

What should you do with the ANDA results?

Quality improvement is a critical factor in all levels of healthcare and plays an important part in the provision of service. The onus of quality improvement in health is now the responsibility of all health care providers and not just those in the Quality departments of our organisations. However, unless we measure what we do, and the outcomes of our care, it will be difficult to know exactly what needs to improve and what impact our improvements have had over time. Efforts to improve systems or processes must be driven by reliable data.

Data not only allows us to accurately identify problems, it also assists us in prioritising quality improvement initiatives and enables objective assessment of whether change and improvement have indeed occurred after change. Data helps us to understand, focus and improve our service by allowing us to compare our performance, either against known standards or against our own prior results. Collecting and analysing data are therefore critical to the function of quality improvement in any health service.

This guide demonstrates the fundamentals of using your data for quality improvement. The concepts are logical and simple, and should apply to any practice.

The NADC encourages you and your organisation to take this opportunity to utilise the valuable information provided to you in the final report of the 2015 ANDA audit.

The NADC hopes that the following guideline will aid the development of quality improvement initiatives that can be reflected in your organisation's future results and patient outcomes.



THE STEPS OF QUALITY IMPROVEMENT

Step 1:

What is your centre aiming for?

You need to be clear, you need to be focused.

“If you aim at nothing, that’s what you will hit!”

Step 2:

Assess your ANDA data

Where do you sit in comparison to other organisations?

- Can you do better?
- Are you an outlier?
- Why?

Again, reflect on what your centre aims for and is it achieving this aim?

Step 3:

Deciding on your projects

Possible criteria for your Quality Improvement projects could be:

- Improvements that will be of most benefit to patients
- Improvement actions that will have the biggest impact across the greatest number of areas
- Improvement that are aligned with organisational strategic goals
- Improvements that are most likely to succeed when all barriers are considered

Step 4:

Rapid Cycle Model questions

The following is the rapid cycle model which gets you started by asking 3 questions:

1) What are you trying to accomplish?

Using the questions of:

- What does the centre want to achieve?
- How does this align with the organisation’s overall strategic goal?

Most organisations will align this with the following 6 overarching aims for improvement in health care:

- Safe
- Effective
- Patient-centred
- Timely
- Efficient
- Equitable

As you answer this question you will develop your *Aim Statement*.

2) How will you know that a change is an improvement?

The answer to this question helps determine your measures.

3) What changes can you make that will result in an improvement?

- What would give you the biggest bang for the organisation's time and dollar investment?
- Are there a few changes you can make that would be simple but effective that may be best to do first?
- Answering these questions moves you into testing the cycles as you begin to find solutions and then make improvements upon them.
- But remember: *All improvement requires making changes but not all changes result in improvement! Plan wisely!*

4) How will you know that a change is an improvement?

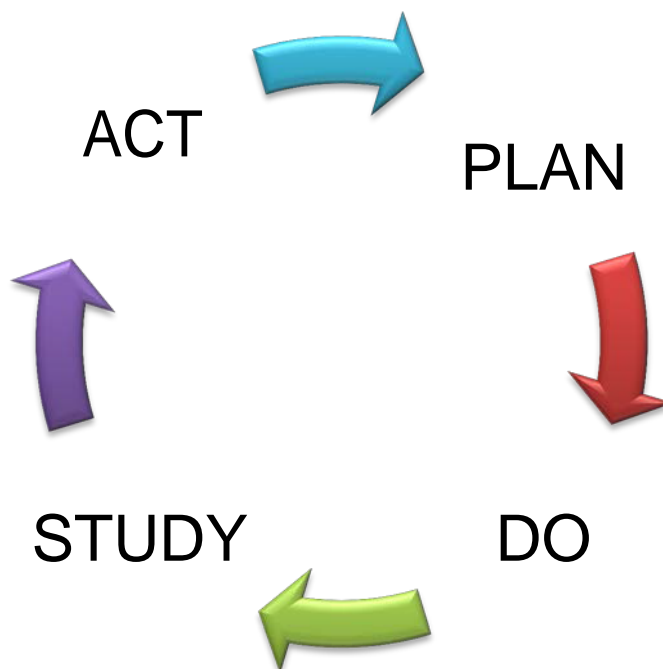
- Simple – ANDA data! You have it already!
- Think about what other sources of information you have available
- Benchmark with other NADC Centres

Step 5:

Deploy the PDSA cycle

After answering the previous key questions, move into the PDSA cycle.

The PDSA system is a simple but effective tool to guide your activity through the essential improvement elements (see Appendix 1)



Plan:

In the planning section you decide:

- What exactly you will do
- Who will carry out the plan
- When will it take place
- Where
- What do you predict will happen
- What data/information will you collect to know whether there is an improvement? What will you measure?

Do

So what do you do in the “Do” section?

- You carry out the plan
- You document any unexpected events or problems
- You begin analysis of data

Study

The STUDY component is where you:

- Complete the analysis of the data
- Review and reflect on the results
- Compare the data to predictions
- Summarise what was learned

Act

The “A” step in the PDSA cycle is where you ACT on what you have planned, done and studied.

You decipher:

- What changes are to be made
- What is the next cycle
- And can you grow the improvements that have been made
- The cycle doesn’t necessarily stop here!

BARRIERS TO CHANGE

Sometimes despite our best efforts we have barriers to change.

Be alert to the following change blocker?

- Absence of relevant data
- Negative attitude
- Fixed routines
- Lack of quality improvement skills
- Unsupportive culture re innovation, team work, change and short term clinical focus
- Money
- And the big issue for everyone = **TIME!**

CHANGE PRACTICE INVOLVES:

- Keeping it simple
- Starting small and build slowly
- Being clear about what you want and how it can be achieved
- Planning well
- Involving key people
- Selling your ideas and plans
- Getting help!

CONCLUSION

Every system is perfectly designed to get the results it gets, so design your system for the results you want.

ANDA gives us an opportunity, an amazing resource that needs to be more than a file on your PC or a wad of papers in your filing cabinet. It needs to be brought to life and be the catalyst for improvement in your organisation.

“If we always do what we have always done, then we will always get what we have always got ”

PDSA WORKSHEET

Organisation: _____ Date: _____

Department: _____ Coordinator: _____

AIM: (What is the overall goal you wish to achieve?)

PLAN: (List the tasks that need to be made to made the change)

ACTION How will you achieve the goal? What steps do you need to take?	WHO Who is involved?	MESUARABLE How will you know that you have achieved the goal	ACHIEVABLE What resources and time to do this?	REALISTIC Are you sure you can really do this?	TIME LIMITED When can this realistically be achieved?

Do: Describe what actually happened when the changes were implemented

Study: Describe the measured results and how they compared to the predictions. Where goals met?

Act: Based on this PDSA cycle, what are the next steps to achieve the Goal/Aim statement?
