INSIGHTS

HAMAD HEALTHCARE QUALITY INSTITUTE
NEWSLETTER

January 2026 | Issue 57

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- Improvement Coach Program

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> **"A new leader, a shared vision, and an exciting path ahead— HHQI welcomes Ms. Sahar Al Shamari."**

NVIC Faculty Appreciation Day

JOY AT WORK CORNER:

Puzzle Let's play Word Search!

Hurry! The first three (3) to submit the correct answer will be published … *read more on page 6*

Mr. Nasser Al Naimi

Chief of Patient Experience and Director, Hamad Healthcare Quality Institute

Ms. Sahar Al Shamari

Assistant Executive Director, Clinical Service*, Hamad Healthcare Quality Institute*

Dear INSIGHTS Readers,

I am pleased to announce the appointment of **Ms. Sahar Dahawi Al Shamari** as the Assistant Executive Director, Clinical Service at the Hamad Healthcare Quality Institute (HHQI), effective immediately.

Ms. Sahar brings **over 15 years of experience** with Hamad Medical Corporation, complemented by a **strong academic foundation** in healthcare quality and systems improvement. She holds a **Master's degree in Health Systems Improvement** and is currently progressing toward the completion of her PhD, reflecting her sustained commitment to advancing excellence in healthcare improvement.

As HHQI continues to play a critical role in **strengthening a culture of continuous improvement and evidence-based practice** across the organization, I am confident that Ms. Sahar's expertise will significantly enhance the Institute's **strategic impact and operational effectiveness.**

Please **join me in extending a warm welcome** to Ms. Sahar Al Shamari and wishing her success in new role.

I am honored to join the HHQI team and begin this **new professional chapter.** I bring extensive experience in quality improvement and a **strong commitment to advancing high-quality, patient-centered care.** Throughout my career, I have contributed to initiatives that **strengthen clinical performance, support evidence-based practices, and address health disparities.** In this role, I am particularly motivated to support efforts that **elevate the HMC level and enhance overall quality outcomes.** I look forward to collaborating with colleagues to apply my experience in **alignment with organizational goals and continuous improvement** across our practices.

"New beginning brings fresh perspective, renewed energy, and new possibilities. We look forward to growing and achieving together."

Celebrating Excellence:
National Value Improvement Collaborative Faculty, Coaches, and Speakers Appreciation Day

by *Dr. Raana Siddiqui*

*"O*n 28 December 2025, Hamad Healthcare Quality Institute proudly hosted the National Value Improvement (NVI) Faculty, Coaches, and Speakers Appreciation Day, a special occasion dedicated to recognizing the exceptional contributions of those who play a pivotal role in advancing value improvement across the healthcare system.

The event brought together a distinguished group of faculty members, coaches, and speakers who have consistently demonstrated commitment, expertise, and passion in supporting value improvement initiatives. Through their guidance, mentorship, and knowledge sharing, they have empowered teams to drive meaningful change, improve patient outcomes, and embed a culture of continuous improvement.

The Appreciation Day served as an opportunity to reflect on the collective achievements of the NVIC community over the past few years. It highlighted the impact of collaborative learning, practical coaching, and evidence-based approaches in translating value improvement principles into real-world practice. Speakers shared insights from their journeys, emphasizing the importance of leadership, resilience, and innovation in sustaining improvement efforts.

A key focus of the event was acknowledging the behind-the-scenes efforts of coaches and faculty who support teams throughout their improvement journeys. Their role in fostering shared experience and learning, critical thinking, encouraging data-driven decision-making, and nurturing local capabilities was widely recognized and celebrated.

Beyond recognition, the day also reinforced the importance of shared purpose. It provided a platform for networking, exchanging experiences, and strengthening collaboration that will continue to support the scale up and spread of the National Value Improvement program.

As we move forward, the dedication and expertise of our faculty, coaches, and speakers remain central to our mission. This Appreciation Day was a heartfelt thank you to those who inspire excellence, champion improvement, and help shape a sustainable, high-value healthcare system.

"Behind every meaningful improvement is a faculty member, coach, or speaker who asked the right question, built confidence, and believed in the power of teams to change care for the better."

Emerging Directions in Quality Improvement Science: What 2025 Signals for Healthcare

by *Dr. Jawed Iqbal*

"Quality Improvement (QI) science in 2025 has undergone a significant evolution. Rather than relying solely on traditional methods, modern QI increasingly integrates advanced technologies, aligns with complementary disciplines, and addresses healthcare as a dynamic and complex system. These shifts aim to strengthen learning, sustainability, and real-world impact across healthcare organizations.

1. Artificial Intelligence as a Catalyst for Improvement: Artificial Intelligence (AI), particularly generative AI, is rapidly becoming a powerful enabler of QI. Its ability to synthesize large volumes of information supports faster learning and more informed decision-making.

- **Predictive analytics** are enabling teams to identify patient risks earlier, allowing improvement efforts to move from reactive responses to proactive prevention.
- **AI-supported improvement design**, including theory of change development, measurement planning, and data analysis, is accelerating the pace of improvement cycles.
- A new competency is emerging around **prompt engineering for QI,** where practitioners combine improvement knowledge with generative AI techniques to enhance project efficiency and insight.

2. Alignment of Quality Improvement (QI) and Implementation Science (IS): A notable trend is the convergence of QI and IS, often referred to as **Evidence-Based Quality Improvement (EBQI).** This approach strengthens the link between research evidence and frontline practice.

- Greater emphasis is being placed on **method fidelity**, such as ensuring PDSA cycles are applied as intended, to enhance reliability and transferability of results.
- **Shared evaluation frameworks**, including **RE-AIM**, are increasingly adopted by QI teams to assess not only effectiveness, but also reach, equity, and sustainability—dimensions that were previously underemphasized.

3. Viewing Healthcare as a Complex Adaptive System: Contemporary QI science recognizes healthcare organizations as complex adaptive systems rather than linear processes.

- Improvement success is now understood to depend heavily on **context, leadership behaviors, and human interactions**, sometimes more than the specific methodology employed.
- There is a growing focus on **organizational resilience**, ensuring that gains are sustained over time and remain robust during periods of disruption, change, or crisis.

4. Wellbeing and Equity as Core Quality Outcomes
Modern definitions of quality extend beyond clinical outcomes to include workforce wellbeing and patient experience.

- **Microlearning approaches**—short, targeted educational interventions—are proving effective in building frontline QI capability while respecting time constraints.
- **Health equity** is increasingly positioned as a central aim of QI, rather than a secondary or balancing measure, reflecting a broader commitment to inclusive and fair care delivery.
- Embedding **Just Culture principles** supports psychological safety, staff engagement, and continuous learning.

5. Evolving Improvement Methodologies: QI methods continue to adapt to the realities of fast-paced healthcare environments.

- **Rapid Cycle Improvement (RCI)** enables multiple small tests of change to occur simultaneously, allowing teams to learn and adapt in real time.
- **FOCUS-PDSA** combines structured problem identification with iterative testing, ensuring interventions are grounded in a deep understanding of system challenges.

Reference:
- Institute for Healthcare Improvement (IHI). *Science of Improvement: How to Improve*.
- Braithwaite J, et al. "Complexity science in healthcare." *BMJ*, 2018.
- Greenhalgh T, et al. "Beyond adoption: A new framework for theorizing and evaluating non-adoption, abandonment, and challenges to scale-up." *Journal of Medical Internet* Research, 2017.
- Glasgow RE, et al. "Evaluating the public health impact of health promotion interventions: The RE-AIM framework." American Journal of Public Health, 1999.

QI JOURNEY SPOTLIGHT

Deming's 14 Points as a System-Level Framework for Continuous Quality Improvement

by *Dr. Gautam L. Sharma*

*"C*onstancy of purpose underpins sustainable quality and patient safety across Hamad healthcare organizations **[Deming Points 1, 14].** Aligning improvement work with enterprise priorities, such as harm reduction, experience of care, and workforce well-being, ensures that initiatives are driven by long-term system aims rather than short-term performance pressures. For QI leaders, this alignment strengthens strategic coherence and accountability.

Deming emphasized the need to **improve the system of care, not individual components in isolation [Points 2, 5, 6, 7].** Within HMC's multi-facility environment, patient flow, clinical handovers, and discharge processes span departments and care settings. System-focused tools such as process mapping, driver diagrams, and run charts enable teams to understand variation and test changes over time. Metrics, including falls per 1,000 patient days, hospital-acquired pressure injury rates, and serious safety trends, support learning rather than judgment.

Creating the conditions for improvement requires leaders to **drive out fear and remove barriers to engagement [Points 8, 9, 10, 11, 12].** A just culture approach, supported by transparent incident reporting and structured learning reviews, empowers frontline teams to identify risks and contribute solutions. Indicators such as **incident reporting trends, staff engagement results, and action completion following RCA or huddles** reflect cultural maturity and psychological safety.

Leadership is central to Deming's philosophy **[Points 3, 13].** When leaders coach teams, participate in improvement huddles, and invest in capability-building, they reinforce that **quality and patient safety are fundamental responsibilities of care delivery.** Involving everyone, from bedside to boardroom, enables HMC to function as a resilient healthcare system.

Deming's 14 Points

1. **Create constancy of purpose** for improvement
2. **Adopt the new philosophy**
3. **Cease dependence on inspection** to achieve quality
4. **End the practice of awarding business on price alone**
5. **Improve constantly and forever** the system of production and service
6. **Institute** training on the job
7. **Adopt** and Institute **leadership**
8. **Drive out fear**
9. **Break down barriers** between departments
10. **Eliminate slogans, exhortations, and targets for the workforce**
11. **Eliminate numerical quotas and management by objectives.**
12. **Remove barriers to pride in workmanship**
13. **Encourage education and self-improvement**
14. **Take action** to accomplish the transformation

"Quality and patient safety thrive when leaders align purpose, strengthen systems, and create an environment where every voice can contribute to improvement."

In **summary,** sustainable quality and patient safety are achieved by **aligning improvement efforts** with **long-term organizational priorities** and **focusing on strengthening systems rather than isolated processes**. Leaders play a key role in fostering a **just culture, enabling learning, and building improvement capability** so that everyone contributes to **safer, higher-quality care**.

Reference:
- *Deming WE. Out of the crisis. Cambridge (MA): MIT Press; 1986.*

Let's play Word Search!
Email your answer at hhqi@hamad.qa

Find the word in the puzzle.

- Words can go in any direction.
- Words can share letters as they cross over each other.

```
V M T S B K T D F N O E Y W L
H V J K Q P V P O X Z V K M E
L J M F Z O J I O Y R O J W A
J E N Q B X T F Z D H R O B D
S K L D P C E A P A A P I T E
S N P I E A U C Z E V M S I R
X Y A P R V A N D X K I A F S
L I S G M F U H C Z I H T A H
Q N J T O Y C N A T S N O C I
I B I L E L N E J J R Z U I P
Q B P B E M S Z K V O B Q G N
V E Y D F Z T R A I N I N G Z
N O I T A M R O F S N A R T E
X R S R E I R R A B X F W Y V
P E D U C A T I O N P K C H R
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CONSTANCY	LEADERSHIP	PRIDE
ADOPT	FEAR	EDUCATION
IMPROVE	BARRIERS	SYSTEM
INSPECTION	SLOGANS	TRANSFORMATION
TRAINING	QUOTAS	

Issue #56 Answers :

Standards are to consistency as recipe is to *uniformity*.
Training is to competence as calibration is to *accuracy*.
Root-cause analysis is to prevention as weather forecasting is to *preparedness*.
Quality culture is to Teamwork as communication is to *collaboration*.
Documentation is to clarity as measurement is to *insights*.
Continuous improvement is to progress as iteration is to *refinement*.
Team engagement is to performance as motivation is to *effort*.
Process mapping is to understanding as blueprints are to *construction*.
Quality control is to detection as quality assurance is to *prevention*.
Consistency is to reliability as variation is to *unpredictability*.
KPI tracking is to performance as a scorecard is to *results*.
Feedback is to improvement as reflection is to *learning*.

> *A bad system will beat a good person every time.. -Deming*

CONGRATULATIONS!

1. Emi Antony
Al Wakra Hospital

2. Anila Mary Mathew
Heart Hospital

3. Rashid Ezhuthachan Kandy
Human Resource

HHQI INSIGHTS EDITORIAL TEAM

Ms. Sahar Al-Shamari   Dr. Khawla Ahmed   Dr. Reham Hassan
Dr. Jawed Iqbal   Mark Adrianne Agramon   Ana Mar Jimena   Dr. Raana Siddiqui

Share your insights with us at hhqi@hamad.qa