Plan ⇨ Do ⇨ Study ⇨ Act

Title: PDSA Cycle: Reporting Template and Process: Data Transparency Project

Start Date: 4/1/2014   **Completion Date:** 6/2/2014

PLAN	
Team leader and members • Names, roles and responsibilities	**Krista Collins, Data Analytics and QI Specialist** • Will design template and circulate this template to clinics for feedback • Develop instructions for reporting • Document PDSA and process **Brandon Lane, Data Specialist** • Will collect data from clinics
Objective / AIM: • What are you testing? • What do you hope to accomplish?	• Testing the design, delivery and process of gathering data from clinics participating in the Data Transparency Project. • **Goal:** to make the sharing of data to OPCA as part of this project an easy process for our clinics.
Plan: • Describe your plan to execute this PDSA. Include specific roles and dates.	**Template:** • Krista will develop a template and circulate the template to clinics during April • Clinics and Data Team will review template at April 2014 meeting • Clinics and Data Team will discuss template and reporting experience for clinics during May 2014 **Instructions:** • Krista will develop instructions on how to use template for reporting data to OPCA. Instructions will be sent out at the same time as the template
Plan: Data Collection • What data needs to be collected? • Who will collect data? • What are baseline measures?	**Data to be gathered:** • Collect feedback from clinics via email, April and May Data / QI calls about use of template **Who will collect the data** • Feedback will be gathered by Diane in meeting minutes, via emails sent to Krista and Brandon **Baseline measure:** • No baseline measures

DO	
Observations • What happened?	**April 2014 call:** Received a lot of feedback about the proposed template. Clinics identified need for instructions related to 12 month reporting period. Clinic and OPCA also identified opportunity to document how chart audits performed as part of this group could also be used for annual UDS reporting. **May 2014 call:** Clinics understood how to use templates, however some inaccuracies were noted (see below feedback). In general, template was easy to use, however there was confusion around the metrics and what to report.
Problems / barriers • Did this PDSA go as planned? Why or why not?	Yes, templates were easy to use, and overall clinics said that reporting data was not difficult.

STUDY	
Data • Analysis data of collected. • What did you learn? Any surprises?	**Feedback from clinics** (April and May 2014 call). • General consensus during May 2014 call: "template is not difficult to use, but some errors (see below) and more clarification around measures needed" • Need instructions on how to create rolling 12 month data • Need instructions on how clinics without an EMR can perform chart audits • Need to identify and call out differences between UDS (chart audit method) and CCO reports • Hypertension: Need to change ">" sign to "<" on template under "numerator" • Emergency department utilization data: should not be a percentage on the template; need to fix numerator (# of patients vs # of visits) • Some confusion around definition of metrics – specifically depression screening with follow-up, SBIRT brief intervention, and ED utilization.

ACT		
Circle your decision	▪ Keep this change. It works! ▪ <mark>Keep testing</mark>	▪ <mark>Adjust this change</mark> ▪ Abort this change

Next steps:
• Outline the next steps based on your findings.
 	
• Is this change ready to be spread? If not, what changes need to be made?
	Make changes based on above feedback. Template at this time is "not perfect". Need to discuss further with clinics to gather and assess data and create alignment with clinics regarding what they report.
	
	Next steps:
	  o Create instructions on how to create rolling 12 months of data
	  o Create instructions on how to perform chart audits for measures that coincide with annual UDS reporting
	  o Make changes to template as noted in above
	
	Will gather feedback during June 2014 call and make additional revisions if needed.	