



# The Model for Improvement



*Southern California*

*LS 1*

# Model for Improvement

What are we trying to accomplish?

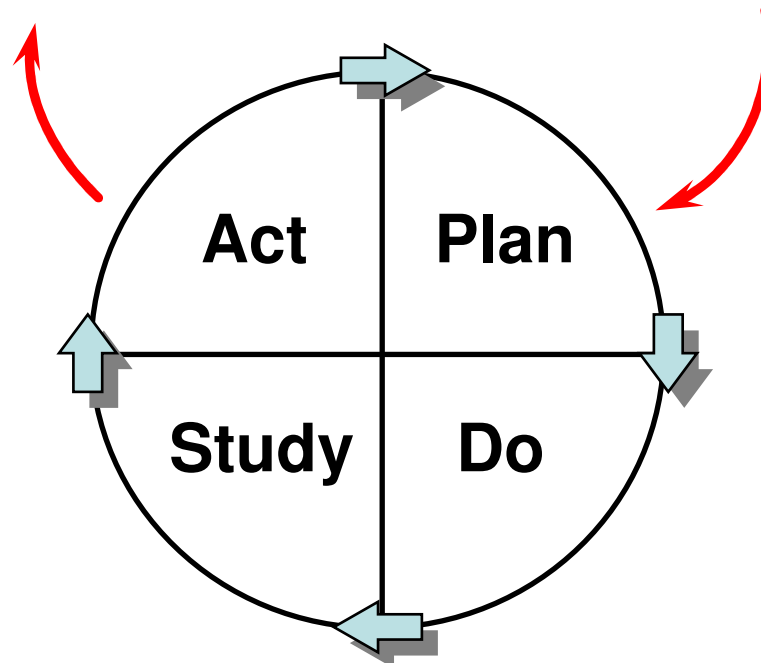
Aim

How will we know that a change is an improvement?

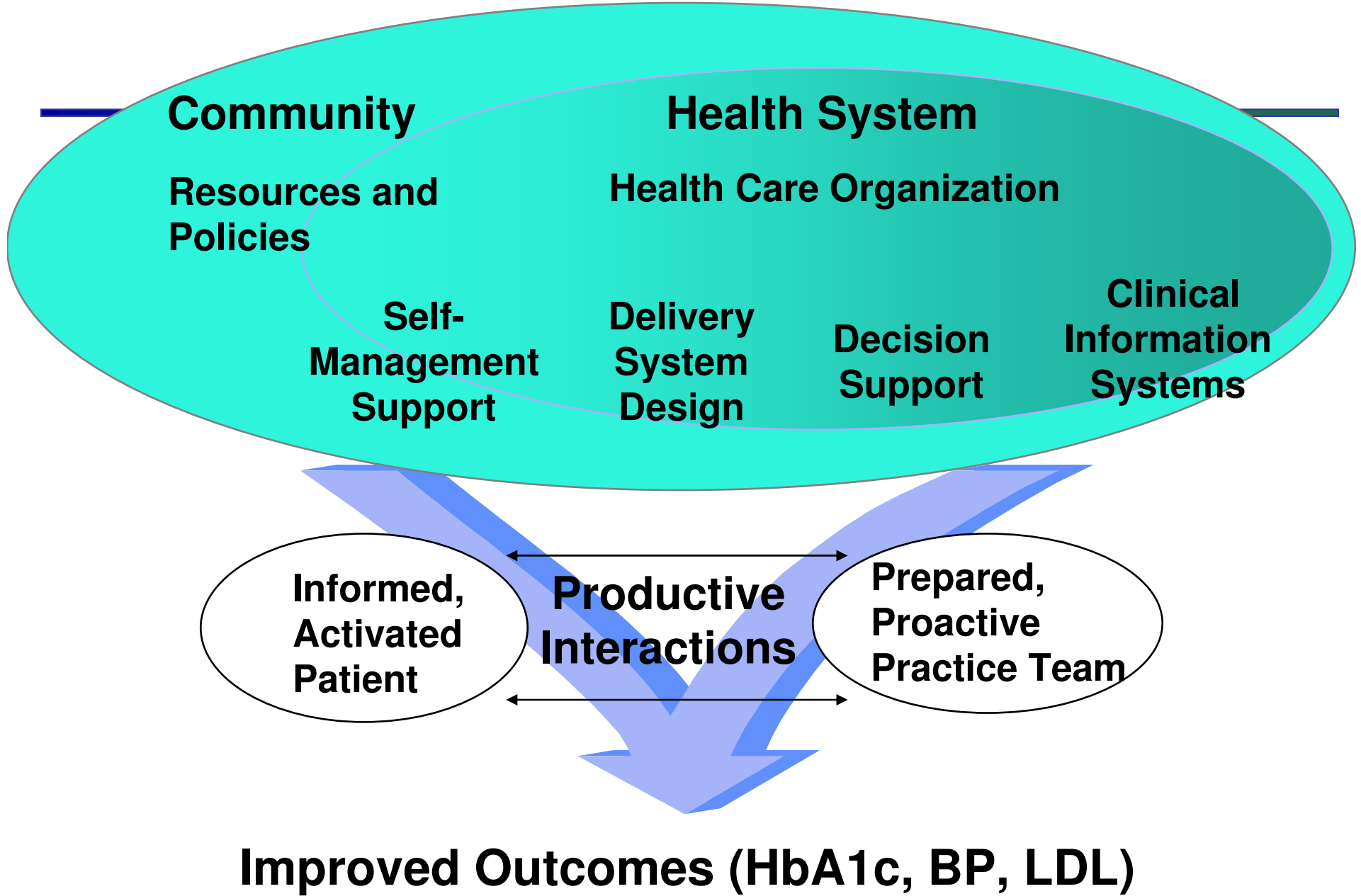
Measures

What change can we make that will result in improvement?

Change package via Chronic Care Model



# Chronic Care Model



# Use PDSA to “try on” a change idea

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Tailor a change for your site, one PDSA at a time

Begin by trying an idea with one patient, one doctor, or for one day to:

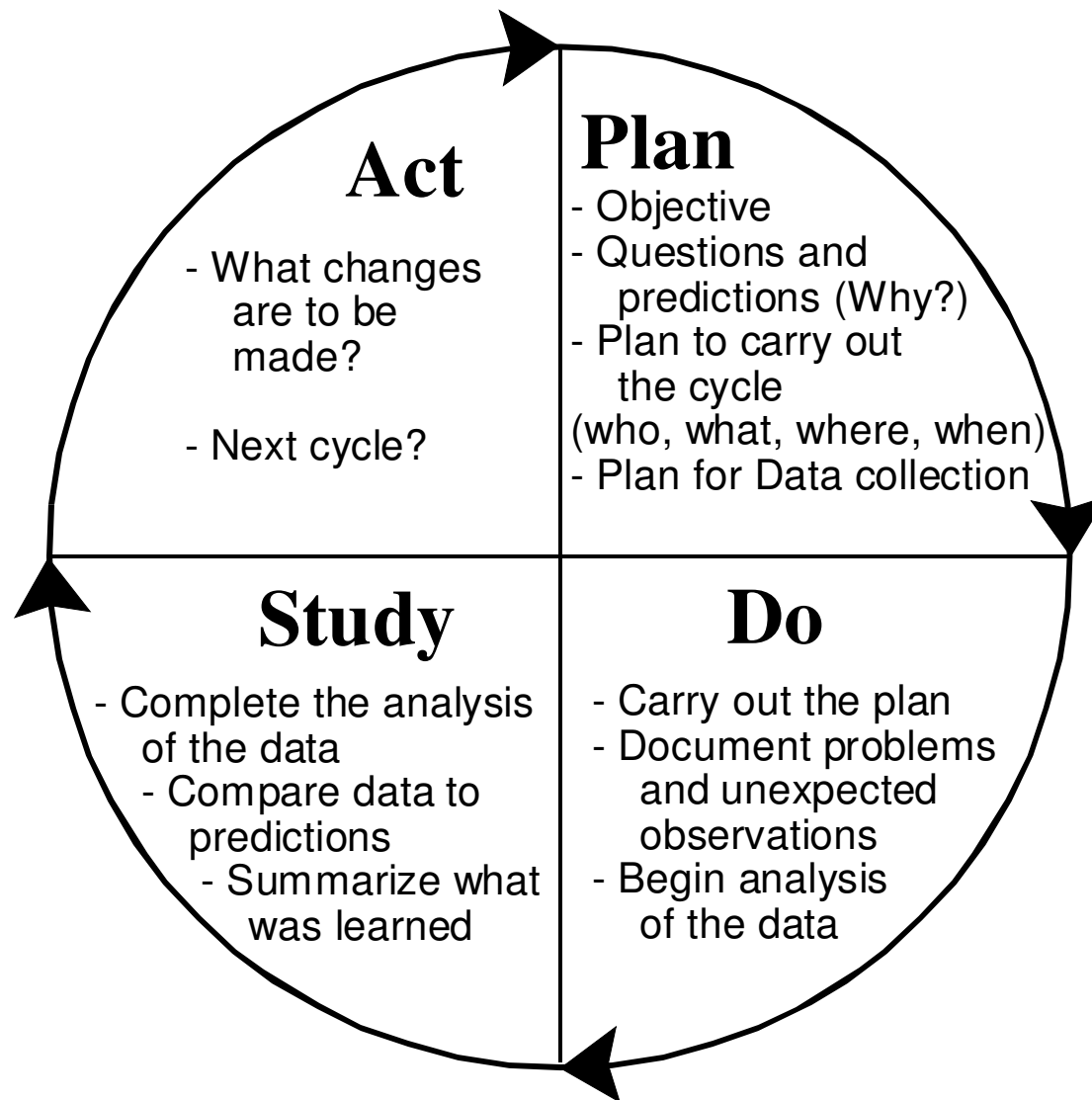
- See how it feels and learn how you can improve “fit”
- Discover other ideas or needed changes
- Overcome fears/Increase confidence



# The PDSA Cycle

Helps put change/new process into place

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# Testing

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A test of change should answer at least one specific question!

# PDSA Example-Harbor UCLA FMC Lomita

## Plan:

- Objective: Get more patients to target by creating oral medication and insulin guidelines (protocols) for providers - to help standardize care
- Questions: Are there guidelines we would feel comfortable adopting?
- Prediction: We can find something that will be useful.
- Who, what, where, when, how:
  - Dr. Tayek and Dr. Davidson will help us review and modify guidelines for our use
  - Schedule patients for a medication adjustment visits on 8/14/07 and try our guidelines draft

## PDSA Cycle (cont.)

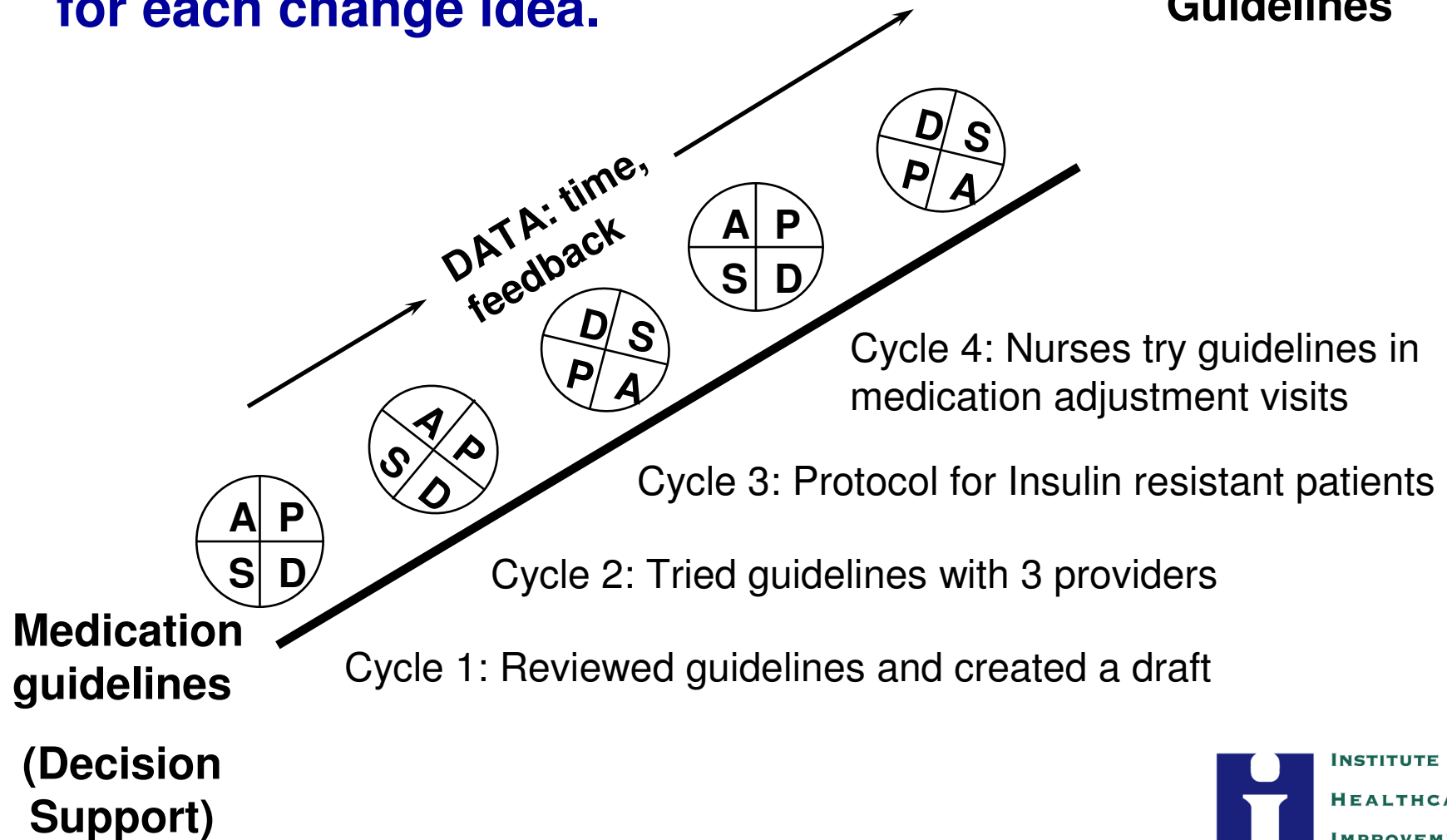
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- **Do:** Protocols were drafted, patients came in for medication adjustment visit, and 3 providers tried protocols.
- **Study:** providers found the protocols useful, but need additional protocol for insulin resistant patients. Medication adjustment visit a good idea.
- **Act:** We have found and will try a different protocol for insulin resistant patients. Also will try nurses being able to use protocol in medication adjustment visits and will develop and test a protocol for patients who may be able to adjust medication themselves.

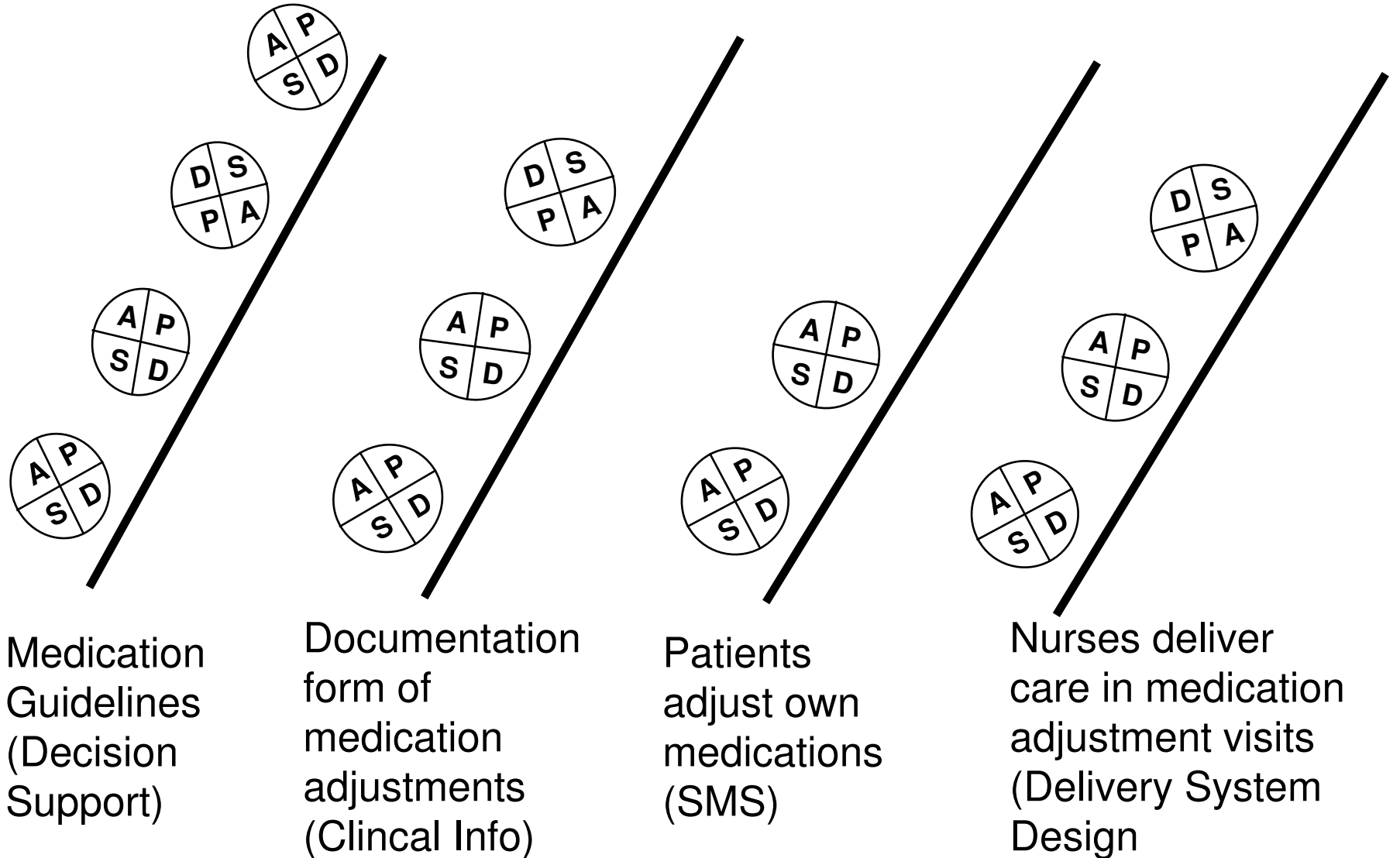


**Build knowledge sequentially with multiple PDSA cycles for each change idea.**

**Routine, Standardized Use of Medication Guidelines**



# Beginning with 1 small test with 3 providers on 1 day led to:



# To improve the levels of disease control in one's practice

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- **Changes to the system must influence the care of every patient so that they:**
  1. **receive planned, continuous care**
  2. **understand and agree to their treatment plan**
  3. **receive protocol-driven treatment intensification directed at reaching clinical goals,**
  4. **have self-management goals and activities regularly reviewed, updated and reinforced.**

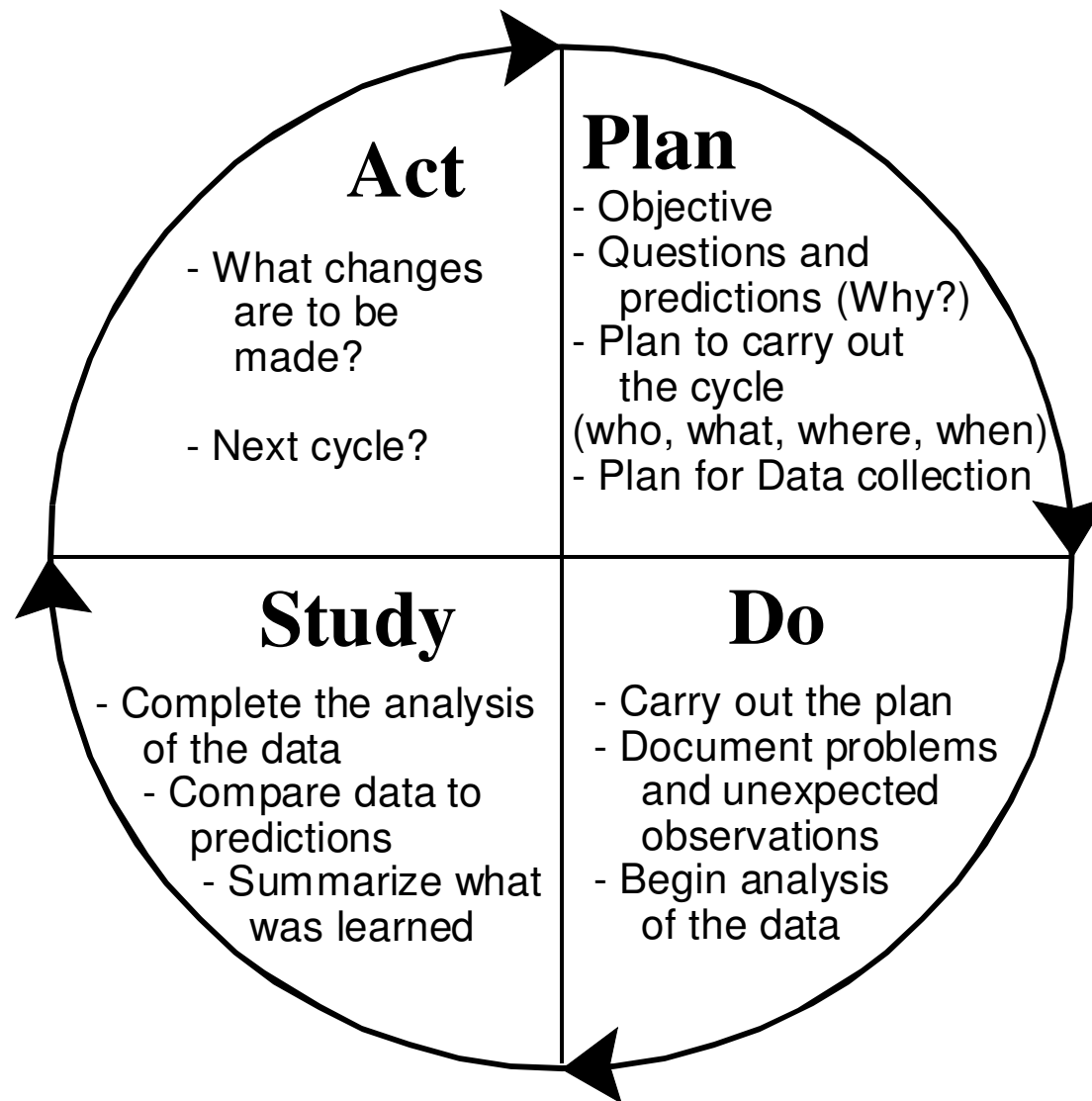
# Overall Aim: Implement the Care Model for those Patients with Diabetes



***Test, Implement, and Spread Key Changes  
for Each Component of the Care Model***

# The PDSA Cycle for Learning and Improvement

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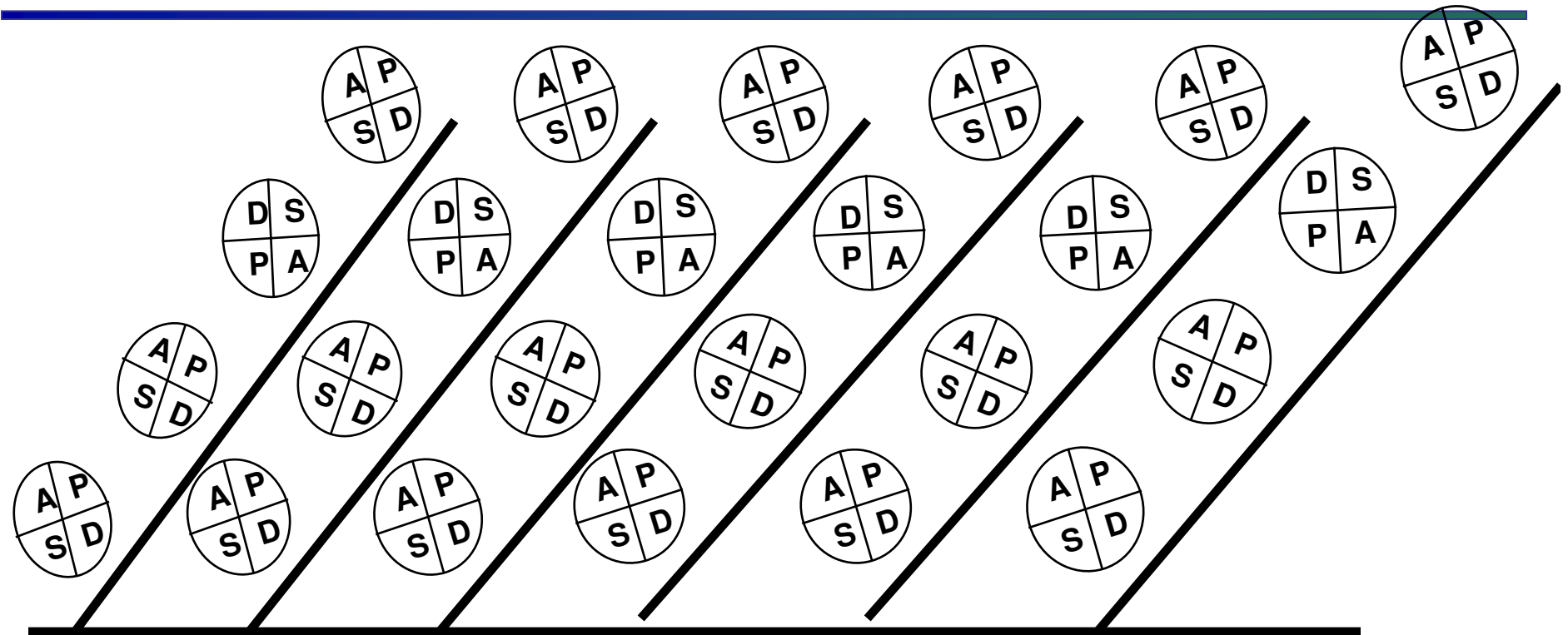


# Testing vs. Implementing

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- Testing – Trying and adapting existing knowledge on small scale. Learning what works in your site/system.
- Implementation – Making this change a part of the day-to-day operation of the system in the pilot site. Usually not after just one test!
- To implement, you need to have something exact to share that will be consistently used with positive results and that will influence other important changes for implementation...

# Overall Aim: Implement the Care Model for those Patients with Diabetes



Self-  
Management  
Support

Delivery  
System  
Design

Decision  
Support

Clinical  
Information  
Systems

Community  
Resources

Health Care  
Organization  
(Leadership)

*Test, Implement, and Spread Key Changes  
for Each Component of the Care Model*

**Improvement Team Time**  
**1<sup>st</sup> PDSA plan**  
**And Improvement Action Plan Form**



# PDSA Worksheet – One step at a time

## A Good way to manage each PDSA cycle

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### **PLAN:**

Objective for this PDSA Cycle:

QUESTIONS:

PREDICITONS:

Details of Plan: Who, What, When, Where, How (Including any data collection)

***Please fill out plan for first PDSA today!***

**DO:** CARRY OUT THE CHANGE OR TEST; COLLECT DATA AND FEEDBACK.  
DESCRIBE WHAT HAPPENED INCLUDE REPORTING OF ANY UNEXPECTED  
EVENTS. BEGIN ANALYSIS.

**STUDY:** COMPLETE ANALYSIS OF DATA; SUMMARIZE WHAT WAS LEARNED.

**ACT:** ARE WE READY TO MAKE A CHANGE? PLAN FOR NEXT CYCLE.



## Improvement Team Action Planning Form Example

PDSA cycle/ ramp #	Change Idea to Test	Person(s) Responsible	April 21 28	May 5 12 19 26	June 2 9 16 23	July 7 14 21 28
1a	Use motivational interviewing techniques for collaborative goal setting– Nurse tries with staff person to get feedback	<i>Kim and Marco</i>	O..X			
2a	Use motivational interviewing techniques for collaborative goal setting and action planning– Nurse tries with 5 patients	<i>Kim,</i>	O.....X			
1b	MA conducts entire foot exam-tries with one patient	<i>Marco</i>	O.....X			
2b	MA conducts foot exam-tries with more patients including other cultures	<i>Marco</i>	O.....X			
1c	Update Registry data-nurse gives SEED patient folder to clerical staff and they update registry last hour of day – try for one day	<i>Kim and Angie</i>	O.....X			

# Improvement Action Plans

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- Consider having all team members in charge of at least one PDSA cycle or ramp
- Try to have cycles outlined in at least 3 components of care model
- Will report out on your action plan with another team or teams at end of day

# Team Time from 2:00-3:00

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- Plan for one PDSA that you can complete by next Tuesday
- Begin your Action Plan Form

Report Out with Peers follows from 3:00-3:30

# References

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- *The Improvement Guide: A Practical Approach to Enhancing Organizational Performance.* G. Langley, K. Nolan, T. Nolan, C. Norman, L. Provost. Jossey-Bass Publishers., San Francisco, 1996.
- *Quality Improvement Through Planned Experimentation. 2nd edition.* R. Moen, T. Nolan, L. Provost, McGraw-Hill, NY, 1998.
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- “A Primer on Leading the Improvement of Systems,” Don M. Berwick, *BMJ*, 312: pp 619-622, 1996.
- “Accelerating the Pace of Improvement - An Interview with Thomas Nolan,” *Journal of Quality Improvement*, Volume 23, No. 4, The Joint Commission, April, 1997.