[Insert Practice name or logo]

Identifying and undertaking QI activities using PDSAs

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| **QI activity identified**  For example, via quarterly planning meeting/staff meetings/data reports/staff suggestions/  patient feedback/change in clinical program/MBS change/etc. |

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| Does the identified QI activity fit within the [10 Building Blocks of High Performing Primary Care](https://cchs.ua.edu/wp-content/blogs.dir/24/files/2014/06/The-10-Building-Blocks-of-High-Performing-Primary-Care.pdf)  and address the Quintuple Aim? |

**YES**

Document activity on the

Quality Improvement Register,

raise PDSA and record on PDSA Register/Log

**NO**

Document activity on the

Quality Improvement Register

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| **Plan (P)**   * Draft PDSA using the ‘Guide to documenting a QI activity as a PDSA * Finalise PDSA with staff associated with the QI activity |

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| **Do (D)**   * Commence and complete the QI activity * Document the commencement of the PDSA on the Quarterly Quality Improvement Plan and PDSA Log * Add the PDSA information to Quality Improvement Board in [insert location] * Place PDSA document in the Practice QI file, under ‘Current’ |

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| **Study (S) and Act (A)**   * Complete using the ‘Guide to documenting a QI activity as a PDSA * Document the completion of the PDSA on the Quarterly Quality Improvement Plan and PDSA Log * File the competed PDSA in the Practice QI file under ‘Completed’ |

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| **Communicate outcome**  This section is dependent on individual practice processes, with the below as examples:   * Document the completion of the PDSA on the Quality Improvement Board * Communicate the completion of the QI activity. For example: * to relevant staff via in-house messaging/communication process * 1:1 if required and document e.g. informal CPD in education file) * staff meeting, if applicable, as per standing item on agenda |