



Quality Council Region 4 Urinary Tract Infection (UTI) Learning Collaborative Call 3: Timely Medical Care May 30, 2024

Developed and Presented by Office of Community Quality Improvement in collaboration with the Office of Integrated Health Supports Network at the Virginia Department of Behavioral Health and Developmental Services



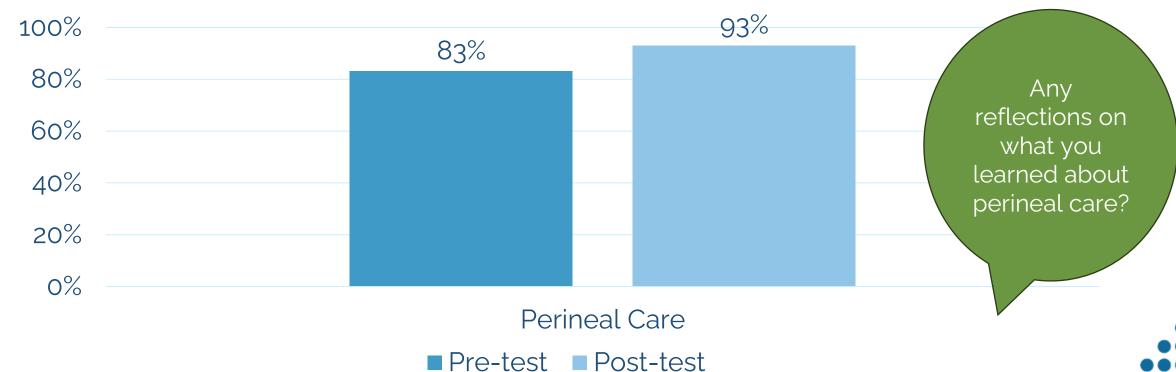
| Agenda | Presenter | Time |
|---|---------------------------------|---------------|
| 1. Review proper perineal care change and data | Pebbles Brown & Participants | 15 minutes |
| 2. Third Change: Timely Medical Care for UTIs | Tammie Williams, RN | 60 minutes |
| 3. How to do a Plan-Do-Study-Act (PDSA) on this change. | Pebbles Brown | 20 minutes |
| 4. Planning and sharing time | Participants | 10 minutes |
| 5. Q&A, Adjourn | Group | 5 minutes |





Let's Review →









Share and Report out!

Handwashing / Hand Hygiene

Since April....

- How have you promoted handwashing?
- Were staff receptive to the information?
- Did you study your change?
- Did staff demonstrate increased knowledge and competency?
 - Did you use the pre-test/post-test that was provided?
- Did staff apply the information to their work?
- What were the results?

Perineal care

- What did you do re: perineal care?
 - Did you train staff in perineal care?
 - What happened? What worked well?
 - What were some barriers? If you overcame them, how so?
 - What did you learn?
 - Did you change <u>anything else</u>? *E.g., proper supplies, new P&P?*
- Did you use the plan-do-study act (PDSA) worksheet?



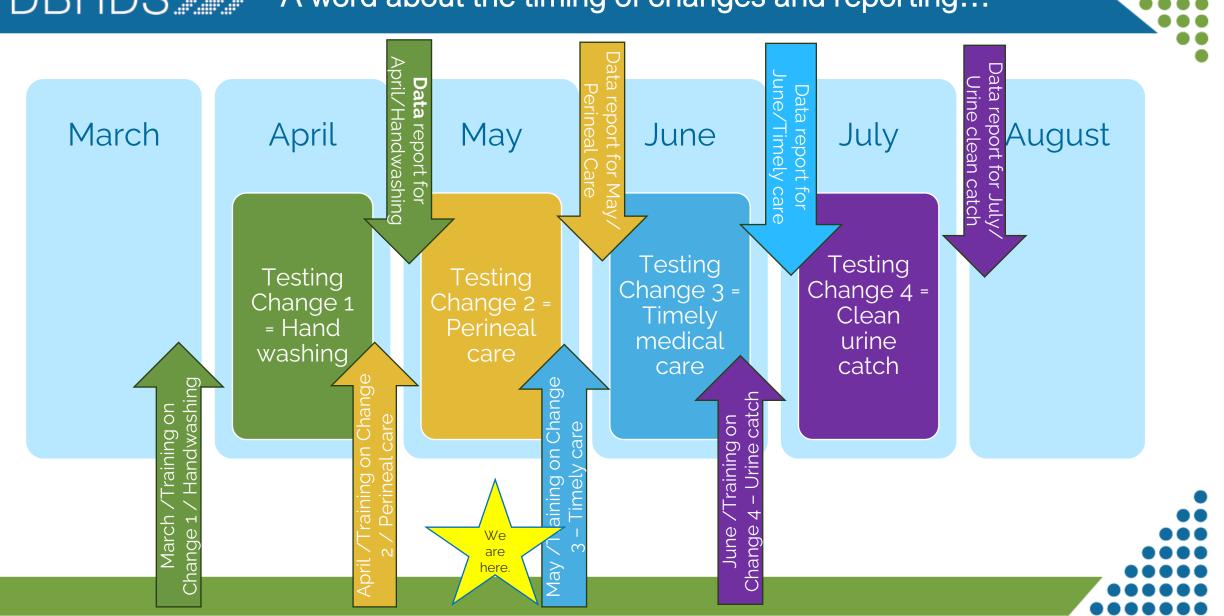


Sharing & Good ideas





A word about the timing of changes and reporting...



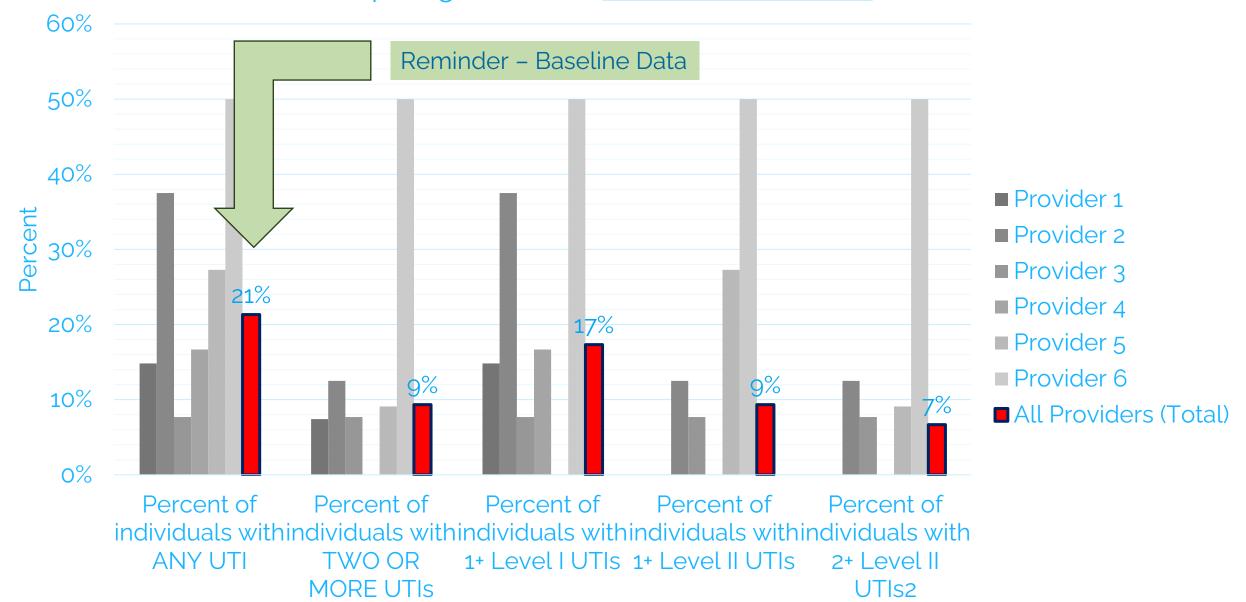


Review of data collection and reporting for: April 2024 Data [reported in early May]

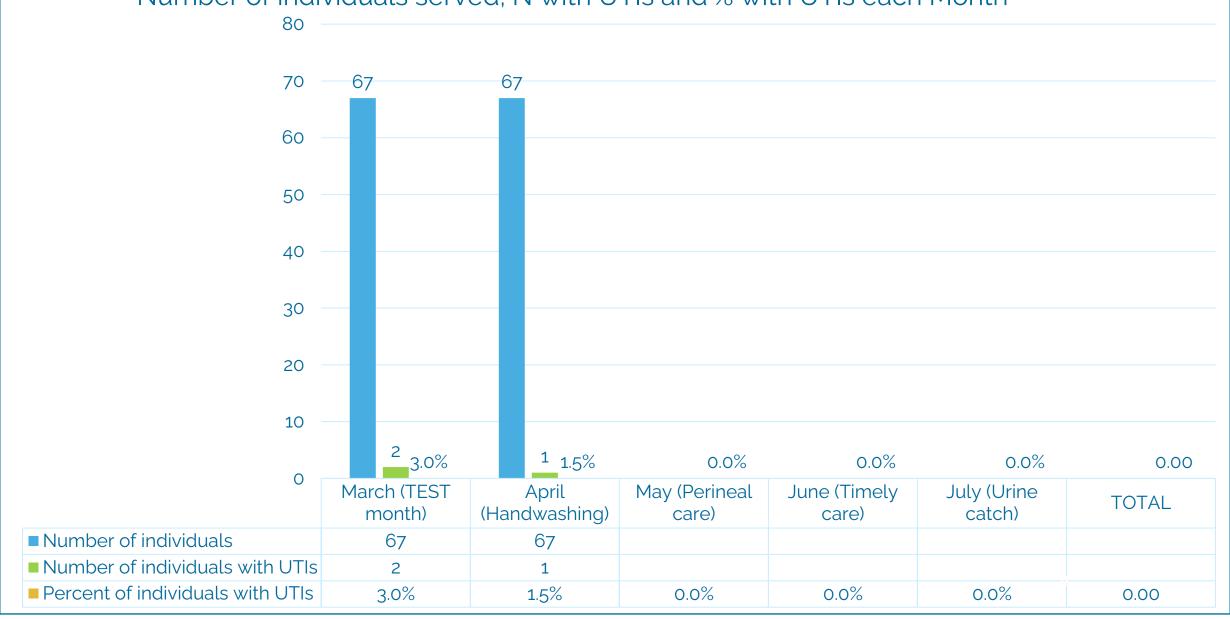
- Thank you for reporting your April data!
 - 100% of sites reported!
- How many individuals were served? [67] total
- How many individuals had at least one UTI? __[1]



UTI Learning Collaborative: Percent of Individuals with UTIs among Participating Providers, <u>Calendar Year 2023</u> (N=6)



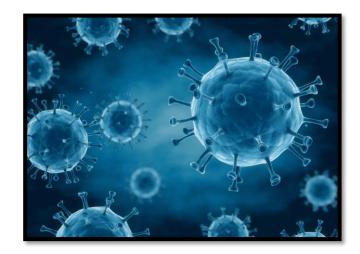
UTI Learning Collaborative Data Number of individuals served, N with UTIs and % with UTIs each Month

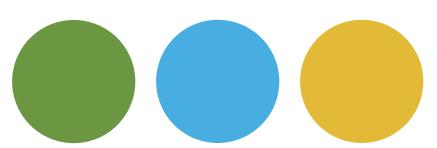






Timely Medical Care for UTIs

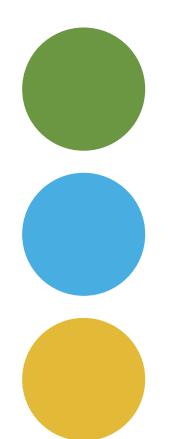












Quality Corner



Review: Model for Improvement



The Three Questions

1

<u>Aim</u>

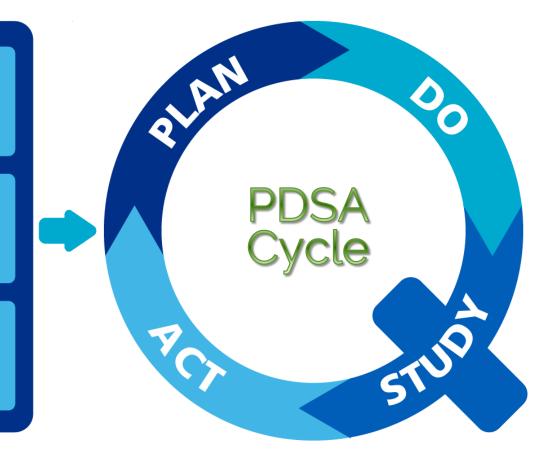
What are we trying to accomplish?

Measure

How will we know that a change is an improvement?

Change

What changes can we make that will result in an improvement?



3

NEXT Try using the Model for Improvement² and the Plan-do-Study-Act (PDSA) Cycle.

Aim: What are you trying to accomplish? What is your SMART Objective? (Specific, Measurable, Achievable, Relevant, Time-bound)

Measure: How will you know a change is an improvement? Describe the measurable outcome(s) you want to see.

Change: What change can you make that will result in an improvement?

Act and decide what to do next. You can:

Adapt: Modify the changes and do another PDSA cycle.

Adopt: Continue or expand the change in your organization.

Abandon: Abandon this change and select a different change

to test in the next cycle.

<u>Document</u> and describe what changes to make for the next cycle based on what you learned.

Study the change you made.

Study and analyze the data you collected. <u>Document</u> how the measured results compare to the predictions. What did you learn? Did the change result in the expected outcome? Were there any surprises, successes, failures, unintended consequences? What would you do different in another test?

4. Act 1. Plan

3. Study

2. Do

Plan a test of your change.

<u>Document</u> the steps that you are going to do. What is your timeline? Who will be involved? When and how will the change happen? What resources will you need? What do you think will happen when you make the change? What data do you need to collect? How will you collect it? When will you have the data?

Do (implement) the plan.

Carry out the plan on a small scale to begin with.

<u>Document</u> your steps and observations, including any problems and unexpected findings or events.

Collect the data you need, per your plan.

Describe what happened when you ran the test.

CONTINUE Plan-Do-Study-Act Cycles based on what you learn in order to achieve improvement.

| 4.1 | | |
|-----|----------------|---|
| | Aim Statement: | The aim of the UTI learning collaborative is to reduce the percent of individuals experiencing UTIs by September 2024 |

DBHD

Filling out the PDSA

| What is your baseline data, and what is your SMART objective? | The Learning Collaborative, the base For our organization, the baseline is: | line is: 16/75 (21 <u>%)</u> The Goal is: | 13% | ns by September 2024. |
|--|---|---|------------------------------|-----------------------|
| Measure: Describe the measure you will use to know that a change is an improvement. | We will measure the number and pe 9/30/2024). We will annualize the re Data collection: We will report the n served each month during the Collab | sults to compare to 2023. umber and percent of any UTIs, a | nd Level I, Level II and rec | |
| Change: What change can you make that will result in an improvement? What do you predict will happen when you make the change? | Change: The change package includes four prevention strategies (hand washing/hand hygiene, proper perineal care, timely medical care, and urine sample). We will learn the information and then train staff on these new strategies each month, for four months. This month (JUNE) is: Timely Medical Care / Healthcare Passport • We will create a Healthcare Passport, to include a Local Medical Care Card, for individuals, beginning with those who have a known risk for UTIs by (deadline). • We will train (How many) staff on how to use the Healthcare Passport, to include a Local Medical Care Card by (deadline). Prediction: When we develop the Healthcare Passport, including the Local Medical Care Card, it will help staff assist individuals to receive timely medical care for UTIs and other conditions. Staff will know which healthcare providers to contact for the individual's care. Staff will feel more prepared to advocate for the individuals. | | | |
| Plan: Plan a test of your change. Document the steps that are needed. What is your timeline? Who will be involved? Include how you will plan to collect and analyze data to study your change. | Task | Who is responsible? | Begin and end dates | Result |
| Do: Implement your plan. Describe what happened. Study: Study and analyze the data | | 1 | | |

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|--|-----------------------------|--|
| | Aim Statement: | The aim of the UTI learning collaborative is to reduce the percent of individuals experiencing UTIs by September 2024. |
| | What is your baseline data, | The Learning Collaborative, the baseline is: 16/75 (21%) The Goal is: 13% |

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Filling out the PDSA

| Aim Statement. | The aim of the off learning collaborative is to reduce the | percent or ma | ividuais ex | vhe |
|------------------------------|--|---------------|-------------|-----|
| What is your baseline data, | The Learning Collaborative, the baseline is: 16/75 (21%) | The Goal is: | 13% | |
| and colors in concern CAAADT | | The Goal is: | | |
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Measure:

Describe the measure you will use to know that a change is an improvement. We will measure the number and percent of individuals experiencing any UTIs during the collaborative period (1/1/2024-9/30/2024). We will annualize the results to compare to 2023.

Data collection: We will report the number and percent of any UTIs, and Level I, Level II and recurrent UTIs per individuals served each month during the Collaborative using a MS Form survey tool.

Change:

What change can you make that will result in an improvement? What do you predict will happen when you make the change? **Change:** The change package includes four prevention strategies (hand washing/hand hygiene, proper perineal care, timely medical care, and urine sample). We will learn the information and then train staff on these new strategies each month, for four months. This month (JUNE) is: Timely Medical Care / Healthcare Passport.

- We will create a Healthcare Passport, to include a Local Medical Care Card, for ______ individuals, beginning with those who have a known risk for UTIs by (deadline).
- We will train (How many) _____ staff on how to use the Healthcare Passport, to include a Local Medical Care Card by (deadline).

Prediction: When we develop the Healthcare Passport, including the Local Medical Care Card, it will help staff assist individuals to receive timely medical care for UTIs and other conditions. Staff will know which healthcare providers to contact for the individual's care. Staff will feel more prepared to advocate for the individuals.

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ment the steps that are
needed. What is your
timeline? Who will be
involved?
Include how you will plan to
collect and analyze data to
study your change.

 Obtain copy of Healthcare Passport and Medical Care Card

Task

2. Identify which individuals to start with (risk for UTIs)

3. Assign staff to complete Passport and Card with individual

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|-------|----------------------------------|
| | / 12 |
| (170) | |
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Do:

Implement your plan. Describe what happened.

Study:

Study and analyze the data

| | Who is responsible? | Begin and end dates | Result |
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What other change could you test?

| *1* | | | | and Developmental dervices |
|--|---|---------------------|---------------------|----------------------------|
| Aim Statement: What is your baseline data, and what is your SMART objective? | The aim of the UTI learning collaborative is to reduce the percent of individuals experiencing UTIs by September 2024. The Learning Collaborative, the baseline is: 16/75 (21%) The Goal is:13% For our organization, the baseline is: The Goal is: | | | |
| Measure: Describe the measure you will use to know that a change is an improvement. | We will measure the number and percent of individuals experiencing any UTIs during the collaborative period (1/1/2024-9/30/2024). We will annualize the results to compare to 2023. Data collection: We will report the number and percent of any UTIs, and Level I, Level II and recurrent UTIs per individuals served each month during the Collaborative using a MS Form survey tool. | | | |
| Change: What change can you make that will result in an improvement? What do you predict will happen when you make the change? | Change: Prediction: | | | |
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PDSA planning and sharing time

- Share ideas: What's going to be in your 'Plan'?
- Make sure to put it on your PDSA Worksheet.
 - How are you going to test this change?
 - How are you going to study this change?
 - Is there another 'change' you're interested in testing?







Learning Collaborative Resources



Resources:

https://dbhds.virginia.go v/clinical-and-qualitymanagement/office-ofcommunity-qualitymanagement/

 PowerPoint slides, Handouts, PDSA Forms



Monthly data reporting here:

https://forms.office.com/g/zKqTqW6Rqm



Schedule:

NEXT: Report on May data: June 7, 2024

Report on June data: July 5, 2024, or next business day

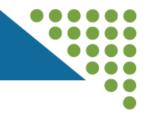
Report on July data: August 2, 2024



To-Do List



- ✓ Bring new tools/resource back to your organization <u>re: timely medical care.</u>
- ✓ Plan to do your Changes and follow the PDSA Worksheet!
- ✓ Submit next data report on Friday June 7, 2024 for the May/Perineal care data.
- ✓ Need help? Reach out!
 - Pebbles.Brown@dbhds.virginia.gov Quality Improvement Specialist, Region 4
 - DBHDS Office of Community Quality Management (OCQM), (804) 314-2065
 - MaryBeth.Cox@dbhds.virginia.gov, QI Coordinator, OCQM, (804) 709-9225
 - Tammie Williams, RNCC, Community Nursing and Educational Lead. tammie.Williams@dbhds.virginia.gov
 - Marylou Bryan, RNCC, Educational Development. marylou.bryan@dbhds.virginia.gov
 - Joy Richardson, RNCC, joy.richardson.@dbhds.virginia.gov
 - Brian Phelps, BCBA. <u>brian.phelps@dbhds.virginia.gov</u>



| Learning Collaborative Schedule of Events | Duration |
|---|-------------|
| Information session Thursday Feb. 29, 2024, 10:00 am − 11:00 am | 30 minutes |
| ✓ Pre-work Due: Registration Information Due: Friday March 8, 2024 | 60 minutes |
| Introduction meeting & Topic 1 - Handwashing Thursday March 28, 2024, 9:30 am − 12:30 pm − IN PERSON* | 3 Hours |
| Meeting 2 - Virtual & Topic 2 - Perineal Care Thursday April 25, 2024, 10:00 am - 11:30 am | 120 minutes |
| TODAY Meeting 3 - Virtual & Topic 3 - Timely Medical Care Thursday May 30, 2024, 10:00 am - 12:00 PM | 120 minutes |
| Meeting 4 - Virtual & Topic 4 - Obtaining urinalysis Thursday June 27, 2024, 10:00 am - 12:00 PM | 120 minutes |
| Meeting 5 – Virtual?? - Wrap-up Thursday July 25, 2024, 10:00 am – 12:00 PM | 120 minutes |





