

Quality Improvement Plan

Develop a QI plan to provide structure and timelines to guide your team through quality improvement activities.

Tip: To support your practice team with implementing quality improvement activities, refer to the **EMPHN Quality Improvement Learning Module**: www.emphn.org.au/quality-improvement

Goal: What are you trying to accomplish?

Tip: Create a **SMART** goal (Simple, Measurable, Achievable, Realistic and Timely). How good do you want to be and by when?

Measure: What data will you use to track your improvement journey?

Tip: Consider how you will use the EMPHN practice report and POLAR to capture the data needed to measure your activities undertaken. Refer to **Appendix A** to record your data throughout your improvement journey.

Activities/Ideas: What changes will you make that will lead to an improvement (small steps)?

Tip: Capture a list of practical steps to undertake and test using PDSA cycles. Refer to **Appendix B** for a PDSA template to record your activities.

Activity/Ideas	Date Completed	Notes

Appendix A

Monthly Data Report

Use this spreadsheet to capture your baseline and monthly data to track your improvement journey. It is important to capture your baseline data before you start any improvement activity.

Measure	Month					
	Baseline Data					
Active Patients						
RACGP Patients						

Notes _____

Appendix B

PDSA Template

Activity/Idea:

PDSA Cycle:

Plan: What exactly will you do? Include what, who, when, where, prediction and date to be collected.

Do: Was the plan executed? Document any unexpected events or problems.

Study: Record, analyse and reflect on the results.

Act: What will you take forward from this cycle? (What is your next step/PDSA cycle?)
