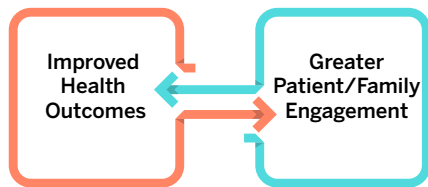


# Conducting Quality Improvement Projects Using Motivational Interviewing in Patient and Family Engagement

## A Technical Assistance Guide for NHPCC Quality Improvement Projects

The National Hemophilia Program Coordinating Center (NHPCC) and the Health Resources and Services Administration (HRSA) have identified patient and family engagement as a focus area for quality improvement (QI) for hemophilia treatment centers (HTCs). Motivational interviewing (MI) is an evidence-based, individualized approach shown to increase engagement. This guide is designed to help you conduct NHPCC QI projects that use MI to improve patient and family engagement.



## Identify Opportunities and How to Achieve Goals

Motivational interviewing aims to enhance the quality of the therapeutic relationship by assisting patients in identifying and setting goals to ultimately improve care and health outcomes.

The following list includes examples of behaviors and outcomes to help you determine opportunities for improvement in the care and services your HTC provides:

- ▶ Comprehensive visit attendance rate by diagnosis is \_\_\_\_% of patients
- ▶ Patient bleed and treatment logs are filled out by more than \_\_\_\_% of patients
- ▶ Medications are taken/administered as prescribed
- ▶ Patients/families contact their HTC whenever symptoms aren't responding to treatment as expected
- ▶ Patients/families manage medications/supplies sufficiently, reducing or eliminating occurrences of running out
- ▶ Increased participation in chapter events

- ▶ Patients set and achieve personal goals
- ▶ Patients and families inquire about new therapies
- ▶ Patients treat bleeds in a timely manner
- ▶ Patients adhere to their agreed-upon treatment plan
- ▶ HTC is advised by an engaged patient and family counsel
- ▶ Patients can "teach back" what was discussed at their most recent HTC visit
- ▶ Patients contact their HTC prior to having any medical/dental procedures
- ▶ Patients have an emergency treatment plan in place
- ▶ Pediatric patients successfully transition to adult care and are able to advocate for their own health

## How to Develop Your HTC's QI Project: Considerations and Strategies

1. Identify the opportunity space and success metrics. Use the list above to determine where your HTC has opportunities to improve patient and family engagement. In addition, identify a patient or family who is at-risk, creating inefficiencies for your HTC staff, or both. It is critical to define how success will be measured. Over time, efforts that aim to support the defined goals must be assessed to determine their effectiveness and if alternate measures should be employed.

**Fast Tip:** Be SMART about your goals: Specific, Measurable, Achievable, Relevant, and Time-based. For more information, see [SMART criteria](#).

2. Identify how goals will be achieved. Next, the means by which your HTC will attempt to achieve them must also be defined. These can include new policies, procedures, or tools that enable your staff to conduct the activities necessary to support patients and goals. To increase the likelihood of success, an agile and iterative approach is recommended. Using driver diagrams, Plan-Do-Study-Act (PDSA) templates, and other frameworks can help you define your efforts. [Learn more](#).



## A QI Project in Practice

The following scenario provides an example of one possible goal with some potential solutions to demonstrate how you can evaluate and use methodologies based on scientific method and human-centered principles.

- ▶ Your HTC identifies the following goal: “Staff uses motivational interviewing to assist patient in creating goals.” Through the QI process, you establish that an outcome of this goal is that the patient participates in the creation of their own goals. From that, an operational definition such as “personal goals documented in the patient’s medical record” is determined.
- ▶ The QI project can now be designed with a SMART aim that 60% of patients with severe hemophilia will have personal goals documented in their medical record by December 31, 2020.
- ▶ Next, you need to create “drivers” to support the goal. These are elements critical to QI success. First, designate the key staff member responsible for conducting the MI and provide them with training in MI if needed.
- ▶ Once drivers are identified, define how they will be integrated into your HTC’s practices and procedures. Identify the “pilot” patient who will be interviewed at the next clinic visit or over the phone. Set a date to begin the experiment with goals defined and documented.
- ▶ After the predetermined event—clinic visit, phone interview, etc.—the staff member(s) responsible for conducting the experiment consult with at least one other member of the staff to determine how much the efforts support the defined goal. Questions may include:
  - ▷ What worked, and why?
  - ▷ What did not work, and why?
  - ▷ Did the interview result in documented patient goals? If not, why not?
  - ▷ What can be done to increase chances of success in the future?

**Fast Tip:** Don’t focus on perfection, which can impede incremental improvement. Also be sure to consider the needs of your HTC and patients over dogmatic adherence to frameworks.

- ▶ Following some tests of change or PDSA cycles, when standardization is the next appropriate step, the staff member(s) responsible for analyzing the results of the trial occurrence present at the next staff meeting. Successes are celebrated and documented in detail for posterity. Opportunities for improvement are discussed and possibly brainstormed. Adjustments are made and, if the staff is comfortable incorporating the new practice into clinic procedure, documentation is produced to inform all relevant staff members. If the new practice needs further refinement, another PDSA cycle is initiated to determine success and fit with patient and clinic needs/goals. Once a practice is adopted in a chosen population, scaling up to additional groups or populations may be considered as appropriate.

**Take Action!** To learn more about the NHPCC’s quality improvement efforts, email [support@athn.org](mailto:support@athn.org) or talk to the QI coaches in your region.

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**About the NHPCC:** Among other technical support focus areas, The NHPCC coordinates and supports a national quality improvement (QI) effort to ensure that the science of quality improvement is leveraged to inform activities that result in improved care and outcomes for patients.

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