

INSIGHTS

HAMAD HEALTHCARE QUALITY INSTITUTE NEWSLETTER

April 2026 | Issue 60

Check out
more on
page 8

HHQI LEARNING EVENTS

- Improvement Coach Program C2 Graduation
- High Performing Organization Program C3 Graduation

LEADERSHIP MESSAGE

Healthcare excellence begins... read more on page 2

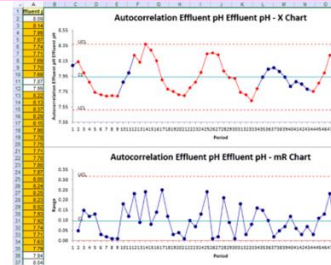
INSPIRING STORY

From Frontline to Global Stage: The 'Global Top 30 Improvers Awards' at the 30th International Forum on Quality and Safety in Healthcare in Oslo, Norway... The Inaugural Global Top 30 Improvers Awards ... read more on page 3



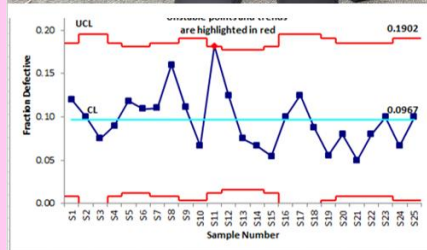
QUALITY SPOTLIGHT

My Journey with the Age-Friendly Health Systems 4Ms: Rethinking Medication Management... Before AFHS, my practice was primarily focused on guidelines and evidence-based medicine... read more on page 4



QUALITY SPOTLIGHT

Pediatric Emergency Center (PEC) Alsaad Nursing Forum: Enriching Value Improvement Projects... PEC Alsaad has been known for enhancing clinical excellence and patient safety... read more on page 5



QI JOURNEY: REFLECTION

Small Steps, Big Shifts: What the Dosing Approach Has Taught Me... Reflecting on my role... read more on page 6

IMPROVEMENT SPECIALIST COHORT 3

QUALITY INSIGHTS

A Story: The Night Shift That Changed Everything... Maybe the issue wasn't the patient ... read more on page 7



JOY AT WORK CORNER:

What's Wrong!

Hurry! The first three (3) to submit the correct answer will be published ... read more on page 8

Share your Inspiring True Stories!

For more details email us at

hhqi@hamad.qa



Mr. Nasser Al Naimi

Chief of Patient Experience and Director, Hamad Healthcare Quality Institute

Dear INSIGHTS Readers,

Welcome to this edition of HHQI Insights. I am delighted to connect with you again as we continue our journey of sharing knowledge, celebrating achievements, and fostering excellence across our healthcare community.

In this issue, I am pleased to invite Ms. Alanoud Almarri, Executive Director of Nursing & Midwifery, Workforce to share her perspective through the Leadership Message.

We hope you find this edition insightful and engaging, as we look forward to continuing our collaboration towards improvement.



Sustainable improvement cannot occur without a workforce that feels motivated, connected, and supported. HHQI continues to integrate wellbeing principles into quality improvement and leadership development efforts across the healthcare system.

HHQI programs emphasize the importance of Joy in Work, teamwork, open communication, and continuous learning as essential foundations for high-performing organizations. We work closely with leaders and teams to build capabilities that strengthen resilience, foster collaboration, and support a culture of appreciation and shared purpose. We believe that when leaders lead with empathy and intention, they unlock the full potential of their teams.

As healthcare leaders, we must continue investing in our people with the same passion and commitment we dedicate to improving systems and processes. Every conversation, every act of recognition, and every opportunity to support staff wellbeing contributes to safer care, stronger teams, and better health outcomes for our patients and communities.

Together, let us build healthier workplaces where both our people and our pursuit of excellence can flourish, because great leadership is the heart of great healthcare.



Ms. Alanoud Almarri

Executive Director of Nursing & Midwifery, Workforce Corporate Nursing & Midwifery

Dear INSIGHTS Readers,

Healthcare excellence begins with the wellbeing of the people who deliver care every day. As leaders our responsibility extends far beyond achieving operational and clinical Outcomes. We are called to create nurturing environments where every member of our workforce feels deeply valued, genuinely supported, fully respected, and empowered to grow and thrive.

In today's rapidly evolving healthcare environment, staff wellbeing is no longer an optional initiative, it is a strategic priority directly linked to patient safety, quality outcomes, staff engagement, and organizational sustainability. True Leadership means shaping a workplace culture defined by compassion, active listening, sincere recognition, psychological safety, and meaningful engagement with those on the frontlines. When we lift our teams, we lift the entire standard of care we provide.

From Frontline to Global Stage: The ‘Global Top 30 Improvers Awards’ at the 30th International Forum on Quality and Safety in Healthcare in Oslo, Norway

The **Inaugural Global Top 30 Improvers Awards** is a prestigious recognition program celebrating the world’s most impactful improvement leaders and initiatives. It is jointly awarded by the BMJ and the IHI in celebration of the 30th anniversary of the **International Forum on Quality and Safety in Healthcare** held at Nova Spektrum, Lillestrøm, Oslo, Norway.

This year, **Kenneth Jun Logrono**, Head Nurse for Nursing Practice and Performance Improvement at Hamad General Hospital (HGH), was named one of the Top 30 Improvers under two categories—Compassionate Leadership and Patient and Community Engagement.

On 11 March 2026, Kenneth received the Compassionate Leadership Award—an honor determined through both expert judging and public voting. This award recognizes a leader who leads by example, demonstrating that profound system improvement begins with inclusivity.

Kenneth has empowered several staff nurses, clinicians, and non-traditional improvers—including housekeepers, clerks, and leaders—to actively participate in and drive meaningful change.

His commitment to bringing people together to build Quality Improvement (QI) capability, regardless of role or position, has helped foster a culture of excellence across the organization. As a result, his teams have demonstrated measurable improvements in outcomes, highlighting the significant impact of compassionate and inclusive leadership in healthcare.

As an award recipient, new opportunities have opened for Kenneth, including invitations to speak at various webinars, contribute to BMJ Quality blogs, and present at next year’s conference, where he will share his expertise and experience on how improvement science fosters environments in which everyone is empowered to contribute to safer, more inclusive, and more reliable care.



Mr. Kenneth Jun Logrono
Improvement Specialist
HGH

Upon receiving the award, Kenneth shared: *“My work shows that improvement should not be a privilege of a few—it must be a capability of all. This recognition strengthens my resolve to continue democratizing the science of improvement. When we do, we unlock the true power of the system—its people. Real quality is built by empowering people, one team, one day, one improvement at a time.”*

He received this recognition with humility and gratitude, emphasizing that the award reflects the dedication of the teams he works with-- to all staff nurses and multidisciplinary team members at HGH and SSC, as well as the Hamad Healthcare Quality Institute (HHQI), which continues to champion the development of QI capability across HMC and Qatar.

The lineup of the world’s Top 30 Global Improvers and their projects can be viewed here:

<https://internationalforum.bmj.com/oslo/compassionate-leadership-shortlist/>



My Journey with the Age-Friendly Health Systems 4Ms: Rethinking Medication Management

“Success stories always begin with a strong vision. Professor Hanadi’s Vision is to establish Qatar as a leading Age-Friendly country, aligned with and competing at international standards.”

My journey in quality improvement began when I joined Rumailah Hospital as a clinical pharmacist under the leadership of Professor Hanadi Al Hamad. I was selected as the medication lead in the Age-Friendly Health Systems (AFHS) initiative, which marked a turning point in how I approach geriatric care.

Before AFHS, my practice was primarily focused on guidelines and evidence-based medicine. However, AFHS shifted my perspective toward a more patient-centered approach, emphasizing quality of life. The 4Ms framework (What Matters, Medication, Mentation, and Mobility) helped me understand that medication decisions should not only be clinically appropriate but also aligned with the patient’s overall function and priorities.



Prof. Hanadi Al Hamad
Deputy Chief Medical Officer & Medical Director
Rumailah Hospital



Dr. Mostafa Elawady
Clinical Pharmacist
Rumailah Hospital

This experience has significantly shaped my professional journey. It expanded my role from managing medications to contributing to system-level improvements and patient-centered care pathways.



What inspired me most was recognizing how medications can significantly affect other aspects of a patient’s health. For example, medications may contribute to falls, delirium, or functional decline. This reinforced the importance of working within a multidisciplinary team, where effective communication helps ensure that medication-related decisions support, rather than compromise, patient outcomes.

This experience has significantly shaped my professional journey.



It also reinforced my belief that quality improvement is not only about clinical outcomes, but about preserving dignity, function, and independence for older adults.

With this, Our team’s work was recognized through the publication **“Age-Friendly Health Systems 4Ms: Implementing Medication Management in Hamad Medical Corporation, Qatar,”** underscoring the impact and significance of our contribution to advancing safe, age-friendly healthcare practice.

Here is the link to the publication abstract: <https://journals.healio.com/doi/10.3928/00989134-20240502-03>

Pediatric Emergency Center (PEC) Alsaad Nursing Forum: Enriching Value Improvement Projects

PEC AlSaad has been known for enhancing clinical excellence and patient safety and addressing the gaps in clinical practice through its value improvement projects (VIPs). In line with this, the department recently held a nursing forum which encourage more staff nurses to apply core quality improvement (QI) principles by developing SMART objectives, implementing the Model for Improvement using PDSA cycles, and utilizing key QI tools (Fishbone analysis, Driver diagrams, and family of measures) to design, evaluate, and sustain safe, high-value, patient- and person-centered care (PCC) initiatives.

The activity started with a welcome message from PEC AlSaad Director of Nursing, Ms. Nora Sendad, where she emphasized the importance of quality improvement projects and guaranteed support to whoever wants to take the lead. They have invited Context experts from other departments. Mr. Kenneth Jun B. Logrono, Head Nurse - HGH, described the journey of a Quality Improvement (VIP) project, including planning, implementation, evaluation, and dissemination, to support safe, high-value, patient- and person-centered care. His proficiency and empathetic personality made the session interactive and relatable to the participants.

Dr. Raana Siddiqui, Program Manager and Faculty-National Value Improvement Collaborative (NVIC) also graced the activity with her expert insights, encouraging the staff and describing the preparation process for writing and publishing articles related to Value Improvement projects.



**Ms. Agnetha Leah
B. Ariota**
GRN
PEC AlSaad

The educational session also evidenced the support of its own nursing staff by having Ms. Siji Siju George and Ms. Rosa Rabin, both from PEC AlSaad as the speakers. They highlighted the practical frameworks for healthcare excellence, including the Quality Improvement tools such as Fishbone Diagram, Process map, Driver diagram, Pareto Chart and PDSA cycle.

To conclude the activity, staff successfully presented their change ideas and projects, with strong endorsement from departmental nursing leaders. This initiative reflects our ongoing commitment to professional development and the delivery of high-quality, evidence-based care across Qatar. It also reinforces the importance of strengthening interprofessional collaboration and cultivating a sustained culture of continuous learning and improvement.



“Small Steps, Big Shifts: What the Dosing Approach Has Taught Me”

Reflecting on my role as a faculty member and QI coach, I’ve come to realize that the HHQI Dosing Approach isn’t just a training method; it sits at the heart of how I connect with people and support their growth. Early on, I believed my role was mainly about delivering the “right” content. Over time, that perspective has shifted. I now see my role as walking alongside teams as they learn, try, struggle, and gradually improve.

Adopting the dosing approach to build capacity and capability has reshaped how I approach my work. What once felt overwhelming has become more manageable. I’ve noticed people relax, become more open, and start to engage in a more meaningful way. They move from listening to trying, from observing to participating. When they share what worked or what didn’t, those moments feel honest and real. They remind me that learning isn’t about perfection, but about courage and effort; and that’s where real growth happens.

As a coach, this approach has helped me build stronger, more meaningful connections with teams. Regular engagement, rather than one-off interactions, allows me to better understand their challenges, celebrate small wins, and support them through setbacks. Creating a space where people feel safe to say, “this didn’t work”, without fear, is incredibly powerful. Over time, I’ve seen how that safety nurtures confidence, curiosity, and a willingness to try again.

What impacts me most is witnessing the shift that happens over time. Staff begin to take ownership. They move away from waiting for direction and start asking themselves, “What can I improve today?” That’s when I know something deeper is changing—not just skills, but mindset and behavior.

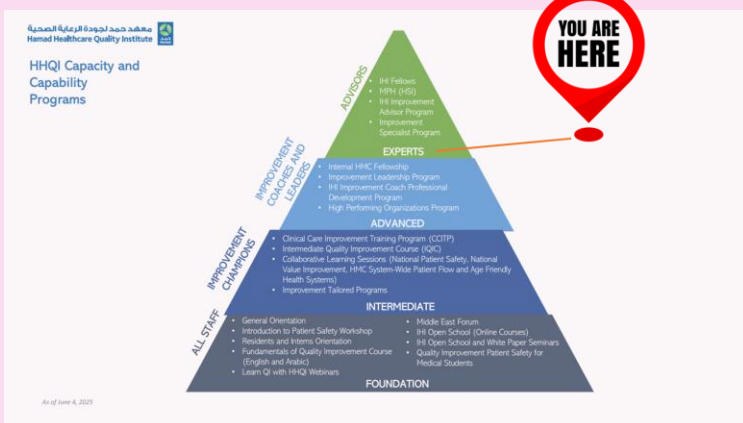


Ms. Ana Jimena
Improvement Specialist (IS)
HHQI

This journey has also taught me patience. Change rarely happens in big, dramatic moments. More often, it unfolds in small, consistent steps that are easy to overlook but impossible to replace. The dosing approach has reminded me to trust the process and value progress; however gradual it may be.

Moving forward, I see an opportunity to build on this foundation by evolving into a more advanced and responsive approach to training. This means not only continuing to structure learning, but also intentionally stretching teams as their confidence grows—introducing more complex problem-solving, encouraging peer-to-peer learning, and fostering greater independence. It’s about shifting from guided practice to empowered leadership, where teams are not just applying tools, but adapting and innovating them within their own contexts.

In the end, this approach has shaped me just as much as it has shaped the people I work with. It has made my role feel more purposeful, grounded, and ultimately more hopeful, while also challenging me to continuously grow alongside those I support.



References:

Lloyd, R. (2023, September 29). Building improvement capacity and capability with the dosing approach. Institute for Healthcare Improvement. <https://www.ihq.org>



by Dr. Jawed Iqbal

At 2:17 a.m., Amina, a young nurse on the medical ward, stood reviewing the chart of Mr. Rahman, a 68-year-old heart failure patient readmitted for the third time in two months. Same diagnosis. Same treatment. Same discharge instructions.

She felt a familiar frustration: *We are working so hard... so why does this keep happening?*

That night, instead of accepting it as routine, she paused to reflect. She remembered a principle often associated with W. Edwards Deming: most problems are created by systems, not individuals.

Maybe the issue wasn't the *patient*. Maybe it wasn't the *staff*. Maybe it was the *process*.

Seeing the System

During handover, Amina noticed a pattern. Medication reconciliation at discharge was correct but rushed. Education was given but not always understood. Follow-up appointments were scheduled but rarely explained clearly.

Everyone was doing their job. Yet the outcome remained the same.

The next morning, she raised her observation during the safety huddle. At first, there was silence. Then the pharmacist admitted discharge counseling often happened under time pressure. A junior doctor shared that summaries were sometimes completed at the last minute. The case manager mentioned follow-up calls were inconsistent. What initially seemed like isolated tasks were, in fact, interconnected gaps.



A Small Test of Change

Instead of launching a major initiative, the team agreed to test one small improvement:

- A structured 10-minute discharge conversation
- A simple checklist
- A follow-up phone call within 48 hours

They tracked weekly readmissions on a visible run chart—nothing complex, just transparent data. Within weeks, the pattern began to shift. Readmissions declined, but something else improved too, the team morale. Staff felt empowered, they weren't just delivering care; they were improving it.

The Ripple Effect

Weeks later, Mr. Rahman returned, not as a patient, but for a routine follow-up.

"This time," he said, smiling, "I understood what to do."

That single sentence reminded the team why improvement matters. Continuous improvement isn't about policies or paperwork. It's about ownership.

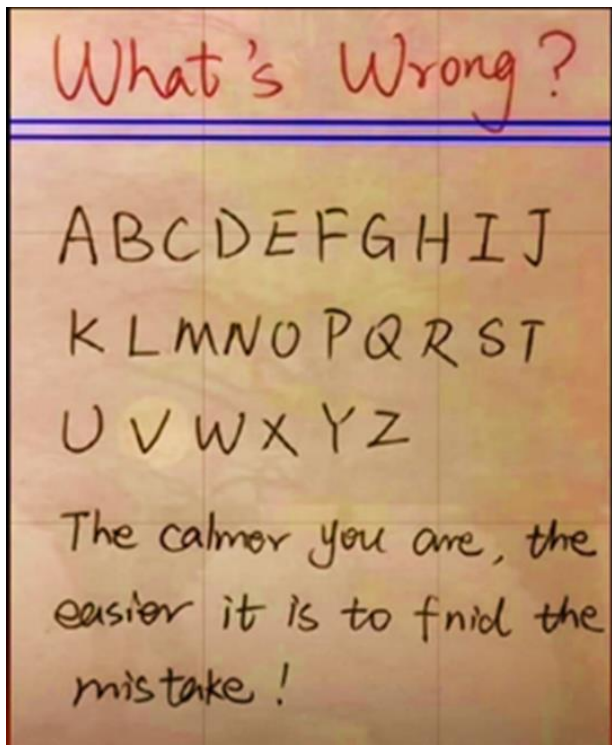
It begins when someone refuses to walk past a recurring problem.

Healthcare improvement does not start in boardrooms. It starts at the bedside, when one person chooses responsibility over routine. And sometimes, all it takes to change a system is one nurse on a night shift deciding that *"good enough is no longer enough"*.



by Ms. Ana Jimena

What's Wrong! Find what's wrong in this picture. Email your answer at hhqi@hamad.qa



Issue 59 Answer : *Trivia Time! The letter "D"*

- What term describes trees that shed their leaves annually? **Deciduous**
- What do Australians call the wild dog that roam the outback? **Dingo**
- What German-origin word refers to a non-biologically related person who looks exactly like you? **Doppelgänger**
- Which loyal house-elf in the Harry Potter series was freed with a sock? **Dobby**
- What is the specific name for a camel that has only one hump? **Dromedary**
- What unit is used to measure the intensity or loudness of a sound? **Decibel**
- What gold coin is famously associated with pirates and treasure chests? **Doubloons**
- What do you call a male duck? **Drake**
- In physics, what is the term for the measure of mass per unit of volume? **Density**
- Which flightless bird, native to Mauritius, went extinct in the 17th century? **Dodo**

CONGRATULATIONS!

Pamila Sundara Selvi Sundara Dhas
Charger Nurse, WWRC

Anita Mariatta D'Souza
Head of Accreditation Programs, RACS

Emi Antony
Inpatient Nurse, AWH

Share your insights with us at hhqi@hamad.qa



HHQI
LEARNING
EVENTS

M A Y
2026

- 3 Improvement Coach Program Cycle 2 - Graduation
- 4 LearnQI with HHQI
- 6 High Performance Organizations Program Cycle 3 – Holding the Gains and Graduation
- 7 Fundamentals of Quality Improvement Course: English
- 11-12 Improvement Leadership Program Cycle 8 – Workshop 3
- 13 HHQI Joy at Work
- 14 Clinical Care Improvement Training Program - Graduation
- 17-19 Intermediate Quality Improvement Course
- 31 Fundamentals of Quality Improvement Course: Arabic

“Improvement is not about doing more... It is about doing “WHAT MATTERS”... safely and intentionally, for every patient.”

Joseph Juran



Dr. Sahar Al-Shamari | Dr. Khawla Ahmed | Dr. Reham Hassan
Dr. Jawed Iqbal | Ana Jimena | Dr. Raana Siddiqui

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