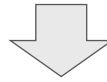


# Identifying and undertaking QI activities using PDSAs

## QI activity identified

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

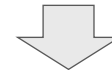


Does the identified QI activity fit within the [10 Building Blocks of High Performing Primary Care](#) and address the Quintuple Aim?



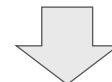
### **NO**

Document activity on the Quality Improvement Register



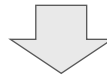
### **YES**

Document activity on the Quality Improvement Register, raise PDSA and record on PDSA Register/Log



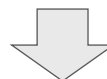
## Plan (P)

- Draft PDSA using the 'Guide to documenting a QI activity as a PDSA'
- Finalise PDSA with staff associated with the QI activity



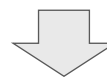
## Do (D)

- 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'



## 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 completed PDSA in the Practice QI file under 'Completed'



## 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