Defining Competency to Empower the BMT Quality Professional

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The James

Creating a cancer-free world. One person, one discovery at a time.
Disclosures

- Nothing to disclose
Background

- The Comprehensive Cancer Center Consortium (C4QI) BMT Workgroup voted on a 2016 workgroup project
  - BMT Quality Professionals: comparison of roles and responsibilities is frequent
  - Leverage BMT’s strong history of quality management and process improvement
  - Several roles in BMT have position papers: Quality Managers could potentially benefit from having one as well

- Multi-faceted approach
  - Literature search
  - Qualtrics Survey
  - Review/Input from experienced BMT Colleagues
Goals

- Share literature and survey findings pertaining to the BMT Quality Manager Role
- Provoke a national dialogue on defining a body of knowledge and roles/responsibilities for the BMT Quality Professional
- Provide a framework for Healthcare Quality Professional training and professional growth
Background: Literature Search

- Broad overview of the current definitions related to the BMT quality professional role
- FACT-JACIE accreditation or quality manager impact on BMT
- Impact of a Quality Manager or Quality Program on outcomes
- 19 total articles selected for review based upon search criteria
<table>
<thead>
<tr>
<th>Finding</th>
<th>Year</th>
<th>Title</th>
<th>First 2 Authors</th>
</tr>
</thead>
<tbody>
<tr>
<td>FACT-JACIE Accreditation is the impetus for quality management. Lack of a quality management program is one of the most common survey findings.</td>
<td>2008</td>
<td>Demonstrating Excellence in Stem Cell Transplantation</td>
<td>Pamphilon, Apperley</td>
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<tr>
<td>Implementation of JACIE standards yielded a statistically significant improvement in overall survival in Allogeneic transplant programs when reviewing 1097,904 transplants. No difference in survival with Autologous programs.</td>
<td>2011</td>
<td>Introduction of a quality management system and outcomes after HCT.</td>
<td>Gratwohl, Brand</td>
</tr>
<tr>
<td>12,993 transplants studied and revealed a statistically significant decrease in mortality over a 3-year period among HLA matched patients that received their transplant in a FACT/Clinical Trials Network Center.</td>
<td>2015</td>
<td>The impact of center accreditation on HCT.</td>
<td>Marmor, Begun</td>
</tr>
<tr>
<td>Quality professional must have a sufficient professional experience and credibility to gain influence.</td>
<td>2000</td>
<td>The Quality Manager</td>
<td>Wilson</td>
</tr>
<tr>
<td>Total quality management: focus on quality improvement for patients and employees.</td>
<td>1994</td>
<td>Bringing Quality to the Customer: A new paradigm for quality managers</td>
<td>Largen</td>
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<tr>
<td>Quality manager: Sales, teaching, consultant, detective, researcher, designer, lawyer.</td>
<td>2004</td>
<td>The Modern Quality Manager</td>
<td>Addey</td>
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</table>
Background: BMT Quality Manager Survey

- Fall 2016
- Qualtrics Survey
- Distribution:
  - Comprehensive Cancer Center Consortium (C4QI) Programs
  - BMT Quality Roundtable Group
  - Linked In groups affiliated with BMT
  - Individual Contacts
- N=43 responses
  - Predominantly mid-to-large sized BMT Programs.
Survey Findings: Key Responsibilities

Over 70% of programs surveyed indicated that their quality professional fulfills the following responsibilities:

- Clinical Program Quality Management
- Change Management (assisting or directing the program in managing changes)
- Maintaining compliance with accreditation standards
- Preparing for accreditation surveys
- Data gathering and analysis
- Facilitation of process improvement projects
- Quality Committee facilitation/oversight
- Policy and Procedure Development
Survey Findings: Quality Manager’s Impact

Responders indicating that Improvements in the following domains are attributed to the BMT Quality Professional role

<table>
<thead>
<tr>
<th>Domain</th>
<th>Percentage</th>
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<tbody>
<tr>
<td>Standard Operating Procedures</td>
<td>94%</td>
</tr>
<tr>
<td>Workflow Improvements</td>
<td>91%</td>
</tr>
<tr>
<td>Achievement of Accreditation</td>
<td>87%</td>
</tr>
<tr>
<td>EHR Documentation Improvements</td>
<td>82%</td>
</tr>
<tr>
<td>Regulatory Compliance</td>
<td>81%</td>
</tr>
<tr>
<td>CIBMTR Form Submission</td>
<td>74%</td>
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<tr>
<td>Program Improvement Goals</td>
<td>72%</td>
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<tr>
<td>Clinical Outcomes</td>
<td>72%</td>
</tr>
<tr>
<td>Patient Satisfaction</td>
<td>62%</td>
</tr>
<tr>
<td>CLABSI Reduction</td>
<td>61%</td>
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</tbody>
</table>
Survey Findings: Quality Manager’s Impact (continued)

Responders indicating that Improvements in the following domains are attributed to the BMT Quality Professional role

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<thead>
<tr>
<th>Domain</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Program Growth</td>
<td>58%</td>
</tr>
<tr>
<td>Transplant Related Mortality</td>
<td>47%</td>
</tr>
<tr>
<td>C. Diff Rate</td>
<td>43%</td>
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<tr>
<td>CPOE Optimization</td>
<td>42%</td>
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<tr>
<td>Cost Savings</td>
<td>38%</td>
</tr>
<tr>
<td>Staff Satisfaction</td>
<td>38%</td>
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<tr>
<td>Re-Admissions</td>
<td>36%</td>
</tr>
<tr>
<td>Reimbursement</td>
<td>34%</td>
</tr>
<tr>
<td>Workflow improvements between clinical and research</td>
<td>30%</td>
</tr>
</tbody>
</table>
Survey Findings: BMT Quality Manager’s Education Level

% with each type of Degree

- Bachelor's: 61%
- Master's: 31%
- PhD, MD: 8%

N=36

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Recommendation: Establish a Body of Knowledge* for the Quality Manager

- Process Improvement
  (including standardized workflows and clinical pathways)
- Change Management
- Data Analysis and Stewardship
- Accreditation and Compliance
  (including policy/procedure development and document control)
- Informatics

* Skills and activities that encompass the quality manager role. This BoK can transfer to multiple disciplines and backgrounds.

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BMT Quality Manager Principles of Success

Transform regulations & standards into action and positive outcomes

Focus on meaningful outcomes to patient care which can be measured and monitored; bring value to patients and the clinical teams

Teamwork and inter-disciplinary collaboration
## Putting into Action: Developing a Healthcare Quality Professional Career Ladder within your Organization

<table>
<thead>
<tr>
<th>Coordinator</th>
<th>Specialist</th>
<th>Manager</th>
<th>Director</th>
</tr>
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<tbody>
<tr>
<td>• Establishes the baseline of a quality program.</td>
<td>• Evaluates trend lines and identifies gaps in the quality program.</td>
<td>• Oversees the entire quality program and drives standardization.</td>
<td>• Directs multiple pieces of a complex system.</td>
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<tr>
<td>• Creates a quality management plan.</td>
<td>• Creates plans for improvement based on data analysis.</td>
<td>• Focuses on process improvement and driving team members to make improvements prior to defining standard operating procedures.</td>
<td>• Partners with physician leadership to implement change.</td>
</tr>
<tr>
<td>• Creates a backbone for developing standard operating procedures.</td>
<td>• Works with data managers to create process improvements.</td>
<td></td>
<td>• Drives performance improvement by becoming the translator of the clinic needs, informatics, and process improvement.</td>
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<td>• In partnership with the clinical team, defines the roles and responsibilities of team members.</td>
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<tr>
<td>• Establishes a baseline for education and competencies required for each role.</td>
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Conclusion & Next Steps

- Assessment of the Quality Role(s) within your BMT Program
  - Competencies
  - Opportunities for career and program growth
- Over-Arching:
  - Development of a white paper to support the role
  - Pathway that continues to ‘raise the bar’ on BMT quality and the unified, consistent approach to how we’re getting there
- Use BMT’s foundation of quality management to assist other clinical groups and teams throughout healthcare
Questions

- “Quality is Pride of Workmanship.”
  - W. Edwards Deming

Special Thanks To:
- Ramona Repaczki-Jones, BMT Quality Director, Moffitt
- Amy Heissenbuttel, Quality Manager, Seattle Cancer Care Alliance
- Marsha Gott, Quality Manager, Yale
- The BMT C4Q1 Quality Workgroup
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