

How to Be a Quality Improvement Coach

Tablet-based Training

Workbook and Resources

Name: _____







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How to Be a QI Coach Tablet Training Course Overview

Welcome to this course on How to Be a Quality Improvement (QI) Coach in the Zim-TTECH programme. This course consists of a set of sessions and resources to support you in being a successful coach to your QI teams, and to help make this aspect of your work rewarding.

Whether you are a new coach or have been working in this field for a while, these resources can support your work by refreshing your memory on the basics, giving you new ideas and encouragement, and providing tools for you to use and share with on-site teams. This training has been organised into six short, practical sessions with content that you can directly use in your work.

These are user-friendly materials, developed with the recognition that Zim-TTECH QI coaches have many roles and responsibilities. We hope that this is an enjoyable learning experience for you!

How to Use this Workbook

This workbook is intended to accompany the How to Be a QI Coach Tablet Training; it provides pages to jot notes as well as structured spaces for you to respond to questions and activities in the training.

Each session includes a pre- and post-test, and activities with written responses. Use the corresponding pages in this workbook to write responses to questions during the session and to jot down any notes or questions you have.

The last section of this workbook includes tools and resources mentioned in the tablet training; however the workbook does not stand alone as a learning tool. Rather, you should use it as you go through each session in the tablet course.

Overview

This course consists of six sessions that follow the steps of a QI project and provide guidance to you in your role as a coach working with facility teams. The sessions are presented in a specific sequence; we recommend you proceed through each session in order. Afterwards, you can revisit sessions, or segments of sessions, as desired.

You may have received QI training in the past. If so, this training will serve as a refresher for you. It will help you to expand your understanding of QI concepts, and to put what you have learned into the context of your day-to-day work. If this is your first QI training, the sessions here will provide you with a basic understanding of QI concepts and theory, and show you how to apply them in your role as a QI coach.

There are a few references in the sessions to 'LARC' or the clinic-laboratory interface (CLI) initiative. For those not familiar, LARC refers to the Laboratory African Regional Collaborative. They have provided training and mentorship for the Ministry of Health and Child Care CLI to help scale up viral load monitoring in Zimbabwe. You can read more about LARC and their work on their website at https://larccqi.org. In this training we have shared some of the LARC's tools, as well as tools from Zim-TTECH, I-TECH, and other sources.

Course Aim and Objectives

The aim of this course is to build your skills to help you successfully coach your QI teams, and to help make QI coaching a rewarding aspect of your work.

By the end of this course, you will be able to:

- Demonstrate effective coaching skills in facilitating the establishment and ongoing activities of a QI team.
- Access available QI tools and provide them to your QI team as needed.
- Infuse your enthusiasm for QI throughout your work in health care.

Session Outline

- Session 1: Introduction to Quality Improvement Coaching
- Session 2: First Steps in Quality Improvement Coaching
- Session 3: How to Coach on Setting Aims and Measures
- Session 4: How to Coach on Problem Analysis
- Session 5: How to Coach on Generating Ideas for Change and Testing Ideas with PDSA
- Session 6: Coaching Your Teams in Sustaining Gains/Next Steps for Quality Improvement Coaching

Course Material and Structure

All of the learning materials for this course have been loaded on your tablet, so you will not need an internet connection. You will have this paper workbook, in which to fill in answers and take notes. Additional resources are included at the end of each session on the tablet and at the end of this workbook.

Note that there are some diagrams that may be easier to read if you rotate your tablet for landscape view.

You will need about 1–2 hours to complete all of the learning activities for each session. Short preand post-tests are included with each session. These are for your use only; you will not be turning them in. However, you can use them to identify content areas that you may need to review further. Remember to have your workbook and a pen or pencil handy as you go through the session activities.

Quality Improvement Expert Coaches

Throughout the training you will hear from experienced QI coaches, who will share information, tips and inspiration. We would like to thank all of these coaches for providing their wisdom and motivation (listed in order of appearance):

- Xolani Msimanga, Zim-TTECH District Site Improvement and Community Linkages Focal Person
- Jacky Samushonga, Zim-TTECH District Site Improvement and Community Linkages Focal Person
- Romana Katekwe (Roe), Zim-TTECH Quality Improvement Officer
- Brian Moyo, Zim-TTECH District Site Improvement and Community Linkages Focal Person
- Shay Blumer-Miroite, I-TECH Senior QI Advisor
- Francie Petracca, I-TECH Senior QI Advisor
- Nicholas Makombe, Zim-TTECH Provincial Focal Person
- Sonia Chikanya, Zim-TTECH District Site Improvement and Community Linkages Focal Person
- Tendai Chigura, Zim-TTECH Provincial Focal Person
- Edson Chidovi, Zim-TTECH Clinical Senior Program Manager
- Alex Mutambu, Zim-TTECH District Strategic Improvement Focal Person
- Alleta Makatore, Zim-TTECH Program Coordinator

Session One: Introduction to QI Coaching



Session Activities and Notes

1.	Which of the following tasks should the QI coach be expected to do?			
2	Score What are 2 or 2 things you should do in propagation for an initial facility visit as a Ol sough?			
2.	What are 2 or 3 things you should do in preparation for an initial facility visit as a QI coach?			
	Score			
3.	What is the ideal number of people that should be on a facility QI team?			
	Score			
	J. C.			

	4.	It is a good idea to take a moment to reflect on your own feelings and motivation around doing QI coaching work. Please take a few minutes to write some thoughts in your notebook about how you anticipate QI coaching work will affect your professional (and personal) life. After you have written your thoughts, select the point on the scale that best indicates how you are feeling.
		Score
	5.	On the Coaches' Monthly Reporting Tool, what are the key elements you should be documenting?
		Score
Ses	sion	1 Pre-test Self-assessment Total Score
wit		flection: Thinking about your past experiences (whether personal or work-related) in working ams or groups, what wisdom and skills from those experiences do you bring to your role as a h?
Cas	e St	udy: Omega Clinic
	1.	What QI team roles could Sekai begin to envision for the various people that have been identified?

2.	If you have already begun working with a QI team, take a moment to write in your notebook a list of the roles and responsibilities for the QI team members. Look at your list to see if there are any adjustments that might be useful for making sure all of the important QI tasks are being covered.

Post-test Self-assessment: Use the space below to write your responses to questions as instructed in the quiz. Track your score for each question and take note of any content areas that you answered incorrectly. If you found that you had some gaps in your knowledge or understanding, think about what you can do to fill in those gaps for yourself, and what resources you can access.

 Which of the following tasks should the QI coach be expected to do? Score		
2.	What are 2 or 3 things you should do in preparation for an initial facility visit as a QI coach?	
	Score	
3.	What is the ideal number of people that should be on a facility QI team?	
	Score	
4.	It is a good idea to take a moment to reflect on your own feelings and motivation around doing QI coaching work. Please take a few minutes to write some thoughts in your notebook about how you anticipate QI coaching work will affect your professional (and personal) life. After you have written your thoughts, select the point on the scale that best indicates how you are feeling.	
	Score	
5.	On the Coaches' Monthly Reporting Tool, what are the key elements you should be documenting?	
	Score	

Session 1 Post-test Self-assessment Total Score____

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Session Two: First Steps in QI Coaching



Session Activities and Notes

What are the key steps in conducting a QI project?		
Conv.		
Score When should you approach district and provincial offices about the QI project?		
Score		
Why is documentation of QI project activities important for the development of a 'chang package'?		
Score		
Why is it a good idea for facilities to have a QI corner?		

Preparing for the QI Site Visit

	nearing Roe share how she prepares for a coaching visit, what did you learn that will help you see for your site visits?
Case S	tudy: Characterizing the Problem Using Data
1.	If you were Sekai, what would be some things you would take care of in preparation for this initial visit?
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2.	Sekai arrives at Omega Clinic at her scheduled time and finds that there is a backlog of clients waiting to be seen. She is frustrated because she was planning to have her meeting with the newly formed QI team. What should Sekai do?
3.	Once the team is gathered, if you were Sekai, how would you work with the team to characterise the problem using data?
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Reflecting on Documentation

Take a moment to think about how documentation has impacted your work. Answer the questions below in your notebook.

1. What are some ways that you have learned the importance of documentation?

2.	How has documentation made your life easier?		
3.	How has a lack of documentation posed a challenge?		

Action Plan

Instructions: Use this action plan to help you think through the steps of coaching your team's Quality Improvement project. It will be useful to return to this planning tool so you can add to it as you consider what you will need to do for each of the areas you will be coaching.

Topic Area	Specific Activities	Time Frame	Resources /Support Needed
Starting with			
a team			
Baseline,			
problem analysis			
Change ideas, PDSAs			
Ongoing support and sustaining			
gains			

Post-test Self-assessment: Use the space below to write your responses to questions as instructed in the quiz. Track your score for each question and take note of any content areas that you answered incorrectly. If you found that you had some gaps in your knowledge or understanding, think about what you can do to fill in those gaps for yourself, and what resources you can access.

1.	What are the key steps in conducting a QI project?		
	Score		
2.	When should you approach district and provincial offices about the QI project?		
	Score		
3.	Why is documentation of QI project activities important for the development of a 'change package'?		
	Score		
4.	Why is it a good idea for facilities to have a QI corner?		
	Score		

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Session Three: How to Coach on Setting Aims and Measures



Session Activities and Notes

	In a SMART aim statement, what do the letters SMART stand for?
	Score
	Which of these is a SMART aim statement?
	Score
	What are the three types of measures that are useful to track for a quality improvement project?
	Score
•	Score Your clinic is aiming to reduce infection rates by improving the frequency of hand-washing among health workers. The clinic will track the project outcome indicator, infection rates. You intend to conduct some PDSAs on a change idea involving posting reminders in consultation rooms. What might be some measures that would be useful as part of the PDSAs to help the clinic learn about the effectiveness of the change idea?
•	Your clinic is aiming to reduce infection rates by improving the frequency of hand-washing among health workers. The clinic will track the project outcome indicator, infection rates. You intend to conduct some PDSAs on a change idea involving posting reminders in consultation rooms. What might be some measures that would be useful as part of the
•	Your clinic is aiming to reduce infection rates by improving the frequency of hand-washing among health workers. The clinic will track the project outcome indicator, infection rates. You intend to conduct some PDSAs on a change idea involving posting reminders in consultation rooms. What might be some measures that would be useful as part of the PDSAs to help the clinic learn about the effectiveness of the change idea?

Coaching on Setting Aims: Think about something you want to improve in your life. It could be health related (lowering your blood pressure), work related (meeting deadlines), or family related (getting your kids to bed on time). In your notebook, write a SMART personal aim statement for what you would like to improve.				
Case S	tudy: Setting Measures for the Omega Clinic QI Project			
1.				
	the Omega Clinic from 5.5% to 14% by 30 July 2019. Is this a SMART aim? Why or why not?			
2.	Looking at the data and the aim, what is the primary outcome measure that the Omega Clinic team will track towards their aim?			
3.	What are some possible process measures that might be considered for the Omega Clinic's QI project?			

incorre	iz. Track your score for each question and take note of any content areas that you answered ectly. If you found that you had some gaps in your knowledge or understanding, think about you can do to fill in those gaps for yourself, and what resources you can access.
1.	In a SMART aim statement, what do the letters SMART stand for?
	Score
2.	Which of these is a SMART aim statement?
	Score
3.	What are the three types of measures that are useful to track for a quality improvement project?
	Score
4.	Your clinic is aiming to reduce infection rates by improving the frequency of hand-washing among health workers. The clinic will track the project outcome indicator, infection rates. You intend to conduct some PDSAs on a change idea involving posting reminders in consultation rooms. What might be some measures that would be useful as part of the PDSAs to help the clinic learn about the effectiveness of the change idea?
	Score
5.	In a QI project, outcome measures are tracked over regular intervals (daily, monthly, or weekly), rather than by simply collecting pre—post data.
	Score
Sessio	n 3 Post-test Self-assessment Total Score

Post-test Self-assessment: Use the space below to write your responses to questions as instructed in

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Session Four: How to Coach on Problem Analysis

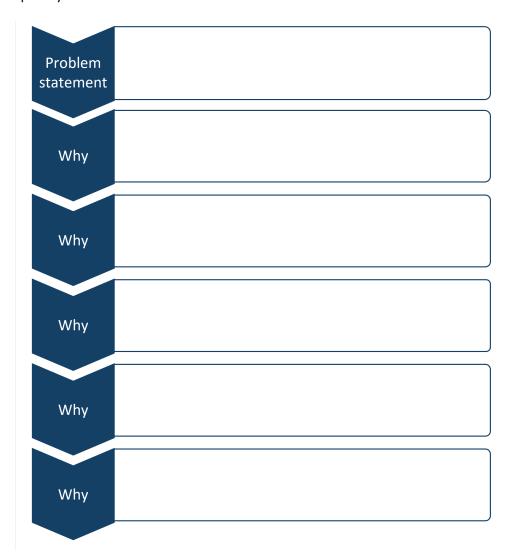


Session Activities and Notes

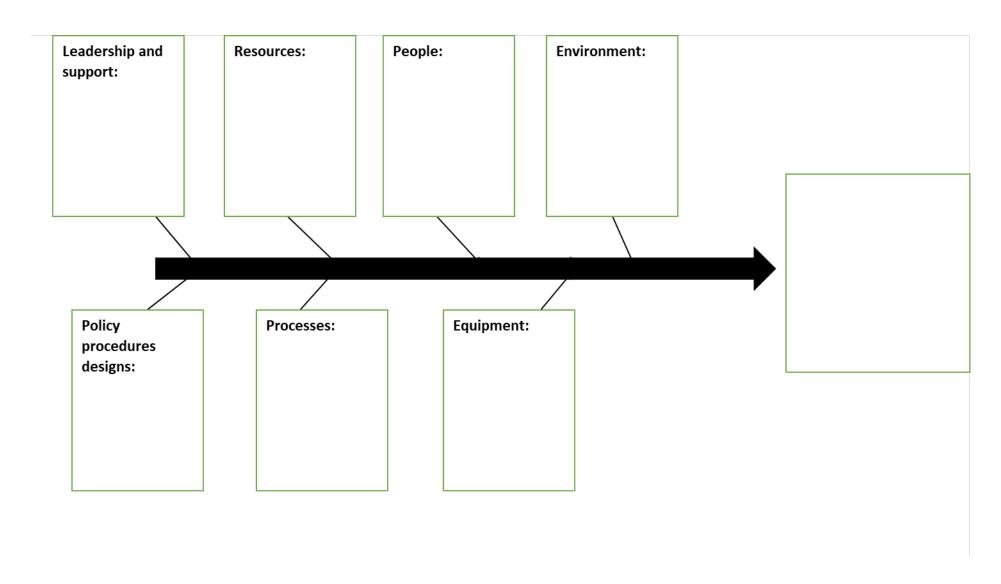
1.	Match the tool with its purpose.
	Score
2.	Why should the team go through the effort of conducting problem analysis, rather than just trying some interventions to make improvements?
	Score
3.	Review the Process Map shown. What do you see in the map that might offer possibilities for improving the process?
	Score
4.	True or false? You should always complete a minimum of two problem analysis tools to effectively improve quality.
	Score
Sessio	n 4 Pre-test Self-assessment Total Score

Practicing the 5 Whys

Problem: Recently, there has been a number of adolescent patients who have been lost to follow up. Why?



Fishbone Exercise: In Session 3, you wrote a SMART aim statement in your notebook for what you would like to improve. Please look at your aim statement and use the Fishbone template to analyse the problem related to your aim.



coachi	ng Process Mapping: As you listen to the selection, reflect on what you observe about ng a team through this activity. Jot down in your notebook your observations and key points ilitating a Process Mapping activity.
Case S	tudy: EICT Process Map
1.	From your experience with HIV index testing, can you identify points along the process where the clinic could try out ideas for improvement?
2.	Take the following question through 5 Whys and write in your responses in notebook:
	Why are patients agreeing to HIV index testing but then not giving names of contacts?

Post-test Self-assessment: Use the space below to write your responses to questions as instructed in the quiz. Track your score for each question and take note of any content areas that you answered incorrectly. If you found that you had some gaps in your knowledge or understanding, think about what you can do to fill in those gaps for yourself, and what resources you can access.

1.	Match the tool with its purpose.				
	Score				
2.	Why should the team go through the effort of conducting problem analysis, rather than just trying some interventions to make improvements?				
	Score				
3.	Review the Process Map shown. What do you see in the map that might offer possibilities for improving the process?				
	Score				
4.	True or false? You should always complete a minimum of two problem analysis tools to effectively improve quality.				
	Score				
Sessio	n 2 Post-test Self-assessment Total Score				

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Session Five: How to Coach on Generating Ideas for Change and Testing Ideas with PDSA



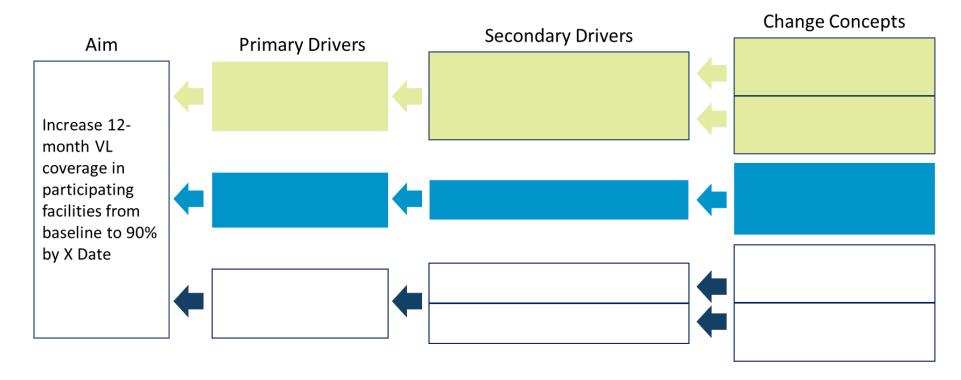
Session Activities and Notes

1.	What does 'PDSA' stand for?				
	Score				
2.	Which of these QI activities involves PDSA?				
	Score				
3.	Where do change ideas come from? List as many sources as you can think of.				
	Score				
4.	What is a driver diagram?				
	Score				
5.	Why is it important to document PDSA cycles?				
	Score				
6.	How many PDSA cycles should be completed for a change idea?				
	Score				
sior	5 Pre-test Self-assessment Total Score				

Using the Driver Diagram: Using this list of components, fill in the blank boxes with each of the components, based on whether they are Primary Drivers, Secondary Drivers, or Change Ideas:

- Efficient transport of samples and results
- HCW training and refreshers on VL
- Sensitization of clients
- Post job aids for VL testing & management
- Identify focal person to communicate with labs
- Available stocks of consumables
- Create WhatsApp groups for peer support
- Ongoing mentorship and supervision
- Work with CARG teams to encourage rotating med-pickup person
- Skilled health care providers
- Maintain a tracking list of consumables
- Clinic-lab coordination
- Client engagement

Improving HIV viral load testing and management (August 2021)



Creative Thinking: Some of these activities to generate change ideas will call on participants to 'think outside the box' and share ideas in the group.

Think about creative thinking activities you have experienced in the past, whether as a coach or as a participant.

Based on your experience, write answers to the following questions in your workbook:

Questions:

- What idea-generating activities seem feasible to do with your teams? How likely will your team members be able to engage?
- Which of these activities might be a good fit for your coaching style and comfort level?

PDSA Experiences and Issues: Take a moment to think about your experiences with QI activities, either as a coach or as a team member. Write responses to the following questions in your workbook.

- How have you or your QI teams conducted PDSAs?
- What are some examples of change ideas you or your teams have tested?
- In these examples, what has gone well? What difficulties have arisen?

Reflecting on the Marshmallow Challenge: Thinking back to the points made in that talk, how do you think they relate to the content we have been reviewing in this session?				
-				
Cas	e St	:udy: Te	sting Ideas	
		As a m	ember of the Omega Clinic QI team, write your responses in your workbook showing ou would respond to each of the brainstorming questions, and give a little explanation	
		1.	What kind of animal would the problem be?	
		2.	What colour would the problem be?	
		3.	What food would the problem be?	
	2.		experience, which of these change ideas would you choose to test first, based on timpact and least effort?	

3.	What documentation should Sekai remind the team to complete now?			
4.	Complete the first three rows of the PDSA trac planning row, choose one idea for the Omega	-		
	QUALITY IMPROVEMENT	TOOL – PDSA TESTS		
/leeti	ng Date: Team Membe	rs Present:		
nstru	uctions:			
	has met to discuss the problem you want to address, analyzed the possible causes of the problem, and generated ideas to try to fix the problem.			
□ V	plem: What problem are you trying to improve? What syour aim statement?			
□ V p	nge idea: What one idea (see list on other side of this paper) are you going to test to see if it helps mprove the problem?			
PDS	A planning: Plan: What will you do? Who will be responsible for it?			

Post-test Self-assessment: Use the space below to write your responses to questions as instructed in the quiz. Track your score for each question and take note of any content areas that you answered incorrectly. If you found that you had some gaps in your knowledge or understanding, think about what you can do to fill in those gaps for yourself, and what resources you can access.

	What does 'PDSA' stand for?
	Score
2.	Which of these QI activities involves PDSA?
	Score
3.	Where do change ideas come from? List as many sources as you can think of.
	Score
4.	Score What is a driver diagram?
4.	
4. 5.	What is a driver diagram? Score
	What is a driver diagram? Score
	What is a driver diagram? Score
	What is a driver diagram? Score
	What is a driver diagram? Score Why is it important to document PDSA cycles?

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Session Six: Coaching Your Teams in Sustaining Gains



Session Activities and Notes

	Typically, once a project has seen improvement, the gains made are easily maintained.
1.	Typically, office a project has seen improvement, the gains made are easily maintained.
	Score
2.	Ongoing coaching should include monthly documentation using the QI coaches' monthly reporting tool.
	Score
3.	What are some causes of QI projects not maintaining their improvements?
4.	Score What are some keys to sustaining improvements that teams should keep in mind during QI projects?
4.	What are some keys to sustaining improvements that teams should keep in mind during QI
4.	What are some keys to sustaining improvements that teams should keep in mind during QI
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4.	What are some keys to sustaining improvements that teams should keep in mind during QI
4.	What are some keys to sustaining improvements that teams should keep in mind during QI

	You Have Reached Your Aim: What do you think causes declines in improvements that have
been a	chieved?
Case S	tudy: Declining Numbers at Omega Clinic
1	What do you observe in the Omega Clinic run chart?
1.	what do you observe in the Onlega Chilic run chart:
2.	What do you think might be some reasons for the numbers declining in the Omega Clinic
	index testing project?

- 3. As the Omega Clinic QI coach, what should Sekai do?
- 4. What do you think would be helpful as next steps for the Omega Clinic QI team in order to integrate the new systems that showed success?

5. Write down what Sekai should document in the monthly reporting tool for her visit with the Omega Clinic QI team. Add details for the quick monthly check questions and the site visit. (For this exercise, it is fine to make up dates.)

Zim-TTECH Quality Improvement Coaches' Monthly Report

Instructions: Please complete a report monthly. Track every site visit that included QI coaching in the table below. Send by email to your faculty and cc-Romana on the last day of each month. (Please no paper copy – You can type it in off-line on your computer and upload it when you have network.)

Report date:	Month/Year	Coach	
-			

Quick monthly check:

What are some things that are going well with your QI coaching? (Rapport with facility teams, interventions that seem to be working, lessons learned)

What things have been challenges for you in QI coaching this month?

What questions do you have about how to do QI coaching?

Site visits: Please complete one block of the table for each site visit conducted. The first block is an example.

Date of visit	Facility and team members present	QI Activities conducted	Progress towards aims	
	Finding (include specifics, e.g. data)	Recommendation / Action Item	Timelines / By When	Responsible person/entity

Post-test Self-assessment: Use the space below to write your responses to questions as instructed in the quiz. Track your score for each question and take note of any content areas that you answered incorrectly. If you found that you had some gaps in your knowledge or understanding, think about what you can do to fill in those gaps for yourself, and what resources you can access.

1.	Typically, once a project has seen improvement, the gains made are easily maintained.
	Score
2.	Ongoing coaching should include monthly documentation using the QI coaches' monthly reporting tool.
	Score
3.	What are some causes of QI projects not maintaining their improvements?
	Score
4.	What are some keys to sustaining improvements that teams should keep in mind during QI projects?
	Score
Session	n 6 Post-test Self-assessment Total Score

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Resources and Tools

Zim-TTECH Quality Improvement Coaches' Monthly Reporting Tool

Fishbone diagram

5-Whys

Process mapping

Process mapping table

Impact/Effort Grid

Action Plan template

LARC Stakeholder Analysis

Model for Improvement

LARC Data Collection Plan

PDSA Tracking Tool

EICT Driver diagram example

IHI Using Change Concepts to Come Up with Ideas

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Report date:	Month/Year	Coach	
	•	well with your QI coaching? (Rappor g, lessons learned)	rt with facility teams,
What thi	ngs have been challenges for	you in QI coaching this month?	
What qu	estions do you have about ho	ow to do QI coaching?	

Site visits: Please complete one block of the table for each site visit conducted. The first block is an example.

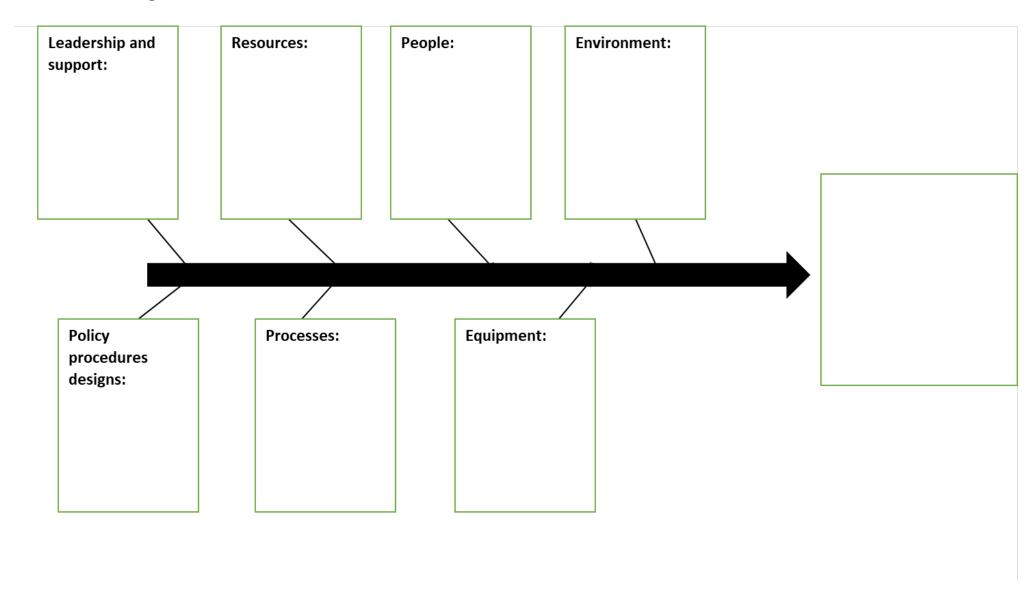
Date of visit	Facility and team members present	QI Activities conducted	Progress towards aims	
2 Feb 2021 (this block is an example)	Omega clinic. Team members present:	Initial meeting, sensitization, process mapping and process table, including some opportunities for improvement. Explained how to conduct baseline data collection.	Aim has been set: By May 31, 2021, VL testing coverage to improve to 85% from (Baseline data still to be collected)	
	Finding (include	Recommendation /	Timelines /	Responsible
	specifics, e.g. data)	Action Item	By When	person/entity
	VL results not documented in the green book. 15 results for the day of visit had not been recorded in green book.	-Documentation of result upon receipt from labIdentify one person responsible for keeping track of documentationTry this as a quick PDSA, document and adjust as needed.	9 Feb 2021	VL focal person
Date of visit	Facility and team members present	QI Activities conducted	Progress tow	vards aims

	Finding (include	Recommendation /	Timelines /	Responsible
	specifics, e.g. data)	Action Item	By When	person/entity
	specifics, e.g. data,	/ colon rem	by triicii	person, energy
Date of	Facility and toom	QI Activities conducted	Duograss tou	royde oime
	Facility and team	Qi Activities conducted	Progress tow	arus airiis
visit	members present			
	Finding (in alcoho	December detice /	Time alice and	Daama waikii
	Finding (include	Recommendation /	Timelines /	Responsible
	specifics, e.g. data)	Action Item	By When	person/entity
Data	Facility and trees		Due succes !	
Date of	Facility and team	QI Activities conducted	Progress tow	aras aims
visit	members present			
	Finding (include	Recommendation /	Timelines /	Responsible
	specifics, e.g. data)	Action Item	By When	person/entity
Date of	Facility and team	QI Activities conducted	Progress tow	ards aims
visit	members present			
	Finding (include	Recommendation /	Timelines /	Responsible
	specifics, e.g. data)	Action Item	By When	person/entity

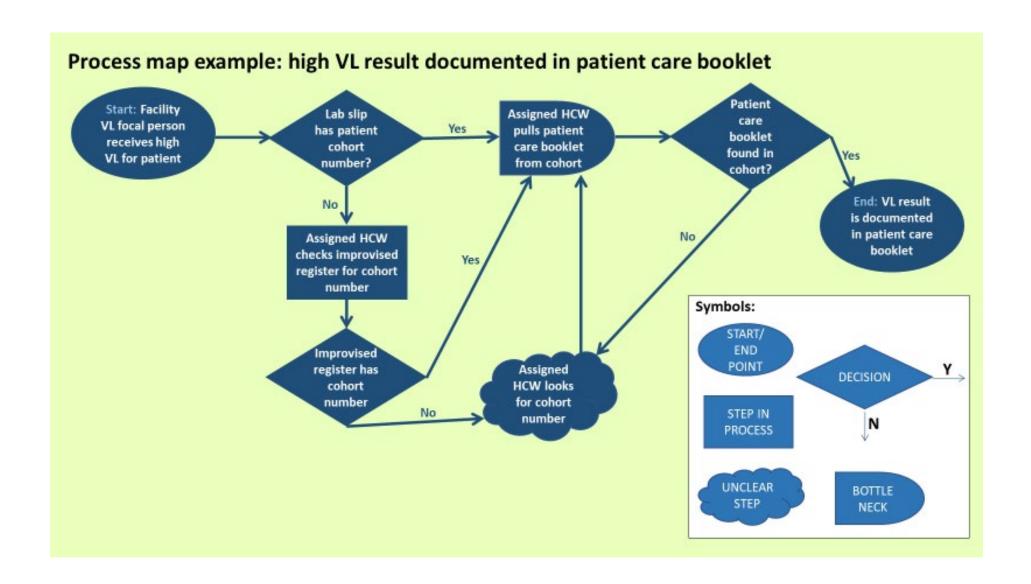
LARC Checklist: Optional to submit as part of this report, but may be handy to help as you plan your site visits.

When	Task
During project planning	☐ Schedule all mentorship visits ahead, for the entire project period
One week prior to the scheduled visit	 Finalize the visit objectives and agenda Confirm with the QI team lead and share the objectives and agenda Review the site's information (project outline and previous deliverables) Get ready for the visit (including preparing site data in an Excel spreadsheet, if necessary)
The day before the scheduled visit	Send a reminder to the facility to ensure staff awareness and readiness
On the day of the scheduled visit	□ Call the QI team lead before beginning travel to the site□ Plan to arrive 30 minutes ahead of schedule
Upon arrival on site	 Meet with the team lead to review the visit objectives and agenda; revise as necessary Check in with the head of the facility
During the visit	 □ Gather the team members around the Learning Board and review project progress; seek understanding, and implement corrective action as necessary □ Perform data quality checks – examine data collection/tally sheets to ensure accuracy and completeness, resolve inconsistencies in the data ○ Coaches may need to collect the data on paper before transferring them to Excel spreadsheet for analysis □ Review challenges and discuss possible solutions □ Check completion of all assigned deliverables (see next page); provide assistance and guidance as necessary □ Meet other stakeholders if necessary or when they are available; seek their collaboration and support
At the end of the visit	 Review visit objectives with the team and ensure they have been met Agree on action plans, including roles and responsibilities Confirm or agree on the time/date of the next visit Clarify any other expectations or questions, if any Summarize meeting notes, including areas for discussion during the next visit Check out with the head of the facility, if required Thank the team and leave

Fishbone Diagram



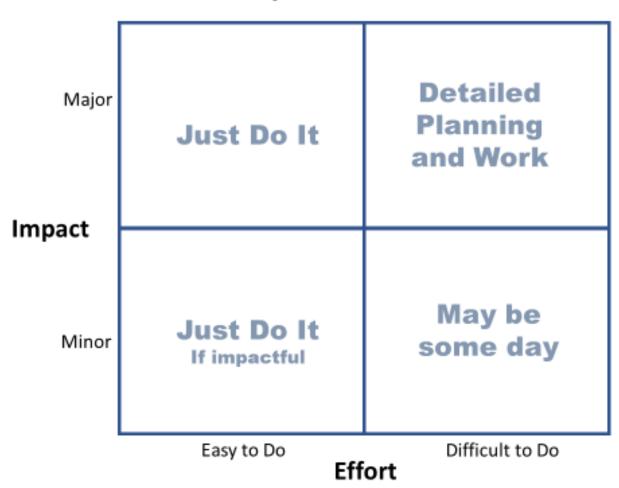
Problem statement	
Why	



Process Mapping Table

Process Step	What Happens?	Who is responsible?	Duration	Forms/logs	Opportunity for Improvement

Impact/Effort Grid



Action Plan

Instructions: Use this action plan to help you think through the steps of coaching your team's Quality Improvement project. It will be useful to return to this planning tool so you can add to it as you consider what you will need to do for each of the areas you will be coaching.

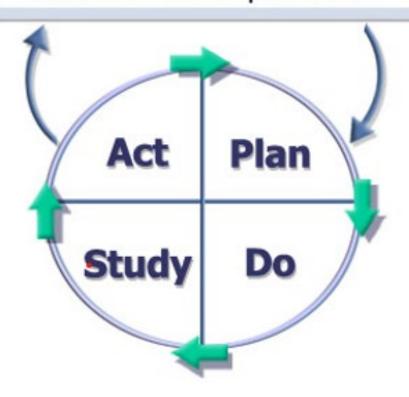
Topic Area	Specific Activities	Time Frame	Resources /Support Needed
Starting with			
a team			
Pacalina			
Baseline, aims,			
problem analysis			
Change ideas, PDSAs			
Oncein			
Ongoing support and			
sustaining gains			

Model for Improvement

What are we trying to accomplish?

How will we know that a change is an improvement?

What change can we make that will result in improvement?



Source: Langley et al. The Improvement Guide.

LARC Data Collection Plan

Who	 Who is responsible for the collection, display and analysis of the data? If a series of data needs to be collected by different cadres, 		
	map the process of data collection from beginning to end		
How Often	Specify data collection frequency - hourly, daily, weekly or monthly		
	Determine the collection cutoffs for the time frame selected.		
	 Consider the project metric and what makes sense in the collection cycle. When must the data be submitted for each cycle? 		
What	Specify what is included or excluded		
	Determine the data source and sample size		
	Draw the data collection log showing what data will be captured		
Where	Specify a location – e.g., a clinic, unit or department		
How	Given the log, will data be collected at time of seeing the patient or actual event (real-time) or collected retrospectively through chart or record review?		
Training	Who will be responsible for training the staff about the data collection?		
	Specify how, when and where.		
Sustainability—See Control Plan	Early in the project, determine who will own the process and the metric at project completion.		
	How will the metric be monitored when the project is complete? (See Control Plan)		

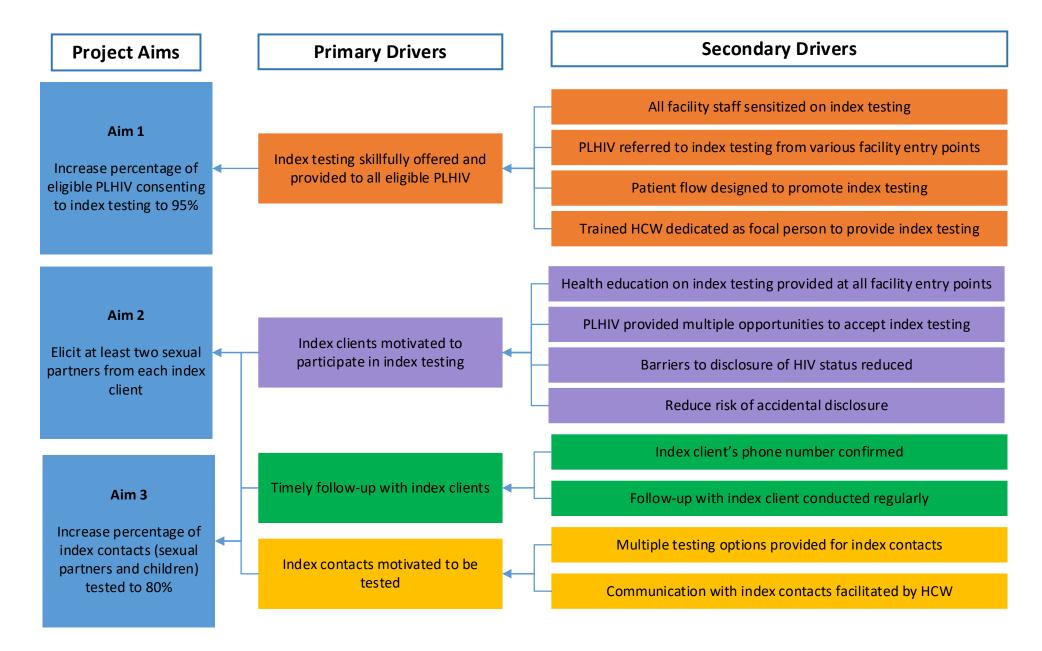
QUALITY IMPROVEMENT TOOL – PDSA TESTS

Meeting Date: Team Members	Present:
Instructions:	
 This tool is to be used for planning and reporting has met to discuss the problem you want to add problem, and generated ideas to try to fix the problem, and generated ideas to try or "test" with or one week), to try to address the problem. For only. (For regular ongoing use, complete all seconds cycles). 	ress, analyzed the possible causes of the oblem. The PDSA for a short period of time (e.g. 1 day, r this exercise, complete the shaded part
Problem:What problem are you trying to improve? What is your aim statement?	
 Change idea: What one idea (see list on other side of this paper) are you going to test to see if it helps improve the problem? 	
 PDSA planning: Plan: What will you do? Who will be responsible for it? When will you do it? What will be your measure of the success of the PDSA? Who will document it? 	
 Do: (fill this out after you conduct the test) Was it implemented as planned? In what ways was it different? Study: How did the test work out? How did the test affect what you were measuring? Act: If the test appeared to help, what adjustments do you think might help make the improvement even better? (e.g. adjust the intervention, try in a different location or with different clients, test a larger number or for longer time. 	
 If you adjust, repeat the test starting with Plan). 	

learned from it)

PDSA #2 (complete another set of descriptions of the Plan, Do, Study, Act cycle, and what was

INDEX TESTING KEY DRIVER DIAGRAM



Open School

Using Change Concepts to Come Up with Ideas*

(To learn more, see *QI 102*: *How to Improve with the Model for Improvement.*)

Eliminating waste, improving workflow, optimizing inventory (1-27, 40-45, 71)

Enhancing producer-customer relationship and changing the work environment (28-40)

Better managing time (46–50)

Managing variation, designing systems to avoid mistakes (51-62)

Design of products and services (63-70, 72)

- Eliminate things that are not used
- 2. Eliminate multiple entries
- 3. Reduce or eliminate overkill
- 4. Reduce controls on the system
- 5. Recycle or reuse
- 6. Use substitution
- 7. Reduce classifications
- 8. Remove intermediaries
- Match the amount to the need
- 10. Use sampling
- 11. Change targets or set points
- 12. Synchronize
- 13. Schedule into multiple processes
- 14. Minimize handoffs
- 15. Move steps in the process close together
- 16. Find and remove bottlenecks
- 17. Use automation
- 18. Smooth workflow
- 19. Do tasks in parallel

- 20. Consider people as in the same system
- 21. Use multiple processing units
- 22. Adjust to peak demand
- 23. Match inventory to predicted demand
- 24. Use pull systems
- **25.** Reduce choice of features
- 26. Reduce multiple brands of the same item
- 27. Give people access to information
- 28. Use proper measurements
- 29. Take care of basics
- 30. Reduce demotivating aspects of the pay system
- 31. Conduct training
- 32. Implement cross-training
- 33. Invest more resources in improvement
- 34. Focus on core process and purpose
- 35. Share risks
- 36. Emphasize natural and logical consequences

- 37. Develop alliances and cooperative relationships
- 38. Listen to customers
- 39. Coach the customer to use a product/service
- 40. Focus on the outcome to a customer
- 41. Use a coordinator
- 42. Reach agreement on expectations
- 43. Outsource for "free"
- 44. Optimize level of inspection
- 45. Work with suppliers
- 46. Reduce setup or startup time
- 47. Set up timing to use discounts
- 48. Optimize maintenance
- 49. Extend specialist's time
- 50. Reduce wait time
- 51. Standardization (create a formal process)
- 52. Stop tampering
- 53. Develop operation definitions
- 54. Improve predictions

- 55. Develop contingency plans
- 56. Sort product into grades
- 57. Desensitize
- 58. Exploit variation
- 59. Use reminders
- 60. Use differentiation
- 61. Use constraints
- 62. Use affordances
- 63. Mass customize
- 64. Offer product/service anytime
- 65. Offer product/service anyplace
- 66. Emphasize intangibles
- 67. Influence or take advantage of fashion trends
- 68. Reduce the number of components
- 69. Disguise defects or problems
- 70. Differentiate product using quality dimensions
- 71. Change the order of process steps
- 72. Manage uncertainty not tasks

^{*}From: Langley GL, Moen R, Nolan KM, Nolan TW, Norman CL, Provost LP. *The Improvement Guide: A Practical Approach to Enhancing Organizational Performance*. 2nd ed. San Francisco, California: Jossey-Bass Publishers; 2009.

