

# Q ESSENTIALS

## AT WORK: PERFORMANCE & PROCESS IMPROVEMENT



Noelle Flaherty, MBA MS BSN RN CCM CPHQ  
*Director, Quality Improvement, Johns Hopkins HealthCare, Glen Burnie, MD*

Noelle Flaherty is so committed to performance and process improvement (PPI) that she incorporates its practice and theory as much in her personal life as in her professional life as a leader in quality. In both worlds, she believes that the continuous PPI process should be followed from beginning to end and step by step, and regards change within any given process as a means to grow and evolve.

Consider her purposeful and varied career path. A year after graduating from a small liberal arts college with a degree in philosophy, Flaherty was working at a law firm when she decided to fulfill her dream of becoming a registered nurse. For someone who likes to “be on the move and learn,” she delighted in the flexibility that the nursing field provides.

As a nurse, “you can change your career path every 2 years,” she says. “I’ve done inpatient, outpatient, ambulatory care, triage, workers’ compensation, and I worked for a third-party administrator. Later, I worked for about 4 years as a practice administrator for a family practice, where I grew to love quality and performance improvement because I did a little of everything. I was a telephone triage nurse, and I took state auditors through lab audits in which they reviewed our policies, and I also worked on improving quality scores using gaps-in-care reports.”

Throughout her career, Flaherty has always kept her eye on the endgame—getting people their needed care. Toward that end, she earned a master’s degree in health services leadership and management, earned an MBA, became a Lean Green Belt, and is now solely focused on the evolving field of PPI.

“I’m now doing just PPI, which is what I want to do forever because it is never boring. Quality standards change at least quarterly, and you have to continue to learn new things in the quality world. Plus, quality now has a greater financial impact and, as such, gets a lot more resources and attention than it used to years

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“As a NAHQ member and CPHQ, it’s great to meet, network with, and share ideas and best practices with people who are experiencing the same kind of environment and challenges. You know you’re not alone.”

ago,” says Flaherty, whose own quality improvement department at Johns Hopkins HealthCare has expanded from six team members 4 years ago to 30 staff members and continues to grow.

Flaherty’s goal is to “positively impact [patients] from a broader population perspective by getting them in for their needed care, and hopefully deliver low-cost, high-quality care with improved patient outcomes.” She says, “I definitely have found my calling in PPI. I constantly have to think, come up with new ideas, and find different ways to tackle problems.”

Flaherty recommends that healthcare quality professionals stay determined, follow the course, and persist in overcoming setbacks to provide patients with the best possible care. To do this, they need to:

**Follow the continuous PPI process (define, measure, analyze, implement, and control) and never skip steps.** “People new to quality or people unfamiliar with performance improvement want to just jump to the solution before they do all of the analysis,” she says. Even veterans in PPI now face added time pressures by working in the rapidly changing environment of healthcare. “You need to move fast,” she said, “but you don’t want to make decisions without basis, without evidence, and not



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having done all the important steps of the continuous PPI process, including risk analysis.”

**Communicate well.** Don’t assume that others in your organization fully understand the current quality environment. “Communicating with other departments within your organization is challenging. You need to tailor your message to each audience so that you will be heard and received positively. For example, when I talk to finance people, I convert quality outcomes to something that financial people understand, such as return on investment,” she says.

**Manage change.** “People often don’t follow the PPI process, especially when changes occur,” says Flaherty, who wrote the change-management competencies as part of her contribution to NAHQ’s PPI work group. “People don’t take time to manage change, and they don’t think through all the repercussions of change to the organization. Although quick change is desired, we need to make sure that we are communicating effectively, involving people, and getting buy-in from everyone involved in the change process. If we don’t, our change efforts are going to fail.” Flaherty continuously learns new and innovative change-management tools at Johns Hopkins Medicine’s Armstrong Institute for Patient Safety and Quality and integrates the tools into her daily work.

**Don’t focus too much on financial impact.** There is an increased interest in PPI within healthcare due to pay for performance on the state and national level. Although this interest may

lead to good health outcomes, there is the risk of focusing too much on financial impact rather than patient outcomes and patient safety. Too much focus on pay for performance could pose an ethical dilemma for healthcare providers. For example, a measure may be incentivized by a government program or health plan that is related to an important patient safety issue (such as lead testing), but there may be disagreements within the provider community regarding the most current standard of care. If the incentive measure varies from the most current standard of care, providers may voice concerns about ethical dilemmas related to the measure being incentivized. Often, quality measures lag standards of care by 1 or 2 years, so this may be an ongoing concern.

Going forward, Flaherty hopes that all healthcare organizations will include quality people at the senior executive or board level so that PPI can become fundamental to the strategic planning process. In addition, quality input is needed at the executive level to ensure measures identified for pay for performance or other strategic goals are meaningful and measurable.

Flaherty plans to advance further within the quality field, and is thankful to have had the opportunity to collaborate with PPI experts as part of NAHQ’s work group. “People who work in quality, performance improvement, and compliance have a quality mindset,” she says. “We always ask ‘How can we improve performance? What do we need to do to make things better?’”



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