

Data “Insanity”: The Silent Improvement Killer

Part 3: Educating leadership ...and getting the respect you deserve

Davis Balestracci

Harmony Consulting, LLC

Phone: (207) – 899-0962

e-mail: davis@dbharmony.com

Web Site: www.dbharmony.com

The Quality Colloquium Preconference Symposium

August 16, 2010

How many meetings? Pages & Pages

Health System Milestones
KONTRAKTYCASEBUDWETLISKYALSKUK

Medicare Cases

Attachment B

Comparison of MDC between 1996 and 1997

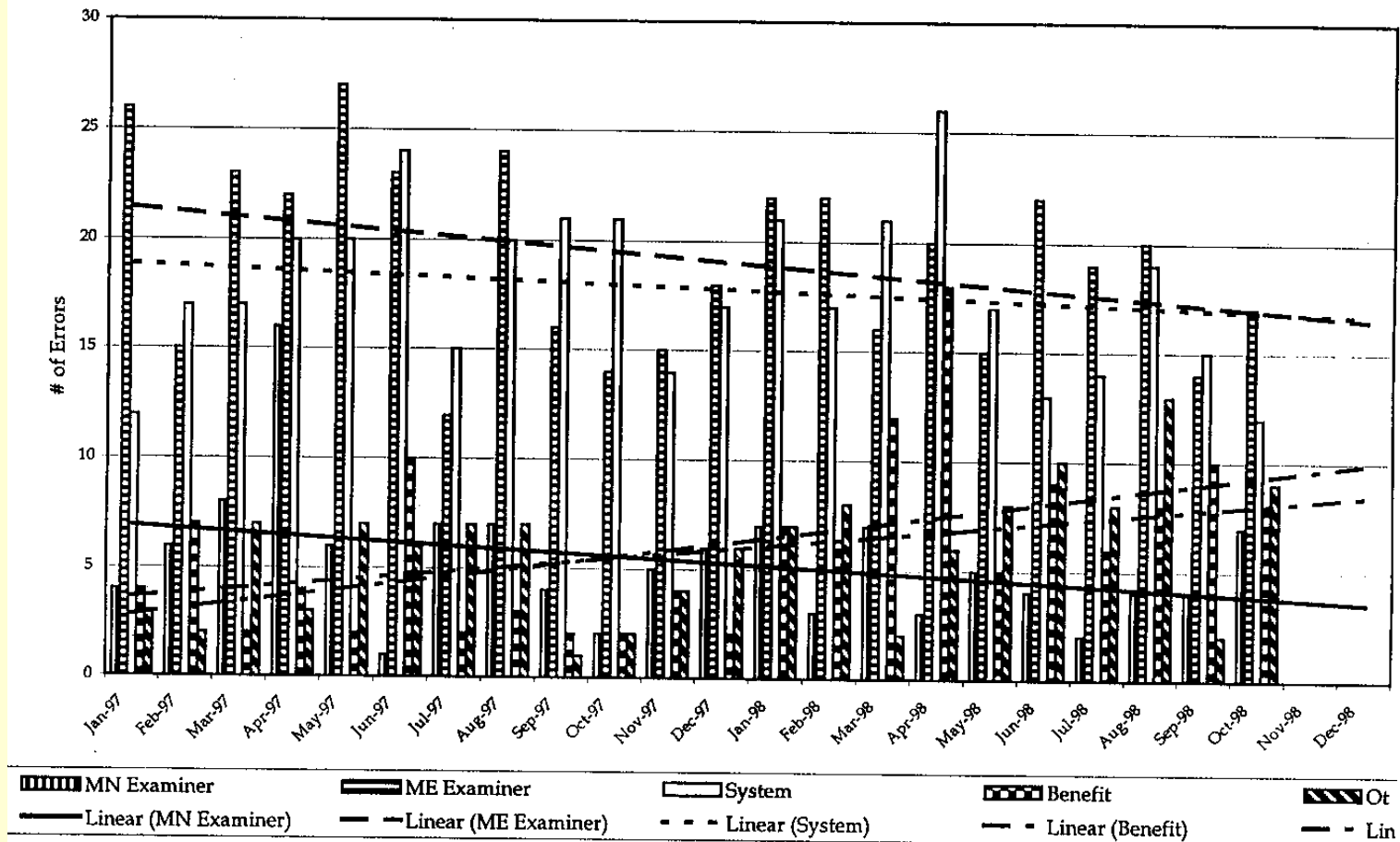
MDC	MDC Description	96 Cases	97 Cases	Avg'd month	Wgt for Avg Cases	96 Mix	97 Cases	97 Mix	97 Mix	97 Mix	97 Mix	97 Mix	97 Mix	97 Mix	97 Mix	97 Mix	97 Mix	97 Mix	97 Mix
24	Multiple Trauma	6	15,8885	2	5,2288	2,6144													
25	HIV/AIDS/Immunodeficiency	2	6,2293	1	1,7431	2,6147													
14	Pregnancy & Childbirth	5	2,0883	2	0,6954	0,4173													
21	Poisoning/Toxic Drug	33	40,0499	11	13,6199	1,2378													
7	Hepatitis & Pancreas	158	284,1856	56	68,0519	1,6726													
23	Health Services	37	23,8232	9	7,9411	0,8823													
17	Myocardial & Neoplasms	256	279,9109	60	91,3036	1,0362													
13	Female Reproductive	128	142,4130	43	47,4710	1,1126													
5	Circulatory	1,638	3,180,9188	613	1,060,3063	1,7306													
20	Alcohol/Drug Use	16	1,4380	5	3,8127	0,7140													
6	Digestive	703	1,017,2700	284	349,0983	1,4807													
16	Blood	41	43,8888	11	14,4835	1,0583													
3	Ear, Nose, Mouth & Throat	66	48,5987	22	15,5329	0,7168													
10	Endocrine, Nutritional & Metabolic	127	178,7106	62	58,9062	0,8459													
1	Nervous System	557	842,1833	178	217,3998	1,2145													
2	Eye	4	2,9594	1	0,9855	0,7391													
11	Kidney & Urinary	256	330,8283	88	110,2764	1,2823													
4	Respiratory	730	1,009,9681	243	116,8644	1,3816													
8	Musculoskeletal	594	1,118,5035	288	472,8745	1,6897													
12	Male Reproductive	36	82,0519	20	30,6840	1,0450													
22	Burns	1	0,9399	0	0,0123	0,8366													
19	Mental Health	28	22,3357	8	7,4458	0,7677													
9	Skin, Subcutaneous Tissues & Breast	152	129,1139	51	43,0360	0,8494													
18	Infectious & Parasitic	131	201,4336	44	67,1445	1,5377													
25	Associated w/ All MDCs	66	425,8208	22	141,8403	0,4518													
	Grand Total	8,313	9,560,6696	2,404	3,180,8899	1,5144													

➤ **THIS IS STATISTICS:** You are reacting to variation!

➤ **“MBLC”:** HALF of this time is WASTE

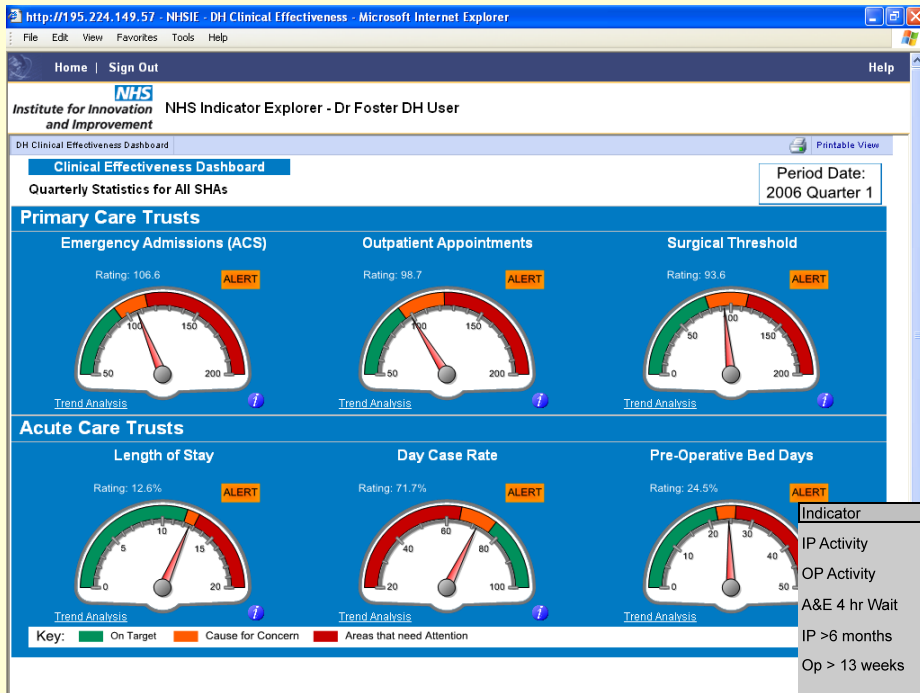
What numbers make you perspire?

Source of NMIS Claims Errors



Challenge:

- 1. Whenever possible, AVOID bar graphs!**
- 2. Trend lines? Easy...NEVER!**



Indicator	Trust Status	A&E	Cancer	Crit Care	Medicine	O&G	Paeds	SR&T	Surgery	T&O
IP Activity	😊	😊	😊	😊	😊	😞	😊	😞	😊	😊
OP Activity	😊	😞	😞	😞	😞	😞	😊	😊	😊	😊
A&E 4 hr Wait	😞	😞								
IP >6 months	😞	😊	😊	😊	😊	😊	😊	😊	😞	😞
Op > 13 weeks	😞	😊	😊	😞	😊	😊	😊	😞	😞	😞

Status Key

😊	On Target or Achieved
😞	Below or Worse than Target
😞	Significantly Below or worse than Target

“WAG”

RUBBISH!

Traffic lights are a special cause strategy – “PLOT THE DOTS!” instead

“SWAG”: GREAT Article

Mills, “Data Torturing”

NEJM October 14, 1993

Like it or not...



Vague data responding to...

Vague problems

will yield...

Vague meetings,

yielding...

Vague questions

yielding...

Vague solutions,

yielding...

Vague results.

WHAT IF...

- ❖ **50% reduction in monthly senior management meeting time**
- ❖ **Eliminating up to one hour each day of managerial review and attempts to interpret unimportant performance data**
- ❖ **60% reduction in daily pounds of published performance reports**
 - “Backup data”
- ❖ **80% reduction in monthly corporate financial reports**

Would this help your improvement efforts?

“When I die, let it be in a meeting. The transition from life to death will be barely perceptible.” --Anon

Transition to More “Advanced” Skills

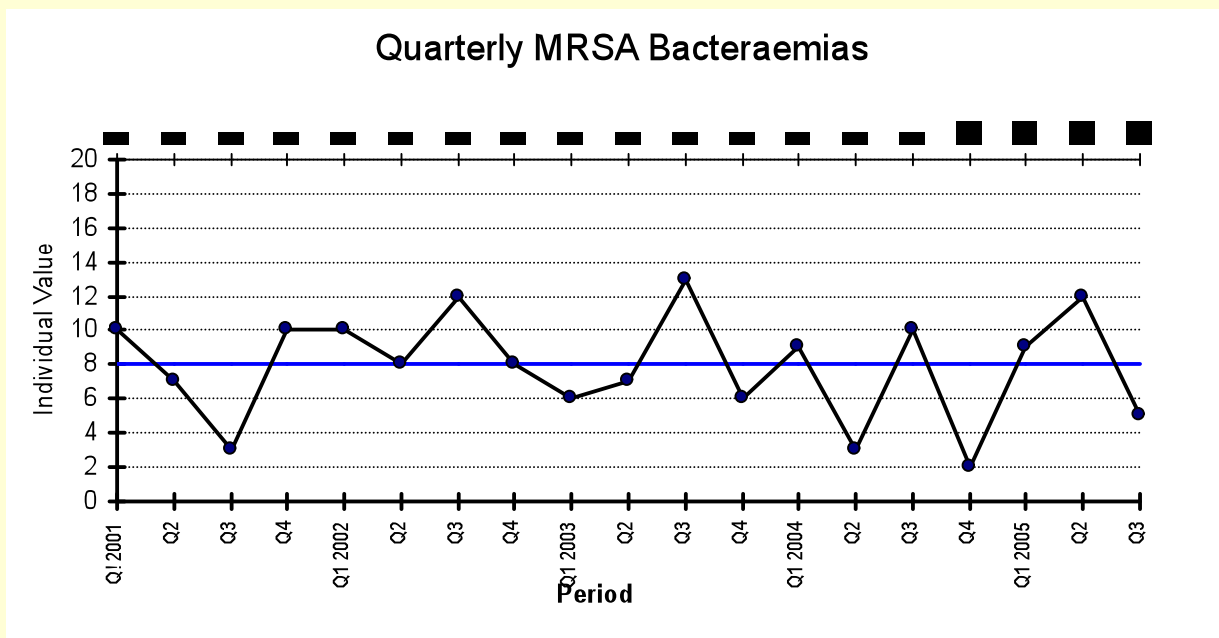
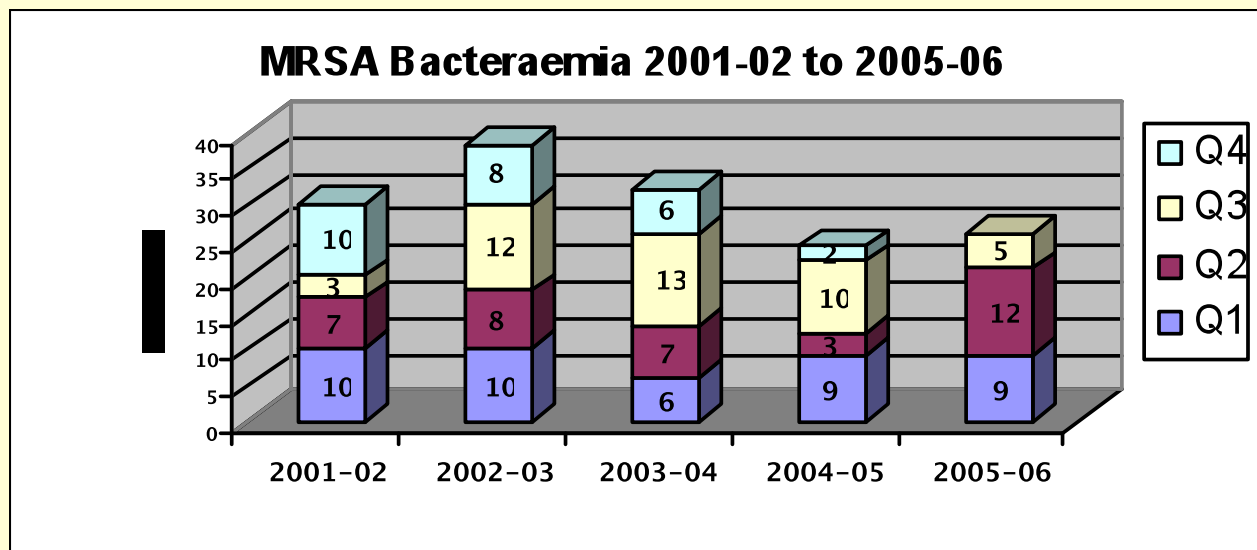
❖ From:

- Colors & Faces & Drawing circles
- “This number is different from that one... which is different from the goal...and *I DON’T LIKE IT – Make it so!*”

❖ To:

- Counting up to “8”
- Subtracting two numbers
- Sorting a list of numbers
- ***Asking better questions!***
- ***“Plotting the dots!”***
- ***“Special” vs. “Common” cause strategy***

NO MORE BORING MEETINGS!



***What if
EVERYONE
did this
and...***

“Assignment” before Part 3

1. Calculate the moving ranges (19 data points produce 18 moving ranges):

**Bacteraemia Data: 10, 7, 3, 10, 10, 8,
12, 8, 6, 7, 13, 6, 9, 3, 10, 2, 9, 12, 5**

Absolute values: (7-10), (3-7), (10-3), (10-10),
(8-10)...(5-12)

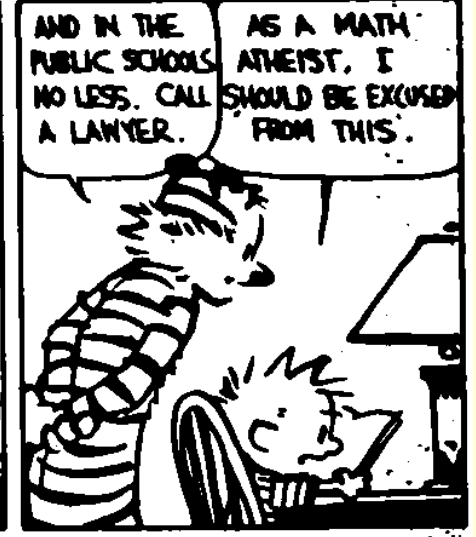
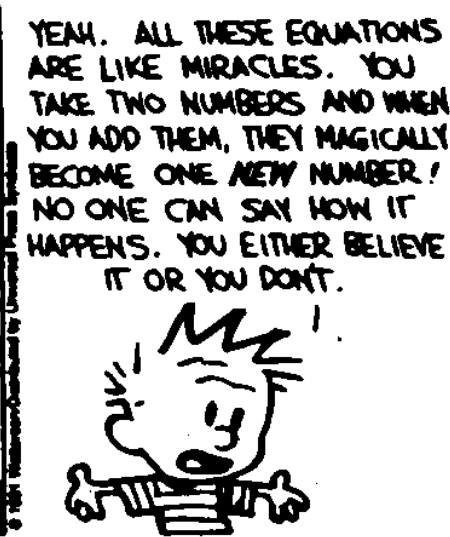
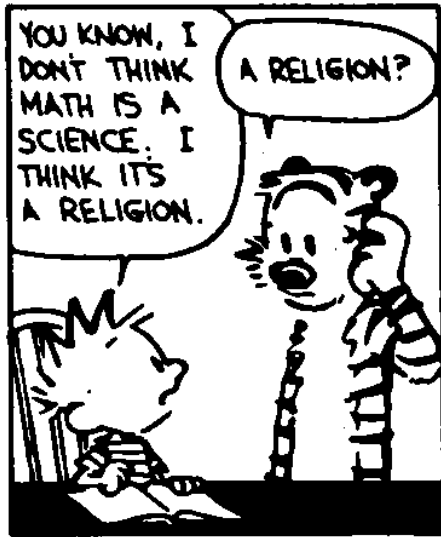
2. Determine MR_{Med} : Sort them from smallest to largest
Average the 9th & 10th in this SORTED sequence

3. Multiply MR_{Med} by 3.865 (round it)

4. The average of the 19 data point is 7.9, let's call it ~8
Calculate $8 \pm [3.14 \times MR_{Med}]$

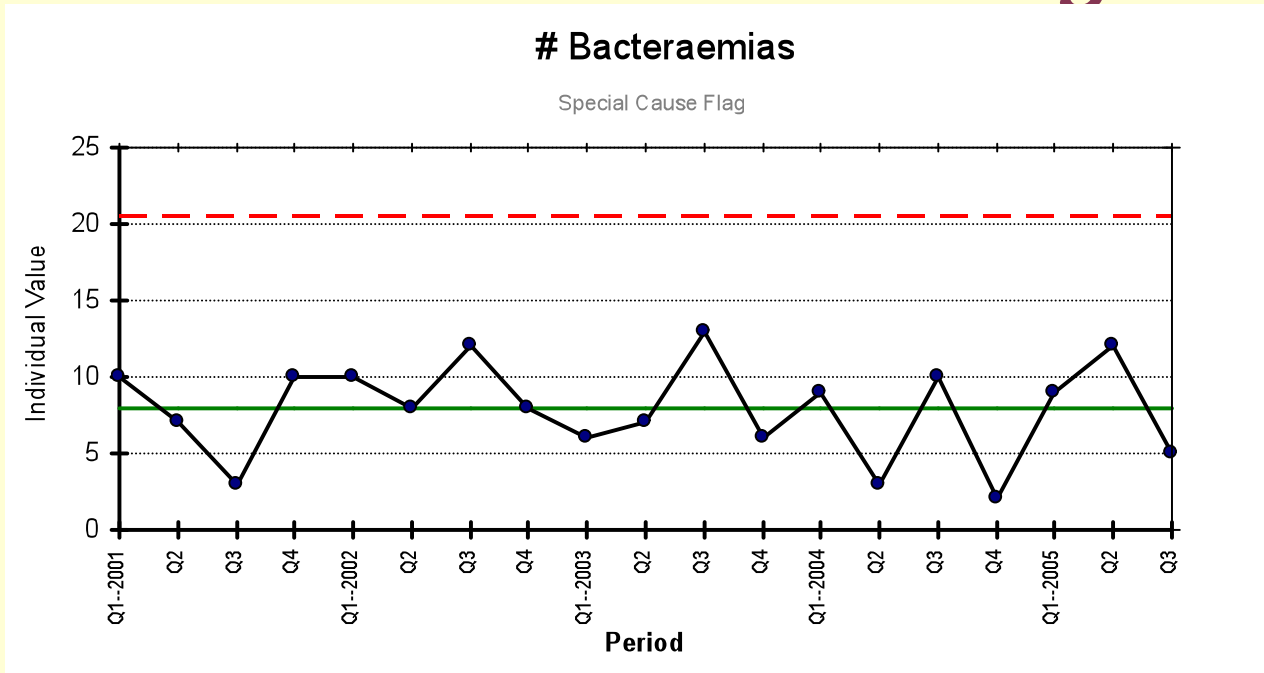
Bacteraemias**Moving Range****Sorted Moving Ranges**

10	*	0	
7	3	1	
3	4	2	
10	7	2	
10	0	3	
8	2	3	
12	4	3	
8	4	4	
6	2	4	9 TH
7	1	4	10 TH
13	6	6	
6	7	6	
9	3	7	
3	6	7	
10	7	7	
2	8	7	
9	7	7	
12	3	8	
5	7		



No more math atheism!!

YIKES – PERFECTLY designed!



Med MR = 4

$MR_{\max} = 4 \times 3.865^* \sim 15$

$8 \pm (4 \times 3.14^*) \sim [0 - 20]$

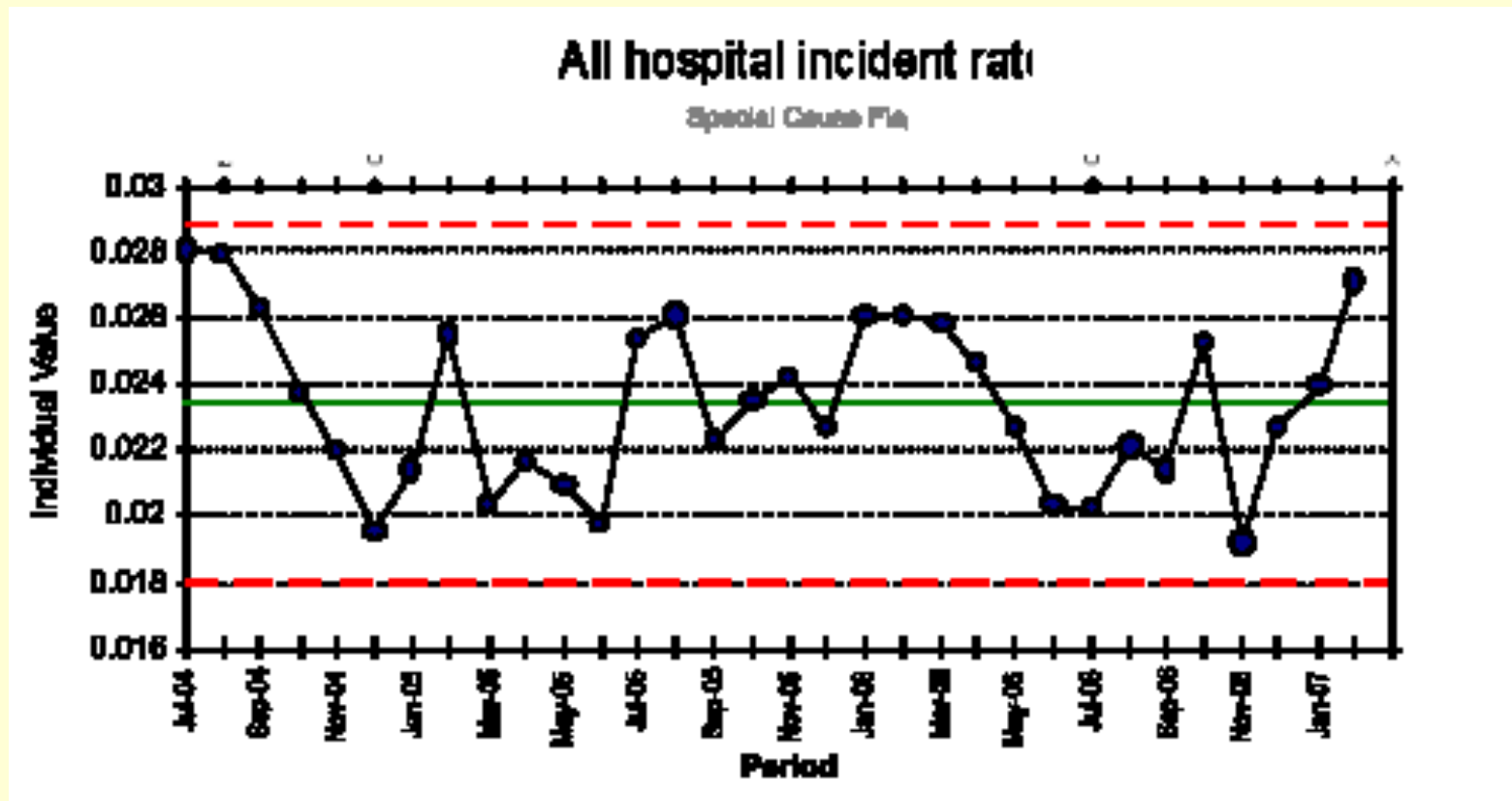
•From theory:
Doesn't change

*“Matrix” 150
bacteraemias?*

Control Charts

- ❖ You DO NOT have to accept this level of performance!
- ❖ ANY numbers between 0 and 20 are indistinguishable from each other AND the average of 8.
- ❖ **KEY:** Any “infection” isn’t necessarily a special cause just because it isn’t “supposed” to happen...or the fact that you can explain it after it occurs

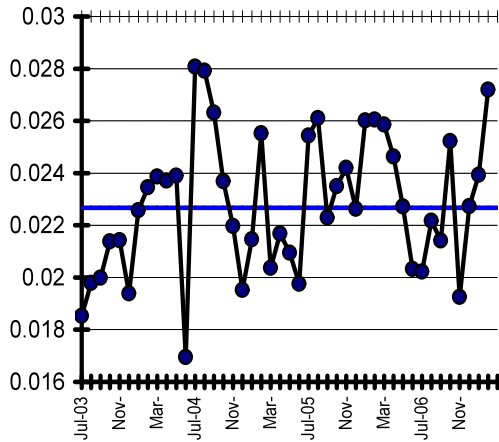
Balanced Scorecard?
“Own” the “Learning & Growth” sub-business – Invent a “Safety” Metric



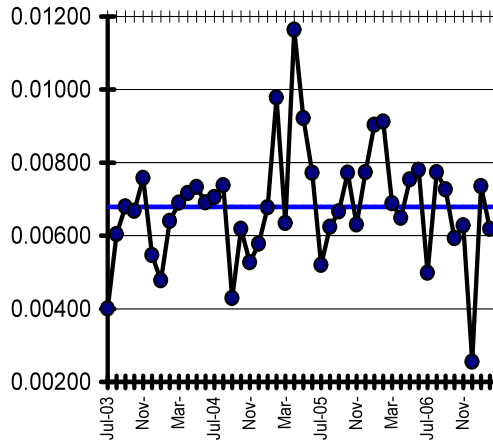
“Big dot”: Safety Analytic

“Peeled” “Incidents”

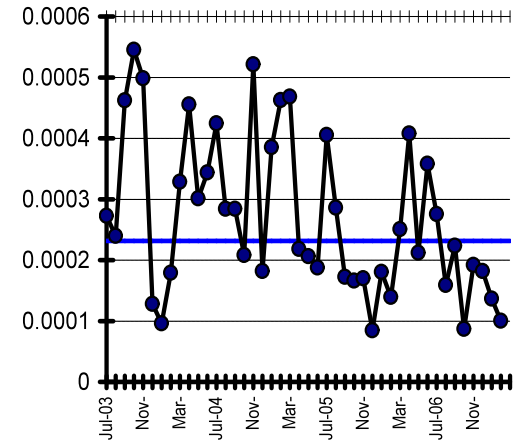
All hospital incident rate



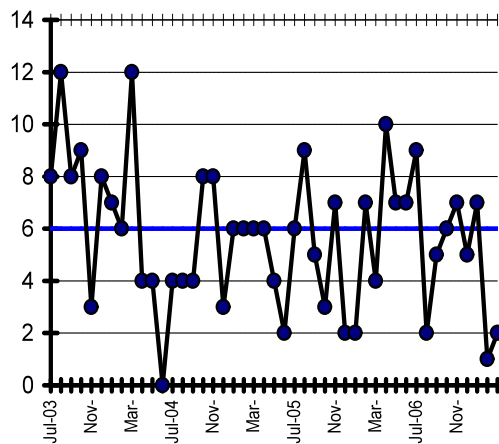
Complaint rate per admission



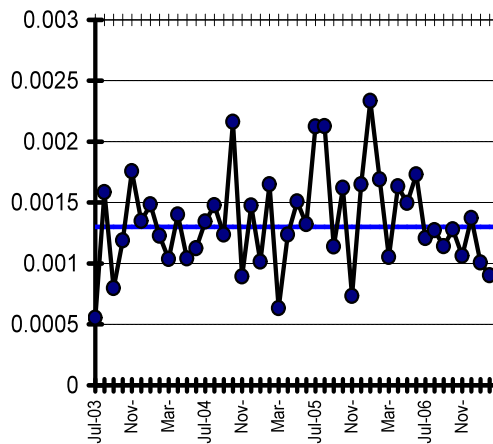
Pressure Ulcer Rate



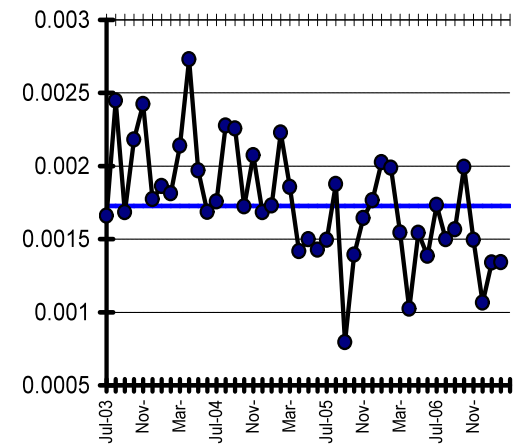
Total Falls



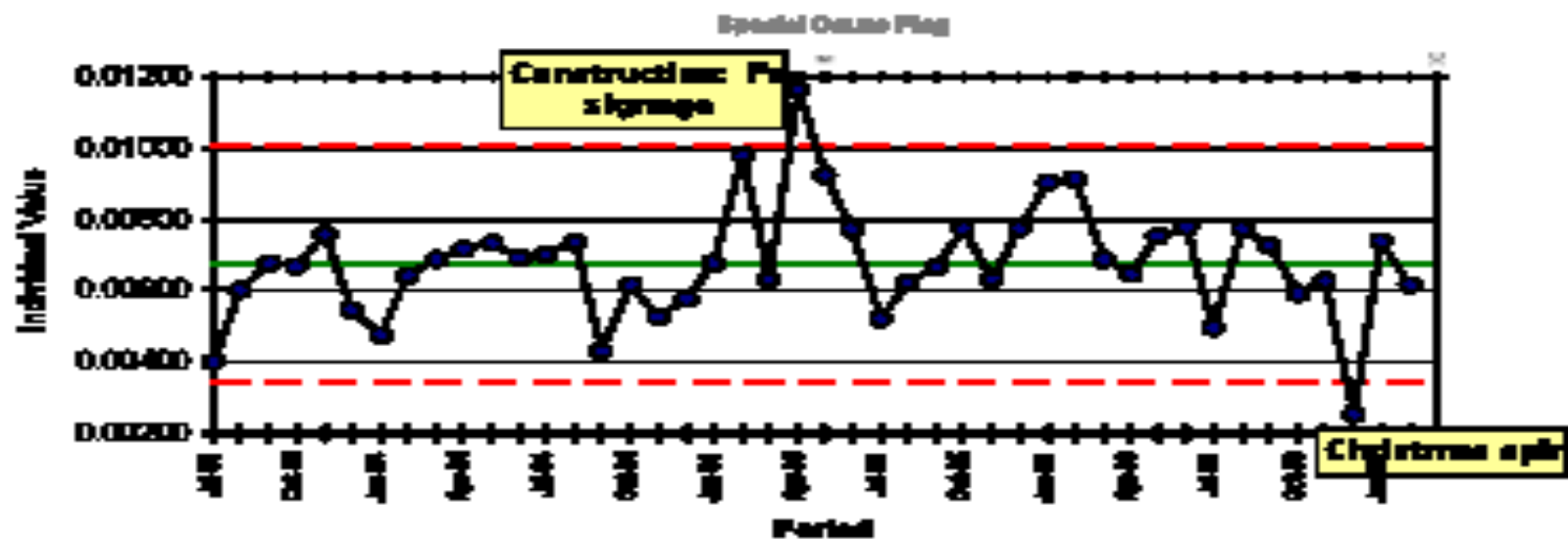
Bacteraemia rate



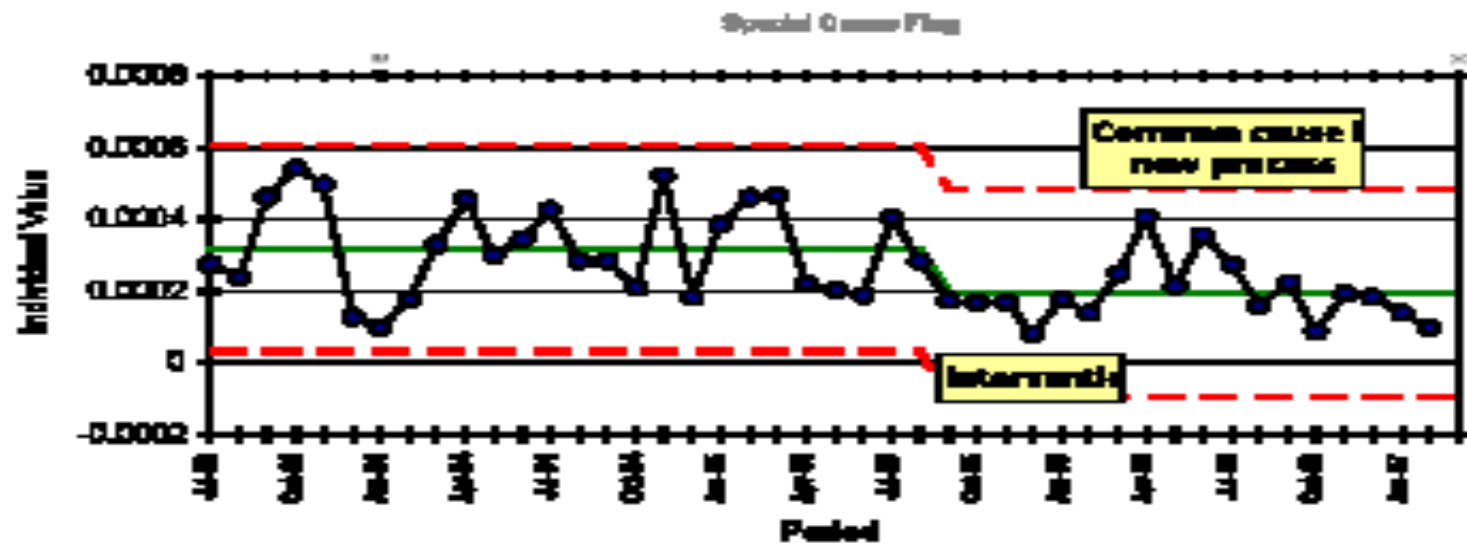
All Hosp_Med_err_rate



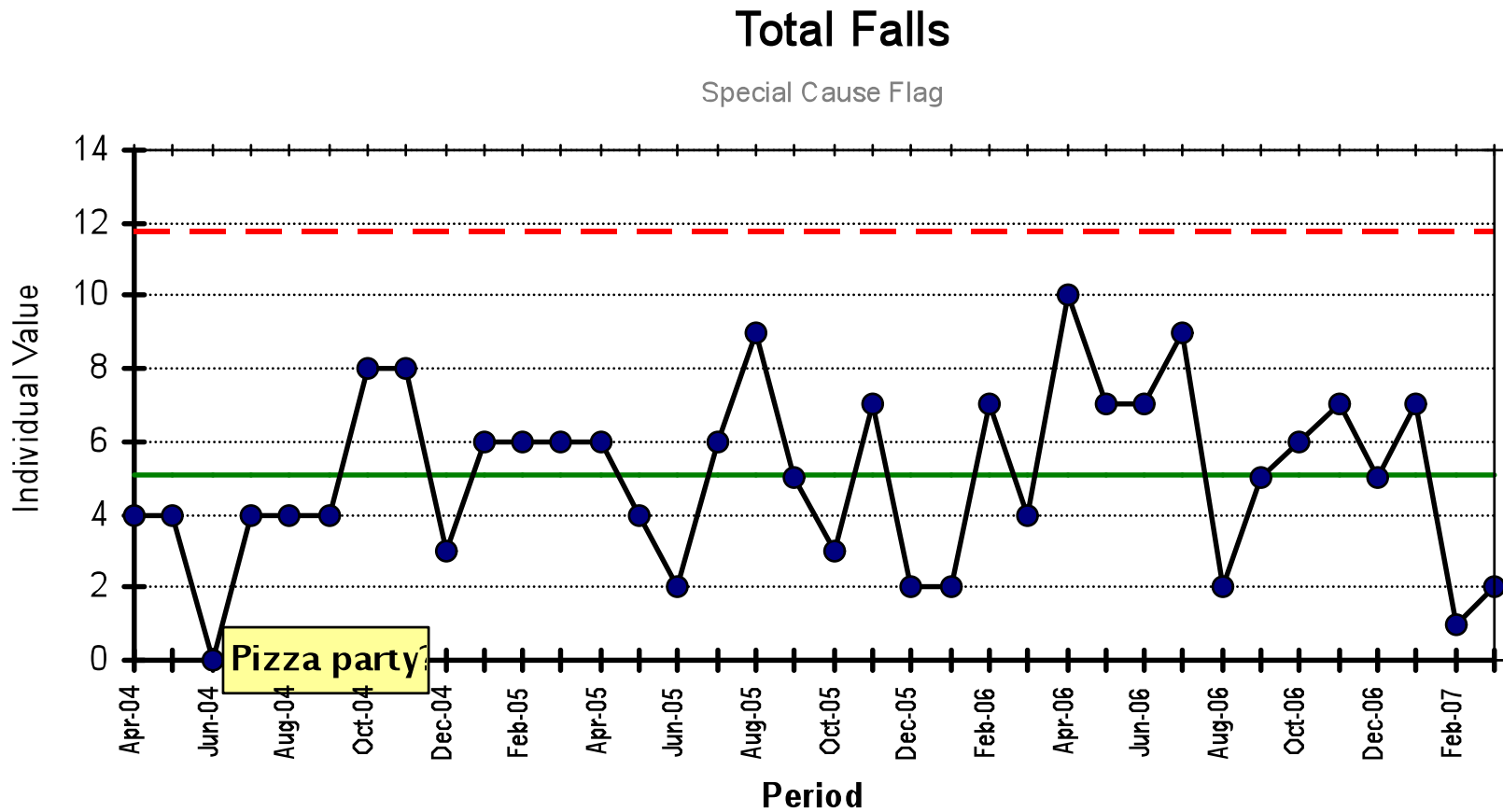
Complaint rate per admission



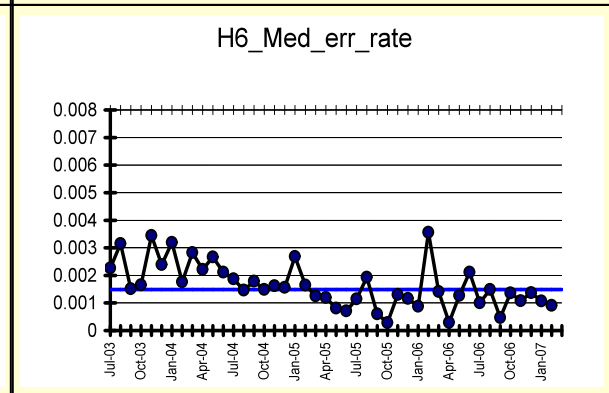
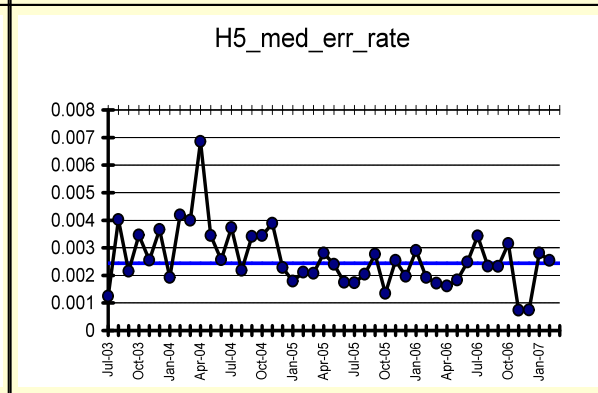
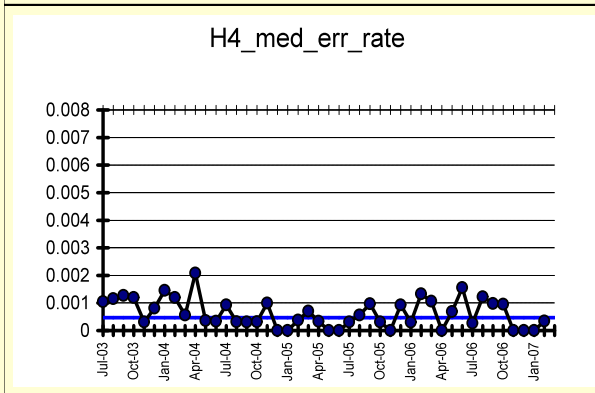
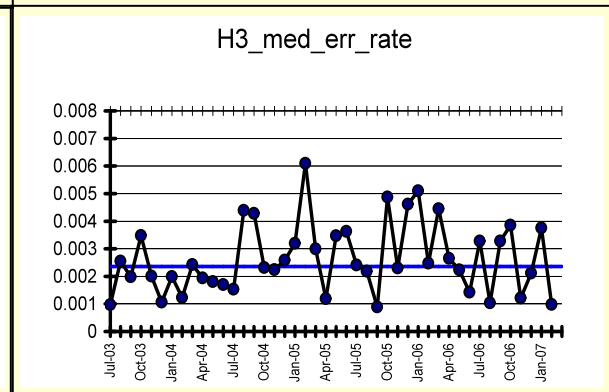
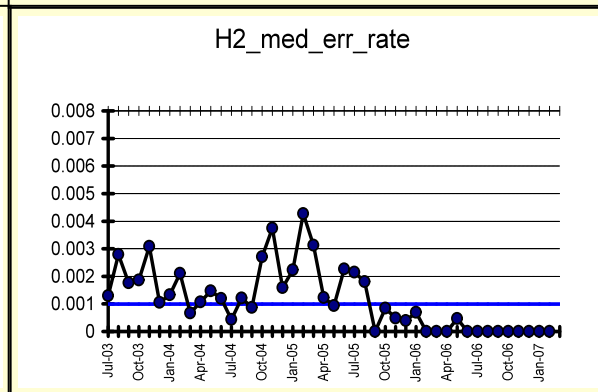
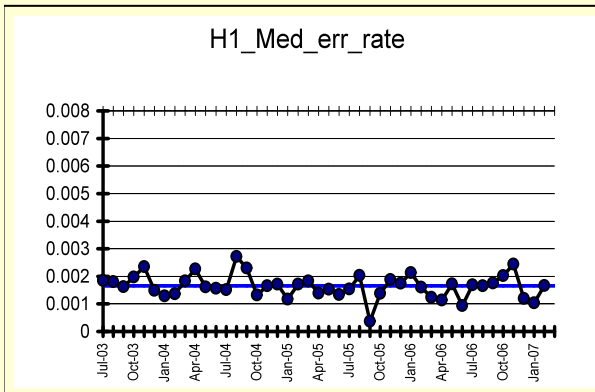
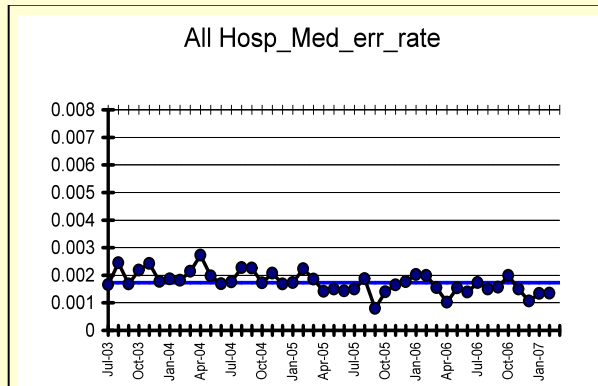
Pressure Ulcer Rate



“Perfectly designed” for Falls



Med Error Rate Comparison



I have an Excel macro that will do this

- ❖ E-mail me and I would *delighted* to send you a copy with a tutorial
- ❖ Pour a glass of wine and spend 2-1/2 hours!
- ❖ davis@dbharmony.com
- ❖ www.dbharmony.com
Sign up for my FREE bi-weekly e-newsletter on the home page

Statistics for Improvement

- ❖ Choose / define an issue in a process context
- ❖ Design & manage *a series of* simple, efficient data collections
- ❖ Use simple analysis / display methods understood by all organizational levels
 - Virtually 99.9+% graphical
- ❖ Assess a situation
 - The current state
 - Identify major opportunities—inappropriate & unintended variation
 - The effects of interventions
- ❖ Hold gains

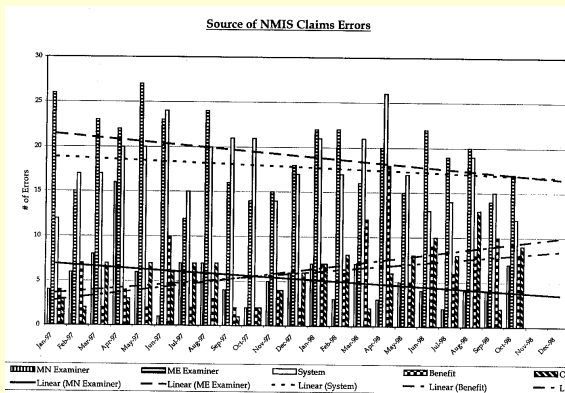
Five “Everyday” Statistical Traps

- ❖ Treating all observed variation in a time series data sequence as special cause.
- ❖ Fitting inappropriate “trend” lines to a time series data sequence. (**NEVER!**)
- ❖ Obsession with Normal distribution and “summary stats.” [Note: *Never* mentioned]
- ❖ Choosing *arbitrary* cutoffs for “above” average and “below” average.
- ❖ Improving processes merely through the use of *arbitrary* numerical goals and standards.
 - “Is the ‘gap’ from the goal common or special cause?”

This...?

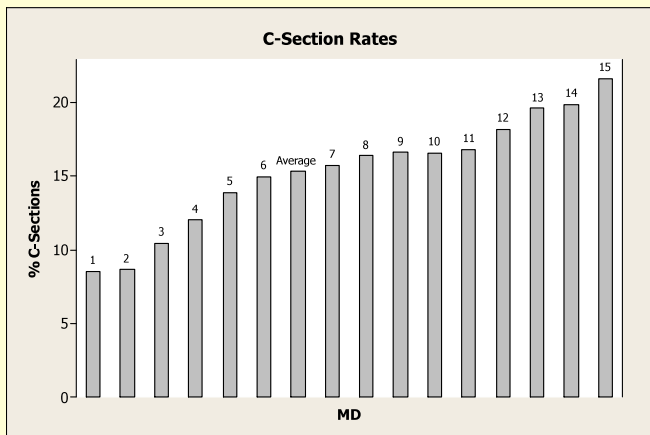
Health System Management
 Comparison of MCO Expenses (FY 2004 - FY 2007)

MCO	Medicare Cases	Medicaid Cases	Medi-Cal Cases	Other Cases	Total Cases	Expenses
24 Medicare (Total)	14,886	2,200	2,200	2,200	21,486	...
24 Medicaid (Total)	2,200	14,886	2,200	2,200	21,486	...
24 Medi-Cal (Total)	2,200	2,200	14,886	2,200	21,486	...

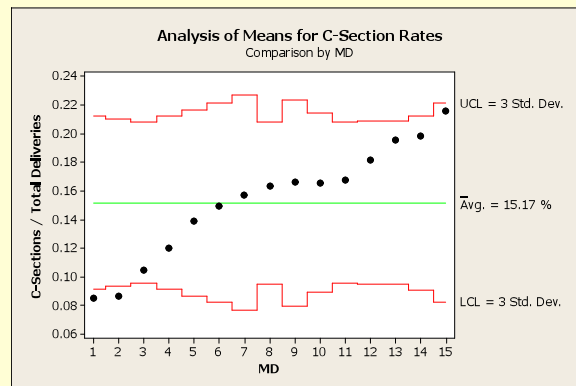
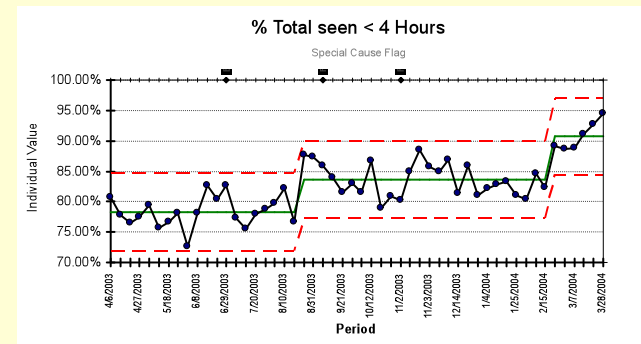
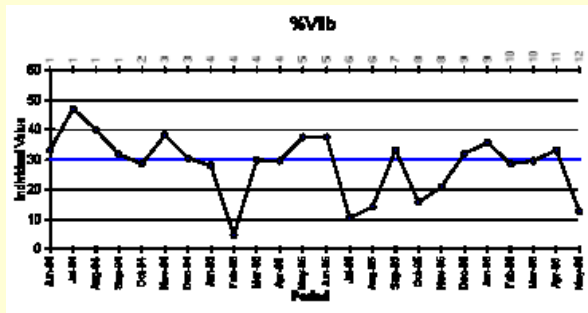
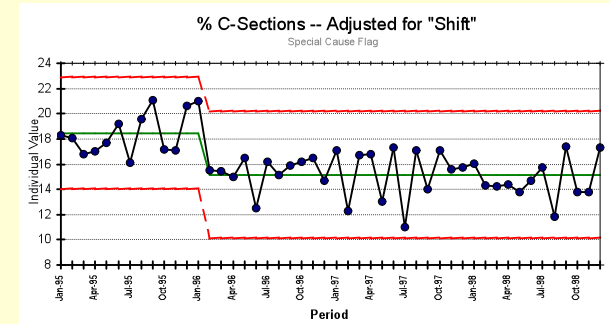
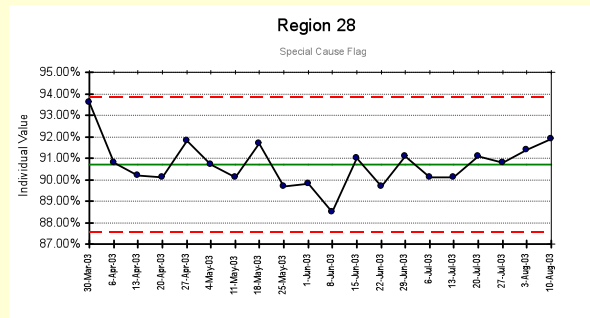
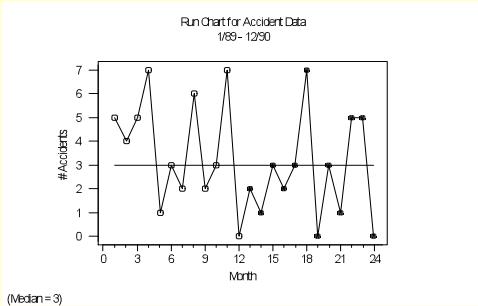


Indicator	Trust Status	A&E	Cancer	Crit Care	Medicine	O&G	Paeds	SR&T	Surgery	T&O
IP Activity	😊	😊	😊	😊	😊	😊	😊	😊	😊	😊
OP Activity	😊	😞	😞	😞	😞	😊	😊	😊	😊	😊
A&E 4 hr Wait	😞	😞	😞	😞	😞	😞	😞	😞	😞	😞
IP >6 months	😞	😊	😊	😊	😊	😊	😊	😊	😊	😞
Op > 13 weeks	😞	😊	😊	😊	😊	😊	😊	😊	😊	😞

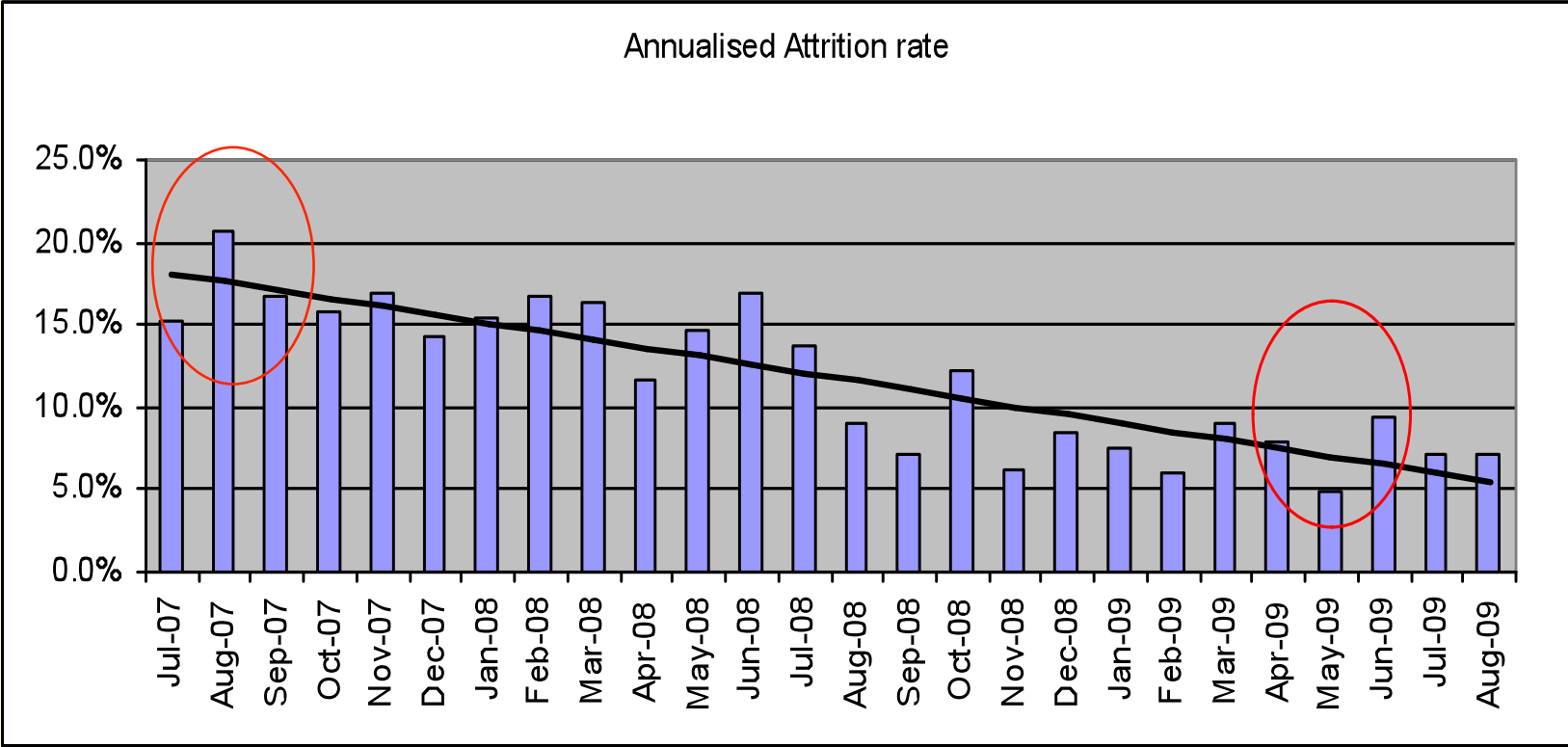
Region	M&M	CDTV	SASHA	H&IOW	WMS	Beds&Herts	Leicestershire, Northamptonshire & Rutlan	BBC	Sy&Sx	GM	C&L	SWP	AG&W	NSC
Kent and Medway	98.4%	96.7%	98.4%	97.3%	96.9%	96.4%	96.9%	96.4%	96.7%	96.9%	96.4%	96.9%	96.4%	96.4%
County Durham & Tees Valley	96.7%	95.6%	96.5%	96.3%	94.7%	96.4%	96.7%	96.6%	96.7%	96.6%	96.6%	96.7%	96.6%	96.6%
Trent	96.7%	95.3%	96.1%	95.5%	94.0%	96.6%	96.7%	96.6%	96.7%	96.6%	96.6%	96.7%	96.6%	96.6%
Shropshire & Staffordshire	97.9%	97.1%	98.1%	97.3%	97.5%	96.6%	96.7%	96.6%	96.7%	96.6%	96.6%	96.7%	96.6%	96.6%
Hampshire & the Isle of Wight	96.6%	95.9%	96.0%	96.7%	95.1%	96.6%	96.7%	96.6%	96.7%	96.6%	96.6%	96.7%	96.6%	96.6%
West Midlands South	97.0%	96.4%	97.6%	97.4%	96.1%	96.6%	96.7%	96.6%	96.7%	96.6%	96.6%	96.7%	96.6%	96.6%
Bedfordshire & Hertfordshire	96.6%	96.0%	96.7%	96.4%	95.2%	96.6%	96.7%	96.6%	96.7%	96.6%	96.6%	96.7%	96.6%	96.6%
Leicestershire, Northamptonshire & Rutlan	96.3%	96.2%	97.3%	96.9%	95.6%	96.6%	96.7%	96.6%	96.7%	96.6%	96.6%	96.7%	96.6%	96.6%
Birmingham & the Black Country	96.8%	95.8%	96.4%	96.6%	94.7%	96.6%	96.7%	96.6%	96.7%	96.6%	96.6%	96.7%	96.6%	96.6%
Surrey & Sussex	96.7%	96.7%	96.7%	97.0%	95.9%	96.6%	96.7%	96.6%	96.7%	96.6%	96.6%	96.7%	96.6%	96.6%
Greater Manchester	96.7%	96.7%	96.5%	96.6%	95.9%	96.6%	96.7%	96.6%	96.7%	96.6%	96.6%	96.7%	96.6%	96.6%
Cumbria & Lancashire	98.0%	97.7%	98.1%	97.9%	97.7%	96.6%	96.7%	96.6%	96.7%	96.6%	96.6%	96.7%	96.6%	96.6%
South West Peninsula	97.2%	97.8%	97.2%	98.0%	97.8%	96.6%	96.7%	96.6%	96.7%	96.6%	96.6%	96.7%	96.6%	96.6%
Avon, Gloucestershire & Wiltshire	96.8%	97.0%	96.4%	97.2%	96.2%	96.6%	96.7%	96.6%	96.7%	96.6%	96.6%	96.7%	96.6%	96.6%
Norfolk, Suffolk & Cambridgeshire	97.2%	97.7%	97.6%	98.0%	97.4%	96.6%	96.7%	96.6%	96.7%	96.6%	96.6%	96.7%	96.6%	96.6%



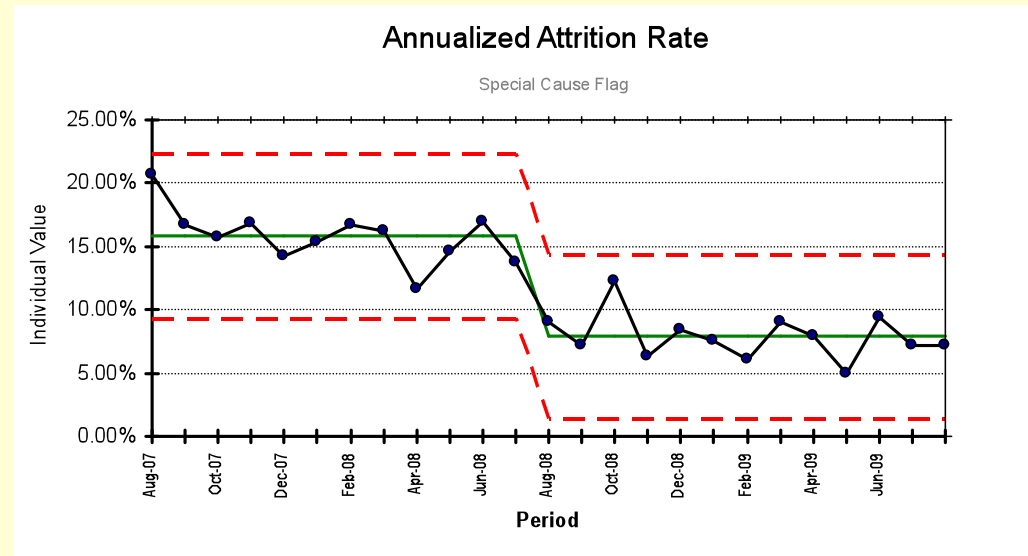
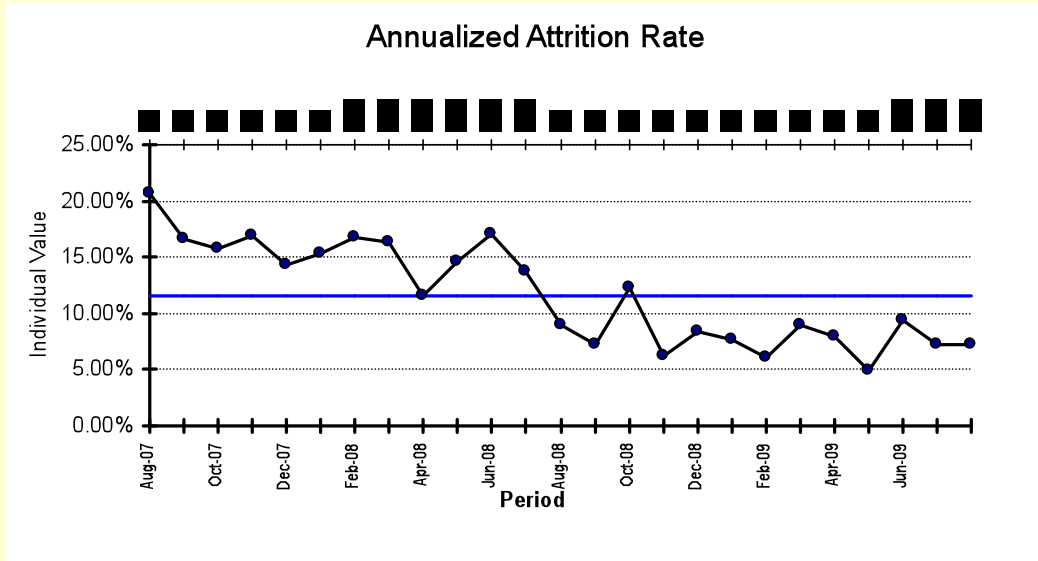
...or this?



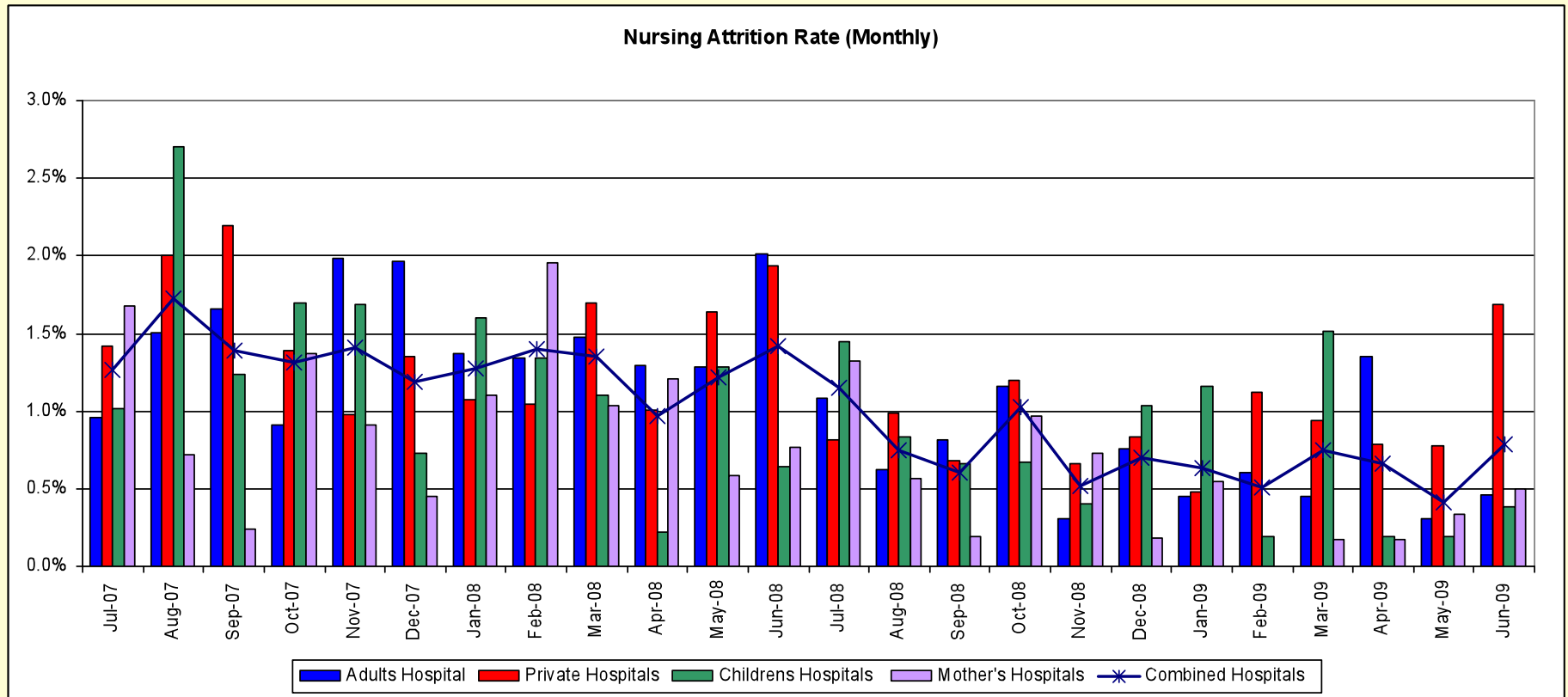
This...



...or this?

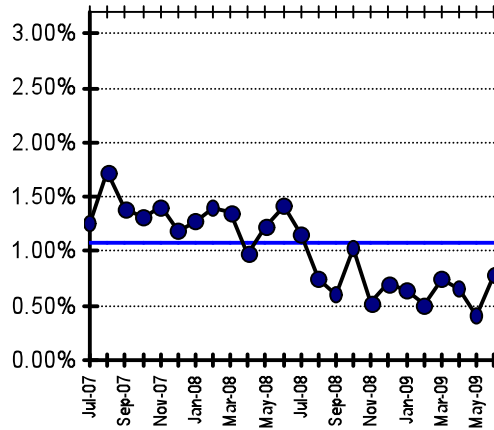


This...

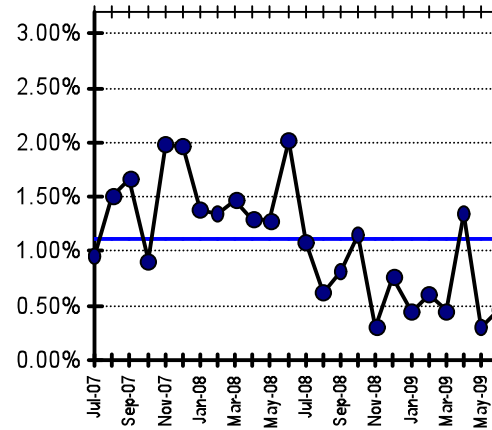


...or this?

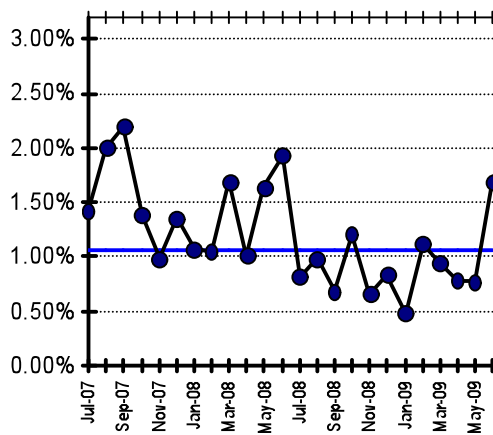
Combined Hospitals



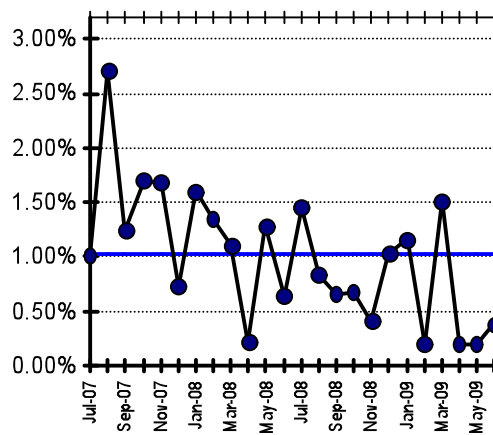
Adults Hospita



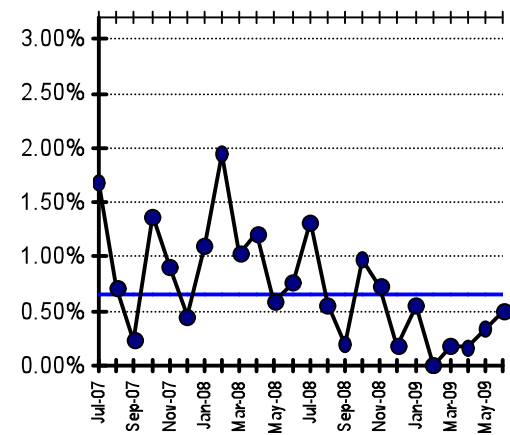
Private Hospitals



Childrens Hospitals



Mother's Hospitals



Suggestions when you go back

- ❖ Individual run charts of various “incidents”
- ❖ Run chart of “total number of RCA, ‘sentinel event,’ and ‘near miss’ incidents”
 - IF COMMON CAUSE: Pareto matrix?
- ❖ Run chart of “time between *any* RCA, sentinel event, or ‘near miss’ event”

Are you “perfectly designed” to have “incidents?”

GOOD LUCK...

- ❖ ...and PLEASE keep in touch!
- ❖ I have an all-day Data Sanity seminar that includes the Excel macro
- ❖ davis@dbharmony.com
- ❖ Please check out my book (Amazon):

Data Sanity: A Quantum Leap to Unprecedented Results

- Email me for Preface or Chapter summaries

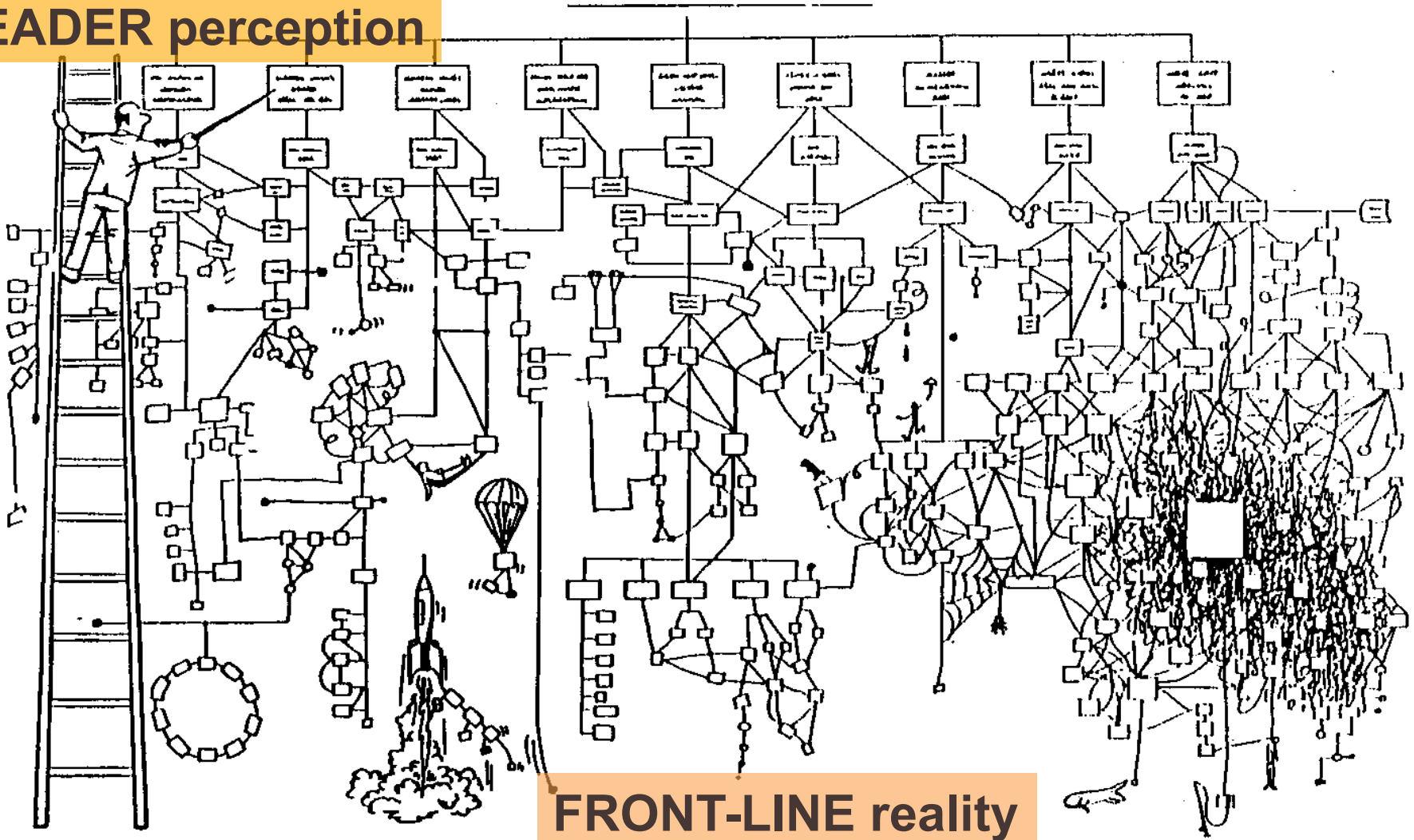
Don Berwick wrote the Foreword

Don Berwick: 1995 Forum Plenary

"Plotting measurements over time turns out, in my view, to be one of the most powerful devices we have for systemic learning... Several important things happen when you plot data over time. First, you have to ask what data to plot. In the exploration of the answer you begin to clarify aims, and also to see the system from a wider viewpoint. Where are the data? What do they mean? To whom? Who should see them? Why? These are questions that integrate and clarify aims and systems all at once...When important indicators are continuously monitored, it becomes easier and easier to study the effects of innovation in real time...Pick a measurement you care about and begin to plot it regularly over time. You won't be sorry."

Your culture awaits...

LEADER perception



FRONT-LINE reality

Your culture awaits...

LEADER perception

