



Appendix M PDSA Worksheet Example

Team Name: Trauma	Date of test: October 29 th 2018	Test Completion Date: November 1st
Overall team/project aim: Implementation of PIC documentation- soft roll out prior to order set go live. Test PIC score documentation for RN's		
What is the objective of the test? Provide inpatient nursing staff with assessment tool/care guidelines for rib fracture patients		

Plan:

Briefly describe the test: Introduce CCU staff to care guideline and use of PIC score to assess rib fracture patients. Over the course of 1 week, the CCU staff will use the new guideline and provide feedback on ease of use, patient response, ability to communicate patient condition with other staff. A short evaluation form will be provided.

How will you know that the change is an improvement? Staff will be able to communicate verbally and in Epic a score to assess how a rib fracture patient is progressing

What driver does the change impact? Improvement in patient care and staff communication

What do you predict will happen? CCU staff will demonstrate ease of use and patients will feel more confident in their ability to express how they are progressing

Plan

List the tasks necessary to complete this test (what)	Person responsible (who)	When	Where
1. Finish Guideline	Karen	10/12	Lucidoc policy
2. Present guideline and concept to Unit Managers and Respiratory therapy	Karen	10/29	Manager meeting
3. Present guideline to Trauma PAC for final approval	Karen and Dr Stepan	9/18	Monthly trauma PAC meeting
4. Work with Nurse educators to develop a plan for staff education	Karen, Lindsey, Amy	10/16	Resource group meeting
5. Work with Epic to develop PIC score and update Trauma order set	Karen and Epic	September-October 2018	Meeting with Epic documentation expert and Order set manager

Do: Test the changes.

Was the cycle carried out as planned? Yes No

Record data and observations.

10/29 CCU Staff was able to find and document PIC score, same with E3 staff 10/30
Staff did not need excessive explanation on use or purpose
Staff huddles – 10 minutes

What did you observe that was not part of our plan?

The PIC score is not visible to the MD's. Email to Epic team to move PIC score visibility for MD's- summary page, FS tab.

Study:

Did the results match your predictions? Yes No

Compare the result of your test to your previous performance:

Ongoing Study:

1/30/19 **What did you learn?** RN's accept new process with few misses. MD's are not adopting the new order set.

Act: Decide to Adopt, Adapt, or Abandon. **November 2nd.**

X Adapt: Improve the change and continue testing plan.

Plans/changes for next test: Working with Epic to improve visibility for MD's.

Order set final work by Epic

Handouts to Education department- adding to Krames

Ongoing Revision:

Adopt: Select changes to implement on a larger scale and develop an implementation plan and plan for sustainability
-Rib panel as add on to order set 1/22/19

Abandon: Discard this change idea and try a different one
-Do not track MD documentation- nurses documentation now appears in Vitals/summary area where is it visible for MD view. 1/15/19

6. Staff (RN and MD) education	Karen, Lindsey, Amy,	September and October	CCU and ED education days
7. Staff education – huddles and 1:1	Karen	October 29-30	CCU and E3 unit huddles, 1:1 with RN's

November 2018: Plan for collection of data and continued rollout:
 11/7- PIC score added to MD summary page
 11/1-12/6- multiple meetings with Epic
 11/15 spread sheet for rib fractures to collect data (% of use and % of documentation)
 11/26- South 5 staff meetings

Go Live for hospital December 2018

12/6- Rib fracture order set live in Epic. Email to Trauma PAC physicians
 12/6 Patients now being entered to spreadsheet. 1:1 education with physicians to use General trauma order set.
 12/18- meet with Epic again re: ability to have rib guidelines in order set as well as a panel.
 1/22/19- Rib fracture panel now available for use as an add on to any order set.

Ongoing meetings/actions 2019

3/19- first report out at trauma QI meeting. MD orders: 53%. RN documentation 89%.
 8/30/19- Trauma Newsletter- review Rib Fracture Guideline purpose and use. Newsletter sent to all admitting physicians.
 September 2019- implement follow-up letter process for admitting physicians, including reminder to use Rib fracture orders.
 12/17- Trauma QI meeting. Dashboard reviewed including breakdown of which physician groups are using orders. General surgeons most likely to order Rib Fx guideline.
 12/20- Trauma QI dashboard updated. Goal for RN documentation 90%, MD order set use 75%.
 12/23 Trauma Newsletter- Trauma Dashboard included showing results for FY2020 so far.

Update 2020 Plans

January 2020- Review and revise Rib Fracture Guideline based on data gathered over past year.
 February 2020- new ACS service to start April 2020.

Ongoing Results/Assessment:

CY 2019	Order set used by MD	RN documentation of PIC score
2019 Quarter 1: 29 patients	10 (34.4%)	27 (93%)
2019 Q2: 31 patients	16 (52%)	27 (87%)
2019 Q3: 43 patients	28 (65%)	42 (98%)
2019 Q4: 31 patients	16 (52%)	27 (87%)
CY 2020		
2020 Q1: 34 patients	22 (65%)	31 (91%)
2020 Q2: 30 patients	21 (70%)	26 (87%)
2020 Q3: 33 patients	27 (82%)	32 (97%)

2019 Quarter 1- some physicians are good about using the Rib panel in addition to general admission order set. Most are still not ordering the guideline. In spite of this, the nurses are using the PIC score.
 2019 Q2 some improvement with physicians. Quick buy in by nursing staff. Discussed at Trauma PAC June 18th. Plan to develop a follow up letter for the physicians who are slow to adopt the Rib Fracture guideline. Will present draft at next Trauma PAC.
 2019 Q3 Trauma Newsletter with Rib Fracture Guideline review. Improvement noted. Now tracking admitting service, isolated vs multisystem trauma, admission floor, age, #of ribs.
 2019 Q4 Number slipping. Implement follow up letter for admitting physicians. Revise Trauma Dashboard with new goals for CY2020.
 2020 Q1: improved use in hospitalist group.
 2020 Q2: Covid 19 pandemic- in spite of stressful times, rates look good. ACS Team started April 2020.
 2020 Q3: more rib fracture patients going to the ACS team, compliance with order set improving.