BREAKOUT PRESENTATION:
WHEN TO ADOPT, ADAPT, OR ABANDON IN THE PDSA PROCESS

Monday, November 16 1:45 PM – 3:30 PM
OUTLINE

- Introductions
- Role of PDSA in making Program Decisions
- Where is the “A” in the Model for Improvement?
- When to Adopt, Adapt, or Abandon?
- Scenario – You decide!
- Get Help From the Group
- Let’s practice!
INTRODUCTIONS

WHO’S IN THE ROOM?
CQI BEGINNER
INTERMEDIATE
ADVANCED

WHAT DO YOU HOPE TO GET OUT OF THIS SESSION?

WHAT IS YOUR ADAPT/ADOPT/ABANDON SITUATION?
Role of PDSA in Making Program Decisions
<table>
<thead>
<tr>
<th>What CQI Is</th>
<th>What CQI Is Not</th>
</tr>
</thead>
</table>
| A continuous and ongoing effort to achieve measurable improvements in quality  
  - For example, improve efficiency, effectiveness, performance, accountability, outcomes | Evaluation |
| Use of a model supported by strategies, methods and tools | Research |
| A repeatable set of steps that work best if they become a routine part of your business operations | A report card |
| | A way to assess or judge programmatic or staff performance |
| | A basis for making funding decisions |
| | A pass/fail or right/wrong process |
| | A trend |
WHAT PDSA IS ....

- Part of the Model for Improvement
- A set of steps to achieve improvements in your program or improvements in quality
- A way to test changes to your program, or new program strategies, before fully committing to them
IT IS NOT...

- A way to design, implement or provide the foundational components of your program
  - Example: Case management
  - This is ‘Assurance’ or ‘Quality Assurance’
- A way to determine if pieces of your program are working or not
  - This is ‘Evaluation’
  - BUT you can evaluate the effectiveness of part of your program AND use PDSA to test a new way!
  - This is Quality Assurance AND Quality Improvement!
OTHER PROGRAM CONSIDERATIONS

- You should be strategic about every component of your program.
  - This is a MUST with limited resources.
- Think about ‘return on investment’ – what are you getting for your time, energy and money?
- Every program strategy must have a reason and must be evaluated for effectiveness and efficiency.
  - Is it working?
  - Is this the best way to achieve results?
  - If not…. CQI!
QA vs. QI

<table>
<thead>
<tr>
<th>Quality Assurance vs. Quality Improvement</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Quality Assurance</strong></td>
</tr>
<tr>
<td>Guarantees quality</td>
</tr>
<tr>
<td>Relies on inspection</td>
</tr>
<tr>
<td>Uses a reactive approach</td>
</tr>
<tr>
<td>Looks at compliance with standards</td>
</tr>
<tr>
<td>Requires a specific fix</td>
</tr>
<tr>
<td>Relies on individuals</td>
</tr>
<tr>
<td>Examines criteria or requirements</td>
</tr>
<tr>
<td>Asks “Do we provide good services”</td>
</tr>
</tbody>
</table>

WHERE IS THE “A” IN THE MODEL FOR IMPROVEMENT?

REVIEW: MODEL FOR IMPROVEMENT
FOCUS FIRST

- Find an opportunity to improve.
- Organize a team who understands the process.
- Clarify the current knowledge of the issue or process. In this stage, you are gathering the "who, what, when, and where."
- Understand the cause of process variation. Here, you ask yourself the "why" question.
- Select the piece of the process you want to improve.
Figure 3. Model for Improvement

Model for Improvement

The Three Questions

1. What are we trying to accomplish?
2. How will we know that a change is improvement?
3. What changes can we make that will result in improvement?

PDSA Cycle

Plan
Act
Do
Study
Model for Improvement

**Answer: Aim Statement**
- Improvement requires setting aims.
- The aim should be SMART:
  - Specific
  - Measurable
  - Achievable
  - Realistic
  - Time-bound
MODEL FOR IMPROVEMENT

Answer: Establish Measures

Teams use quantitative measures to determine if a specific change actually leads to an improvement.
## Measuring for Improvement

<table>
<thead>
<tr>
<th>Purpose</th>
<th>Improvement</th>
<th>Accountability</th>
<th>Research</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Understanding the Process</td>
<td>Comparison</td>
<td>To bring new knowledge into daily practice</td>
</tr>
<tr>
<td></td>
<td>Evaluating change</td>
<td>Reassurance</td>
<td></td>
</tr>
<tr>
<td></td>
<td>To discover new knowledge</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Data</th>
<th>Improvement</th>
<th>Accountability</th>
<th>Research</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Gather <em>just enough data to learn and complete another test of change</em></td>
<td>Large amounts of data</td>
<td>Gather as much data as possible just in case</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Duration</th>
<th>Improvement</th>
<th>Accountability</th>
<th>Research</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Small tests of significant change to accelerate the pace of improvement</td>
<td>Long periods of time</td>
<td>Can take long periods of time to obtain results</td>
</tr>
<tr>
<td></td>
<td>Short and current</td>
<td>Often in the past</td>
<td>Long and in the past</td>
</tr>
</tbody>
</table>
Six Key Questions to Help Plan How To Use Data For Improvement

1. What data or measures do you need?
2. What data do you have available and how frequently can you access it?
3. What data do you not have available that you need, and how will you get it?
4. How frequently are you going to examine data?
5. Who is going to do what, with regards to collecting data and tracking improvements?
6. How can your data be made transparent?
MODEL FOR IMPROVEMENT

Selecting Changes
Ideas for changes to test may come from...
- Root Cause analysis (Process map, Fishbone diagram, etc.)
- Literature / evidence of effectiveness
- A Driver Diagram
- Ideas of peers, experts in the field
- Creative thinking techniques
- Team input
The Plan-Do-Study-Act (PDSA) cycle is a way to test a change in the real work setting — by

- **Plan**: Understand the problem. Describe how you will test an improvement strategy.
- **Do**: Implement your plan; test your improvement/change strategy.
- **Study**: Measure whether the test worked. Can it could be improved in any way?
- **Act**: Review your test and decide what to do: Adapt, adopt or abandon?
## Scale of Testing

<table>
<thead>
<tr>
<th>Commitment</th>
<th>None</th>
<th>Moderate</th>
<th>High</th>
</tr>
</thead>
<tbody>
<tr>
<td>Belief in Change / Cost of failure</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Low / Large</td>
<td>Very small scale test</td>
<td>Very small scale test</td>
<td>Very small scale test</td>
</tr>
<tr>
<td>Low / Small</td>
<td>Very small scale test</td>
<td>Very small scale test</td>
<td>Small scale test</td>
</tr>
<tr>
<td>High / Large</td>
<td>Very small scale test</td>
<td>Small-scale test</td>
<td>Large-scale test</td>
</tr>
<tr>
<td>High / Small</td>
<td>Small scale test</td>
<td>Large scale test</td>
<td>Implement</td>
</tr>
</tbody>
</table>
Implementing Changes
After testing a change on a small scale, learning from each test, and refining the change through several PDSA cycles, the team may implement the change on a broader scale — for example, for an entire pilot population or on an entire unit.

Spreading Changes
After successful implementation of a change or package of changes for a pilot population or an entire unit, the team can spread the changes to other parts of the organization or in other organizations.
CONSIDERATIONS FOR WHEN TO ADAPT, ADOPT, ABANDON
ACT.... WHAT DO THESE OPTIONS MEAN TO YOU?

- Adapt:

- Adopt:

- Abandon:
When to Adapt?

- “You have evidence that your change strategy could get you the results you want. Tweak your strategy based on your testing and try again.”

You have:
- done at least 1 full PDSA
- developed a hypothesis
- measured something

The results of your test (data) suggest that your hypothesis was correct or that, with adjustments, you will get there.

This is the default option.

Prototype phase; “Adapt” with abandon!

You should adapt a change strategy and re-test unless there is clear indication that it will not work.
**When to Adopt?**

- “It worked! You got the results you want! Hard-wire it into your program and consider spreading it to the rest of your program or beyond your organization.”

- You have:
  - Done several PDSA cycles
  - Developed and proven at least 1 hypothesis
  - Data and information showing your tests were successful

- You have prototyped and perfected your change.

- It is “obvious” to your team that this “new thing” or “strategy” should become a routine part of your program.

- You want to tell the whole world what you have discovered.
WHEN TO ABANDON?

- “After multiple tests, accept that your change strategy was not successful. Quit testing it. Move on to a new strategy.”

- You have:
  - Developed and tested a hypothesis
  - Adapted your change strategy several times.
  - Collected data that tell you it is not working.

- Can be difficult.
- May be a change strategy you were sure would work.
- May be emotional investment in the change.
- Avoid seeing it as “failure.” Why do you want to do something that clearly does not work / have the intended effect?
- Be thankful you will no longer waste time, energy, resources on trying it.
The key to being able to confidently decide whether to Adapt, Adopt or Abandon is to do due diligence on the Plan, Do, and Study parts of the PDSA.
PDSA: An [INVENTED] Healthy Start Example

The Healthy Start program has 3 sites providing services. They analyzed data from Year 1.

We are the CQI team for site #2.
What are we trying to accomplish?

Quality Improvement Area:

Improve proportion of prenatally enrolled participants.

- **Rationale:** Healthy Start requires that half of all program participants = pregnant women.
Number of Participants Served by Site, Year 1

- **Served, Prenatal**
- **Served, PP/IC**

<table>
<thead>
<tr>
<th>Site</th>
<th>Site 1</th>
<th>Site 2</th>
<th>Site 3</th>
<th>ALL SITES</th>
<th>Goal</th>
</tr>
</thead>
<tbody>
<tr>
<td>20</td>
<td>20</td>
<td>20</td>
<td>30</td>
<td>30</td>
<td>30</td>
</tr>
<tr>
<td>30</td>
<td>30</td>
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<td>20</td>
<td>20</td>
<td>20</td>
<td>5</td>
<td>10</td>
<td>10</td>
</tr>
<tr>
<td>90</td>
<td>95</td>
<td>95</td>
<td>245</td>
<td>305</td>
<td>400</td>
</tr>
<tr>
<td>400</td>
<td>400</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Pregnancy/Postpartum Status at Enrollment

- **First trimester**
- **2nd Trimester**
- **3rd Trimester**
- **Postpartum**
AIM STATEMENT (SITE 2)

- To increase the number of first and second trimester enrolled participants, from 25 in Year 1 (2 per month) to 60 (5 per month) by May 31, 2016.
THE 6 QUESTIONS:

1. What data do you have available and how frequently can you access this data?
   - Number of referrals of pregnant women
   - Weeks pregnant at referral
   - Where the referral comes from
   - Date of referral, first contact and enrollment

2. What data do you **not** have available that you need?
   - Whether the mom was eligible for the program
   - How long it takes to contact the mom and enroll her
3. How are you going to measure or track improvements?
   - We will use a check sheet to establish baseline for the past 2 months, and continue using to test whether the change results in improvement.

4. How frequently are you going to measure or track improvements?
   - These data will be collected for every pregnant woman referred to the program. The CQI Team will meet every 2 weeks to gauge progress.

5. Who is going to do what, with regards to collecting data and tracking improvements?
   - The Data Specialist will ensure that these data are collected on an ongoing basis.

6. How can you make data transparent?
   - The check sheet will be reviewed at each team meetings and graphs printed and posted on the hall bulletin board.
Aim: (overall goal you wish to achieve)

Every goal will require multiple smaller tests of change

To increase the number of first and second trimester enrolled participants, from 25 in Year 1 (2 per month) to 60 (5 per month) by May 31, 2016.

Plan

What change are you going to test? Clearly describe it.

We are going to begin tracking all prenatal referrals to better understand where they are coming from, how long it is taking to process them, whether they are eligible and enroll in the program.

<table>
<thead>
<tr>
<th>List the tasks needed to test this change.</th>
<th>Person responsible</th>
<th>When to be done</th>
<th>Where to be done</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Identify all the variables we want to track.</td>
<td>1. Team</td>
<td>1. Monday a.m. meeting</td>
<td>Conf room</td>
</tr>
<tr>
<td>2. Put them in a spreadsheet.</td>
<td>2. Data mgr</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. Complete the spreadsheet for all referrals received in the past 2 months.</td>
<td>3. Each team member put their own data</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. Create 1-2 graphs of key information</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

What do you think will happen when you make the change?

How will you know that your change has been successful? What data or information will you need?

We think we will gain insight into what is happening with our referrals and use the information to decide what to do next.

- The Excel spreadsheet tracking tool is in place.
- The team finds it helpful in understanding referrals
- There are no unanswered questions about referrals
## THE CHECK SHEET

<table>
<thead>
<tr>
<th>Time period</th>
<th>Client ID</th>
<th>Referral Date</th>
<th>Referral Source</th>
<th>Weeks Pregnant at Referral</th>
<th>Date of First Contact</th>
<th>Date of Enrollment</th>
<th>Weeks Pregnant at Enrollment</th>
<th>Days from referral to enrollment</th>
<th>Eligible?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Baseline</td>
<td>123</td>
<td>10/1/15</td>
<td>WIC</td>
<td>18</td>
<td>10/15</td>
<td>10/28</td>
<td>22</td>
<td>28</td>
<td>Yes</td>
</tr>
<tr>
<td></td>
<td>234</td>
<td>10/5/15</td>
<td>WIC</td>
<td>15</td>
<td>10/15</td>
<td>10/18</td>
<td>17</td>
<td>13</td>
<td>Yes</td>
</tr>
<tr>
<td></td>
<td>0123</td>
<td>9/10/15</td>
<td>Self ref</td>
<td>13</td>
<td>9/11</td>
<td>9/11</td>
<td>13</td>
<td>1</td>
<td>Yes</td>
</tr>
<tr>
<td></td>
<td>378</td>
<td>9/20/15</td>
<td>ABC OB</td>
<td>27</td>
<td>9/28</td>
<td>9/30</td>
<td>29</td>
<td>10</td>
<td>No</td>
</tr>
<tr>
<td></td>
<td>209</td>
<td>9/28/15</td>
<td>WIC</td>
<td>20</td>
<td>10/8</td>
<td>10/15</td>
<td>22</td>
<td>10</td>
<td>Yes</td>
</tr>
</tbody>
</table>

### PDSA period
SITE 2: BASELINE DATA

Weeks Pregnant at Referral

<table>
<thead>
<tr>
<th>Client 1</th>
<th>Client 2</th>
<th>Client 3</th>
<th>Client 4</th>
<th>Client 5</th>
</tr>
</thead>
<tbody>
<tr>
<td>18</td>
<td>15</td>
<td>13</td>
<td>27</td>
<td>20</td>
</tr>
<tr>
<td>22</td>
<td>17</td>
<td>13</td>
<td>29</td>
<td>22</td>
</tr>
</tbody>
</table>

Weeks Pregnant at Enrollment

Legend:
- Blue: Weeks Pregnant at Referral
- Red: Weeks Pregnant at Enrollment
STARTING A RUN CHART

- 1st Trimester Enrollees
- 2nd Trimester Enrollees
- Total
<table>
<thead>
<tr>
<th><strong>Do</strong></th>
<th>Describe what actually happened when you ran the test</th>
</tr>
</thead>
<tbody>
<tr>
<td>We created the check sheet and put it in Excel.</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>Study</strong></th>
<th>Describe the measured results and how they compared to the predictions</th>
</tr>
</thead>
<tbody>
<tr>
<td>As predicted, we gained insight into our referrals. The data were useful in understanding what was happening.</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>Act</strong></th>
<th>Describe what you learned and what you will do next: Adapt this change and retest (what will you refine?); Adopt this change and test on a larger scale (describe?); or Abandon (why?).</th>
</tr>
</thead>
<tbody>
<tr>
<td>We will adopt this tool and continue to add elements as needed. We learned that over 2 months, we received 5 referrals in the 2nd or 3rd trimester. We got 0 in the first trimester. All referrals were from WIC, AB OB/GYN (not eligible) or self-referral. We will brainstorm ways to get more prenatal referrals.</td>
<td></td>
</tr>
</tbody>
</table>
To increase the number of first and second trimester enrolled participants, from 25 in Year 1 (2 per month) to 60 (5 per month) by May 31, 2016.

- Marketing / advertising to pregnant women
- Flyers next to pregnancy tests at drug stores
- Ads in local parenting magazine
- Get more referrals from health department family planning clinic
- Improve number rand quality of referrals from OB/GYN
- Improve self referrals
- Increase referrals from diverse community partners
**Aim:** (overall goal you wish to achieve)

Every goal will require multiple smaller tests of change

To increase the number of first and second trimester enrolled participants, from 25 in Year 1 (2 per month) to 60 (5 per month) by May 31, 2016.

**Plan**

What change are you going to test? Clearly describe it.

We will conduct strategic outreach to the Family Planning clinic at the health department. We will develop a postcard for FP staff to give to patients at the ‘crucial moment’ of the pregnancy test.

<table>
<thead>
<tr>
<th>List the tasks needed to test this change.</th>
<th>Person responsible</th>
<th>When to be done</th>
<th>Where to be done</th>
</tr>
</thead>
<tbody>
<tr>
<td>Develop post cards</td>
<td>Team leader</td>
<td>Next week</td>
<td>Conf room</td>
</tr>
<tr>
<td>Arrange meeting with FP clinic manager to discuss how this could fit their routine</td>
<td>Team</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Develop a mutually agreeable process to try for 2 weeks</td>
<td>Team leader and FP clinic manager</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Call or meet with FP staff to review test</td>
<td>Data mgr</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

What do you think will happen when you make the change? How will you know that your change has been successful? What data or information will you need?

We think the FP staff will be interested in this. We think we will get at least 2 new referrals from this process.

Ask the FP staff to make note of:
- How many cards they passed out
- How many cards the women turned back in

We will need to know how many postcards we got back.
**“Back of the Napkin” Tallies**

<table>
<thead>
<tr>
<th>Data for 2-week time period</th>
<th>Comments from FP manager</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>50</strong> Cards given to FP clinic</td>
<td>Some staff were absent when we talked about the cards. We tried to put a process in place where there was a stack available in each exam room. Not all staff understood when or how to give the card to the client or explain it.</td>
</tr>
<tr>
<td><strong>30</strong> FP clinic estimate of all pregnancy tests performed during time period</td>
<td></td>
</tr>
<tr>
<td><strong>15</strong> Given to women with pregnancy tests</td>
<td></td>
</tr>
<tr>
<td><strong>3</strong> Cards returned to Healthy Start staff</td>
<td></td>
</tr>
<tr>
<td>Of the 3, only 1 was pregnant. The other two have children but are not pregnant.</td>
<td></td>
</tr>
</tbody>
</table>

**30:1 Return on Investment**
**Do**  
Describe what actually happened when you ran the test

We tried a new thing!

---

**Study**  
Describe the measured results and how they compared to the predictions

Out of 30 women seen for a pregnancy test, 15 were given a card. Of the 15 given out, 3 came back to Healthy Start. Only 1 was pregnant.  
30:1 Return on Investment

Also, we did not collect information on whether the women who received the postcards were actually pregnant.

---

**Act**  
Describe what you learned and what you will do next: Adapt this change and retest (what will you refine?); Adopt this change and test on a larger scale (describe?); or Abandon (why?).

What would you do?
<table>
<thead>
<tr>
<th><strong>Do</strong></th>
<th>Describe what actually happened when you ran the test</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>We tried a new thing!</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>Study</strong></th>
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<tbody>
<tr>
<td></td>
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<tr>
<td></td>
<td>30:1 Return on Investment</td>
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</tbody>
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</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Let’s Adapt this and try to improve the process!</td>
</tr>
</tbody>
</table>
**Aim:** (overall goal you wish to achieve)

Every goal will require multiple smaller tests of change

To increase the number of first and second trimester enrolled participants, from 25 in Year 1 (2 per month) to 60 (5 per month) by May 31, 2016.

**Plan**

What change are you going to test? Clearly describe it.

We will conduct strategic outreach to the Family Planning clinic at the health department. We will develop a postcard for FP staff to give to patients at the ‘crucial moment’ of the pregnancy test.

List the tasks needed to test this change.

<table>
<thead>
<tr>
<th>1. Arrange 2nd meeting with FP clinic</th>
<th>1. Team leader</th>
</tr>
</thead>
<tbody>
<tr>
<td>2. Refine the postcard process to try for 2 weeks; to include 1-page laminated info sheet for staff and suggested script</td>
<td>2. Team leader and FP clinic staff</td>
</tr>
<tr>
<td>3. Improve data to focus only on pregnant women</td>
<td>3. Team</td>
</tr>
<tr>
<td>4. Call or meet with FP staff to review test</td>
<td></td>
</tr>
</tbody>
</table>

Person responsible | When to be done | Where to be done

Next week | Conf room

What do you think will happen when you make the change?

How will you know that your change has been successful? What data or information will you need?

We think if we better define the postcard process, that 1) -Staff will give the postcard to all women receiving a POSITIVE pregnancy test and 2) -At least half of those women will turn in the post card/refer

-How many patients received positive pregnancy test; -How many cards FP clinic passed out
-How many cards the women turned into FP staff
-How many postcards/referrals Healthy Start received
“Back of the Napkin” Tallies

<table>
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<tbody>
<tr>
<td>50 Cards given to FP clinic</td>
<td>Despite new improved process, laminated instruction sheet, and cards, staff continue to forget to give the card to clients.</td>
</tr>
<tr>
<td>20 FP clinic report of <strong>Number of positive pregnancy tests</strong></td>
<td></td>
</tr>
<tr>
<td>10 # postcards FP clinic gave to women with positive tests</td>
<td></td>
</tr>
<tr>
<td>5 Cards returned to Healthy Start staff</td>
<td><strong>20:5 Return on Investment</strong></td>
</tr>
</tbody>
</table>
### Do
Describe what actually happened when you ran the test

FP staff were receptive to adapting the process.

### Study
Describe the measured results and how they compared to the predictions

- Staff only gave the postcard to HALF all women with positive pregnancy test
- Half of the women receiving a postcard filled it out and gave it back
ROI = 4:1

### Act
Describe what you learned and what you will do next: Adapt this change and retest (what will you refine?); Adopt this change and test on a larger scale (describe?); or Abandon (why?).

What would you do?
QUESTIONS TO HELP DECIDE

- Is additional improvement possible?
- Is it worth staff time (yours and theirs), effort to continue the 4:1 return on investment?
- Do you see this naturally improving or sliding back?
### Do
Describe what actually happened when you ran the test

FP staff were receptive to adapting the process.

### Study
Describe the measured results and how they compared to the predictions

- Staff only gave the postcard to HALF all women with positive pregnancy test
- Half of the women receiving a postcard filled it out and gave it back
ROI = 4:1

### Act
Describe what you learned and what you will do next: Adapt this change and retest (what will you refine?); Adopt this change and test on a larger scale (describe?); or Abandon (why?).

What would you do? **Abandon the idea of having FP staff give the card to women with pos preg tests and explaining it**

But.... Does this mean your collaboration with the FP clinic is over?
<table>
<thead>
<tr>
<th>Time period</th>
<th>Client ID</th>
<th>Referral Date</th>
<th>Referral Source</th>
<th>Weeks Pregnant at Referral</th>
<th>Date of First Contact</th>
<th>Date of Enrollment</th>
<th>Weeks Pregnant at Enrollment</th>
<th>Days from referral to enrollment</th>
<th>Eligible?</th>
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</thead>
<tbody>
<tr>
<td>Baseline</td>
<td>123</td>
<td>10/1/15</td>
<td>WIC</td>
<td>18</td>
<td>10/15</td>
<td>10/28</td>
<td>22</td>
<td>28</td>
<td>Yes</td>
</tr>
<tr>
<td></td>
<td>234</td>
<td>10/5/15</td>
<td>WIC</td>
<td>15</td>
<td>10/15</td>
<td>10/18</td>
<td>17</td>
<td>13</td>
<td>Yes</td>
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<tr>
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<td>0123</td>
<td>9/10/15</td>
<td>Self ref</td>
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<td>9/11</td>
<td>9/11</td>
<td>13</td>
<td>1</td>
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<td>378</td>
<td>9/20/15</td>
<td>ABC OB</td>
<td>27</td>
<td>9/28</td>
<td>9/30</td>
<td>29</td>
<td>10</td>
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<td>9/28/15</td>
<td>WIC</td>
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<td>22</td>
<td>10</td>
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<td>11/1</td>
<td>WIC</td>
<td>28</td>
<td>11/15</td>
<td>11/15</td>
<td>31</td>
<td>14</td>
<td>Yes</td>
</tr>
<tr>
<td>PDSA period</td>
<td>209</td>
<td>11/10</td>
<td>FP Clinic!</td>
<td>8</td>
<td>11/15</td>
<td>11/20</td>
<td>10</td>
<td>10</td>
<td></td>
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</tr>
</tbody>
</table>
CONTINUE THE RUN CHART

1st Trimester Enrollees
2nd Trimester Enrollees
Total
GET HELP FROM THE GROUP

- What do you hope to get out of this session?
- What is your adapt/adopt/abandon situation?
LET’S DO AN ACTIVITY!

- Put Together a Toy - PDSA
RESOURCES

- http://www.mindtools.com
- http://www.ihi.org
THANK YOU FOR YOUR ATTENTION!