



TIPS FOR FAMILY PHYSICIANS ON QUALITY IMPROVEMENT

The Primary Care Sequence to Achieve Change

Follow these steps when implementing changes in your practice. They work together as a set!



1. Form an Improvement Team

- Assemble a representative team within the clinic; consider including patients on your team.



2. Clarify the Problem/Opportunity

- Define what you want to improve first.
- Ask your team about routine practice challenges and opportunities.
- Review evidence and data from your EMR and provincial panel reports.



3. Map Process

- Visually depict the steps and sequence in a process; identify gaps and delays.
- Document the current and new processes.



4. Use Model for Improvement



Set an Aim Statement

- The aim should be time-specific, measurable and define the specific group of patients that will be affected.

Identify Measures

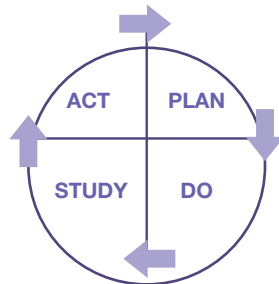
- Determine the baseline.
- Use process, outcome, and balancing measures to check if you are improving.

Select Change Ideas to Test

- Ideas for change may come from people who do the work, from the experience of others who have successfully improved, from published evidence, etc. check if you are improving.

Test Changes (PDSA)

- The Plan-Do-Study-Act (PDSA) cycle is shorthand for testing change ideas in the real work setting – by planning it, trying it, studying the results together, and acting on what is learned. check if you are improving.



5. Sustain the Gains

- Complete periodic measures; display your results.



6. Spread the successful changes

- After successful implementation of a change, or package of changes for a pilot population, the improvement team can spread the changes to other parts of the clinic or to other clinics.



7. Celebrate

- Plan to celebrate at milestones along the improvement journey, as well as when you achieve your aim. Recognize and highlight the efforts and accomplishments of the team.



The Sequence to Achieve Change (STAC) is a structured process for improvement in family practice. The STAC helps teams make changes that lead to fundamental change for new ways of doing things that will result in better performance and sustainable improved patient outcomes.

- 1. Form an Improvement Team.** “Those who do the work, must improve the work” – include all those who “touch” the process. Identify and engage people who will adopt the change. Include patients if possible as they provide unique perspectives to the problem. Set specific meeting times and have a clear agenda.
- 2. Clarify the Problem / Opportunity.** Once the opportunity for improvement has been identified, teams takes time to explore the problem and create a shared understanding. Examine available data and literature that may contribute to the understanding of the problem.
- 3. Map the Process.** Mapping the process creates a visual representation, showing the sequence of tasks using standard flowchart symbols. The map should represent the current state; drill down and examine the process steps that affect the patient journey. Team can then look for unnecessary steps or duplication, bottlenecks, steps that can be combined, done in parallel or should be done in a different order.
- 4. Use the Model for Improvement.** The Model for Improvement is a roadmap for quality improvement. It consists of three questions related to Aim, Measure, Change, followed by an action testing phase – the Plan, Do, Study, Act (PDSA) cycle.

AIM: What are we trying to accomplish? Set an aim statement. A good aim statement clarifies the scope of the project, aids in team selection, provides a timeframe (and creates a sense of urgency to do the improvement work), creates focus when a team “gets lost” and gives practices permission to change. “The x team will improve y result by defined % by z date”.

Measure: How will we know that a change is an improvement? A set of measures needs to be identified, outcome, process, and balancing measures. Use existing data collection whenever possible and measure ‘just enough’ to learn.

Change: What changes can we make that will result in improvement? Teams identify unique, actionable changes that will bring about improvement for a specific set of circumstances (in your practice). Change ideas come from literature, knowledge experts, team brainstorming, and from others who have made improvements to similar problems.

The Plan Do Study Act (PDSA) Cycle: The PDSA cycle is a systematic series of tests used to learn about the impact of the change in your specific context. More than one cycle is needed before implementing a change. Always start with a small test, make a prediction, collect data on your PDSAs to discuss with the learn, then check whether your prediction came true. During “the act”, decide to adopt, adapt, or abandon your change idea.

- 5. Sustain the Gains.** Teams need to sustain or “hold the gains” of their improvements over the long term but it can be difficult not to slide back to the “old way”. Revise procedure documents to reflect the new ways and train staff in the new ways to ensure everyone is doing the process in the same way.
- 6. Spread the Successful Changes.** In the spirit of improvement and collaborative learning, all teams teach, and all teams learn. Share your improvement success stories with colleagues and other clinics. Use run charts to share your improvement story as a “picture is worth a thousand words”.
- 7. Celebrate.** Improvement work is time consuming and requires behaviour change, when teams improve and patient care is better, teams need to celebrate and be recognized for their hard work. Just as those who do the work must improve the work, those who improve the work must decide how to celebrate the improvement.

SOURCES

www.ihl.org/resources/Pages/HowtoImprove/ScienceofImprovementHowtoImprove.aspx
Vermont Oxford Network-Sequence to Achieve Change | TOP QI Guide Model for Improvement
Associates in Process Improvement, www.apiweb.org/index.php