### Assessing Progress:
**How are you Doing?**
**How do you move forward?**

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Maine Quality Counts

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#### 90 Day Practice Improvement Plan Detail

**Practice Name:** Shespect Valley Health  
**Center Date:** September 10, 2015  
**Quality Improvement Specialist:** ____________________________

**Name of Person(s) Completing:** Judith Day, LCSW

**Unmet Requirement #1:**

**Aim:** By November 19, 2015 we will:

- Increase co-management with Behavioral Health from 12% to 25%

**We intend to accomplish this by:** (specify actions you will take):

- Lengthening the initial chronic pain visit from 30 minutes to 45 minutes so that the Behavioral Health Consultant can
- meet the patient for the purpose of providing patient education and administering 4 screening questionnaires (the
- Opioid Risk Tool, PNQ0, GAD7, and Adverse Childhood Experiences questionnaire).

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**90 Day Practice Improvement Plan Detail**

**We will know that the change is an improvement because (measures):**

- An increase in the number of Behavioral Health visits for chronic pain patients;
- Completed assessments will be documented in the chart;
- Data will indicate an increase in the percentage of participating patients co-managed with Behavioral Health

**Resources that you will need to accomplish (time, people, materials, information, coaching/support):**

- Teamwork between front office staff (scheduling) and providers; support and organization from practice manager;
- Coordination between providers and medical assistants to educate patients on the change;
- Team to problem solve and refine visit flow

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**“It sounded like an excellent plan, no doubt, and very neatly and simply arranged. The only difficulty was, she had not the smallest idea how to set about it.”**

Lewis Carroll of Alice in *Alice in Wonderland*
• **90 Day Action Period #3**
  - Nov 19 - Dec 3  Reconvene lead team to assess current state, revisit aim (2 weeks)
  - Dec 4 - 11  Diagnose, prioritize and assign the work for the work period (1 week)
  - Dec 14 - Jan 29  Teams engaging in the work period and tracking and reporting progress (6 weeks)
  - Feb 2 - Feb 9  Re-calibrate and prepare for next 90 day cycle

• **90 Day Action Period #4**
  - Feb 10 - Feb 24  Reconvene lead team to assess current state, revisit aim (2 weeks)
  - Feb 25 - March 3  Diagnose, prioritize and assign the work for the work period (1 week)
  - March 4 - April 15  Teams engaging in the work period and tracking and reporting progress (6 weeks)
  - April 15 - May 19  Conclusions, Summary and “Take A ways” to share at the final Learning Session (May 19, Maple Hill Farm) (1 month)

**WHAT ARE WE TRYING TO ACCOMPLISH?**

“Soon” is not a time

“Some” is not a number

“Hope” is not a plan

**Cucumbers**

- [https://www.youtube.com/watch?v=8Q7qnNpT WxM&feature=youtu.be](https://www.youtube.com/watch?v=8Q7qnNpT WxM&feature=youtu.be)

- What PDSA cycles do you use in your daily work, even if that’s not the name you use for them?

- What’s the value of a failed PDSA cycle?

- Think about the last PDSA cycle you ran in your personal life — even if you didn’t know it was a PDSA cycle at the time. Was it successful? Why or why not?

**Cucumber Salad**

- **Ingredients:**
  - 2 medium cucumbers, thinly sliced
  - 1/3 cup cider or white vinegar
  - 1/3 cup water
  - 2 tablespoons sugar
  - ½ teaspoon salt
  - 1/8 teaspoon pepper
  - Chopped fresh dill weed or parsley, if desired

- **Directions:**
  1. Place cucumbers in small glass or plastic bowl.
  2. In tightly covered container, shake remaining ingredients except dill weed. Pour over cucumbers. Cover and refrigerate at least 3 hours to blend flavors.

**Lunch**

- [https://www.youtube.com/watch?v=8Q7qnNpTWxM&feature=youtu.be](https://www.youtube.com/watch?v=8Q7qnNpTWxM&feature=youtu.be)

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Plan Do Study Act—Plan!

- **Plan**
  - Hypothesis or theory (We wonder if we do X, will it result in Y?)
  - Prediction
  - Details for small scale: who, what, where, how, when, scope
  - Data for learning: what, how
  - Carry out the test, preferably on a small scale.

Plan Do Study Act—Do!

- **Do**
  - Jot down what happened
  - Record anything different from plan?

Plan Do Study Act—Study!

- **Study**
  - What does it mean?
  - How did it compare to prediction?
  - What did we learn?

Plan Do Study Act—Act!

- **Act**
  - What shall we do next?
  - Adopt
  - Adapt
  - Abandon

Standardizing Current Best Process and Holding the Gains

<table>
<thead>
<tr>
<th>Task</th>
<th>Who</th>
<th>When</th>
<th>Tools Needed</th>
<th>Measures</th>
</tr>
</thead>
<tbody>
<tr>
<td>Plan Do Study Act: PDSA</td>
<td>Create standard process map to be inserted in your Playbook.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Do</td>
<td>What are we learning as we DO the standardization?</td>
<td>Any problems encountered?</td>
<td>Any surprises?</td>
<td></td>
</tr>
<tr>
<td>Study</td>
<td>As we STUDY the standardization, what have we learned?</td>
<td>What do the measures show?</td>
<td>Are there identified needs for change or new information or “tested” best practice to adapt?</td>
<td></td>
</tr>
<tr>
<td>Act</td>
<td>As we ACT to hold the gains or modify the standardization efforts, what needs to be done?</td>
<td>Will we modify the standardization?</td>
<td>What is the Change Idea?</td>
<td>Go to PDSA Worksheet.</td>
</tr>
</tbody>
</table>
11/17/2015

1. Early tests are simple and designed to learn then succeed
2. Then test over a variety of conditions to understand scalability and identify weaknesses
3. Later tests are designed to predict and prevent failures
4. Implementation testing

Follow-Up
- Monitor the new patterns of results and select new themes for improvement.
- Embed new habits into daily work: daily huddles, weekly Lead Team meetings, monthly “town hall” meetings, data walls, and storyboards.

Follow-Up
Improvement in health care is a continuous journey.
The new patterns need to be monitored to ensure the improvements are sustained. Embedding new habits into daily work with the use of “huddles” to review and remind staff, as well as weekly Lead Team meetings keeps everyone focused on improvements and results that can lead to sustained and continuous improvements.

Data walls, storyboards and monthly all-staff meetings are methods to embed new habits and thinking for improvement.
The Lead Team should repeat the process for newly recognized themes and improvements that are identified in the assessment and Metrics That Matter.

Your Turn
- Work together with your team to complete as much of the 90-day Action Period worksheet as possible.
- Use your PDSA Worksheet and SDSA Worksheet
- We will collect your 90-day Action Plan worksheet carbon copy

Thank you for your hard work! You are making a difference!