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| **Plan-Do-Study-Act planning tool** |

**PDSA title**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

New PDSA  Linked to a previous PDSA (title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_)

**Plan:**

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| **What are we going to do?** | **Person responsible** | **When to be done?** | **Where to be done?** | **For how long?** |
|  |  |  |  |  |
| **What prompted this change?** | | | | |
|  | | | | |
| **Who are we going to involve?** | | | | |
| Staff? If yes, who? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Residents? If yes, who? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Anybody else? If yes, who? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | |
| **How long will the change be tested for?** | | | | |
|  | | | | |
| **How will the impact of the change be measured?** | | | | |
| Routinely collected measures: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  One-off measures: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Staff feedback: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Resident feedback: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | |
| **Predict what will happen when the change is carried out** | | | | |
| **What will improve?** | **What could go wrong?** | | | |
| **Who will assess what happened?** | **Date/time to assess this** | | | |
|  |  | | | |
| **What preparation is needed before the change is tested:** | **Person responsible** | **When to be done?** | **Where to be done?** | **How long?** |
|  |  |  |  |  |
|  |  |  |  |  |
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|  |  |  |  |  |

Date/time of the meeting to review this PDSA: \_\_\_\_\_\_\_\_\_­­­­­\_\_\_\_\_\_

**Do:**

Date of the test: \_\_\_\_\_\_\_\_\_ Did the test go as planned?  Yes  No

|  |  |
| --- | --- |
| **Describe what happened** | |
|  | |
| **Report on collected measures** | **Did anything else happen?** |
|  |  |

**Study:**

|  |  |
| --- | --- |
| **Describe how the results compared with prediction** | **How did this compare to previous cycle (if applicable)?** |
|  |  |
| **What was learnt?** | **How could this be done better?** |
|  |  |

**Act:**

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| **What is the next step?** |
| Adapt/develop this PDSA  Test this PDSA for longer  Test this PDSA on more people  Introduce this as daily routine  Stop this PDSA  Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **Describe what will happen next** |
|  |