Hawaii Long-Term Care Application of PDSA Cycles

Presented by Mary Erickson and Dana Mitchell

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Speaker Info

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Objectives

- Understand key elements of plan-do-study-act (PDSA) cycle
- Use PDSA as core improvement methodology in nursing home setting
- Apply PDSA cycle to action plan following root cause analysis
When and why do we start a PDSA cycle?
Session 5: Reliable Processes

If you have a process that does NOT work so well...

- Common or infrequent failure?
- One person ≠ common failure
- Process to fix one attribute at a time

PDSA!
Session 6: To PIP or not to PIP

Opportunity for improvement identified

- Yes
- No

High degree of belief?

- Yes
- No

Low risk?

- Yes
- No

Low Cost?

- Yes
- No

High staff buy-in

- Yes
- No

Implement change

- Monitor for ongoing issues

Start performance improvement project

Identify team

Choose change model

Charter project

Test and measure on a small scale

Increase size of test and measure

Hold the gains

PDSA!
Session 7: Improvement Questions

• What is working? (Appreciative inquiry)


• What would success look like? (Aim setting)

• How would you know (what would you see) if successful? (Feedback/measure)

• What could you try that would get you closer to success? (Change ideas)

• What could you try out before the next call?
How do we use PDSA?
Helpful Tools

• Microsoft Word templates included with this presentation

• Additional Mountain-Pacific change documentation tools: https://www.mpqhf.org/corporate/health-and-transformation-services/resources/ecqi-resources/

• Institute of Healthcare Improvement (IHI) tools: http://www.ihi.org/resources/Pages/HowtoImprove/SciencesofImprovementHowtoImprove.aspx
PDSA Cycle

Plan
- Objective
- Idea to correct issue(s)
- Include who, what, where, when, why

Act
- Changes to be made
- Next cycle

Do
- Carry out the plan
- Observe current plan
- Begin analysis of data

Study
- Finish analysis of data
- Compare data to predictions
- Summarize learnings
Documentation

Burdensome but serves a purpose:

• Understanding what interventions or transformation tasks were effective

• Historical documentation and communication to successors of what was tried and how it worked

• For a hospital, nursing home or clinic – provides documented evidence of quality improvement activities for meeting Centers for Medicare & Medicaid Services (CMS) regulatory or certification requirements
Case Examples

Fall prevention alarms, from many to none

Experience of care and resident satisfaction with meals
We are here to help.
Mountain-Pacific Quality Health
Hawaii Contact Information

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