Quality Improvement Record

Model for Improvement and Plan-Do-Study-Act (PDSA) template.
For more information on the Model for Improvement and PDSA method, visit the Brisbane South PHN Quality Improvement website.

Our General Practice Quality Improvement (GPQI) Team can work with you to provide practical advice and resources to help implement your QI activities.
For support call 3864 7540 or email support@bsphn.org.au.

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Practice name:	Marvel Family Practice		
Date:	10 July	Team members:	Thor - reception staff Dr Strange - GP Hulk - practice nurse

Goal: What are you trying to accomplish?

Create a S.M.A.R.T. goal (Specific, Measurable, Achievable, Relevant, Time-bound)

Example: We aim to increase the BMI recording rates from 35% to 40% between 1st July and 31st December.

We aim to update the height and weight records of 100 patients during the month of August.

Measure: How will you measure and track your improvement?

Outline how you will collect the data, including how often and where from.

Manual tracking methods used with a tally sheet placed next to the scales.

1 Aug: 0
8 Aug: 23
15 Aug 45
22 Aug: 67
29 Aug: 89
31 Aug: 100

Ideas: What changes could you make that will lead to an improvement?

Brainstorm with your team ideas to help reach your goal. Test the ideas using the Plan-Do-Study-Act (PDSA) method.

Four blank PDSA templates are provided on the following pages to record the testing of different ideas.

Ideas		Date completed
Idea 1:	Use Primary Sense report, patients booked in with missing PIP QI measures, to identify active patients missing current BMI records.	
Idea 2:	Nurse to opportunistically gather 5 patients each day from the waiting room to obtain height and weight measures.	
Idea 3:	Reception staff to ask patients to complete a form while they wait, providing height and weight.	
Idea 4:	Create a poster for tracking improvements.	

Plan-Do-Study-Act (PDSA) Cycle

Idea: Reception staff will use Primary Sense report, patients booked in with missing PIP QI measures, to identify active patients missing current BMI records.

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PLAN *Plan the test including how to collect data.*

Include what, who, when, where, predicted outcome and data to be collected.

Thor will generate Primary Sense report twice a week to identify patients who are missing their BMI and place a note in the appointment so GP and nurse can easily identify which patients are missing data.
When patient arrives, the nurse will invite the patient to have their height, weight and BMI updated prior to their appointment with the GP. The GP will also be aware of the flag and ensure measures are completed as part of the consultation.

DO *Run the test on a small scale.*

Was the plan carried out? What was done? Document any unexpected events or problems. Record any observations and data collected.

Thor generated Primary Sense report twice a week on Monday and Thursday during the month of August and flagged patients missing BMI in appointment book.
If capacity allowed, Nurse Hulk would invite identified patients to have their height and weight measured in the treatment room and record the data in the correct fields of patient files.
Dr Strange would review BMI for identified patients, and if still missing during consultation, Dr Strange would capture the measures and record them in the correct fields of patient files.

STUDY *Analyse and study the outcome.*

Review and reflect on the results. Compare what happened to your predictions.

At the end of the focus, 100 patients had their BMI records updated.

Results have been shared with the whole pratice team and a celebratory morning tea was organised.

ACT *Record the next steps.*

Does your idea work? Does it need any changes? Will you test a new idea?

We as a team decided to shift our focus slight to maintain BMI records by capping the flagging limit to 5 patients each day. This will ensure we continue to update patient current BMI without loading too much work to reception staff.