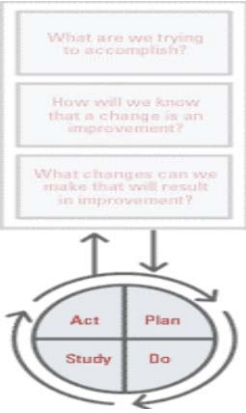




## Quality Assessment and Performance Improvement (QAPI) Plan

Please submit your QAPI plan (Step 1) with the Medical Director's signature to the Network office by:  
**Monday, October 24, 2011**

Cycle (Dates of the project): *September 2011 – March 2012*

 <p>Adopted from IHI Website, June 2007</p>	<p><b>Project: <i>Fistula First Quality Assessment &amp; Performance Improvement (QAPI) Project</i></b></p> <p><b>TEAM: Facility Name:</b> _____ <b>CCN:</b> _____ (List all members)</p> <p>_____</p> <p>_____</p> <p>_____</p> <p><b>BACKGROUND:</b> (Summary of facility's identified problem and description of what the facility has been doing to improve the problem in the past – root cause analysis (RCA) will assist with finding out where the problem(s) are.)</p>
<p><b>Step 1.</b> <b>PLAN:</b> Plan/develop the test.</p>	<p><b>PROBLEM Statement:</b> (Statement outlining the root cause.)</p> <p><b>AIM Statement</b> (Statement designed to guide you to your goal.)</p> <p><b>What is the goal?</b> (Include a numeric goal to achieve.) <b><i>To increase the facility's AVF rate from _____ to _____ by March 2012.</i></b></p> <p>Goal is a _____ percentage point increase from baseline.</p>

**Develop a plan to achieve the goal?**

(List steps of the plan – this will allow you to identify the step that may need modifying/revising if necessary.) Add more paper if necessary.

**What data sources are needed for the test?** (What data sources will you be using to monitor your progress?)

**What measures are used to analyze if you are achieving the goal?**

**Baseline:** «JUN11»% (June 2011 SIMS data)

**Measure:** (Numerical formula)

$$\frac{\# \text{ of prevalent patients using AVF as primary access}}{\text{Total \# of HD patients at the facility}} = \text{Facility AVF rate}$$

**Monitoring frequency:** Monthly

	Jun 2011	Sept 2011	Oct 2011	Nov 2011	Dec 2011	Jan 2012	Feb 2012	Mar 2012
<b>AVF Rate</b>								

<p><b>Step 2.</b> <b><u>DO:</u></b> Try out the test on a small scale.</p>	<p><b>Implement the plan.</b> (Document problems and unexpected observations as you implement your plan.)</p>
<p><b>Step 3.</b> <b><u>STUDY:</u></b> Set aside time to analyze the data and study the results.</p>	<p><b>Analyze the results and compare the results with your goal.</b></p>
<p><b>Step 4.</b> <b><u>ACT:</u></b> Determine if the test was successful or the plan needs to be revised.</p>	<p><b>If the test was successful, how will you implement the plan on a wider scale?</b></p> <hr/> <p><b>If it was not successful, what needs to be changed based on what you have learned? Should you continue to search for other root causes?</b></p>

\_\_\_\_\_  
Medical Director's Signature

\_\_\_\_\_  
Date

<b>Guidelines For Using The PDSA Process To Create Change</b>				
<b>PROCESS</b>	<b>Questions To Be Answered</b>	<b>Generate Ideas</b>	<b>Gain Consensus</b>	<b>What To Do Before Proceeding To The Next Step</b>
<p><b>PLAN:</b> Identify an opportunity and plan for change.</p>	<p>How can we get to where we want to be? What do we do first? What's the best way to do it?</p>	<p>Ideas on how to solve the problem; how to implement solutions; how to monitor and evaluate the trial improvement.</p>	<p>Agree on a design and implementation plan for a trial improvement; agree on criteria for evaluating trial.</p>	<p>Brainstorm possible improvements; analyze strengths and weaknesses; establish criteria for selection; establish time lines and a plan for monitoring and evaluating the trial; update run charts and progress reports.</p>
<p><b>DO:</b> Implement the change on a small scale.</p>				<p>Document problems and unexpected observations.</p>
<p><b>STUDY:</b> Use data to analyze the results for the change and determine whether it made a difference.</p>	<p>Have we implemented the trial improvement correctly? Have we followed the monitoring plan? Are we improving? What are we learning?</p>		<p>Agree on effectiveness of trial.</p>	<p>Evaluate improvement trial using established criteria; compare results with desired state; check for new problems; decide to implement change system-wide, or return to root cause analysis (fishbone diagram) to search for other sources of variation; update run chart and progress report.</p>
<p><b>ACT:</b> If the change was successful, implement the plan and continuously monitor results. If the change did not work, start the process again.</p>	<p>Should we implement system-wide change? Does management support the change? If not, should we continue to search for other root causes?</p>	<p>Ideas for planning system-wide change. (Implement action based on what you learned in the study step. If the change did not work, go through the process again with a different plan using what you have learned in the study step.)</p>	<p>Agree to a new plan for system-wide change; or, return to root cause analysis and start the process again.</p>	<p>Prepare to report results of the project; communicate results throughout the organization; continue to monitor.</p>

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