

**PEDIATRIC OFFICE FOR IMPROVEMENT SCIENCE**

**JANUARY - MARCH 2023**

**QI QUARTERLY**  
**VOLUME 3**

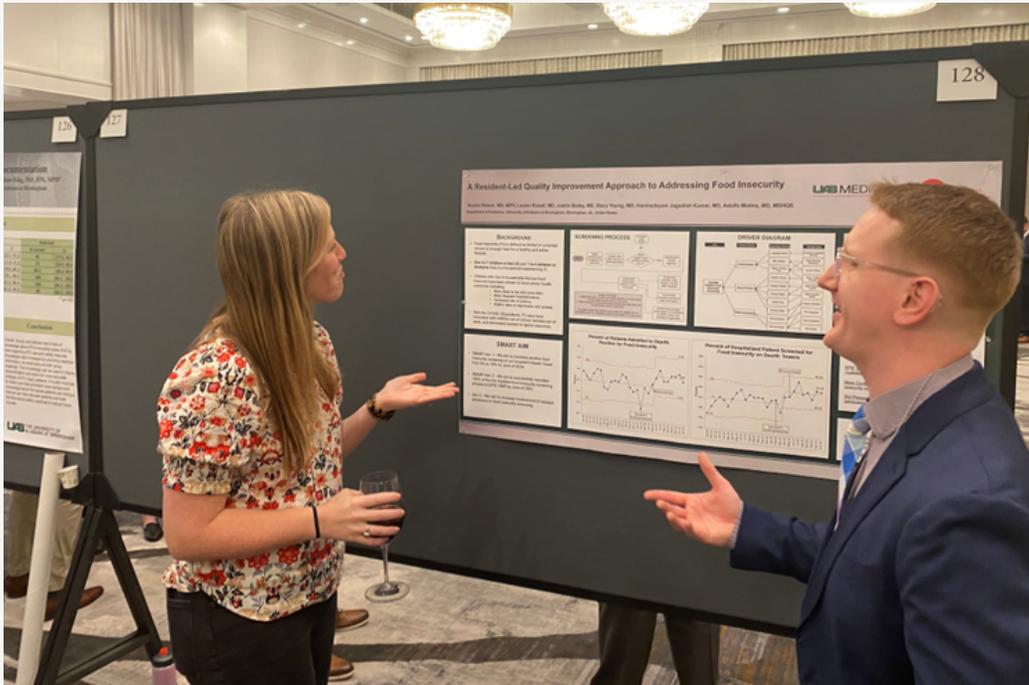


**PREPARED AND PRESENTED BY**  
**ANNE KINYUA**

# PROJECT SPOTLIGHT

## A RESIDENT-LED QUALITY IMPROVEMENT APPROACH TO ADDRESSING FOOD INSECURITY.

A Oslock, LM Rosati, J Bailey, S Young, H Jagadish Kumar and AL Molina, Birmingham, AL. University of Alabama Birmingham

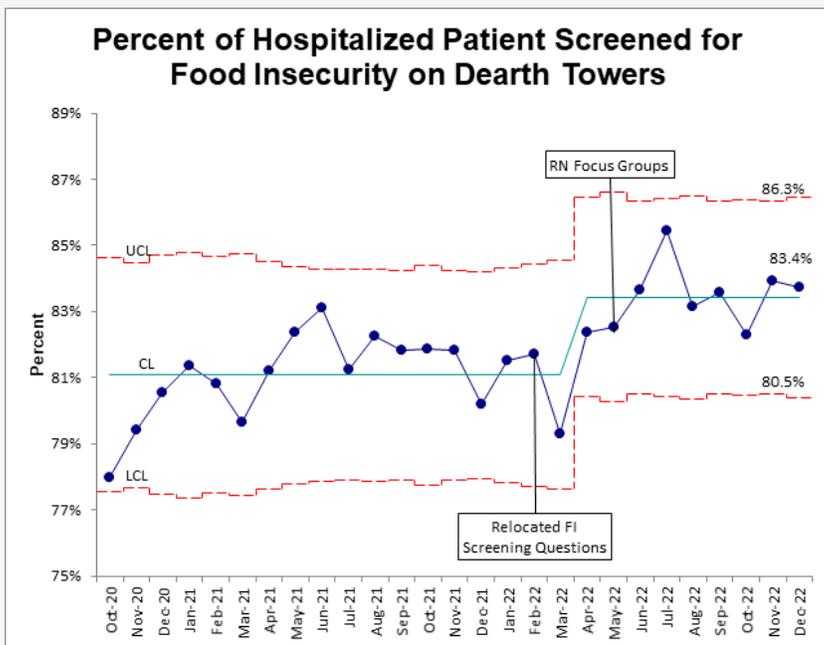
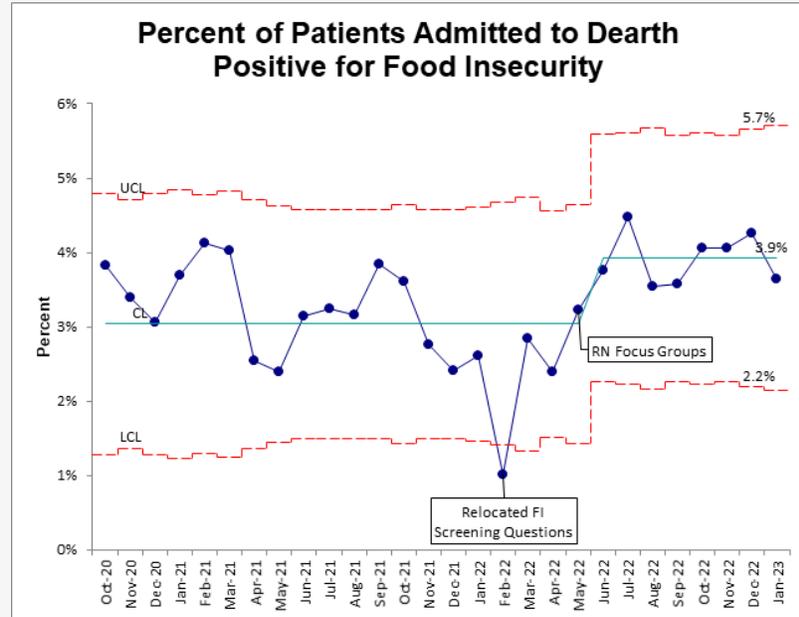


Dr. Oslock presenting the initiative at SSPR earlier this year.

**Purpose of Study:** Alabama ranks among the most food-insecure states, with a prevalence of 13-15% and food insecurity (FI) is associated with worse healthcare outcomes. In 2020, we began screening for FI among our hospitalized patients. Initial screening data yielded a mean positive screening rate of 3%, much lower than published rates in our community. We aimed to improve our screening process to better capture food-insecure patients. The project's SMART aim is to increase positive FI screening at our hospital from 3% to 10% by June 2023.

**Methods Used:** Screening is performed during a nurse-driven comprehensive "admission profile" using the validated 2 question AAP Hunger Vital Signs™. Using the model for improvement, a resident-led team began iterative PDSA cycles aimed at increasing the rate of positive screens. Informal focus groups with nursing staff to discuss the current FI screening process and develop a key driver diagram were an essential first step. An initial intervention was aimed at reducing question order and dissent bias by moving these questions earlier in the admission profile

**Summary of Results:** Nursing focus groups revealed important themes regarding barriers to effective screening: structural (location of questions, format within the EMR), delivery method (paper vs. electronic, private vs. administered), nurse-based (reserving adequate time for patient screening, orientation on appropriate screening techniques), and patient-based (health literacy, stigma associated with FI). Since the initial intervention we have noticed a small but significant difference in overall screening rates and positive screens.



**Conclusions:** Identifying FI among pediatric patients is vital to supporting families. However, effective screening for FI in the inpatient setting has multiple barriers. We continue efforts focused on primary drivers to improve screening.

# WRITING WORKSHOP

POISE will be conducting a writing workshop this fall to assist providers within the DOP in getting their quality improvement work published. Below is a draft of the workshop agenda.

Click [HERE](#) to sign up for the workshop:

## PROJECTED ITINERARY

### Session 1: Introductory Writing Session

Content: QI Journals, SQUIRE guidelines, what makes QI publishable

### Session 2: Introduction Section

Content: Review intro sections through lens of SQUIRE guidelines

### Session 3: Methods

Content: Review process/outcome/balancing measures, traditional vs QI statistics

### Session 4: Results

Content: Rules for special cause variation, creating/annotating publication worthy control charts, constructing a demographic "table 1"

### Session 5: Discussion

Content: Cadence and length, aspects to include/exclude

### Session 6: Writing your Abstract/Title

Content: choosing your journal title, what's critical to include/exclude, wrap up/feedback



# OUR PROGRESS

UPDATES FROM THE OFFICE



## THE STATE OF QUALITY IMPROVEMENT

### Subsections of POISE

So as to help advance the state of quality improvement across the DOP, POISE has created subsections to help focus quality officers' efforts in improving the quality of quality.

#### Quality Improvement Education

To help develop the next generation of improvers, Drs. Emily Smitherman and David Galloway will be redeveloping the residency noon conference QI curriculum and offering additional education offerings to DOP fellows given the resounding need voiced by division directors across the department.



# OUR PROGRESS



## Quality Improvement Outreach

To identify divisions' unique needs related to quality improvement and further engage clinicians in improving their patients' outcomes, POISE has been meeting with every division to gain their perspective and identify ways in which POISE can help advance their initiatives. Dr. Kassel's involvement with the DOP's Annual Quality & Safety Day further extends this mission. Ashley Moellinger will help the office identify ways in which POISE can further extend beyond physicians and engage all providers in improving patient outcomes.



## Dashboards

Drs. CaJacob, Loberger, and Zaccagni will be working alongside Mahek Virani within Performance Improvement in improving dashboards across campus. With the arrival of EPIC, we are hopeful we can enhance divisions' ability to visualize relevant outcomes in real time, to further identify areas for improvement, and assess the impact of interventions on patient outcomes.



## Recognition

Dr. Rashid will be working to improve efforts in recognizing scholarly QI occurring on campus through newly created awards. The Quality Improvement Achievement Award for fellows will recognize and celebrate quality improvement successes during fellowship training and The Quality Improvement Achievement Award recognizes faculty engaged in quality work designed to improve health outcomes in children of Alabama.





# PROJECTED TIMELINE

TASK	START DATE	END DATE
<b>QUARTER 01</b> SUBSECTION FORMATION	JANUARY 2023	MARCH 2023
<b>QUARTER 02</b> CONTINUED OUTREACH	APRIL 2023	JUNE 2023
<b>QUARTER 03</b> WRITING WORKSHOP	JULY 2023	SEPTEMBER 2023