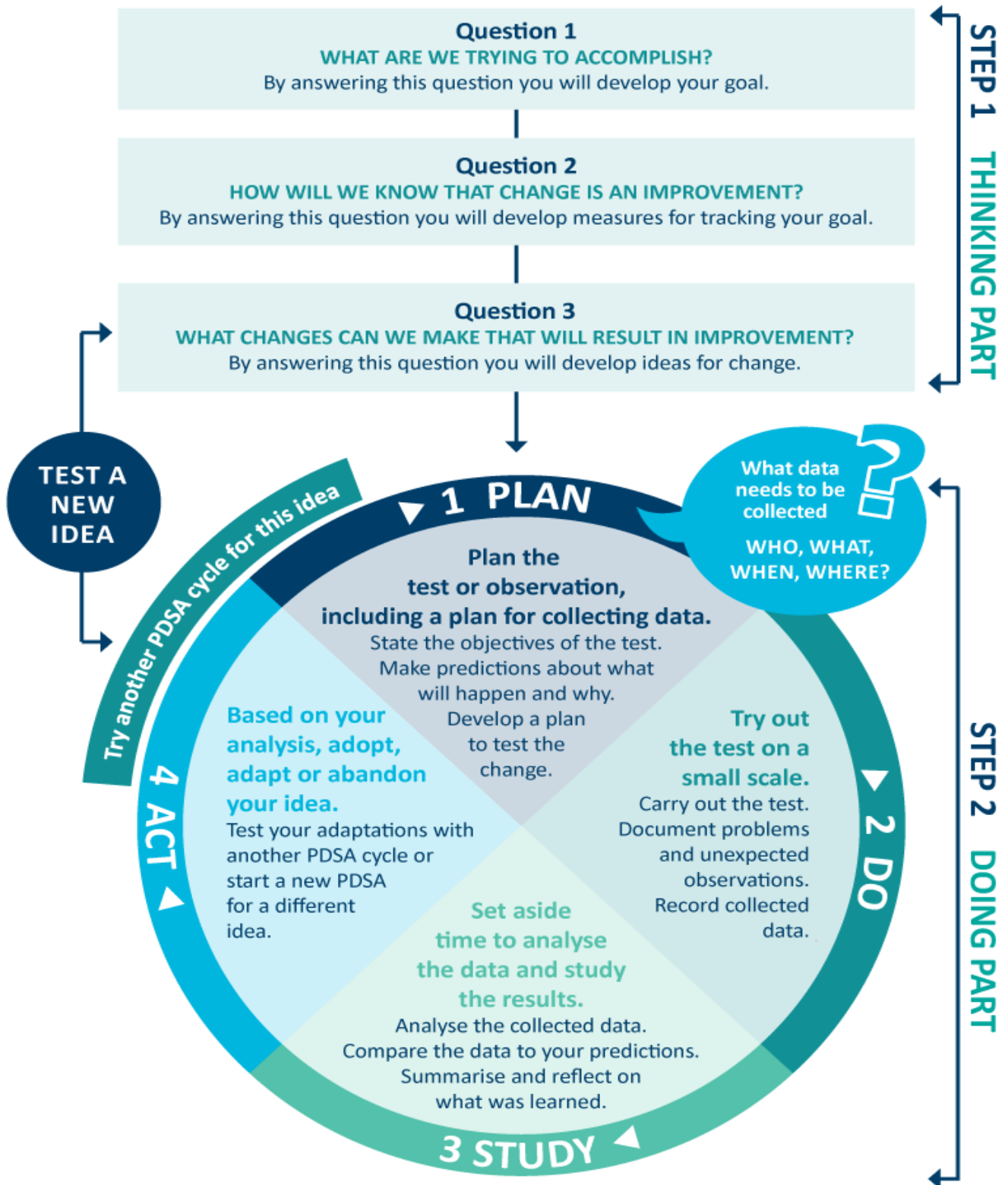


# Model for Improvement diagram



Source: <http://www.ihl.org/resources/Pages/HowtoImprove/ScienceofImprovementTestingChanges.aspx>

# MFI and PDSA template

## Step 1: The thinking part - The 3 fundamental questions

<b>Practice name: Frozen General Practice</b>	<b>Date: 16/03</b>
<b>Team members: Ana (practice nurse), Elsa (receptionist) and Kristoff (practice manager)</b>	
<b>Q1. What are we trying to accomplish? (Goal)</b>	
By answering this question, you will develop your GOAL for improvement. Record this as a S.M.A.R.T. goal ( <b>S</b> pecific, <b>M</b> easurable, <b>A</b> chievable, <b>R</b> elevant, <b>T</b> ime bound).	
By 30 September, we will increase the number of our active patients, aged 65 years and over, who have a current influenza vaccine by 30.	
<b>Q2. How will I know that a change is an improvement? (Measure)</b>	
By answering this question, you will determine what you need to MEASURE in order to monitor the achievement of your goal. Include how you will collect your data (e.g. Primary Sense reports, patient surveys etc). Record and track your baseline measurement to allow for later comparison.	
To monitor whether our actions result in an improvement, we will use Primary Sense to monitor the number of active patients aged 65 years and over who have not had an influenza vaccine recorded in the last 15 months. We will record the number at baseline and each month until the 30 September.	
We will obtain the number of patients who have not had an influenza vaccination from the Primary Sense Winter Wellness report, filtering for active patients aged 65 years and over.	
BASELINE MEASUREMENT: 120 patients who have not had an influenza vaccination in the last 15 months DATE:16/03	
<b>Q3. What changes could we make that will lead to an improvement? (List your IDEAS)</b>	
By answering this question, you will generate a list of IDEAS for possible changes you could implement to assist with achieving your S.M.A.R.T. goal. You will test these ideas using part 2 of this template, the 'Plan, Do, Study, Act (PDSA)' cycle. Your team could use brainstorming or a <a href="#">driver diagram</a> to develop this list of change ideas.	
IDEA: Ensure all relevant staff know how to use the AIR function to record and update patient vaccinations in the practice's clinical software	
IDEA: Run a special 'seniors' vaccination clinic, including influenza vaccination	
IDEA: Using Primary Sense, identify patients 65 years and over who are eligible for the influenza vaccination	
IDEA: Use the prompts function in Primary Sense to flag eligible patients and addressing vaccination at their next appointment.	

**Note: Each new GOAL (1st Fundamental Question) will require a new Model for Improvement plan.**

**Source: Langley, G., Nolan, K., Nolan, T., Norman, C. & Provost, L. 1996, The Improvement Guide, Jossey-Bass, San Francisco, USA.**

## MFI and PDSA template

### Step 2: The doing part - Plan, Do, Study, Act

You will have noted your IDEAS for testing when you answered the 3rd fundamental question in step 1. You will use this template to test an idea. Ensure you communicate the details of the plan to the entire practice team.

IDEA	Record the change idea you are testing
Which idea are you going to test? (Refer to Q3, step 1 above)	
Ensure all relevant staff know how to use the AIR function to record and update patient vaccinations in the practice's clinical software	
PLAN	Record the details of how you will test your change idea
Plan the test, including a plan for collecting data	What exactly do you plan to do? Record who will do what; when they will do it (day, time etc) and for how long (1 week, 2 weeks etc); and where (if applicable); the data to be collected; and predictions about the outcome.
Idea: Run an education session to ensure that all relevant staff know how to use the AIR function to record and update patient vaccinations in the practice's clinical software	
Who: Ana, the practice nurse	
What: Organise an education session with the practice team to do a 20-minute presentation on using AIR for vaccinations. Invite one of the quality improvement coordinators from Brisbane South PHN to offer further information and training if required. Include info about current stats and QI aim.	
Create a quick pre and post training questionnaire (3 questions) to assess knowledge of the practice team before and after training.	
When: 2 April	
Data to be collected: How many practice staff attended the training session. Pre and post survey data.	
Predictions: All staff in attendance (9/9) is anticipated. 6 out of our 9 (6/9) clinical staff will know how to use AIR through the clinical software prior to training and this will increase to all clinical staff (9/9) knowing how to use AIR through the clinical software after the training.	

DO	Run the test, then record your actions, observations and data
Run the test on a small scale	What did you do? Were there any deviations from the original plan? Record exactly what you did, the data collected and any observations. Include any unexpected consequences (positive or negative).
<p>18 March – Kristoff, the practice manager ran a report using Primary Sense to identify patients 65 years and over who are eligible for the influenza vaccination. Kristoff did this using the Primary Sense report function using the following instructions:</p>	
<ol style="list-style-type: none"> <li>1. Open Primary Sense</li> <li>2. Click on reports</li> <li>3. Click on diabetes in the keyword filter section</li> <li>4. Double click on the Winter Wellness report to run the report</li> <li>5. Use the up and down arrow function next to age to filter</li> <li>6. Refer to the last flu vax section to see scan for eligible patients (you can use the arrow function to filter however, this may scramble your age filter)</li> <li>7. Optional - Export the report to Excel or CVS to save or print.</li> </ol>	
<p>20 March – Ana spoke to Kristoff regarding her idea and asked if she could use some time in the upcoming staff meeting to do the training. Kristoff thought this was a great idea and suggested that Elsa, the receptionist could help with the pre and post survey development.</p>	
<p>23 March – Ana and Elsa had a brief meeting to determine what questions would be included in the pre and post survey. Ana suggested to Elsa to use Microsoft forms but Elsa wasn't very confident.</p>	
<p>25 March – Ana contacted one of the quality improvement coordinators Brisbane South PHN to invite them to come to the training session. Ana also asked if they could support Elsa with some tips on how to set up the Microsoft forms survey. The coordinator called Elsa and helped her through the process.</p>	
<p>28 March – Elsa used Microsoft forms to develop the pre and post surveys.</p>	
<p>4 April – Ana sent out the pre training survey to all staff for completion.</p>	
<p>16 April – Training conducted. The quality improvement coordinator from Brisbane South PHN attended and gave out some handouts for staff. The coordinator also supported Kristoff with adjusting some of the user permissions in the clinical software so that all users had access to the AIR function.</p>	
<p>13 April – Post training survey sent out to all staff for completion.</p>	

STUDY	Analyse the data and your observations
Analyse the results and compare them to your predictions	Was the plan executed successfully? Did you encounter any problems or difficulties? What worked/didn't work? What did you learn on the way? Compare the data to your predictions. Summarise and reflect on what was learned.
<p>This test was very successful. The data we collected through the pre and post surveys was very valuable and showed us that our prediction in terms of how many of the clinical staff knew how to use AIR was not correct. We anticipated that 6/9 of staff knew how to use AIR but that ended up being only 5/9 staff. Our post survey reflected that all staff know knew how to use AIR which made the training very worthwhile!</p> <p>Further to this, the post survey reflected an increase in knowledge and appreciation from staff for the session.</p> <p>It was great to have one of the quality improvement coordinators from Brisbane South PHN come along. They were very helpful.</p> <p>We are going to do a survey to the practice team to see what other topics they might want to cover in future education sessions so that they have the opportunity to have their voice heard and be involved in the upskilling planning process.</p> <p><i>Communicate the results of your activity with your whole team. Celebrate any achievements, big or small.</i></p>	
ACT	Record what you will do next
Based on what you learned from the test, record what your next actions will be	Will you adopt, adapt or abandon this change idea? Record the details of your option under the relevant heading below. <i>ADOPT: record what you will do next to support making this change business as usual; ADAPT: record your changes and re-test with another PDSA cycle; or ABANDON: record which change idea you will test next and start a new PDSA.</i>
<p>ADOPT: We are going to plan 6 monthly training sessions and will send surveys to the practice team prior to the sessions to see what topics they might want to cover – this will become business as usual.</p> <p>ADAPT:</p> <p>ABANDON:</p>	

Repeat step 2 to re-test your adapted plan or to test a new change idea