

Example 3, Patient Recall: DO, STUDY & ACT phases

MODEL FOR IMPROVEMENT

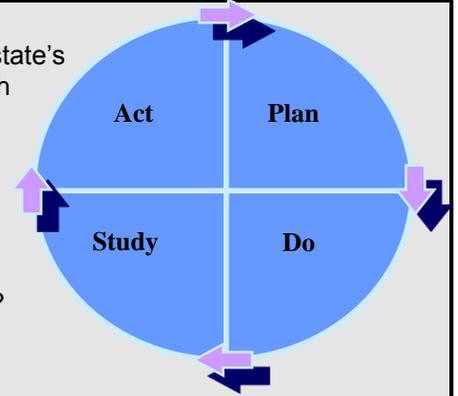
Team Name: Forever Pediatrics

Plan a Test of Change

Cycle #:_1_Start Date: 1/14/13 End Date: 1/19/13

Objective for this PDSA Cycle (Aim):

By March 1, our practice will recall our patients 19-23 months of age who are in the state's immunization information system (IIS) and are 90 days or more behind schedule with their immunizations, in order to increase up to date (UTD) immunization status of our 24 months old patients to at least 90%.



PLAN:

QUESTIONS

- Are all of the patients documented in the IIS as "Forever Pediatrics" still our patients?
- Are all of our patients 19-23 months of age in the IIS, with complete and correct immunization information?
- Are there correct addresses and phone numbers for these patients in the IIS?

PREDICTIONS

We will have patients on our recall list who are no longer our patients. We will have patient records in the IIS which do not match our patient chart immunization records. There will be some incorrect records and some incomplete records. We will need to update patient demographics for many of these patients.

PLAN FOR CHANGE OR TEST: WHO, WHAT, WHEN, WHERE

(Tasks: Prior to Monday morning, Dan (LPN) will generate the list of our patients in the IIS who are 19-23 months of age and are at least 90 days past due for 1 or more immunizations). By Friday, Dan and Jan (Admin) will review the list. They will inactivate those patients with documentation that they are no longer our patients. Immunization records in IIS for remaining patients on list will be compared with our patient records. Any additional/corrected information from our patient records will be added to the IIS, including updated demographics (addresses, phone numbers, e-mails, if available).

PLAN FOR COLLECTION OF DATA: WHO, WHAT, WHEN, WHERE

Dan and Jan will maintain a log as they conduct their review. They will record reasons for the changes made to the original recall list (i.e., patients inactivated, additional doses of vaccines entered into IIS, corrected vaccines and/or vaccination dates, updated demographics).



DO: CARRY OUT THE CHANGE OR TEST; COLLECT DATA AND BEGIN ANALYSIS. REPORT THE RESULTS OF YOUR TEST HERE. Describe observations, problems encountered, and special circumstances.

Dan and Jan each spent at least 1 hour each day that week reviewing the ≥ 90 days recall list of 150 patients aged 19-23 mos. They found that patients had not been inactivated in the IIS when they left our practice (staff didn't know to do that). Found that HiB vaccine was inaccurate in IIS (Entered as HiB NOS, rather than HiB PRP-OMP). Algorithm in IIS showed some patients on list not actually UTD because vaccine given in our practice at wrong interval. Many patients had incorrect addresses, phone numbers in IIS (and no e-mails had been entered initially).

STUDY: COMPLETE ANALYSIS OF DATA; SUMMARIZE WHAT WAS LEARNED

This work was very time consuming (10 hours) but necessary to improve quality of information being used for appropriate recall activity. Of the original recall list, 80 patients remain (20 inactivated because documented as no longer our patients, 30 had incorrect HiB data entered so looked like a 4th dose was needed but the series was complete, 10 records had dates edited which then made them up to date (5 of those were foreign records with month and day switched), 10 had additional doses of vaccine given at our practice which were not in the IIS. Outreach outcomes would have failed because of outdated addresses and phone numbers in IIS which would be used to generate the address labels and phone list.

ACT: ARE WE READY TO MAKE A CHANGE? Modifications or refinements to the test? PLAN FOR THE NEXT CYCLE

We are not ready to make change. Findings will be shared by Dan and Jan at our monthly practice meeting, to discuss ways to improve IIS data quality. Next cycle - generate recall using address labels for recall letters, phone list for calls and e-mail list, depending on patient reminder/recall preference in the IIS. Could consider as 3 simultaneous PDSA cycles.