



IMPROVING THE QUALITY OF CARE

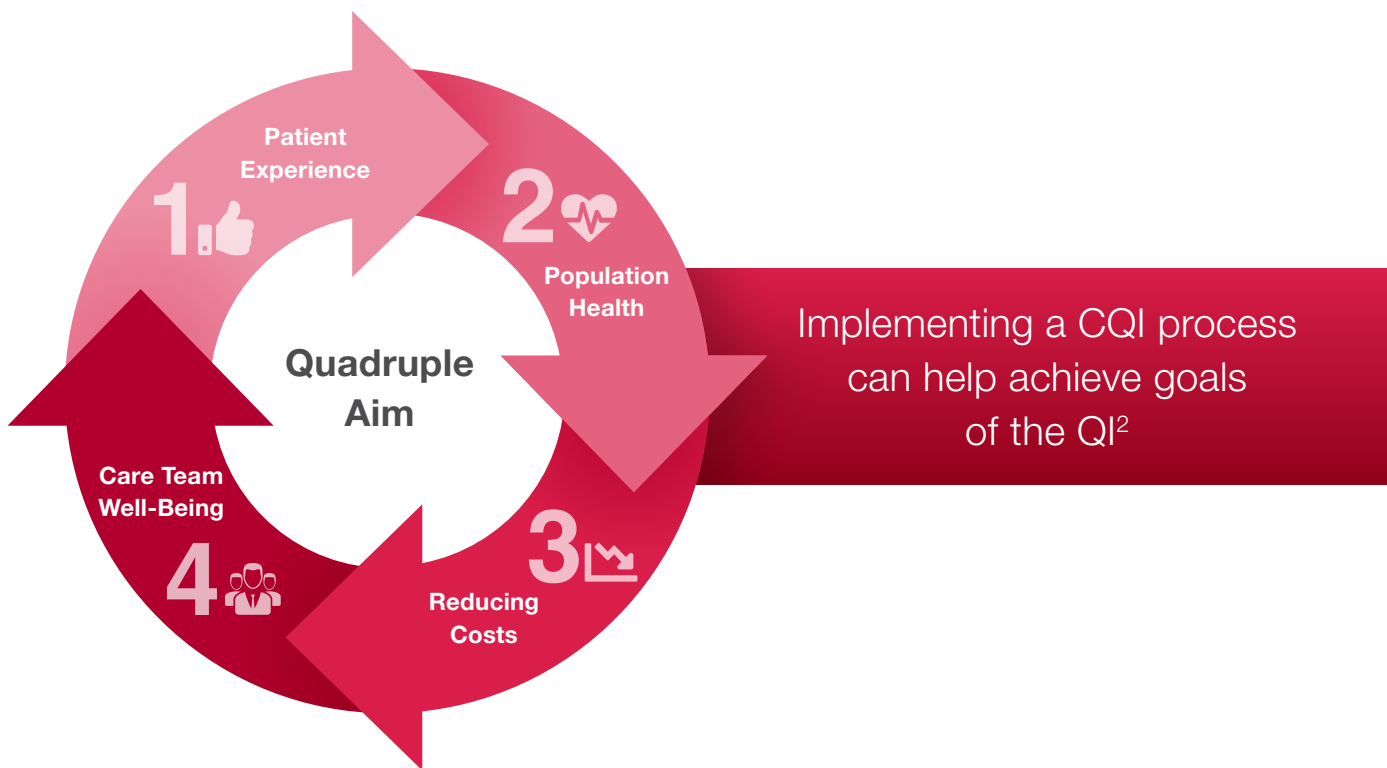
Selecting a Quality Initiative (QI) and
Implementing via Plan-Do-Study-Act (PDSA)



ADOPTING THE QUADRUPLE AIM AND CQI PROCESS

The Quadruple Aim is an approach to optimizing health system performance through 4 dimensions¹

- | | | | |
|--------------------------------------|---|---|---|
| 1. Improve the health of populations | 2. Enhance the patient experience of care | 3. Reduce the per capita cost of healthcare | 4. Improve the work life of healthcare clinicians and staff |
|--------------------------------------|---|---|---|



Continuous improvement begins with a culture of improvement for the patient, practice, and population in general²

- The focus needs to be placed on answering questions based on structured clinical and administrative data²
- A CQI process continuously addresses the following questions^{2,3}:
 - How are we doing?
 - Can we do it better?
 - Can we do it more efficiently?
 - Can we be more effective?
 - Can we do it faster?
 - Can we do it in a timelier way?

IMPLEMENTING THE CQI PROCESS

The key to any CQI initiative is using a structured planning approach to²



Evaluate the current practice processes



Improve systems and processes



Achieve the desired outcome and vision

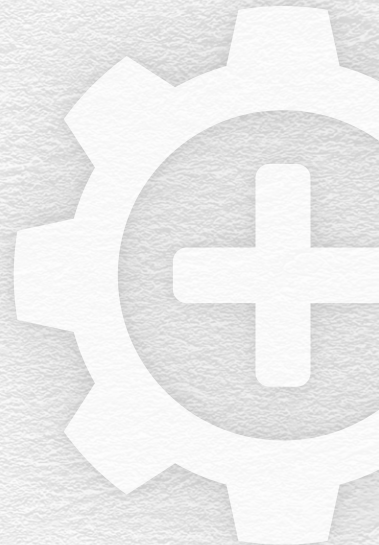
HELPFUL TIPS FOR SUCCESS²

Tools commonly used in CQI include strategies that enable team members to assess and improve healthcare delivery and services.

The healthcare team must understand what works, what does not work, and how the CQI process will help change care.

The CQI plan identifies the desired clinical or administrative outcome as well as the evaluation strategies that enable the team to determine if they are achieving that outcome.

The team also intervenes, when needed, to adjust the CQI plan based on continuous monitoring of progress through an adaptive, real-time feedback loop.



Patient care can be transformed if CQI concepts, strategies, and techniques are used effectively²

All Medicare Advantage (MA) organizations (MAOs) must have an ongoing QI Program^{*4}

^{*As required by section 1852(e) of the Social Security Act (the Act) and 42 CFR § 422.152(a).⁴}

PDSA OVERVIEW

PDSA is an important component of CQI⁴

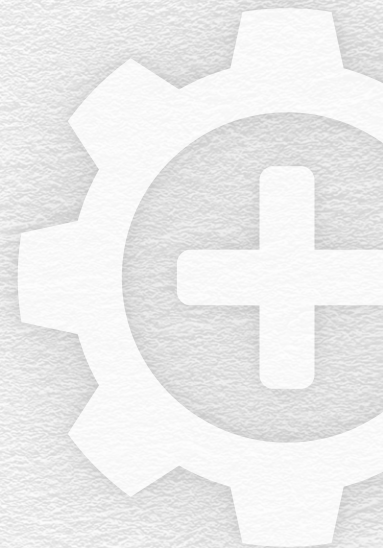
- PDSA is a straightforward, iterative approach to implementing quality improvement in your practice⁵
- PDSA is used to design and carry out QI projects²
- PDSA follows the CQI concept to develop methods and work with leaders and teams to⁶
 - Provide education and training
 - Help organizations improve their products and services
 - Help build organizations' capability for ongoing improvement

IHI: HOW TO IMPROVE WITH PDSA⁷

The Model for Improvement, developed by Associates in Process Improvement, is a simple yet powerful tool for accelerating improvement.

The model is not meant to replace change models that organizations may already be using, but as a tool to accelerate improvement.

This model has been used very successfully by hundreds of healthcare organizations in many countries to improve a wide variety of healthcare processes and outcomes.



PDSA is easy to adopt regardless of practice size or resources⁵

—According to the American Medical Association Steps Forward[®]

FOUR STEPS IN A PDSA CYCLE^{5,6}

1 PLAN

Plan the test/initiative

- Identify the PDSA team
- Develop your plan

2 DO

Try out the test in a small cycle

- Implement the plan
- Begin data analysis

3 STUDY

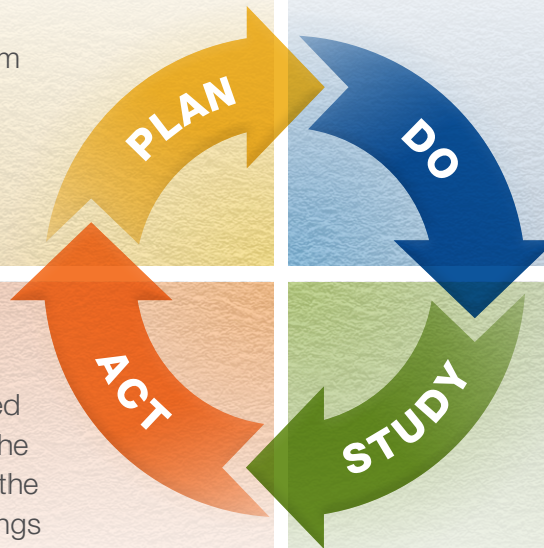
Analyze the results and look at the data

- Evaluate the success of the process change
- Summarize learnings

4 ACT

Adjust the process based on the results found in the Study phase and refine the change based on learnings

- Adjust the process based on the results



Adapted from Associates in Process Improvement.

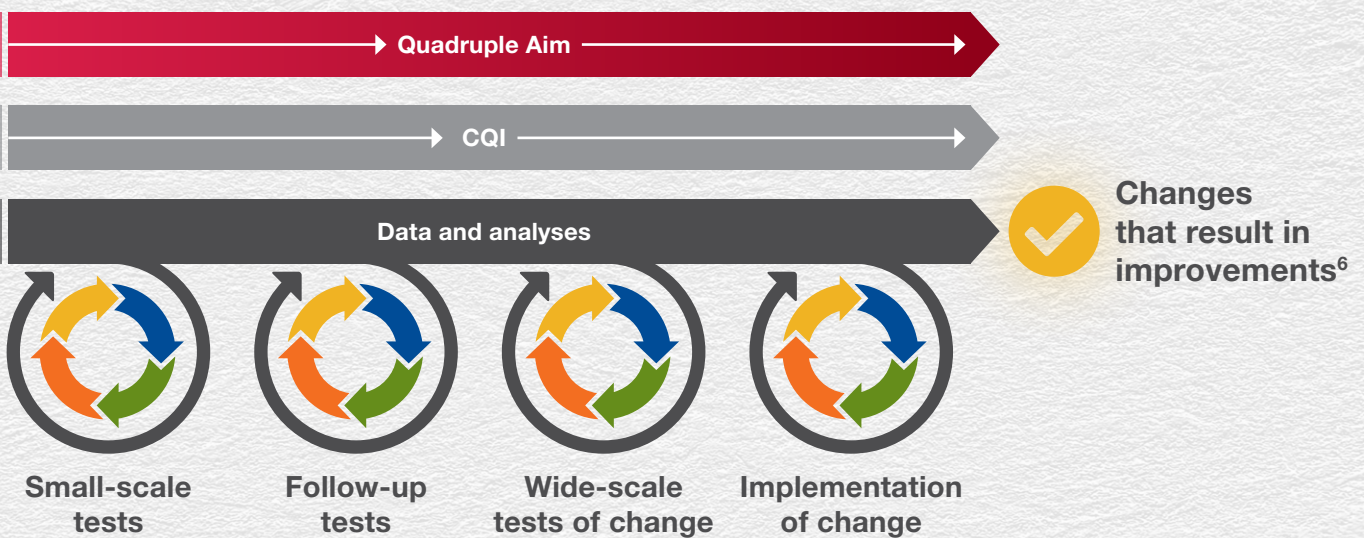
The PDSA cycle systematic process⁸

- **The cycle begins with the Plan step.** This involves identifying a goal or purpose, formulating a theory, defining success metrics, and putting a plan into action
- **The Do step follows,** in which the components of the plan are implemented and the new process is communicated to the team
- **Next comes the Study step,** during which outcomes are monitored to evaluate the plan for progress and success, as well as to identify pain points and areas for improvement
- **The Act step closes the cycle,** integrating the learning generated by the entire process, which can be used to adjust the methods, reformulate the process altogether, or broaden the learning/improvement cycle from a small-scale experiment to a larger implementation plan

The PDSA method provides a straightforward, iterative approach to quality improvement in your practice⁵

FOLLOWING THE PDSA CYCLE, THE NEXT STEP IS TO PLAN A NEW CYCLE BASED ON EVIDENCE LEARNED⁵

- Improvements are based on altering how work or activity is done and providing positive and visible differences that have a lasting impact⁶
- Once the process is analyzed, the PDSA cycle should be repeated⁹
- Plan the new cycle based on the learnings from previous cycles to execute the CQI⁵



As a best practice, MAOs should follow the PDSA QI model as the overall structure for implementation and monitoring of the Chronic Care Improvement Program⁴

CREATE A PDSA WORKSHEET FOR DEVELOPING YOUR QUALITY IMPROVEMENT PROJECT

You can find a PDSA worksheet from the Agency for Healthcare Quality and Research (AHQR) [here](#) and IHI [here](#) to help complete your QI project.

Completed PDSA Worksheet (NYC Program on Health Literacy)

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: 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 2 weeks.

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.

Example of AHQR PDSA worksheet on patient feedback¹⁰

Keep the following in mind when completing the worksheet and using the PDSA cycles to implement the CQI process¹⁰:



Single Step

Each PDSA cycle is a single segment of the CQI process; break down the task into steps and then evaluate the outcome, improve it, and test again



Short Duration

Each PDSA cycle should be as brief as possible for you to gain knowledge regarding whether it works or not



Small Sample Size

A PDSA will likely involve only a portion of the institution or practice. Once feedback is obtained and the process refined, the implementation can be broadened to include the whole institution

IMPROVING THE QUALITY OF CARE BY IMPLEMENTING CQI AND PDSA CYCLES



When implementing new processes to improve outcomes, start small and plan ahead⁵



Use careful thought when implementing each part of the PDSA cycle⁵



Ongoing communication and detailed attention to the metrics are keys to success⁵



Practice members who are not on your PDSA team should receive regular updates about the initiative's progress^{5,11}



Implement the Quadruple Aim to optimize health system performance and apply CQI for support in effectively executing process improvements^{1,2}

Using PDSA in pragmatic research can help uncover implementation challenges and may enable clinics to integrate a research-based intervention into everyday care processes¹²



Please refer to the **Improving the Quality of Care Presentation** for a full discussion of the PDSA cycle

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