Rapid Cycle Improvement Collaborative (RCIC)

What is RCIC?

At Cincinnati Children's, The James M. Anderson Center for Health Systems Excellence is transforming the delivery of care through improvement science. Our Rapid Cycle Improvement Collaborative (RCIC) is designed to help teams achieve measurable improvement in focused, narrowly scoped projects.

Course Benefits:

- Apply quality improvement (QI) methods to a project to achieve measurable process and outcome improvement results, using the Improvement Science Model and the Model for Improvement
- Make a direct impact in areas such as safety, productivity, community health, patient-family experience, staff experience, access, clinical outcomes, and well-being
- Connect with and learn from other course participants

The Anderson Center

The Anderson Center is committed to developing the next generation of leaders who will accelerate the transformation of health. We have:

- Proven impact, with 88% of graduates achieving improvement results
- Developed over 1,300 improvement science leaders from within and beyond Cincinnati Children's
- Guided over 2,100 participants in team-based process improvement collaboratives
- Distinguished faculty with over 250 years of combined experience in improvement science who use evidence-based teaching and coaching practices
- Expert QI coaches and instructors who have made a commitment to bringing an equity focus to the courses with the aim of closing health disparity gaps

> *"RCIC was truly a game changer for me in terms of quality improvement. This collaborative gave me the knowledge and skills needed to spread a process throughout my entire division. It transformed my way of thinking when trying to implement change, and the information learned will aid in my growth as a person and provider indefinitely."*
>
> **RCIC Graduate**

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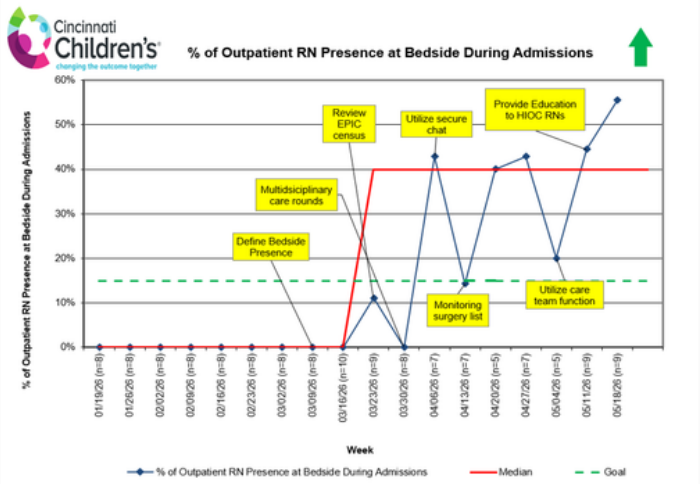
Who?



The target audience is a small team, including a leader, recommended and sponsored by their department, division, or institute leadership to work on an identified problem which is part of their improvement portfolio. The team should include people who conduct work in the key areas of the process intended to be improved. Members might include, but are not limited to, physicians, nurses, allied health professionals, educators, researchers, business professionals, clinical and non-clinical professionals, support staff, and patients and families when possible. It is critical that the appropriate front line staff be included.

What?

The collaborative's methodology is based on the Improvement Science Model, the Model for Improvement, and Deming's System of Profound Knowledge, along with basic quality improvement tools which give teams a roadmap to follow. Team leaders receive additional instruction on group dynamics and leading teams.

How?

RCIC is built on the "All Teach All Learn" philosophy and the "Teach-Do" model for instructions. Sessions are highly interactive and include instruction, case studies, hands-on simulation, shared learning, feedback from senior leadership (clinical and non-clinical QI experts), coaching, application exercises, and time allocated to work on team projects with additional quality improvement resources during sessions. Teams meet outside the collaborative to continue the work they've started in the session. Team leaders receive additional instruction and coaching in smaller group sessions.

When?

Cohorts are offered twice a year.

Continuing Education

Participants in this course may qualify for continuing education credit.
For more information, contact *cme@cchmc.org*.

> *"The Rapid Cycle Improvement Collaborative (RCIC) was an essential experience for my career development. My team was able to leverage the quality improvement (QI) training we received and put those learnings immediately into practice to improve care."*
>
> **RCIC Graduate**

For more information about RCIC and how to apply, go to https://www.cincinnatichildrens.org/research/divisions/j/anderson-center/education/additional-programs and contact us at RCIC_COMMUNICATIONS@cchmc.org.