Steps to Complete a Quality Improvement Project

Identify the Problem

- Think about an area needing improvement.
- Consider what isn't working efficiently in your current process. Staff workarounds, safety event reports, and patient experience data can provide insights into areas needing improvement.

II. Formulate an AIM Statement

- Define your goal using the SMART criteria:
 - Specific
 - Measurable
 - Attainable
 - Relevant
 - Time-bound
- Example: "To decrease patient wait times from check-in to seeing a provider by 30% within the next 6 months in our primary care office, ensuring that at least 85% of patients are seen by a provider within 15 minutes of their scheduled appointment time. This will improve patient satisfaction and streamline clinic workflow."

III. Select Measures

- Decide how you'll track progress:
 - Quantitative data (e.g., time reductions)
 - Qualitative feedback (e.g., surveys)
- o Plan your data collection process (frequency, method, responsible person).

IV. Understand Current Conditions

- Observe the existing workflow.
- o Interview key team members or patients for insights on challenges.
- Consider cause and effect techniques such as 5 Whys

The **5 Whys** technique is used to explore the cause-and-effect relationship behind a specific problem. By asking "Why?" up to five times, you can uncover the underlying cause of an issue rather than just addressing the symptoms.

1. Steps to Complete the 5 Whys

- 1. **State the Problem**: Clearly define the issue you're experiencing in your osteopathic practice (e.g., "Patients are waiting too long for their appointments").
- 2. **Ask 'Why?'**: For each answer, continue to ask "Why?" until you arrive at the root cause of the problem.
- 3. **Determine Root Cause**: Once you've asked "Why?" at least five times (or until you reach a satisfactory answer), you've likely identified the root cause.



4. Action Plan: After finding the root cause, decide what actions need to be taken to address it.

2. Example of 5 Whys Process

Problem: Patients are waiting too long for their appointments.

Why#	Question	Answer
1st Why	Why are patients waiting too long?	Because the DO is running behind schedule.
2nd Why	Why is the DO running behind schedule?	Because each patient visit is taking longer than expected.
3rd Why	Why are patient visits taking longer?	Because extra time is spent on manual paperwork.
4th Why	Why is so much time spent on paperwork?	Because the clinic uses paper-based intake forms.
5th Why	Why does the clinic still use paper forms?	Because the clinic hasn't implemented electronic health records (EHR).

Root Cause: The clinic hasn't adopted an EHR system, leading to delays from manual paperwork.

3. Blank 5 Whys Template

Problem Statement: Describe the problem here.

Why#	Question	Answer
1st Why	Why is this problem happening?	
2nd Why	Why is that the case?	
3rd Why	Why does that occur?	
4th Why	Why is that happening?	
5th Why	Why is this continuing?	-

Root Cause:

4. Action Plan Template

o Use 5 Whys technique to explore cause and effect relationship behind a specific problem.

Action	Responsible Person	Due Date	Status
Implement electronic health records (EHR) system.	Dr. John Doe	01/15/2024	In Progress
Train staff on new EHR system.	Clinic IT Specialist	02/01/2024	Not Started

5. Instructions

- o **Define the Problem**: Start by clearly stating the problem you're trying to solve.
- o **Ask 'Why?'**: For each answer, continue asking why until you uncover the root cause.
- o **Take Action**: Once the root cause is identified, create an action plan to address it.
- Follow Up: Regularly monitor the status of your actions to ensure the root cause is properly addressed.

Benefits of Using the 5 Whys

- Simplicity: Easy to implement without requiring complex tools.
- Focus on Root Causes: Helps you avoid treating just the symptoms of a problem.
- Effective for Continuous Improvement: Encourages a culture of inquiry and constant process refinement.

V. Brainstorm Solutions

- Generate ideas without limiting yourself to just one solution.
- Evaluate each based on cost, ease of implementation, and potential impact.

Use a PICK to prioritize improvement solutions:

<u>Implement</u>	<u>Challenge</u>
-install self-check-in kiosks to reduce wait times -send appointment reminders via SMS	-implement a new EHR system for better patient records -redesign the clinic layout to improve patient flow
<u>Possible</u>	Kill/Kibosh
-add more chairs in the waiting area -post signage to direct patients to check-in faster	-create a new waiting room lounge for patients -renovate the clinic for aesthetics only
<u>Implement</u>	Challenge
Possible	Kill/Kibosh

VI. Test Changes Using PDSA (Plan-Do-Study-Act)

The **PDSA** cycle is a simple, structured method for testing and implementing changes in a process. It allows teams to make improvements in small, controlled steps, which makes it easier to see what works and adapt as needed.

- Plan: Choose one idea to test on a small scale.
- o **Do**: Implement it in a limited way (e.g., one shift or one team).
- Study: Review results and gather feedback.
- o Act: Adjust as needed or scale up if successful.

VII. Implement & Sustain Changes

- Promote change by identifying change agents and champions to create project awareness.
- Use feedback, training, and consistent follow-up to maintain improvements.

Celebrate Successes!!

Don't forget to celebrate successes, both big and small! Acknowledging achievements boosts morale, reinforces positive behavior, and encourages continued engagement in quality improvement efforts. Celebrating successes helps build momentum for ongoing improvement and demonstrates the value of teamwork and dedication in enhancing patient care. Recognize your team's hard work through meetings, shout-outs, or small celebrations to maintain enthusiasm and a positive culture around change initiatives.