ACCELERATED PRACTICES PROGRAM
PREPARING HEALTHCARE TEAMS TO ACCELERATE OUTCOMES IMPROVEMENT

AP PROGRAM
The AP Program is designed to create value for patients and communities by accelerating outcomes improvement.

This highly immersive, experiential program requires real-world application and will prepare participants to:

- Lead data driven, team-based improvement initiatives
- Improve effectiveness, efficiency, and safety outcomes
- Improve clinical and non-clinical healthcare service delivery
- Reduce waste and minimize inappropriate variation in processes
- Become champions for local improvement education and change
- Improve cost outcomes

The AP Program will also provide a forum for knowledge sharing within and between organizations.

4 SESSIONS OVER 4 MONTHS: OCTOBER 2015 - JANUARY 2016

<table>
<thead>
<tr>
<th>Date</th>
<th>Focus</th>
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<tbody>
<tr>
<td>October 7-9</td>
<td>Course overview, quality—an imperative for survival, three systems, quality-improvement tools, evidenced-based medicine, designing data systems</td>
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<tr>
<td>November 4-6</td>
<td>Adaptive leadership, variation analysis, SPC charts, protocols, human factors and patient safety, quality controls cost and tracking, clinical integration</td>
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<td>December 2-4</td>
<td>Phase II of adaptive leadership and SPC charts, curing vs. caring, quality vs. research, accountable-care organizations, Lean thinking</td>
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<td>January 29</td>
<td>QI leadership, project presentations, graduation</td>
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Suggested Participants
Health professionals, especially:
- Physicians and clinicians
- Clinical-operations leaders
- QI Professionals
- Senior Leaders

Cost
- $5,000 registration fee
- Group rates available
- Breakfast and lunch provided

Location
The Hyatt Place
3090 E. 6200 South
Salt Lake City, UT 84121
1-800-993-4751

Room blocks reserved at Health Catalyst rate

Register
Space is limited – registration deadline is 9/1/2015
Email academy@healthcatalyst.com

This activity has been approved for **AMA PRA Category 1 Credits™** see page 4 for details.
AP PROGRAM OBJECTIVES

SESSION ONE | Day 1

Quality: An Imperative for Survival
- The science of process improvement
- The challenge of high performance
- History of medicine – from a craftsman approach to evidenced-based care
- The current state of healthcare – its successes and its shortcomings measured against its potential
- Healthcare policy and politics
- QI and its relationship to healthcare delivery today

SESSION ONE | Day 2

The Three Systems
- How data systems fit into a larger context of three critical systems (content, deployment, and analytics), which improve outcomes
- Apply concepts that are important when designing a data system
- The relationship between the AIM statement and data-system design
- Components of self-coding data forms
- How and which data system to access for needed data elements
- Link the use of data systems with quality-improvement projects

Quality Improvement Tools
- Problem and AIM statements – creating your project charter
- Outcome measures
- Problem-solving tools
- Decision-making tools – Pareto charts, affinity sort, multi-voting, run charts
- Model for improvement and PDSA

Evidenced-Based Medicine
- Extracting medical evidence; synthesis/meta-analysis of data
- Levels of evidence, development and use

SESSION ONE | Day 3

Designing Data Systems
- Concepts to consider
- Using electronic systems
- The difference between data systems for improvement vs. research
- Relationship between aim statement and data system design
- Components of self-coding data forms
- Conceptual flow for healthcare

SESSION TWO | Day 4

Adaptive Leadership: Managing Change
- Adaptive leadership principles and skills
- Creating a culture of teamwork
- Finding a productive range of tension
- Addressing technical work and adaptive work
- Authority and exercise of leadership
- Reflecting in action

Variation Analysis and Statistical Process Control
- Effects of practice variation on clinical outcomes
- Methods to reduce variation in clinical practice and medical errors
- Data types and appropriate data-collection tools
- Tracking assignable variation to root causes and the use of the statistical method to manage random variation
- Type & use of SPC graphical analysis & data type
- Linking SPC to improvement work

SESSION TWO | Day 5

Protocol Implementation and Testing
- Human limitations of decision making and their implications in the healthcare environment
- The difference between guidelines and explicit protocols
- Standardization of clinical decisions with point-of-care implementation of computerized protocols
- Effective adoption of evidenced-based practice
Patient Safety Outcomes – How do we change our future?
- Patient safety in the US healthcare system
- Drivers of change for patient safety
- Appropriate tools/techniques for improving specified patient safety situations

Quality Controls and Healthcare Costs
- Causal links between quality and cost
- Areas of quality waste
- Limited resource utilization (productivity vs. efficiency)
- Methods to improve quality while reducing costs
- Tracking fixed vs. variable costs; direct vs. indirect costs
- Activity-based cost accounting
- Sub-optimization
- Strategies to harvest cost savings

SESSION TWO | Day 6
Clinical Integration
- Structural considerations for replicating improvement across systems of care
- Outcomes vs. drill-down tracking approaches

SESSION THREE | Day 7
Adaptive Leadership Strategies for Applying Quality Improvement in Healthcare
- Barriers that make cultural change difficult
- Tools to overcome these difficulties
- Strategies for initiating change in a facility
- Enhance capacity to exercise leadership
- Build a framework to help others make progress on tough problems
- Create resiliency

SPC: What Control Chart Should I Use?
- Review of correlation between SPC graphical analysis and data type
- Role of underlying distributions when constructing control charts
- Selection of appropriate control chart for specific course projects

SESSION THREE | Day 8
Curing vs. Caring
- Customer types and expectations
- The art of listening
- Patient-centered care

Is it Quality or Research?
- Difference between research and QI
- Methods to ensure ethical oversight for both
- Models to identify a project's category

Accountable Care Organizations
- Care coordination and evidenced-based medicine
- Value-based outcome criteria into clinical practice guidelines and quality evaluation
- Use of balanced metrics to ensure highest quality care at the lowest cost
- Population health and medical homes

Lean Thinking
- A3 problem solving
- Value stream mapping
- Identifying types of waste
- The value of direct observation
- Sustaining change

SESSION THREE | Day 9
Team Report Outs
Each team will present early results and receive input from class participants and course leaders.

SESSION FOUR | Day 10
Quality-Improvement Leadership
- Roles of senior leaders and relationships to front-line projects
- Impact of leaders on organizational performance
- Reward and recognition
- Spread and sustainability
- Key competencies of quality leaders

Project Presentations
- Teams present projects to meet graduation requirements

Graduation Ceremony
CONTINUING EDUCATION

This activity has been planned and implemented in accordance with the Essential Areas and policies of the Accreditation Council for Continuing Medical Education through the joint sponsorship of The UT Health Science Center San Antonio School of Medicine and Health Catalyst.

The UT Health Science Center San Antonio School of Medicine is accredited by the Accreditation Council for Continuing Medical Education to provide continuing medical education for physicians.

The UT Health Science Center San Antonio School of Medicine designates this live activity for a maximum of 55.50 AMA PRA Category 1 Credits™. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

Other healthcare professionals will receive a Certificate of Attendance. For information on applicability and acceptance, please consult your professional licensing board.

The UT Health Science Center San Antonio School of Medicine designates this PI CME activity for a maximum of 20.0 AMA PRA Category 1 Credits™.