



The ABCs of QI:

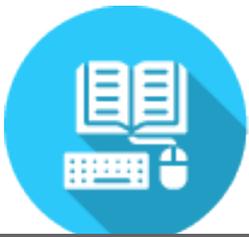


The ABCs of QI: Model for Improvement PDSA and Steps for a Successful Implementation



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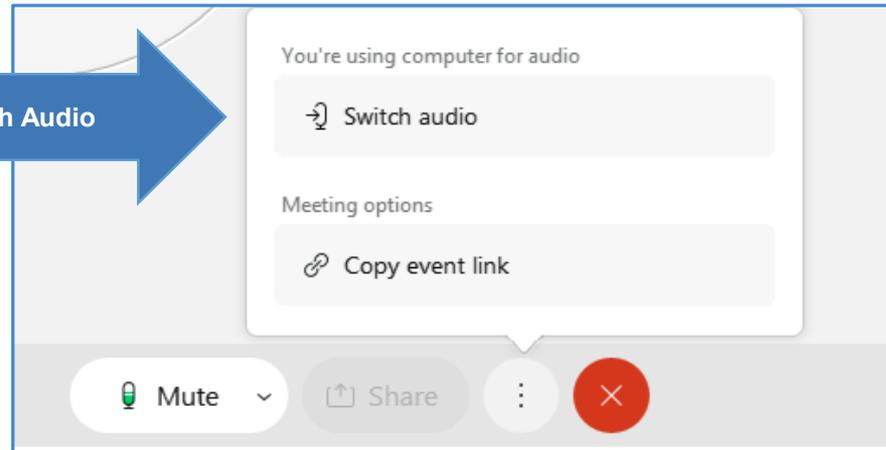


Webinar Instructions

To avoid echoes and feedback, we request that you use the telephone audio instead of your computer audio for listening and speaking during the webinar.

Figure 1

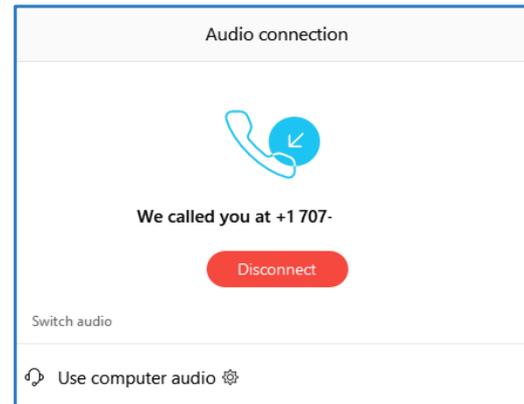
Click Switch Audio

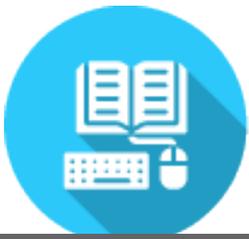


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Figure 2

Enter telephone number



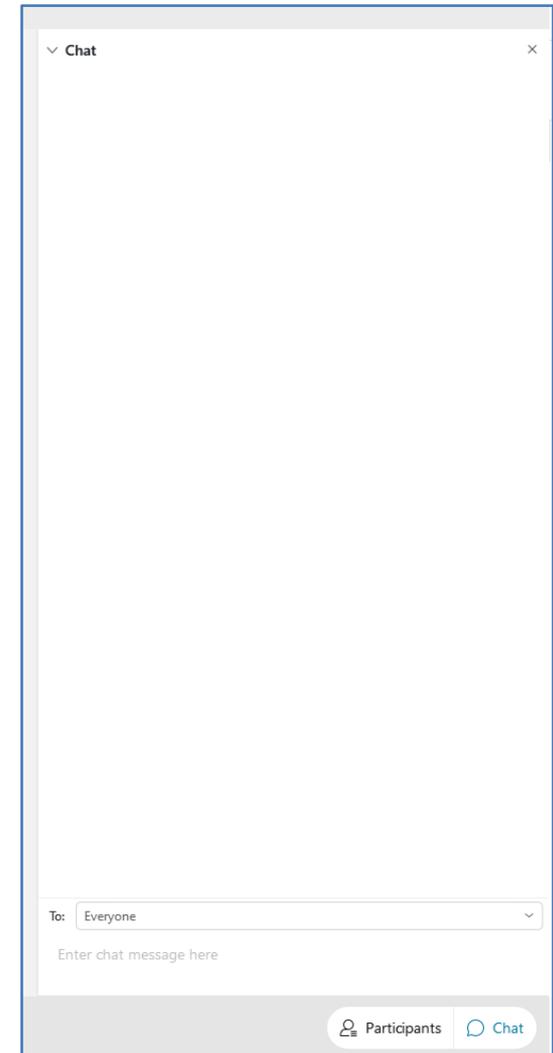


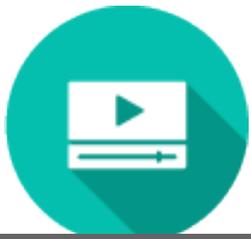
Webinar Instructions

- All attendees have been muted to eliminate any possible noise/interference/distraction.
- Please take a moment and open your chat box by clicking the chat icon found at the bottom right-hand corner of your screen and as shown in **Figure 1**.
- If you have any questions, please type your questions into the chat box, and they will be answered throughout the presentation.
- Be sure to select “**Everyone**” when sending a message.



Figure 1





Conflict of Interest

All presenters have signed a conflict of interest form and have declared that there is no conflict of interest and nothing to disclose for this presentation.



Learning Objectives

Learn, Understand, and Practice

1

Understand how to use the PDSA Cycle to test change ideas

2

Importance of testing small

3

Critical elements of a successful full-scale implementation of a solution/change



Review Session IV

Team Sources for Changes:

- Published research
 - Books, white papers, change packages, etc.
- Experts
- Peers
- Patients “voice of the customer”
 - Focus groups, surveys
- 5 Whys
- Driver Diagrams
- Process Mapping/Value Stream Mapping

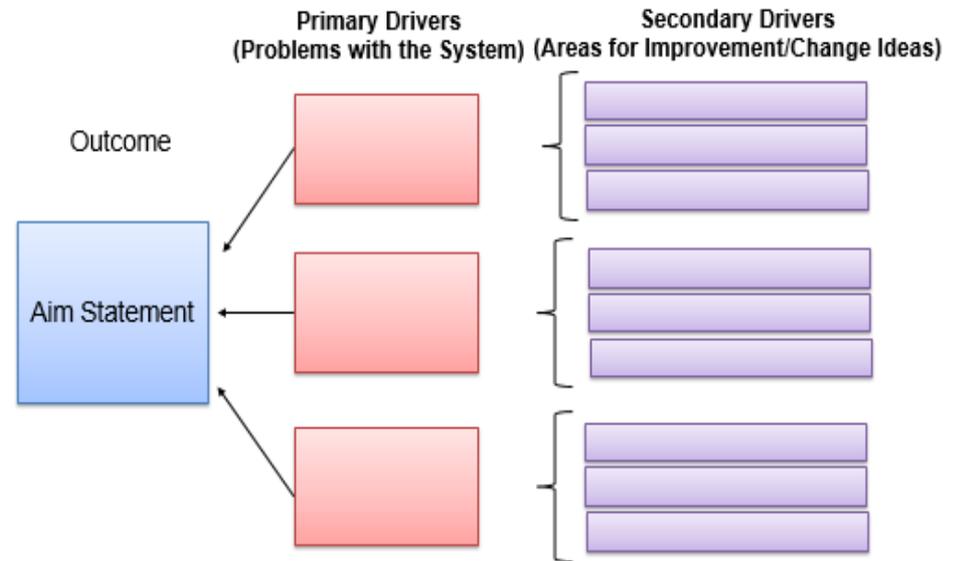


Review Session IV

Driver Diagram

Purpose

- Translates a high-level improvement goal into sub-projects
- Helps organize change concepts and ideas
- Tests theories about cause and effect
- Serves as a communication tool



Source: Health Quality Ontario, *Driver Diagram Instruction*



Review Session IV

Tips for developing a Driver Diagram

- Include those who know the work
- If primary drivers are less defined, work backwards
 - Collect change ideas
 - Cluster common ideas together to identify primary driver
- No right or wrong answer





Review Session IV

What is Process Mapping

- Understand context in which change will be made
- Serves as a tool for logical thinking about a process
- Identify changes that could be made:
 - Gaps in systems
 - Wasted efforts (redundancy, extra steps, use of resources)
- Defines and standardizes the steps and sequences
- Builds consensus





Questions





PDSA Cycle

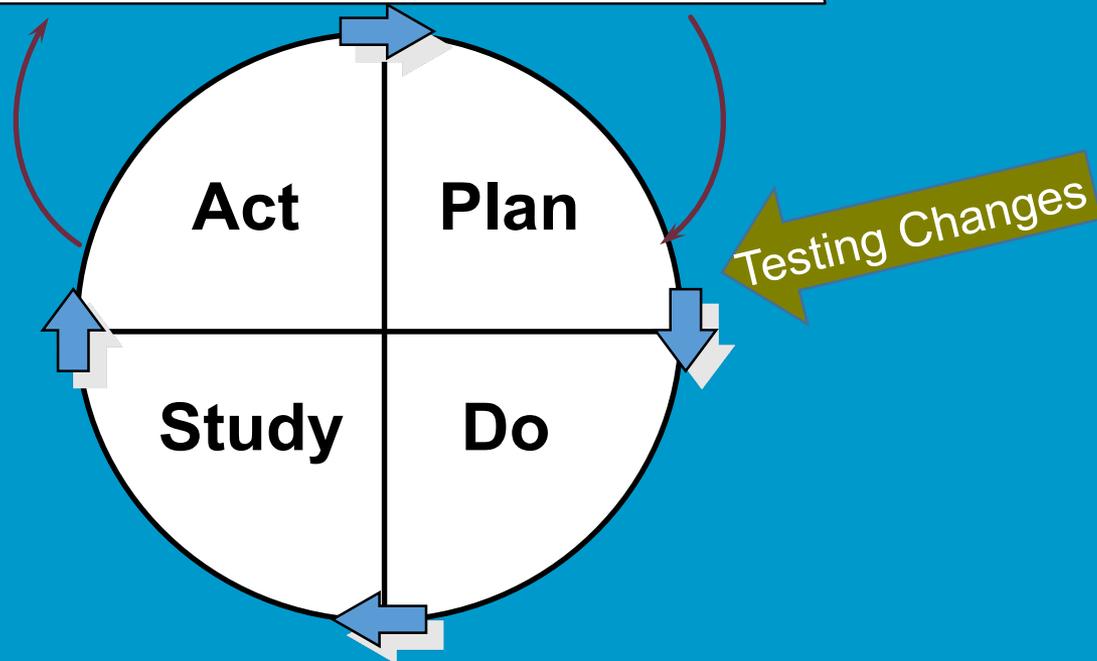


Model for Improvement

What are we trying to accomplish?

How will we know that a change is an improvement?

What changes can we make that will result in improvement?



From Associates in Process Improvement



PDSA Cycle

Vehicle for learning and action

- Facilitates learning through an iteration of cycles spurred by prediction

Three most common ways for using the cycle:

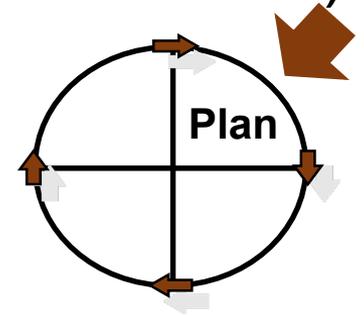
- To build knowledge to help answer any of the three questions
- To test a change idea
- To implement a change



PDSA - Plan

What change will you make? (questions to be answered)

- Who will do it?
- When will it be done?



Formulate an hypothesis (make a prediction)

- What do you think will happen?
- What do you expect to happen?

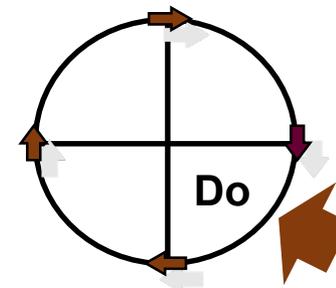
Evaluate the test (collect data)

- How will you collect and record data
- Quantitative vs. qualitative



PDSA - Do

- Carry out the plan
- Document activity, problems and observations
- Begin data analysis





PDSA - Study

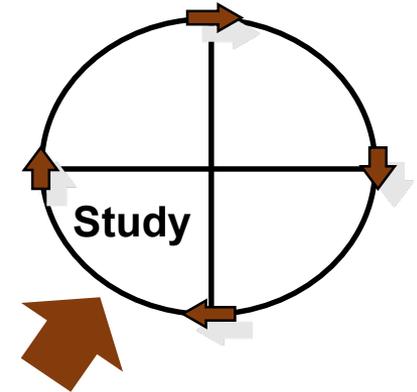
Complete data analysis

- Leave time for reflection about the test
 - What is your “gut” reaction?

Compare data to predictions

- What happened?
 - Did you get expected results?
 - Did anything unexpected happen?

Summarize what was learned





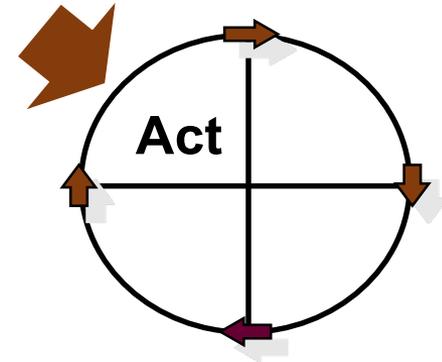
PDSA - Act

What will your next test cycle be?

- **A**dopt
- **A**dapt
- **A**bandon

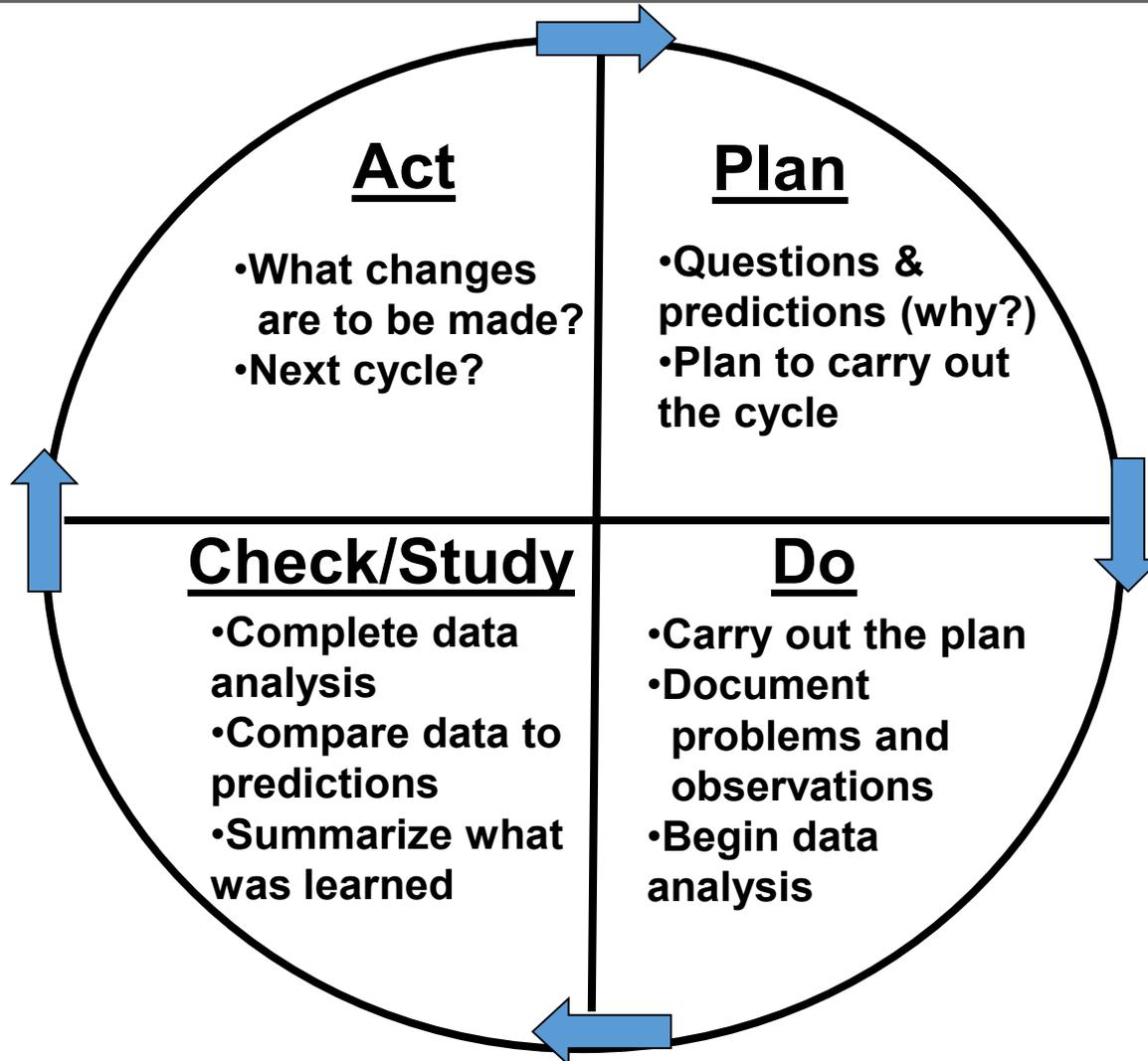
Plan the next cycle

- Refine changes
- Change conditions
- Try it on a larger scale





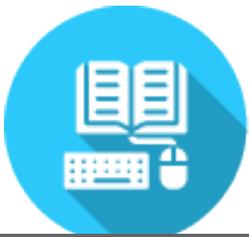
Rapid Cycle Improvement - PDSA





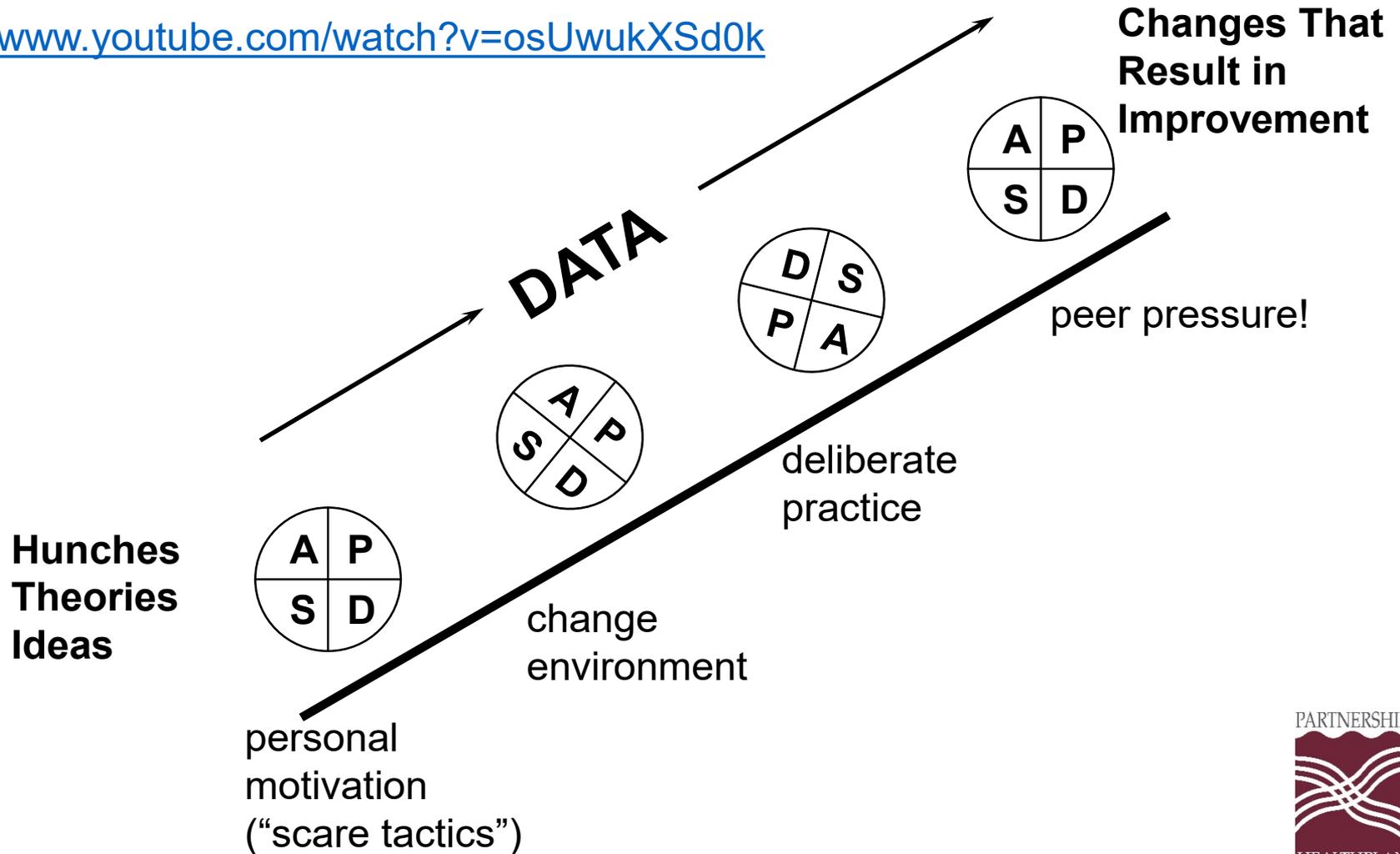
Why Do Small Tests of Change?

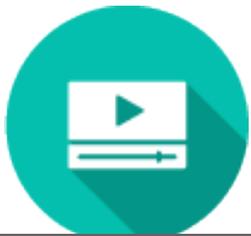
- Try a temporary change and learn from it
- Understand:
 - Likelihood the change results in improvement
 - Extent and limitations of the change
- Learn to adapt the change to local environment
 - Evaluate cost
 - Address unexpected consequences
- Gain buy-in and minimize resistance



What Does a PDSA Cycle Look Like?

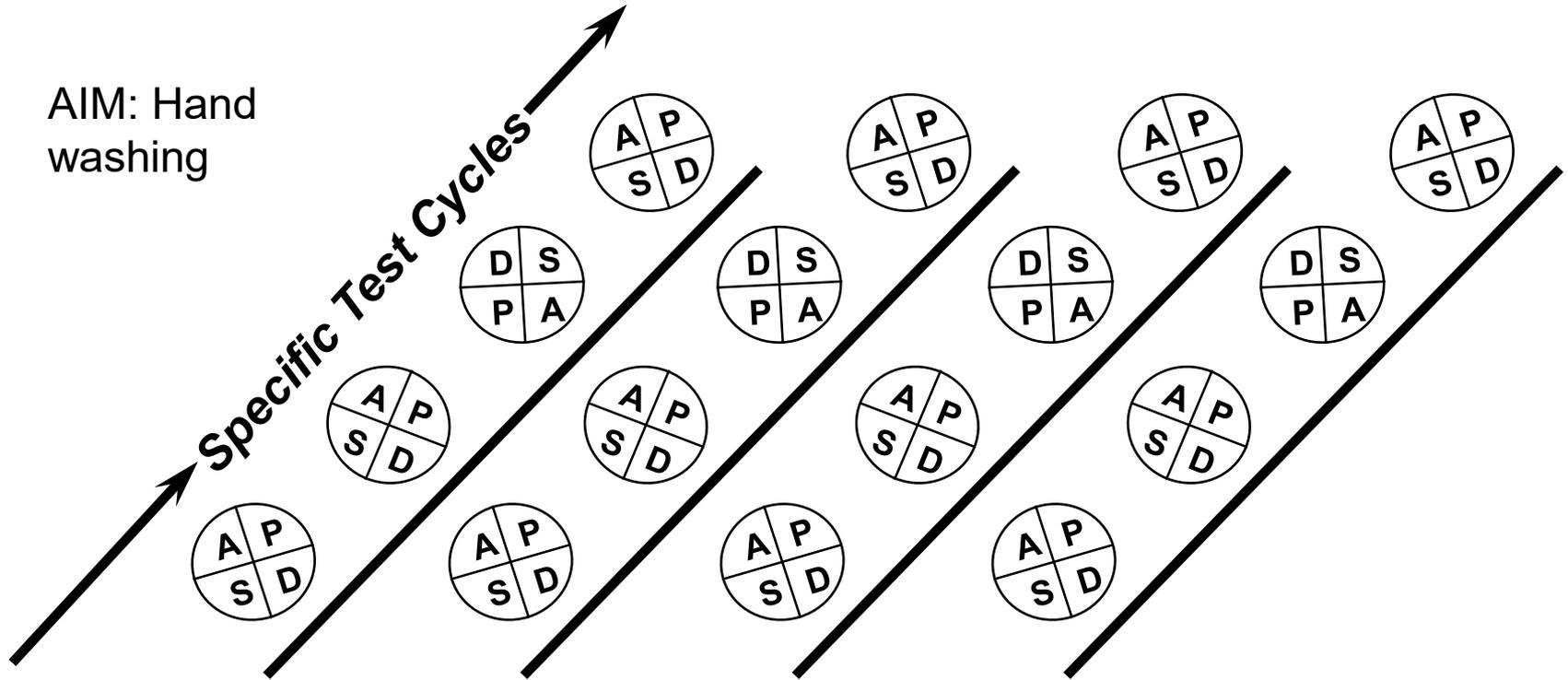
<http://www.youtube.com/watch?v=osUwukXSd0k>





Accelerate Improvement: PDSAs in Parallel

AIM: Hand
washing



Staff education

Environment:
Signs & soap
location

Practice hand
washing
sessions

Formal
policies &
leadership
modeling

Documenting Your PDSA Cycles

PDSA (plan-do-study-act) Worksheet

TOOL: Patient Feedback STEP: Dissemination of surveys CYCLE: 1st Try

PLAN

I plan to: We are going to test a process of giving out satisfaction surveys and getting them filled out and back to us.

I hope this produces (predictions): We hope to get at least 25 completed surveys per week during this campaign.

Steps to execute:

1. We will display the surveys at the checkout desk.
2. The checkout attendant will encourage the patient to fill out a survey and put it in the box next to the surveys.
3. We will try this for 1 week.

DO

What did you observe?

- We noticed that patients often had other things to attend to at this time, like making an appointment or paying for services and did not feel they could take on another task at this time.
- The checkout area can get busy and backed up at times.
- The checkout attendant often remembered to ask the patient if they would like to fill out a survey.

STUDY

What did you learn? Did you meet your measurement goal?

We only had 8 surveys returned at the end of the week. This process did not work well.

ACT

What did you conclude from this cycle?

- Patients did not want to stay to fill out the survey once their visit was over. We need to give patients a way to fill out the survey when they have time.
- We will encourage them to fill it out when they get home and offer a stamped envelope to mail the survey back to us.



Documenting Your PDSA Cycles

Project: Patient Feedback

Test: Dissemination of surveys

PDSA Cycle No.	Description of test	PLAN		DO		STUDY	ACT
		What do you predict will happen?	How will you measure if your test made an improvement?	Date(s) of test	Notes	Results/Key Learning Key Learning	What will you do next? (abandon change, more testing, implement)
1	Patient Survey	We hope to receive 25 completed surveys per week during campaign	We will analyze the results of completed surveys	7/20 - 7/24	Pt. was busy checking in and missed the survey	8 survey completed by the end of the week. The process did not work	Patient did not want to stay after visit to complete survey. We will provide the survey with envelop and stamp and encourage patient to take home, fill-out and return my mail.
2							
3							
4							
5							

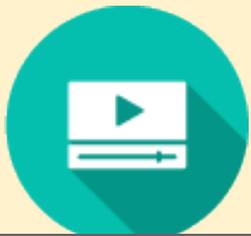


Remember

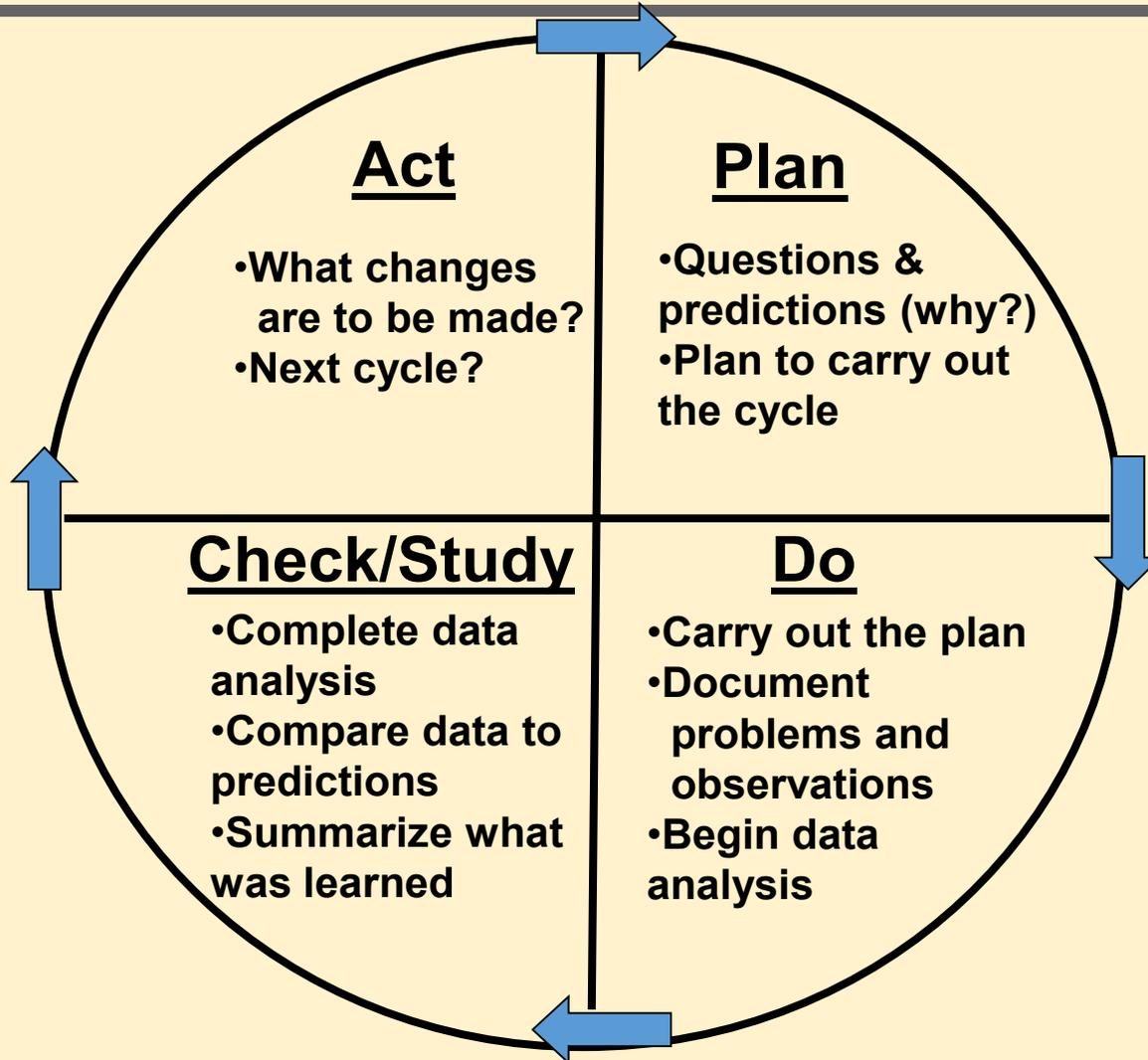
- Work with those who will work with you
- “It’s only a test...”
- Multiple small results build momentum
- Make your work visible to others
- Put patient care first
- Make the new way easier



Adapted from the IHI Breakthrough Series College

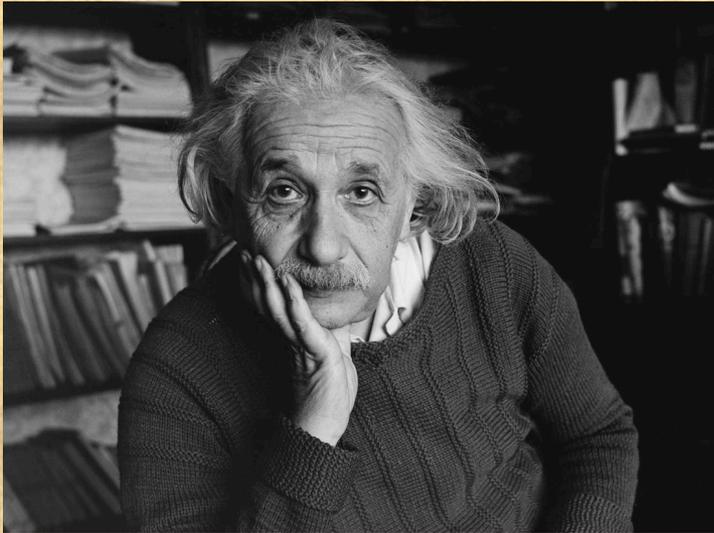


Knowledge Check



Adapted from the IHI Breakthrough Series College





“Insanity is doing the same thing, over and over again, but expecting different results.”

— Albert Einstein

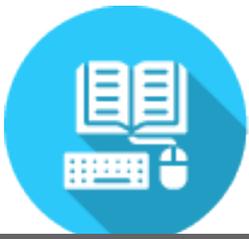


Questions





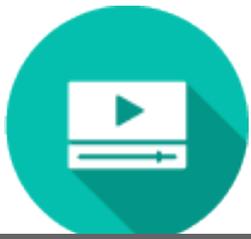
Implementation



Implementation

Critical ingredients of a successful full-scale implementation of a solution include:

- Implementation Tasks, Owners and Timeframes
- Documentation
- Training
- Troubleshooting
- Performance Management
- Measurement
- Generate short term wins



Implementation (continued)

Critical ingredients of a successful full-scale implementation of a solution include:

- Communication
 - Keep it simple
 - Relate to audience
 - Widely and often
 - Walk the talk
 - Listen and be listened to
- Empower others to effect change
- Comprehensive Control Plan





Control Plan

Set the stage for the implemented intervention to be successful. Document and communicate to appropriate owners:

- **Roles and Responsibilities:** Who will do what
- **Full implementation training** conducted and training materials filed
- **Plan for regular monitoring of process** – Including the measure for the process
- **Contingency planning documentation:** Anticipate what could go wrong and potential countermeasures
- **Post-mortem:** Team debrief on the project – what went well and learnings for future projects or the new process owner



Questions

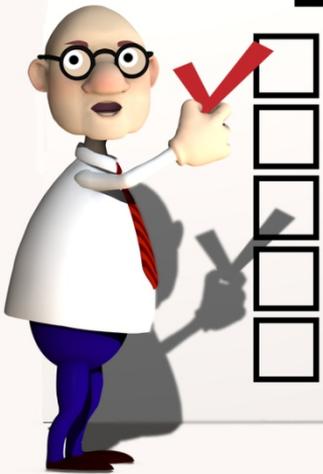




Evaluations

Please complete your evaluation. Your feedback is important to us!

Evaluation



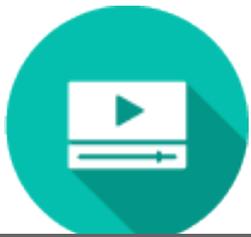
- OUTSTANDING**
- Excellent**
- Very Good**
- Average**
- Below Average**



Continuing Education Credits

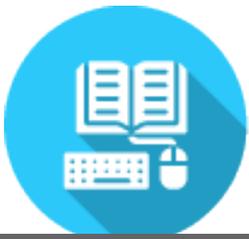
Approved for 1 AAFP Elective credits.**CME is for physicians and physician assistants and other healthcare professionals whose continuing educational requirements can be met with AAFP CME.

Provider approved by the California Board of Registered Nursing, Provider #CEP16728 for 1 hours.



1:1 Coaching with Improvement Advisor

- Improvement Advisors Can Help:
 - Additional Training and Clarification on the Model for Improvement
 - Project Planning
 - Advise on Quality Projects including:
 - Aim Statement
 - Project Charter
 - Driver Diagram / Process Mapping
 - PDSAs



Quality Improvement On-Demand Trainings

Accelerated Learning Education Program

- Well Child Visit in the First 15 Months of Life Webinar
- Childhood Immunization Measures Webinar
- Academic Detailing Webinar: Improving Asthma Care and the HEDIS Asthma Medication Ratio

2019 PCP QIP High Performers – How'd They Do That?

- (Webinar #1 of 3 (PCP's with > 10, 000 PHC members)
- Webinar #2 of 3 (PCP's between 10 - 20,000 PHC members)
- Webinar #3 of 3 (PCP's with < 20, 000 PHC members)

ABCs of Quality Improvement

- 1:5 – The Model for Improvement and Creating an Aim Statement
- 2:5 – Using Data for Quality
- 3:5 – Understanding the Role of Measurement in Quality Improvement
- 4:5 – What Changes Can We Make that will Result in Improvement
- 5:5 – Testing and implementing Changes via the Plan-Do-Study-Act Cycle

Additional Quality Improvement Webinars:

- Tools for Prioritizing Quality Measures
- Change Management/Change Fatigue and QI Webinar

Recordings:

<http://www.partnershiphp.org/Providers/Quality/Pages/PIATopicWebinarsToolkits.aspx>



Resources

A Quick Guide to Starting Your Quality Improvement Projects

<http://www.partnershiphp.org/Providers/Quality/Pages/PIAcademyLandingPage.aspx>

QI Monthly Newsletters

<http://www.partnershiphp.org/Providers/Quality/Pages/PCPQIPMonthlyNewsletter.aspx>





Thank You!

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