

Plan-Do-Study-Act (PDSA) Cycle

Introduction

The purpose of this PowerPoint presentation is to assist you in your efforts to make improvements in the care provided at your dialysis facility.

In this presentation you'll learn...

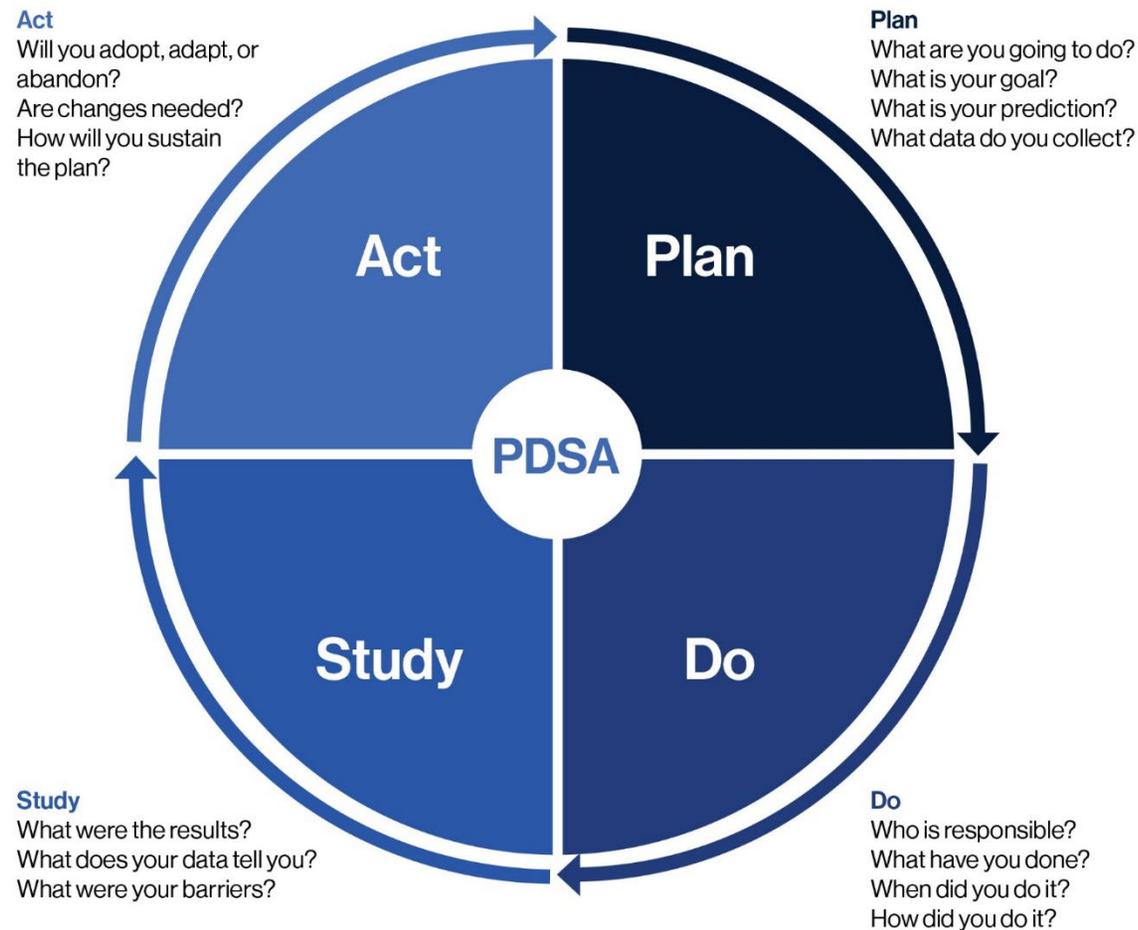
- About the PDSA cycle
- How to move through the cycle
- Example of a PDSA cycle
- Rapid Cycle Improvement
- Resources Available

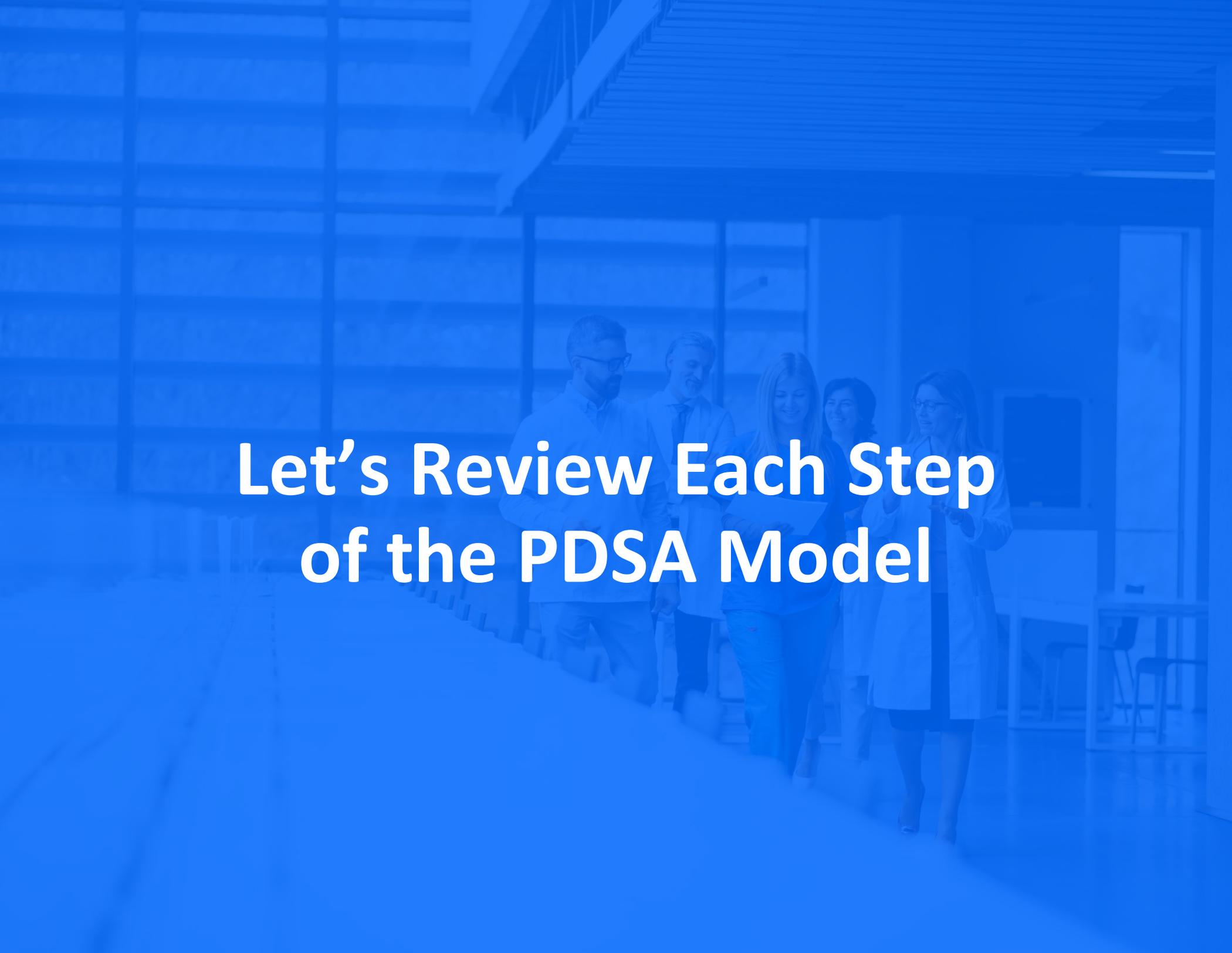
What is the PDSA Cycle?

Running a PDSA Cycle is another way of saying testing a change.

The role of the Network is to serve as conveners, organizers, motivators and change agents. The ultimate goal of the Network is to assist facilities in achieving, measuring and maintaining change.

Model for the Plan-Do-Study-Act Cycle





Let's Review Each Step of the PDSA Model

It Starts With a Plan

- What are we going to do?
- What is our goal?
- What is our prediction?
- What data do we need to collect?



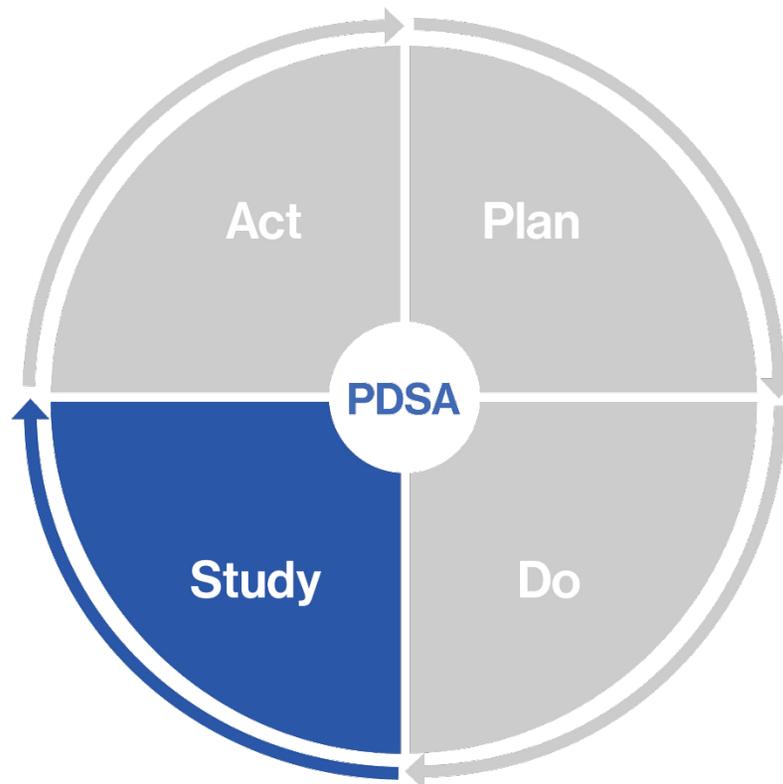
Execute, or DO, Your Plan

- Who is responsible?
- What have you done?
- When did you do it?
- How did you do it?



Next, Study Your Data

- What were the results?
- What does your data tell you?
- What were your barriers?

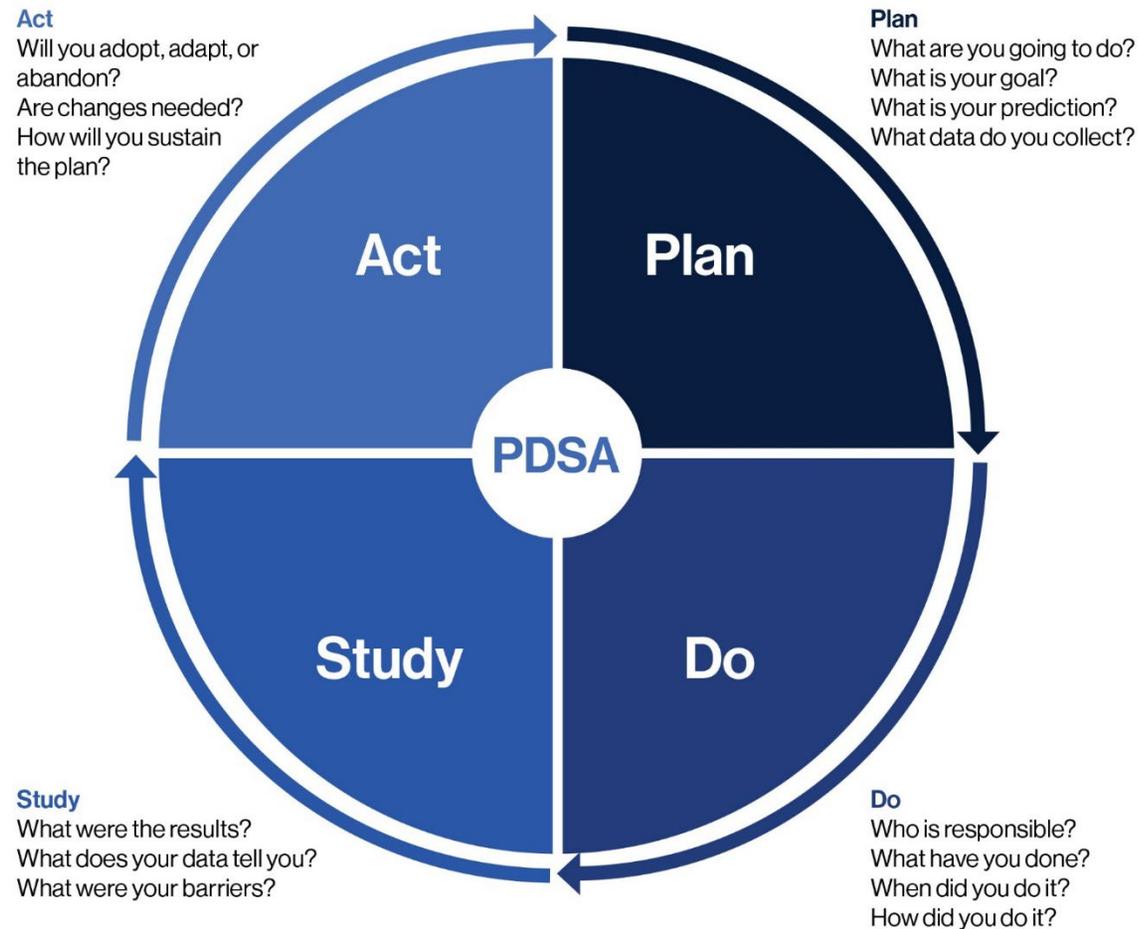


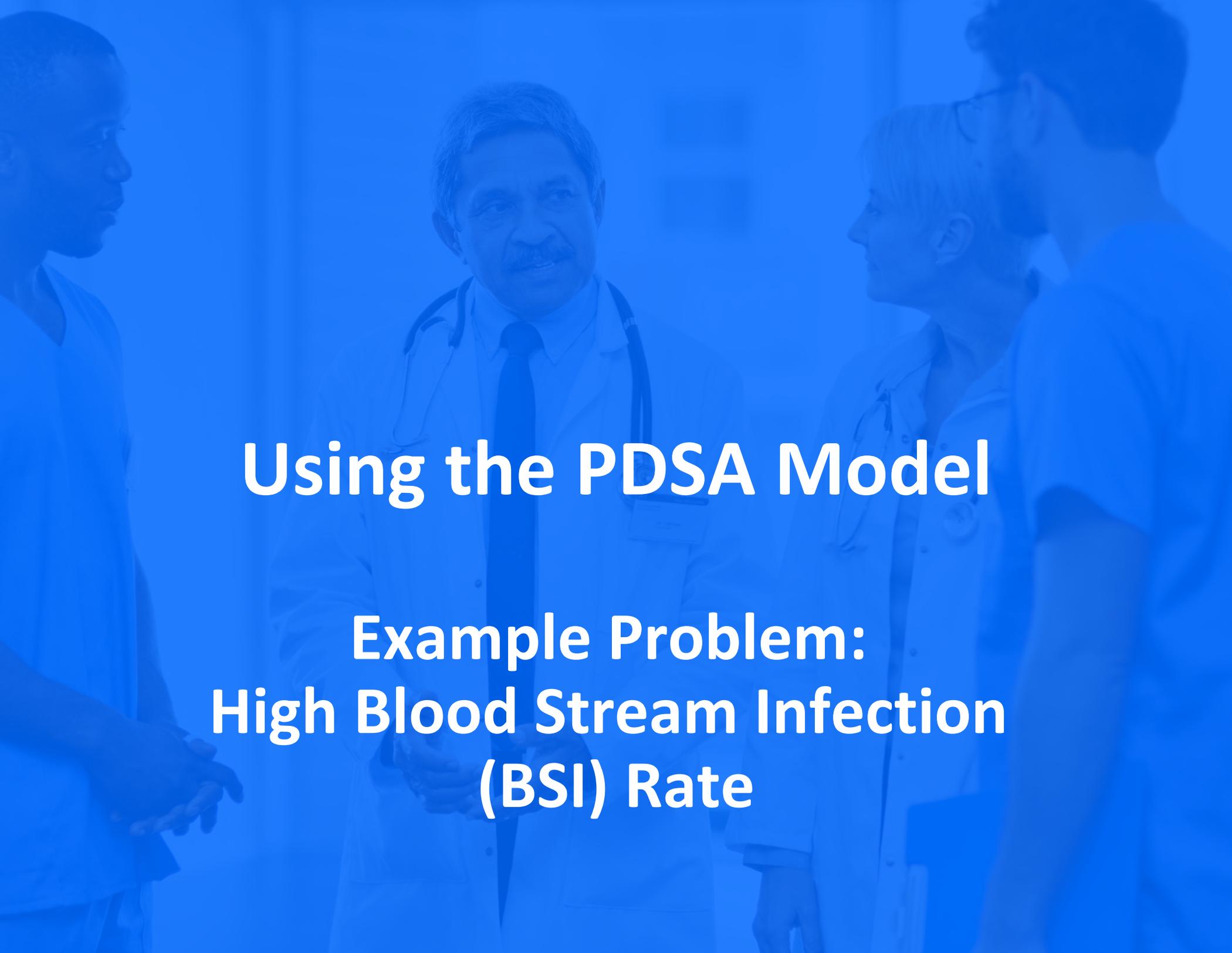
How Will You Act on the Results?

- Will you adopt, adapt or abandon?
- Are changes needed?
- How will you sustain the plan?



Bringing it All Together





Using the PDSA Model

**Example Problem:
High Blood Stream Infection
(BSI) Rate**

PDSA | Plan

High BSI Rate	
What are we going to do? What is our goal? What is our prediction? What data is required?	<ul style="list-style-type: none">• Hand hygiene education and auditing• 100% of staff and patients will be educated on proper hand washing• Tracking tool will be developed for patients and staff to sign once training is complete• Audits will be performed in the month of _____ to assess understanding and compliance

PDSA | Do

High BSI Rate	
Who is responsible? What have you done? When did you do it? How did you do it?	<ul style="list-style-type: none">• Staff educator will hold an in-service on _____.• Staff reviewed proper hand washing with patients during the month of _____.• Patients and staff signed pledges to perform good hand hygiene.• Month of _____ audit results: _____% staff compliance and _____% patient compliance

PDSA | Study

High BSI Rate	
What were the results? What does your data tell you? What were your barriers?	<ul style="list-style-type: none">• _____% of staff and patients completed training and signed pledges• Continued efforts and training are necessary• Barriers included: Lack of education, poor compliance, patients not engaged

PDSA | Act

High BSI Rate	
Will you adopt, adapt, or abandon? Are changes needed? How will we sustain the plan?	<ul style="list-style-type: none">• We will adopt the plan to educate staff and patients on hand hygiene quarterly.• We will perform monthly hand hygiene audits for six months to assess the need for further education and/or compliance.

Rapid Cycle Improvement

The PDSA cycle is a trial-and-error process.

- What does your data show?
- Are you satisfied with the results?
- Did you come to an acceptable solution?
 - NO? Don't stop there!
 - Don't get frustrated or lose momentum
 - Start the PDSA cycle over again
 - Keep working until you find an acceptable solution

Thank You



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