

# To be or what to be?

Leadership roles in conducting quality improvement  
work guided by national quality registries

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## Background

- A National Quality Registry (NQR) contains individualised data concerning patient problems, medical interventions, and outcomes after treatment; within all health care production
  - 2012-2016: 320 million SEK investment by the State and the Swedish Association of Local Authorities and Regions to develop NQRs supportive function in quality improvement (QI) work within health care
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## Background

- 2014: 81 NQRs helping to monitor results and develop quality of health care
  - Coaches were trained to evoke excellency in staff and do QI supported by the NQRs – what about the leaders?
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# Aim

- To explore the roles of health care leaders in QI projects: what are the opportunities and challenges of managing continuous, sustainable improvement work with the help of NQRs?
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# Methods

- Leaders were included in the 2<sup>nd</sup> round!
    - exploratory interview study with an inductive approach to begin with
    - 7 female leaders from the program
    - Theoretical framework: Role theory by Reed (2001)
- Find (identify aim)
- Make (ownership of aim)
- Take (dynamic approach to benefit the system) the role!
- qualitative content analysis (Graneheim et al. 2004 and Krippendorff 2013)
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# Results

- Current *needs* to create better conditions for QI include more education about and time for QI
    - increased structure through the method, helping to reach improved clinical continuity and effectiveness
  - The role of the leader is to create the conditions for successful QI by monitoring and motivating staff
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# Results

- Leaders are often willing to contribute but do not know how
  - Biggest challenges include lack of resources, QI knowledge and non-optimal NQRs
  - NQRs should be developed, focusing on everyday challenges experienced by staff as well as value-adding questions for patients
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# Results

- The structure introduced by the coaching method helps the leaders to manage continuous QI
  - The evaluative approach helps leaders to make adjustments needed to stay focused
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## Further research

- Impact of the method - from added knowledge to better practice?
    - ✧ Work environmental changes? Culture, co-operation?
    - ✧ Added value for the patients?
    - ✧ NQRs influence on research?
    - ✧ Future careers of coaches and leaders?
    - ✧ Enhanced sustainability in health care settings?
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## Bottom line

- There is limited strategic thinking considering QI in health care organizations today.
  - A clear multiprofessional model for QI can help leaders to manage the work.
  - NQRs need to be further developed, considering technical challenges and indicators used.
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