Guidance for Completing the PDSA Cycle Documentation Tool

Below is guidance for completing the PDSA documentation tool. Several questions are posed for each phase of the PDSA cycle to help you think through the idea/solution/change you want to test and want you want to learn from testing it. Complete the documentation tool as thoroughly as possible. However, it does not need to be grammatically correct and full sentences! More importantly, your concepts need to be clear and concise so anyone can understand what you have written.

"PLAN" Phase— *Complete this section prior to the scheduled testing date!*

TODAY'S DATE: *Date in which the "PLAN" phase is being documented on this form.*

CYCLE #: *Is this the first PDSA cycle to test a change? The 2nd? 3rd? etc… You will probably have more than one cycle for a particular change.*

PERSON COMPLETING PDSA CYCLE WORKSHEET: *Team member completing this form.*

AIM: *What is the overarching goal you are trying to achieve? E.g. Reduce show rates, decrease client time in the clinic.*

WHAT- CHANGE TO BE TESTED/DEVELOPED/IMPLEMENTED: *Are you testing, developing, or implementing a change? What is the change (e.g. idea or solution) you want to test to see if it will make an improvement to your current process? What do you want to find out during this PDSA cycle? Who/what is the change to affect (e.g. all Family Planning clients, just supply visit clinics, etc…)?*

TEAM PREDICTIONS ON THE IMPACT OF THE CHANGE: *What do you think will happen when you test your change?*

WHEN—SCHEDULED DATE TO TEST CHANGE: *What date(s) and time(s) will you be testing the change?*

WHO- PARTICIPANTS IN TEST AND THEIR ROLE/RESPONSIBILITY IN EXECUTING TEST: *Who are the members on the team that will participate in the test? What are their roles/responsibilities in executing the test? Who are not on the team but will be participating in the test? What are their roles/responsibilities in executing the test?*

OTHER—E.G. FORMS/TOOLS THAT NEED TO BE DEVELOPED, SCHEDULE CHANGES, ETC… *Are there any worksheets, surveys, data gathering tools, checklists, etc… that need to be developed? Do you need to change the schedule for the testing date? What other resources do you need to have in place to ensure your test goes as planned?*

"DO" Phase— ***Complete this section while you are testing the change to record observations!***

SUMMARY OF DATA COLLECTED: *So far, what are you learning from the data you are collecting during the testing of the change? Any obvious findings? Any problems/issues with your data measures?*

TEAM OBSERVATIONS OF CHANGE TESTED/DEVELOPED/IMPLEMENTED: *What effects, if any, have you observed that you feel the testing/developing/implementing of the change has contributed to? Were the effects positive? Negative? Neutral? Has the PDSA cycle been carried out as planned? Have you run into any problems/issues with the plan?*

"STUDY" Phase— ***Complete this section as soon as you can after the "DO" phase! Complete "ACT" phase, too.***

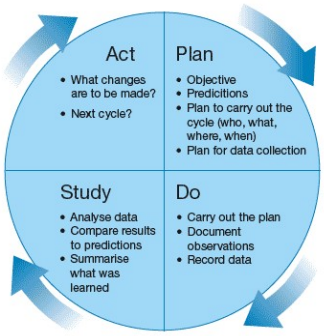
FINDINGS- WHAT HAPPENED WHEN CHANGE WAS TESTED/DEVELOPED/IMPLEMENTED: *What were the overall findings from the test? Include findings from team members and non members.*

FINDINGS- WHAT DID THE DATA YOU COLLECTED TELL YOU: *What are the findings from the data you collected?*

FINDINGS- COMPARE YOUR FINDINGS TO YOUR PREDICTIONS FROM THE PLAN PHASE- WHAT DID YOU LEARN: *Were your predictions right, wrong, somewhere in between? Do you need to test again to collect more information? Do you need to tweak the plan and conduct another PDSA cycle?*

"ACT" Phase— ***Complete this section in conjunction with the "STUDY" phase!***

ANSWER THE FOLLOWING QUESTIONS: If you answered "Yes" to any of the questions, you are ready to plan your next PDSA cycle! Go to the "PLAN" Phase on a new PDSA Documentation tool worksheet and plan your next cycle.



PDSA Checklist and Guide

Single Step - Each PDSA often contains only **a segment or single step** of the entire tool implementation.

Short Duration - Each PDSA cycle should be as brief as possible for you to gain knowledge that it is working or not (some can be as **short as 1 hour**).

Small Sample Size - A PDSA will likely involve only a portion of the practice (maybe 1 or 2 doctors). Once that feedback is obtained and the process refined, the implementation can be broadened to include the whole practice.

Plan	Do	Study	Act
Here you will write a **concise** statement of what you plan to do in this testing. This will be <u>much more focused and smaller than the implementation of the tool</u>. It will be a **small portion** of the implementation of the tool. ☐ The statement is a **<u>concise</u>** statement of what we will do. ☐ The statement is small and focused ☐ We have included a measurement or an outcome that we hope to achieve ☐ Quantitative Measurement (# of doctors performed teach-back) ☐ Qualitative Measurement (nurses saw less congestion in the lobby) The **time limit** that you are going to do this study – remember, it does not have to be long, just long enough to get your results. And, you may set a time limit of **1 week** but find out after **4 hours** that it doesn't work. You can terminate the cycle at that point because you got your results. ☐ Time Limit _____	**Execute the PLAN** What did you observe? (Ex. how the patients react, how the doctors react, how the nurses react, how it fit in with your system or flow of the patient visit) Did everything go as planned? ☐ Yes ☐ No If no, did I have to modify the plan?	What did you learn? Did you meet your measurement goal? If you met your goal, how well did it work?	What did you come came away with for this implementation? If it did not work, what can you do differently in your next cycle to address that? If it did work, are you ready to spread it across your entire practice?

PDSA Worksheet for Testing Change

Aim: (overall goal you wish to achieve)

Every goal will require multiple smaller tests of change

Describe your first (or next) test of change:	**Person responsible**	**When to be done**	**Where to be done**

Plan

List the tasks needed to set up this test of change	**Person responsible**	**When to be done**	**Where to be done**
		.	

Predict what will happen when the test is carried out	**Measures to determine if prediction succeeds**

Do **Describe what actually happened when you ran the test**

Study **Describe the measured results and how they compared to the predictions**

Act **Describe what modifications to the plan will be made for the next cycle from what you learned**

PDSA WORKSHEET

PHASE: PLAN	PHASE: DO	PHASE: STUDY	PHASE: ACT
TODAY'S DATE: CYCLE #:	SUMMARY OF DATA COLLECTED:	FINDINGS--WHAT HAPPENED WHEN CHANGE WAS TESTED/DEVELOPED/IMPLEMENTED:	ANSWER THE FOLLOWING QUESTIONS: DO YOU NEED TO MODIFY YOUR CHANGE AND TEST AGAIN? If "Yes," go to the Plan Phase and plan your next cycle. DO YOU NEED TO TEST THE SAME CHANGE AGAIN TO MAKE SURE IT WORKS? If "Yes," go to the Plan Phase and plan your next cycle. ARE YOU READY TO IMPLEMENT THE CHANGE? If "Yes," go to the Plan Phase and plan your next cycle. DO YOU HAVE A DIFFERENT CHANGE YOU ARE READY TO TEST? If "Yes," go to the Plan Phase and plan your next change.
PERSON COMPLETING PDSA CYCLE WORKSHEET:			
AIM:			
WHAT- CHANGE TO BE TESTED/DEVELOPED/IMPLEMENTED:			
TEAM PREDICTIONS ON THE IMPACT OF THE CHANGE:	TEAM OBSERVATIONS OF CHANGE TESTED/DEVELOPED/IMPLEMENTED:	FINDINGS-- WHAT DID THE DATA YOU COLLECTED TELL YOU:	IDEAS FOR TESTING:
WHEN-- SCHEDULED DATE TO TEST CHANGE:			
WHO--TEAM MEMBERS PARTICIPATING IN TEST AND THEIR ROLE/RESPONSIBILITY IN EXECUTING TEST:		FINDINGS-- COMPARE YOUR FINDINGS TO YOUR PREDICTIONS FROM THE PLAN PHASE-- WHAT DID YOU LEARN:	
OTHER—MEASURES TO COLLECT AND FORMS/TOOLS THAT NEED TO BE DEVELOPED FOR TEST:			