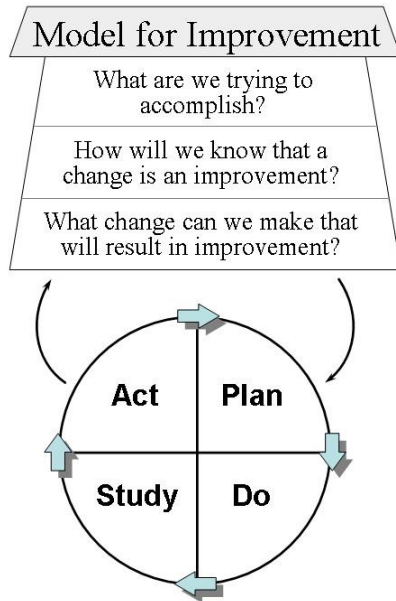


Model for Improvement Overview

Connie Davis, MN, ARNP

The **Model for Improvement** provides us a way to improve our care just like the scientific method helps us learn new knowledge. It was developed by experts who reviewed how successful organizations made changes. It is a simple way to approach any aspect of care from big system issues to individual care between a professional and a client.

There are 6 steps to using the Model for Improvement:



1) Set an aim: Answer the question, "What are we trying to accomplish?" The aim needs to be measurable and have a completion date. An aim may be something like improving our client's ability to care for their wound or decreasing the wait time for an assessment.

2) Decide how to measure. Answer the question, "How will we know that a change is an improvement?" If we don't measure what we've done, we don't know if what we did is better. These are the "vital signs" of your project

3) Select some new ideas to try. Answer the question: "What change can we make that will result in improvement?"

4) Test your ideas using PDSA cycles. **PDSA** stands for Plan-Do-Study-Act. It is much like trying out an intervention with a patient or client.

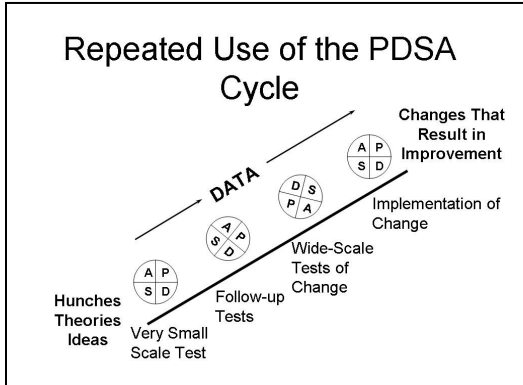
Plan: Review your aim and measures and decide what you can try that might improve the situation. Make it simple and quickly testable, like trying with one nurse and one client today or tomorrow.

Do: Try your new idea.

Study: While you are trying your new idea, observe what happens. Was it faster? Did it work better? Did the patient or staff member like it?

Act: Review your test. What could happen next? Do we need to try it on more clients to see if it works with different kinds of people in different situations, or do we need to modify our idea? Sometimes an idea doesn't work and we look for another. The Act step leads to a new PDSA cycle.

As you can see, PDSA cycles build on each other. Each test of a new idea or refinement of an idea leads to changes in care. The measures will let us know if our ideas are working the way we think they will.



5) When we have tested our change in many situations, we are ready to implement our change. This means we make the change our standard practice. We rewrite the procedure manual, train the staff and add it to our orientation process.

6) We may have an opportunity to spread our idea to another situation or another community. The new setting will need to test our idea in their environment to see if it works as well for them. PDSA cycles will help them determine how to adapt the idea to their practice.

The Model for Improvement has helped many healthcare organizations improve their processes and outcomes. It can be taught to patients to help them learn to make changes in their daily lives. There is more detail around each part of the Model for Improvement but the basics are enough to get started on improvement.

References:

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