



**Tips and Tools for Learning Improvement**

**Answer Key | Plan-Do-Study-Act**

**Exercise 1: Developing a plan**

<b>Plan component</b>	<b>Option 1</b>	<b>Option 2</b>	<b>Option 3</b>	<b>Reasons for choice(s)</b>
Who will be responsible for escorting patients?	Physician or clinical officer	Nurse	<b>Volunteer</b>	<i>This task does not require clinical skills. A volunteer doing the escorting is the least likely to disrupt the clinic functioning.</i>
At what scale or how long will we test the change? <sup>1</sup>	The next 100 HIV patients with suspected TB	<b>The next 5 HIV patients with suspected TB</b>	All HIV patients with suspected TB for the next month for the whole clinic	<i>Starting with the next 5 patients gives you a small sample to get an understanding of where there may be complications or problems.</i>
How will we know if the test was successful (learning from the test)?	The team will ask the head of the HIV clinic and the head of the TB clinic if it worked	<b>All patients found to be co-infected are escorted to the other clinic; the staff, volunteer and patient found it helpful</b>	The team will review whether there is a change in the percent of completed referrals of HIV patients with suspected TB to the TB clinic for all patients in one month	<i>The best initial way to determine learning from this test would be whether all patients were escorted and whether staff, volunteers and patients found it useful. This lays a foundation for determining if it should be tested further.</i>
When should we first review the results of the test?	At the regular meeting of the team at the end of the month	Once per hour during the test period	<b>A quick, informal meeting when the test is complete</b>	<i>For this change, the best thing to do is to try it out and have a quick, informal meeting of the team to see how it went. When testing a change, it can be helpful to see what you can do right away that you can learn from to determine if it is worthwhile. If you wait until a formal team meeting that might be held once per month, you might forget the details of what happened and/or you have missed out on time to make simple adjustments and test again. Meeting every hour is unnecessary as there may not even be a relevant patient in that timeframe.</i>

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Plan component	Option 1	Option 2	Option 3	Reasons for choice(s)
Who will collect information for review?	Volunteer alone	<b>Volunteer and staff members from HIV and TB clinics</b>	Facility leadership	<i>The best option is the volunteer and staff together as they jointly can determine whether the change was beneficial for everyone involved. For a PDSA cycle, members of the team or people involved in the process should collect the quantitative and qualitative information that they need to determine if their test worked.</i>
What is your prediction about what will happen?	<i>While there may be a few variations of predictions, generally the team would predict that by escorting patients from one clinic to the other, the patients are less likely to leave and will be connected to care and that a personal escort will encourage patients to go right away.</i>			

## Exercise 2: Reviewing study and act steps

### Part 1

Team Member 1	Team Member 2	Team Member 3
<p>“This change was not successful. The volunteer didn’t escort everyone. This change relied on one volunteer and when he left it dropped. He didn’t know what to do when he got there. We don’t know whether they were registered or seen at the TB clinic. I would recommend we test something completely different.”</p>	<p>“This was a successful change because we know that the HIV patients are making it to the clinic. However, we need to make modifications to refine the change, address some of the problems, and test it again.”</p>	<p>“This was a great change. Most people made it to the clinic, and that’s much better than our current rate of completion for referrals. I suggest that we implement this for all patients starting tomorrow. We don’t need further testing because we know it works.”</p>
<p><i>Expert response: This team member is correct that there are problems that need to be fixed. However, there seems to be some promise in the change so it is worth fixing the problems and testing again.</i></p>	<p><i>Expert response: This is the best option. The purpose of the PDSA is to test a change to see if it works. They tested this change, and while it has some problems, it also has potential. It is worth fixing those problems and doing a quick test again, perhaps with a few more patients, to see what happens. Doing these quick tests means that they don’t spend time implementing flaws. They can refine the promising change and know it works before implementing across the facility.</i></p>	<p><i>Expert response: While this is a promising change, there are still a lot of problems and unknowns. Implementing this across the facility with all patients could create more confusion and problems and be detrimental. It needs more testing.</i></p>

## Part 2

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Which of the following improvements is NOT a good next step?	<input type="checkbox"/> Clarify what happens when the volunteer reaches the TB clinic with a patient <input checked="" type="checkbox"/> Have the nurse escort patients instead of the volunteer <input type="checkbox"/> Create a coverage schedule so there is always a volunteer available to escort patients	<i>There is nothing in the test that tells us that having the volunteer do this is a bad idea. It is best to keep testing with the volunteer.</i>
Which of the following is the best idea for the scale of the next test of having a schedule of volunteers to escort patients?	<input type="checkbox"/> Testing the new schedule of volunteers for 6 months <input type="checkbox"/> Test on 200 patients <input checked="" type="checkbox"/> Test a new schedule of volunteers for one full clinic day	<i>As one of the problems was a scheduling issue, it would be good to clarify this issue and then test for a full day to see if the new schedule provides adequate coverage.</i>

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*Results of the second PDSA: The team decided to test the new schedule for volunteers as well as clarify that the volunteer should escort the patient to the registration desk and let them know this is a referral. They tested this for one day and found it worked well. They plan to test this for a full week to see how this arrangement works on days when the clinics have different hours.*