The Pursuit of Radiation Oncology Performance Excellence

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MALCOLM BALDRIGE PERFORMANCE EXCELLENCE PROGRAM (PEP)

1987 Federal law created the Baldrige National Quality Program and Quality Award
Now renamed the Baldrige Performance Excellence Program
Directed at first to commercial organizations, categories for health care, education and non-profits added later
ACHIEVING PERFORMANCE EXCELLENCE

“Give Us the Tools and We Will Finish the Job”

Winston Churchill
WWII British Prime Minister
(1874-1965)

BALDRIGE HEALTH CARE CRITERIA TOOLS FOR PERFORMANCE EXCELLENCE

In-depth, multi-disciplinary, self-assessment approach to analyze and measure the quality and effectiveness of a radiation oncology department’s clinical, research and educational programs

STARTING POINT: ORGANIZATIONAL PROFILE

BALDRIGE PEP
MISSION, VISION, & VALUES

Mission: What are we trying to accomplish?

Vision: Where are we headed and how do we want to be viewed?

Values: What is truly important to us?
CATEGORY 1: LEADERSHIP

Senior leadership actions guide, manage, and demonstrate communication, and encouragement of high performance.

Leadership approaches ensure regulatory/accreditation compliance, ethical behavior, and societal responsibilities.

Senior leaders establish a culture of patient and other stakeholder engagement, develop the Department’s future leaders, and recognize and reward contributions by its workforce.

CATEGORY 2: STRATEGIC PLANNING

Key elements of the strategic planning process are considered using SWOT Analysis.

Resources are evaluated to ensure the availability of a skilled workforce, and address requirements that might entail capital expenditures, technology development and/or acquisition, and new health care partnerships or collaborations.

Strategic objectives are converted into action plans to accomplish the objectives and how progress is assessed.

SWOT ANALYSIS
STRENGTHS & WEAKNESSES
OPPORTUNITIES & THREATS

<table>
<thead>
<tr>
<th>SWOT Matrix</th>
<th>HELPFUL</th>
<th>HARMFUL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Strengths</td>
<td></td>
<td></td>
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<tr>
<td>Weaknesses</td>
<td></td>
<td></td>
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<tr>
<td>Opportunities</td>
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<tr>
<td>Threats</td>
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</tbody>
</table>
**SWOT ANALYSIS**

**STRENGTHS & WEAKNESSES**

- What do we excel at?
- What resources are we lacking?
- What resources do we have?
- What services require improvement?
- What do we view as our strengths?
- What do we see as our weaknesses?

**UTILIZE STRENGTHS**

**CONFRONT WEAKNESSES**

**SWOT ANALYSIS**

**OPPORTUNITIES & THREATS**

- What new technology is under consideration?
- What institutional resources will be available?
- What are our strategic goals?
- What institutional competition for new equipment capital funding do we face?
- How strong are competitive local and regional radiation oncology centers?
- How could future uncertain program support impact our ability to recruit and retain well-qualified professionals?

**TAKE ADVANTAGE OF OPPORTUNITIES**

**MINIMIZE THREATS**

**CATEGORY 3: FOCUS ON PATIENTS**

**OTHER CUSTOMERS AND MARKETS**

85 Points

Patients and other stakeholders who directly and indirectly influence the Department's operations are identified.

Differing needs and expectations of stakeholders are determined.

Feedback is acquired from patients and other stakeholders regarding satisfaction with the clinical services provided and overall organizational performance.

Information is transmitted to ensure stakeholders are kept fully informed about the Department's operations and concerns.
CATEGORY 4: MEASUREMENT, ANALYSIS AND KNOWLEDGE MANAGEMENT

90 Points

Policies and procedures ensure the accuracy and reliability of equipment, computer hardware and software.

Data are acquired and utilized for treatment planning, machine control, and electronic medical record (EMR) systems.

Policies and procedures maintain the privacy and security of patient information.

CATEGORY 5: WORKFORCE FOCUS

85 Points

The workforce is rewarded for high performance, innovation, and initiative.

Support is provided for continuing education, maintenance of certification, and development of new knowledge through formal training or on-the-job mentoring.

Adequate personnel, space, and equipment are supported to successfully carry out clinical, teaching, and research responsibilities.

CATEGORY 6: PROCESS MANAGEMENT

85 Points

The Radiotherapy Quality & Safety Management Program is organized and assessed.

Work processes are tracked to demonstrate improvements in provided services and outcomes.
CATEGORY 7: RESULTS

Results factors (LeTC) summarize, review, and evaluate the overall outcomes achieved in Categories 1-6.

PROCESS SCORING-CATEGORIES 1-6

(ADLI)

- **Approach**: Methods used; appropriateness; effectiveness; organization
- **Deployment**: Relevance; consistency; execution
- **Learning**: Refinement of approaches; support of change; team sharing
- **Integration**: Alignment across processes and staff work units in support of Department goals

<table>
<thead>
<tr>
<th>Score Range (%)</th>
<th>Characteristics</th>
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<tbody>
<tr>
<td>0-25</td>
<td>Driven by activities rather than by systematic processes</td>
</tr>
<tr>
<td>30-40</td>
<td>Beginnings of a structured process-oriented system</td>
</tr>
<tr>
<td>50-65</td>
<td>Systematic, repeatable approaches increasingly aligned with key organizational strategies and goals</td>
</tr>
<tr>
<td>70-100</td>
<td>Effective, systematic approaches highly aligned with key strategies and goals; operations exhibit innovation, efficiency and collaborative information sharing</td>
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RESULTS SCORING - CATEGORY 7

(LET C) [Image]

Levels - Measured performance
Trends - Rate and extent of performance improvements
Comparisons - Performance relative to industry and/or accreditation standards
Integration - Degree to which processes, procedures and outcomes support organizational goals and objectives

**Scoring Range (%)**

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<th>Score Range</th>
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<tbody>
<tr>
<td>0-5</td>
<td>Poor or unreported performance levels</td>
</tr>
<tr>
<td>10-25</td>
<td>Improving performance levels</td>
</tr>
<tr>
<td>30-45</td>
<td>Good performance levels achieved for some Categories</td>
</tr>
<tr>
<td>50-85</td>
<td>Good to excellent performance levels achieved for many Categories</td>
</tr>
<tr>
<td>90-100</td>
<td>Excellent performance levels achieved for most Categories</td>
</tr>
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</table>

**WHAT DOES IT ALL MEAN?**

Approaches and outcomes that meet general requirements of a particular Category generate a score of

Accomplishments determined to be Inferior to or Exceeding that ranking, are scored accordingly
TOTAL POINT SCORE

Total Points = \[
\text{Category Points x Assigned Percent} \]

Perfect Score = 1,000 Points!

Typical Winner's Score

PEP PEP HOORAY!

TOTAL POINTS

Typical Score 700-800 Points

O PPORTUNITIES F O R I MPROVEMENT (OFIS)

Self-analysis evaluations describing criteria requirements not addressed or that could be more effectively addressed through process adjustments or better illustrated by results.

WHO CAN DO ALL THIS?

Dr. Seuss
Writer & Illustrator (1904-1991)
THESE SUPER HEROES CAN DO IT!

I.M. Superman
Medical Physicist
(1958 - )

A. WonderWoman
Medical Physicist
(1958 - )

SUPER HEROES FOR RAD ONC!
PEP PEP

“Failure is more frequently from want of energy than want of capital”

Daniel Webster
U.S. Statesman
(1782-1852)

Q: WHAT DID THE ENVELOPE SAY TO THE STAMP?
A: “STICK WITH ME AND WE’LL GO PLACES!”
All science is either physics or stamp collecting

Ernest Rutherford
1908 Nobel Laureate
“Father of Nuclear Physics”
(1871-1937)

Using Baldrige Performance Excellence Program Approaches in the Pursuit of Radiation Oncology Quality Care, Patient Satisfaction, and Workforce Commitment

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