilities

Transition Plan Framework

The transition plan implementation framework provides the roadmap for the DHA to execute the management and administration of the MTFs to achieve an Integrated System of Readiness and Health.



Functional Capabilities (FCs)

The transition plan is founded on the implementation of enterprise functional capabilities (common function or product line that supports the efficient and effective delivery of military healthcare) overseen by the DHA.

DHA initiated the enterprise management of the Quadruple Aim Performance Planning (QPP) functional capability on OCT 1 2018

FC #	FC Name	DAD
1	Decision Making Architecture (Governance)	Special Staff
2	Regional Model	N/A
3	Strategic Communications	Special Staff
4	DHA MILPER Management	DAD Admin and Management
5	DHA CIVPER Management	DAD Admin and Management
5A	Learning and Development Division	DAD Admin and Management
6	DHA & Regional Staffing (Manpower)	DAD Admin and Management
7	Acquisition EA	DAD Contracting
8	**QPP**	**DAD Strategy and Innovation**
9	Education and Training EA	DAD Education and Training
10	Research and Development	DAD Research and Development
11	MEDLOG EA	AD CSA
12	Public Heath EA	AD CSA
13	PPBE (Financial Operations)	DAD FO
14	Revenue Cycle Management EA	DAD FO
15	Enterprise Activities (EA) Management	AD CSA
16	Health Plan (TRICARE) EA	DAD Health Plan
17	Healthcare Operations	DAD HCO
18	Facilities EA	DAD FO

FC #	FC Name	DAD
19	Pharmacy EA	DAD HCO
21	MHS GENESIS Transition and Sustainment & OCHIO	DAD HCO
22	Prioritization Procedural Instructions	Special Staff
23-25	Clinical Quality Management	DAD MA
26	Clinical Operations (Clinical Communities)	DAD MA
27-28	Health IT	DAD IO
29	IG	Special Staff
30	Legal Services and Support	Special Staff
31	Mission Assurance	DAD Admin and Management
32	Analytics	DAD Strategy and Innovation
33	EO/EEO	DAD Admin and Management
34	SHARP/SAPR	DAD Admin and Management
35	Clinical Laboratories	DAD HCO
36	Privacy	DAD HCO
37	Graduate Medical Education	DAD MA
38	AD-CSA (CSA, ASBP, DODMERB, AFMES)	AD CSA
39	Virtual Health	DAD HCO
40	Small Business Programs	DAD Contracting
41	Chaplaincy	TBD

Quadruple Aim Performance Process (QPP)

What is the QPP?

The QPP is more than a plan. It is the process by which "we" engage the entire military health system to achieve breakthrough performance in pursuit of the Quadruple Aim (Improved Readiness, Better Health, Better Care, and Lower Cost).

What is the purpose of the QPP?

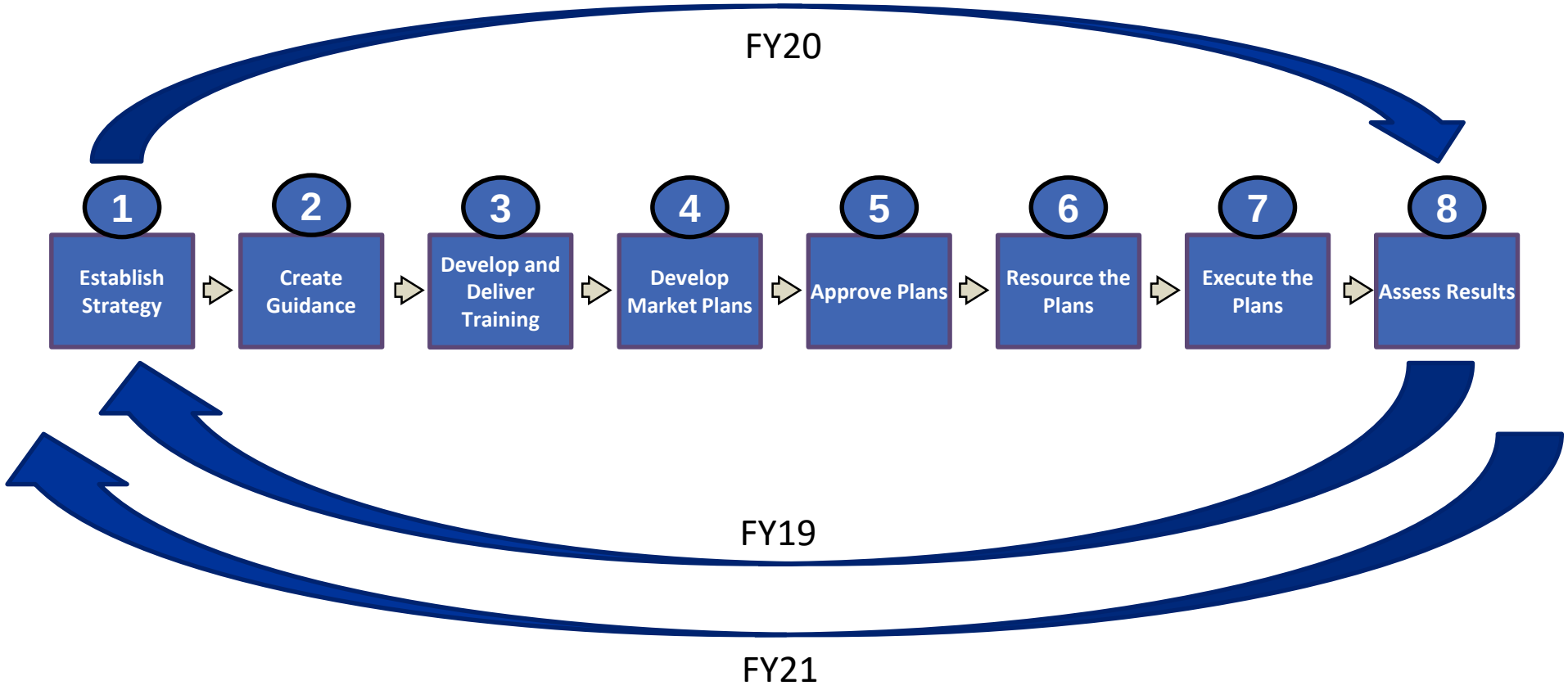
- Align Market and Military Treatment Facility (MTF) activities with the Military Health System (MHS) Quadruple Aim vision,
- Enhance our integrated system of readiness and health,
- Promote system learning and continuous improvement,
- Support a smooth transition of administration and management of MTFs to the Defense Health Agency (DHA) and,
- Enable enhanced enterprise performance, balanced across the Quadruple Aim framework – Improved Readiness, Better Health, Better Care, and Lower Cost.

QPP Enables System Shift Along Several Paradigms

Currently, the majority of MTFs create business or performance plans using Service-specific guidance, which has resulted in a decentralized performance management system with varied performance improvement initiatives and limited learning across the MHS. To reform this current state, the DHA will use the QPP to translate strategy to action by aligning effort, standardizing performance improvement initiatives, and building and sustaining an integrated system of readiness and health.

Current State	Future State	Opportunity
Competing Guidance	**Single Guidance**	Implement a standard approach to change and a standard set of DHA strategic priorities across the enterprise
Resource Driven	**Strategy Driven**	Achieve efficiencies by using DHA strategic priorities to drive resource decisions
MTF Mission (Moving Target)	**MTF Mission (Fixed)**	Align projects and initiatives with DHA strategic priorities (Quadruple Aim)
Solution Focused	**Problem Focused**	Understand the root cause of the problem to identify the most effective solution
Decentralized Performance Management	**Centralized Performance Management**	Enable enterprise transparency and accountability through a unified portfolio of system-wide efforts
Top-Down Direction	**Bottom-Up Learning**	Leverage system-wide knowledge at MTF and Market levels to inform strategic goals and priorities

QPP Value Stream: Moving From Planning to a Continuous Cycle of Improvement and Learning



Why is QPP Needed?

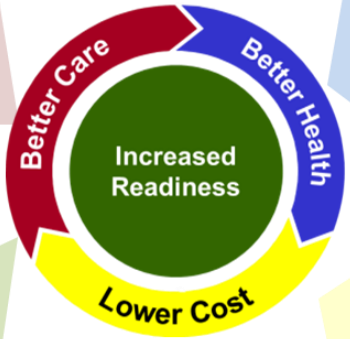
$$\text{Value} = \frac{\text{Readiness} + \text{Health} + \text{Care}}{\text{Cost}}$$

Better Care

Providing a care experience that is patient and family centered, compassionate, convenient, equitable, safe, and always of the highest quality.

Better Health

Reducing the generators of ill health by encouraging healthy behaviors and decreasing the likelihood of illness through focused prevention and the development of increased resilience.



Ensuring that the total military force is medically ready to deploy and that the medical force is ready to deliver health care anytime, anywhere, in support of the full range of military operations, including humanitarian missions.

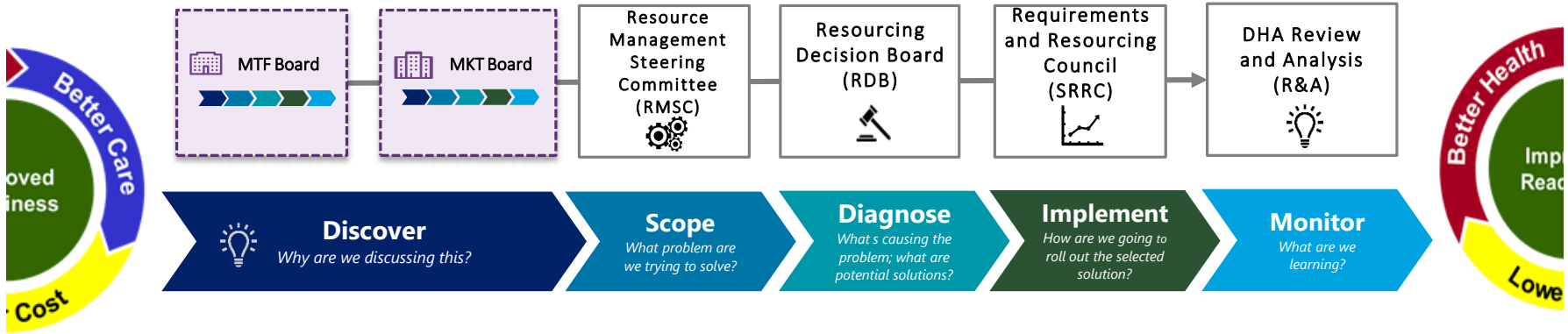
Increased Readiness

Creating value by focusing on quality, eliminating waste, and reducing unwarranted variation; considering the total cost of care over time, not solely the cost of an individual health care activity.

Lower Cost

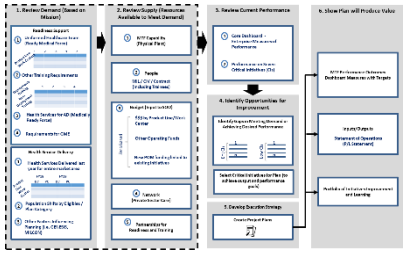
DHA - Health System Optimization

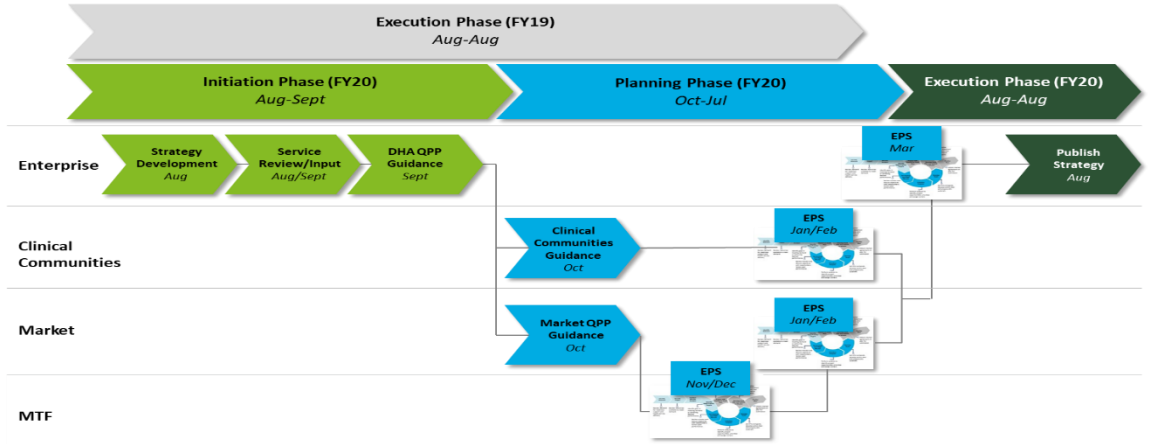
Structure



Process

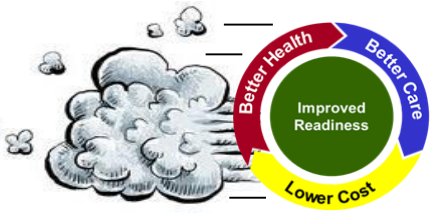
Quadruple Aim Performance Process (QPP)





Outcome

Better Health + **Better Care** + **Lower Cost** + **Improved Readiness**



Process for Monitoring the FY19 plans:
What Happens After QPP Plan Approval?

- The QPPs are a “living document” with the intent to make adjustments and course corrections as new information is uncovered
  - MTFs will be dialoging with their assigned DHA POC exchanging relevant information to ensure projects are tracking as expected
  - Collaborative exchanges will enable DHA to make refinements to processes during this learning process
- tIMO and DHA will provide on-site visits to MTFs to assist with improving gaps in performance and achieving project milestones
- DHA will gather shared learnings to:
  - Celebrate MTF successes
  - Disseminate “Best Practices”
  - Enhance procedures/instructions
  - Look for partnering opportunities

FY19 Plan Reviews and Cadence

	Membership	Content MHS Level Policy and Oversight Focus
SMMAC Review & Analysis **Quarterly**	- PDASD, OASD, DASD, ASD (HA), USD (P&R) - DHA Dir - SGs - Chairperson for Oversight Councils (MROC, RMOC, HSOC, HIOC)	Oversight Council Chairperson (MROC, RMOC, HSOC, HIOC) presents findings by exception: • Identification and analysis of measures with sub-optimal performance • Recommendations for closing Gaps in performance, to include: o Additional resources, if necessary o Support for new or existing strategic initiatives o Additional studies to determine root causes of performance gap and identify industry or government best practices

	Membership	Content Market Level Execution Focus
DHA Reviews **Quarterly**	- DHA Director, DHA Dep Dir - AD HCA, AD CSA, AD Management /CAE, DADs - DSGs - tIMO Director	DHA will review the following at the Market Level: • Readiness: (Readiness Demand Signal - projected vs actual); • Resources/Workload (Statement of Operations - Direct/Purchased Care workload and budget - planned vs execution); • Performance Measures and Project Execution: Briefed by exception highlighting successes/potential opportunities for enterprise-spread • Other (additional topics requiring HQ visibility/support)

	Membership	Content MTF Level Execution Focus
Market Reviews **Monthly**	- tIMO Director - MTF Commanders	**Monthly:** Market Director will review MTF performance measures on an **exception only** basis including, but not limited to: readiness, budget and workload, QPP performance and performance measures, and any additional topics requiring tIMO visibility/support.

Information & Decisions*

**Information and outputs from each meeting will inform higher level meetings*

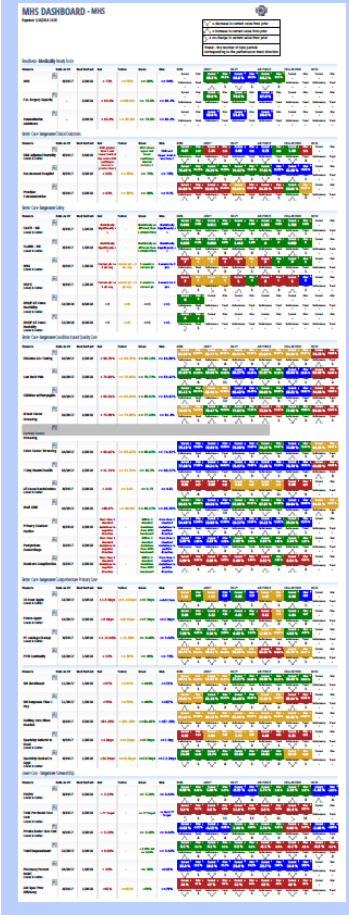
FY19 QPP Critical Initiatives will remain for FY20

Quad Aim	Critical Initiatives (CI)	Working Definition of FY 19 Critical Initiatives
Readiness	Deployability (Medically Ready Force)	Anything that contributes to the **deployability of the active, reserve or guard force**, including care, screening, prevention, or improvements to access for uniformed personnel. This is done in support of Service requirements (readiness demand signal)
	Improve Medical Force Readiness (Ready Medical Force)	All activities that ensure the **medical force is ready to deploy anywhere, anytime** in support of the full range of military operations. It includes efforts to increase readiness related clinical knowledge skills and abilities, but also making sure that the entire team is available for platform specific training, that the facility can support planned and emergent requests for personnel (eg RFFs), etc. (readiness demand signal)
Better Health	Encourage Healthy Behaviors (Health)	About 50% of health outcomes are related to behaviors. As we shift from healthcare to health we intend to help patients achieve better health by **making the healthy choice the easy choice**. This is particularly important with regard to nutrition, activity, tobacco use, substance abuse, and self-management of chronic illness. (health demand signal)
Better Care	Optimize & Standardize Access (Access)	**Patients should not have to wait for help** when they need our help. This initiative is about reducing waiting time for appointments, but it is also about creating alternatives that get help to people without a visit to a hospital or clinic. It is also about reducing time that people have to wait for answers (e.g. lab results) (health demand signal)
	Improve Condition Based Quality Care (Quality)	Our clinical communities are developing pathways of care that will specify the best known way to deliver care for common conditions like low back pain and normal childbirth. While piloting these efforts, we will implement evidence based care and **make the right choice the easy choice for the health team** in common conditions (diabetes, low back pain screening, pharyngitis, etc) (health demand signal)
	Achieve Zero Patient Harm (Safety)	We will **achieve zero harm by identifying zero events** (wrong site surgery, post operative infection, etc) **and preventing them with always events** (checklists, care bundles, etc.) This will require changing the culture, lots of training and rigorous process management. (health demand signal)
Lower Cost	Improve Effectiveness & Efficiency of DC Platform	Increasing productivity will be accomplished by **eliminating the wasteful processes that prevent our team from performing at full capacity.** We will work smarter, not harder and apply the principles of high reliability to eliminate wasteful procedures, re-work and wasted capacity. (efficiency of output)

"One Set of Initiatives for the System"

FY19 MHS Performance Dashboards

P4I Measures



MHS Core Dashboard

64 measures

- Initial measures approved Dec 2014
- Reviewed by work groups, components, and Integration Board
- Represents core measures aligned to the Quadruple Aim and as a result of the MHS Review and includes the measures from the three dashboards displayed to the right

Critical Initiative Measures Dashboard

30 measures

- Available 1 October 2018
- Utilized for development of QPPs
- Represents the current priority focus areas for the DHA, as identified by VADM Bono's 7 Critical Initiatives for FY19

RMG Measures Dashboard

25 measures

- Available 1 October 2018
- Requested by the RMG
- Enables the RMG insight into measures they have identified as key to enterprise performance

Transition Measures Dashboard

22 measures

- Available 1 October 2018
- Developed in response to NDAA Section 7a02
- Provides leadership with insight into how the MHS is doing during the transition

Back-up slide XX has a complete list of individual dashboard measures

Dashboards available on CarePoint: https://carepoint.health.mil

Current Priorities to enhance FY20 Process

- Define **Readiness Demand Signal** for a medically ready force and a ready medical force
- Develop **Competency Objectives/Training plan** aligned to QPP Guidance
- Define requirements and develop a **Tool** for the new streamlined plan template to include all parts of the process (demand, supply, gaps in performance, resourcing, improvement projects, and outcomes)
- Finalize Inputs/Outputs to future state **QPP Annual Cycle**
- Publish FY20 Guidance by end of Nov

FY20 QPP Development Life Cycle

Market Plans will feed POM submissions through the projection of 3 years of requirements.

FY20 QPP Plans will feed FY22 POM submissions.

MARKET PLAN PRIORITY

Initiate Planning Efforts for Phase 2 QPPs and Publish Guidance (Nov 18)

- Finalization of the 'what' of each section of the plan template

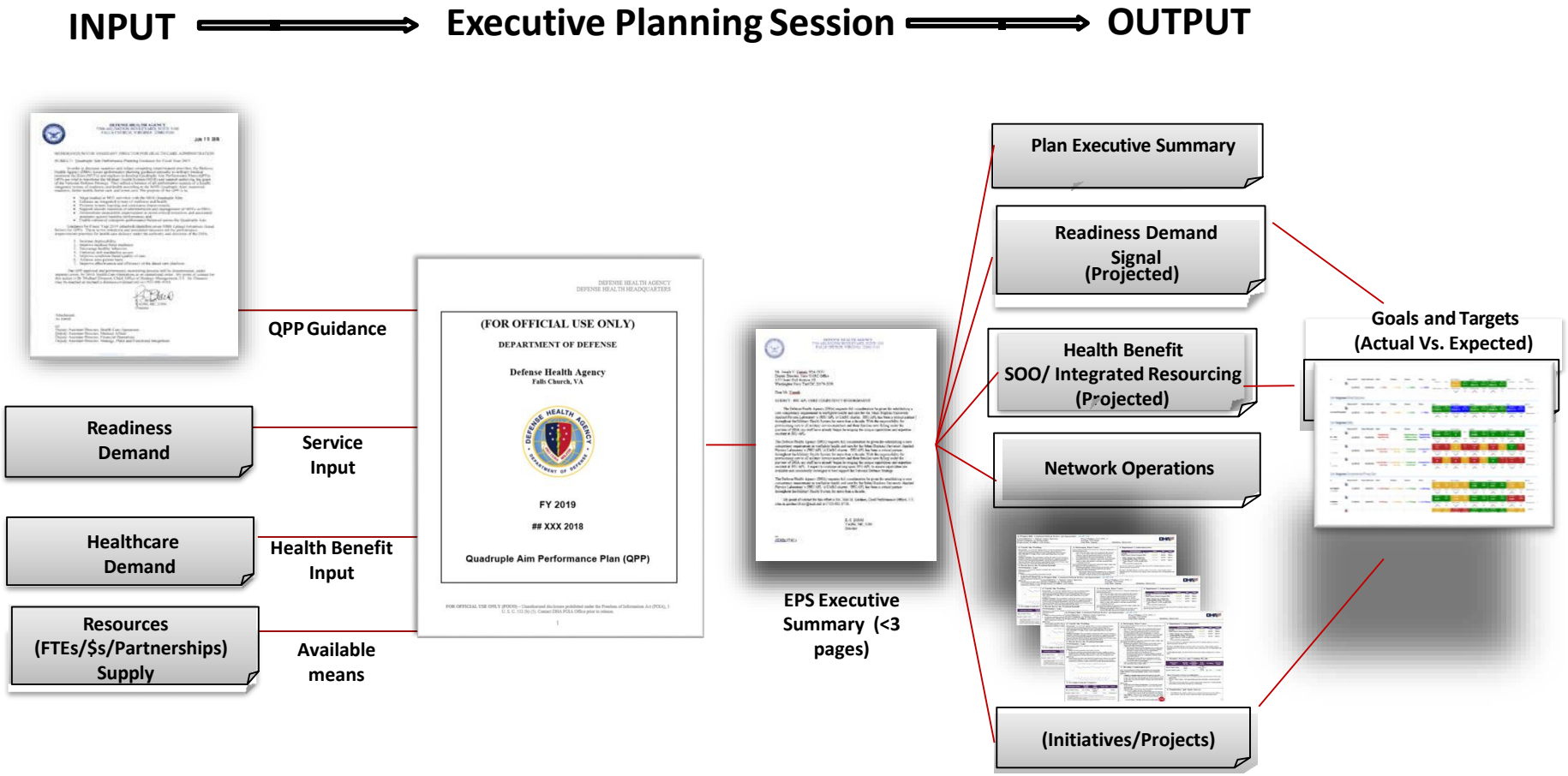
MARKET PLAN PRIORITY

Phase 2 Training Plan Established (Nov 18)

- Development of training for incoming Markets

	ACTION		FY18 QTR 4	FY19 QTR 1	FY19 QTR 2 (MAR)	FY19 QTR 3 (JUN)	FY19 QTR 4 (SEP)	GOALS
QPP	Create structural Quadruple Aim Performance Planning Process framework	Execution Phase		Execute Phase 1 QPPs (Oct 2018) Ongoing training for Phase 1 (Site Visits directed by AD HCA 14 Sep 18 Memo) (Oct 2018) Conduct Quarterly Assessments of tMTF against planned targets (Nov 2018)	Conduct Quarterly Assessments of tMTF against planned targets (Mar 2019)	Conduct Quarterly Assessments of tMTF against planned targets (Jun 2019)	Summary of Phase 1 yearly performance (Sep 2019)	DHA functions as an enabler for Markets/MTFs to acheive breakthrough performance through the Quadruple Aim (Measures in development - intent is to develop using HRO Maturity Measures)
				Implement QPP Lifecycle (Phase 1)				
		Planning Phase	Establish a supportive QPP structure (Sep 2018) Design QPP Lifecycle Phase 2-4 (show POM alignment) (Sep 2018)	Initiate Planning Efforts for Phase 2 QPPs and Publish Guidance (Nov 2018) Phase 2 Training Plan Established (Nov 2018) Quadruple Aim Performance Planning Tool Created (inputs/outputs/outcomes) (Dec 2018)	Market training complete (Mar 2019)	Phase 2 Market Plans Submitted to DHA (May 2019)	Phase 2 Markets Plans endorsed/resourced for execution (Sep 2019)	Proposed Measure of Success: 1) HSO Model/QPP Process Operational (yes/no); 2) % of Markets/MTFs trained; 3) # of projects supported through; 4) # of decisions documented at Quarterly Reviews (assess value added) ; 5) DHA (enterprise roll-up) rate of change on critical intiiatve measures
				Implement QPP Lifecycle (Phase 2)				
		Support Required	Service HQ support for development of FY20 Guidance and Market training plan					
			Service resources (CIV/MIL and CTR) must be aligned to support execution and planning of QPP					

What's Required for a Successful Plan?



QPP Learnings and Challenges

Cultural Shift to a Learning Organization; QPP More than a Plan

- Need Process for Addressing Issues
- Need to establish clear lines of Authority / Communication
- Access to SMEs to assist with questions and problems related to QPP development
- Competency Development Critical
  - Projects – development of A-3s that articulate the problem vice chasing a measure
  - Measures are for improvement not hitting a target
- Need to set clear Guidance early
- Tools and Templates needed to reduce the amount of unnecessary work

Challenges

- Confusion on QPP vs. Business Plan
- Overcome Variance in Boldness to Drive Command Mission
- Readiness Demand Highly Undefined

QPP Value:
Tangible Desired Results

Focused Learning
(Critical Initiative Alignment)

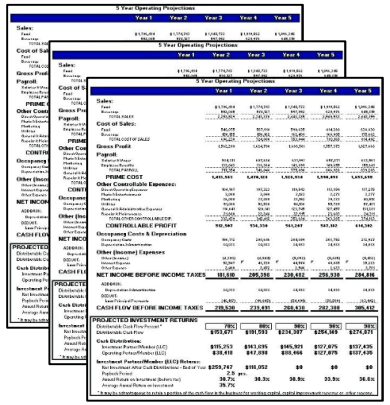
MTF	Deployability (Medically Ready Force)	Improve Medical Force Readiness	Encourage Health Behaviors	Optimize & Standardize Access	Improve Condition Based Quality	Achieve Zero Patient Harm	Improve Effectiveness & Efficiency
#1	✓	✓	A	✗	✓	E	A
#2	✗	✓	✗	✓	✗	✗	E
#3	✗	A	✗	A	✗	✓	✗
#4	✓	✗	✓	✗	✓	✓	✗
#5	A	✗	A	✓	✓	✗	✓
#6	✓	✗	✗	✓	✓	✓	A
#7	A	✓	✗	A	E	A	E

A = Absent but Needed
E = Existing but Needs Refinement

✓ = Needed and Meets Requirements
✗ = Not Needed

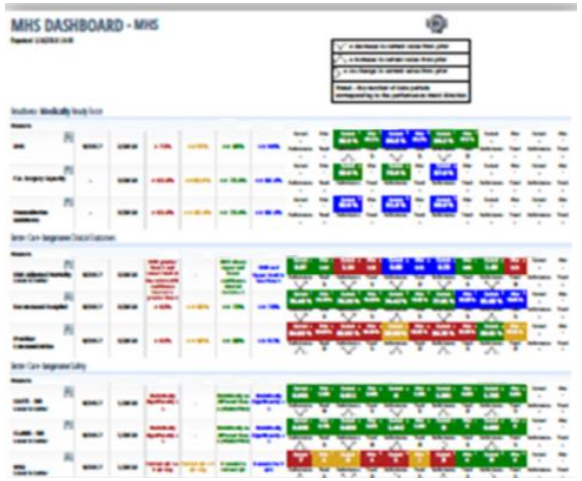
- Links MTF performance improvement to DHA strategic priorities (Critical Initiatives)
- Provides local solutions that can be scaled to drive enterprise improvement

Clarity of Operations
(Mission Established)



- Explicit quantitative view of MTF vision
- Links inputs to outputs
- Can be considered profit/loss statement

Improved Outcomes
(Impact Quad-Aim)



Strategy to Execution: This pipeline of continuous planning and execution is supported by a central program office at the DHA

QPP Critical Initiative Dashboard Background

VADM Bono identified her seven Critical Initiatives for FY19 (which will continue for FY20), which are comprised of:

- *Deployability*
- *Improve Medical Force Readiness (Ready Medical Force)*
- *Encourage Healthy Behaviors (Health)*
- *Optimize & Standardize Access (Access)*
- *Improve Condition Based Quality Care (Quality)*
- *Achieve Zero Patient Harm (Safety)*
- *Improve Effectiveness & Efficiency of DC Platform*

Summary

- Discussed strategic mission of DHA and its ties to Quadruple Aim improvements
- Examined QPP process's role in MHS enterprise standardization
- Demonstrated QPP's value in enabling DHA transformation into a High Reliability Organization
- Utilized the QPP approach in creating a routine problem-solving method