![](_page_0_Picture_0.jpeg)

## The ABCs of QI:

![](_page_0_Picture_2.jpeg)

Session 5: What Change Can We Make that Will Result in Improvement?

![](_page_0_Picture_4.jpeg)

![](_page_0_Picture_5.jpeg)

![](_page_0_Picture_6.jpeg)

![](_page_0_Picture_7.jpeg)

Amanda Kim, Senior Project Manager Andrea Harris, Project Manager

![](_page_1_Picture_0.jpeg)

## **Review Session IV**

### **Team Sources for Changes**:

- Published research
- Experts
- Peers
- Patients "voice of the customer" (surveys, focus groups)
- 5 Whys
- Driver Diagrams
- Process Mapping

![](_page_1_Figure_10.jpeg)

![](_page_1_Figure_11.jpeg)

![](_page_1_Figure_12.jpeg)

![](_page_1_Picture_13.jpeg)

![](_page_2_Picture_0.jpeg)

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

— Albert Einstein

![](_page_3_Picture_0.jpeg)

## **Learning Objectives**

### Learn, Understand, and Practice

![](_page_3_Figure_3.jpeg)

![](_page_3_Picture_4.jpeg)

![](_page_4_Picture_0.jpeg)

## Testing Changes with the Model for Improvement

![](_page_4_Figure_2.jpeg)

## **Rapid Cycle Improvement - PDSA**

![](_page_5_Figure_1.jpeg)

Adapted from the IHI Breakthrough Series College

![](_page_6_Picture_0.jpeg)

## PDSA - Plan

Prepare the logistics for the selected change

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

Predict the outcome (what is your hypothesis)

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

Create your data collection plan (for evaluation)

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

![](_page_6_Picture_11.jpeg)

Plan

![](_page_7_Picture_0.jpeg)

## PDSA - Do

- Carry out the plan
- Document activity, problems and observations

![](_page_7_Picture_4.jpeg)

Collect the data

![](_page_7_Picture_6.jpeg)

![](_page_7_Picture_7.jpeg)

![](_page_8_Picture_0.jpeg)

## **PDSA - Study**

Complete data analysis

• Leave time for reflection about the test

 $\circ$  What is your "gut" reaction?

- Compare data to predictions
  - What happened?
    - $_{\odot}$  Did you get expected results?
    - $_{\odot}$  Did anything unexpected happen?
- Summarize what was learned

![](_page_8_Figure_10.jpeg)

![](_page_8_Picture_11.jpeg)

![](_page_9_Picture_0.jpeg)

## **PDSA - Act**

What will your next test cycle be?

- Adapt
- Adopt
- Abandon

### Plan the next cycle

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

![](_page_9_Picture_10.jpeg)

![](_page_9_Picture_11.jpeg)

## What Does a PDSA **Cycle Look Like?**

![](_page_10_Figure_1.jpeg)

![](_page_11_Picture_0.jpeg)

## **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 test a change idea
  - To implement a change

![](_page_11_Picture_8.jpeg)

### Documenting Individual Cycles: PDSA Worksheet

#### 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.
- 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.

![](_page_13_Picture_0.jpeg)

## Accelerate Improvement: PDSAs in Parallel

![](_page_13_Picture_2.jpeg)

Staff education

Environment: Signs & soap location Practice hand washing sessions Formal policies & leadership modeling

![](_page_13_Picture_7.jpeg)

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## **Documenting Your PDSA Cycles**

#### **Project: Patient Feedback**

#### Test: Dissemination of surveys

	PLAN				DO	STUDY	ACT
PDSA Cycle No.	Description of test	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							

![](_page_14_Picture_5.jpeg)

![](_page_15_Picture_0.jpeg)

## Why Do Small Tests of Change?

- Try a temporary change and learn from it
- Understand the likelihood the change results in improvement
- Understand the 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 if change is implemented and spread

![](_page_15_Picture_9.jpeg)

![](_page_16_Picture_0.jpeg)

Consider this . . .

### "I have not failed. I've just found 10,000 ways that won't work." — Thomas Edison

![](_page_16_Picture_3.jpeg)

# F.A.I.L.

### <u>First Attempt In Learning</u>

Don't give up. Celebrate failures. Audri's Rube Goldberg Monster Trap

![](_page_16_Picture_7.jpeg)

![](_page_17_Picture_0.jpeg)

## 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

![](_page_17_Picture_8.jpeg)

![](_page_17_Picture_9.jpeg)

Adapted from the IHI Breakthrough Series College

## **Knowledge Check**

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Adapted from the IHI Breakthrough Series College

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## Questions

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![](_page_20_Picture_0.jpeg)

![](_page_20_Picture_1.jpeg)

![](_page_20_Picture_2.jpeg)

## Summary

![](_page_20_Picture_4.jpeg)

![](_page_20_Picture_5.jpeg)

![](_page_21_Picture_0.jpeg)

### Summary

![](_page_21_Figure_2.jpeg)

PARINERSHIP HEALTHPLAN of CALIPORNIA

## Model for Improvement - 5 Steps

- **1. Set an** <u>**Aim**</u> What are we trying to accomplish? Is your goal SMART? *How good, by when, for whom*
- 2. Establish <u>Measures</u> How will we know if a change is an improvement?
  - a) Outcome measure Where are we trying to go? Including a baseline (minimum 5 data points). This should tie directly to your Aim
  - b) Process measures Are we doing the right things to get there? Indicators
  - c) Balancing measures What are the potential unintended consequences?
- **3.** <u>Identify</u> Changes What changes can we make that will result in improvement? (research, team brainstorming)
- 4. <u>Test</u> the Changes (start small, multiple cycles)
  - a) <u>P</u>LAN the test, including who, when, predictions and a plan for collecting data
  - *b)* <u>*D*</u>*O* the change and observe outcomes
  - c) <u>STUDY the data and analyze the results</u>
  - d) <u>ACT on the learnings to develop the next test (Adapt, Adopt, Abandon)</u>
- 5. <u>Implement</u> Changes Drive spread and establish methods for long-term sustainability

![](_page_22_Picture_13.jpeg)

## Applying the Model for Improvement

![](_page_23_Figure_1.jpeg)

![](_page_24_Picture_0.jpeg)

![](_page_24_Picture_1.jpeg)

## Implementing and Sustaining Project Outcomes

![](_page_24_Picture_3.jpeg)

<u>\_\_\_</u> A A A

![](_page_24_Picture_4.jpeg)

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## Implementation

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

- Implementation Tasks, Owners and Timeframes
- Communication Plan
- Documentation
- Training
- Troubleshooting
- Performance Management
- Measurement
- Demonstration of Short-Term Wins
- Post-Implementation/Control Plan

![](_page_25_Picture_12.jpeg)

![](_page_25_Picture_13.jpeg)

![](_page_26_Picture_0.jpeg)

## **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

![](_page_27_Picture_0.jpeg)

## Questions

![](_page_27_Picture_2.jpeg)

![](_page_28_Picture_0.jpeg)

## **Evaluations**

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

![](_page_28_Picture_3.jpeg)

![](_page_28_Picture_4.jpeg)

![](_page_29_Picture_0.jpeg)

- **ABCs of QI Presenters:**
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- Andrea Harris (aharris@partnershiphp.org)
- Flora Maiki (fmaiki@partnershiphp.org)
- Dorian Roberts (droberts@partnershiphp.org)
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### QI/Performance Team:

ImprovementAcademy@partnershiphp.org

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### Resources

A Quick Guide to Starting Your Quality Improvement Projects <u>http://www.partnershiphp.org/Pr</u> <u>oviders/Quality/Pages/PIAcade</u> <u>myLandingPage.aspx</u>

### Resources

Quick Guide to Starting Your Quality Improvement Projects

![](_page_30_Picture_5.jpeg)

![](_page_30_Picture_6.jpeg)

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## **Quality Improvement Trainings**

#### **Accelerated Learning Education Program**

These learning sessions will cover Partnership HealthPlan of California's Primary Care Provider Quality Incentive Program measures.

#### **Date:** July 12 **Time:** Noon - 1:15 p.m.

Pediatric Health - Child and Adolescent Well-Care Visits (3-17 years), Screenings, and Immunizations for Adolescents

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## **Quality Improvement Trainings**

#### **On-Demand Courses**

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

![](_page_32_Figure_4.jpeg)

PHC provides resources and webinars to help our providers improve performance across a variety of clinical, operational and patient experience metrics.

Click Here for On Demand Courses

- Accelerated Learning
- PCP QIP High Performers -How'd They Do That?
- Project Management 101
- Tools for Prioritizing Quality Measures
- Understanding the Benefits
   Delivery System

![](_page_32_Picture_12.jpeg)

![](_page_33_Picture_0.jpeg)

![](_page_33_Picture_1.jpeg)

![](_page_33_Picture_2.jpeg)

## **Open Discussion**

![](_page_33_Picture_4.jpeg)

![](_page_33_Picture_5.jpeg)