



# 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 <b>proper perineal care</b> change and data	Pebbles Brown & Participants	15 minutes
2. Third Change: <b>Timely Medical Care for</b> <b>UTIs</b>	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

### Let's Review $\rightarrow$

#### Combined Scores, Pre vs. Post





## 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









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**

DBHDS



Quality Improvement Tools



#### NEXT Try using the Model for Improvement<sup>2</sup> 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?



#### Plan a test of your change.

Document 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.

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

*	1				
DBHD	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. <b>Data collection:</b> 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.			
Filling out the PDSA	Change: What change can you make that will result in an improvement? What do you predict will happen when you make the change?	<ul> <li>with those who have a known risk for UTIs by(deadline).</li> <li>We will train (How many)staff on how to use the Healthcare Passport, to include a Local Medical Care Card by(deadline).</li> <li>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.</li> </ul>			
	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         Image: Constraint of the second seco			
	<b>Do:</b> Implement your plan. Describe what happened.				
	Study: Study and analyze the data				

DBHD	Aim Statement: What is your baseline data, and what is your SMART objective?	The aim of the UTI learning collaborative is to The Learning Collaborative, the baseline is: 1 For our organization, the baseline is:	.6/75 (21 <u>%)</u> The Goal is: _	13%	ls by September 2024.
	Measure: Describe the measure you will use to know that a change is an improvement.	We will measure the number and percent of 9/30/2024). We will annualize the results to <b>Data collection:</b> We will report the number a served each month during the Collaborative	compare to 2023. and percent of any UTIs, ar	nd Level I, Level II and rec	
Filling out the PDSA	Change: What change can you make that will result in an improvement? What do you predict will happen when you make the change?	<ul> <li>Change: The change package includes four predical care, and urine sample). We will lead four months. This month (JUNE) is: <u>Timely</u></li> <li>We will create a Healthcare Passport with those who have a known risk for with those who have a known risk for <u>We will train (How many)</u> (deadline)</li> <li>Prediction: When we develop the Healthcare individuals to receive timely medical care for for the individual's care. Staff will feel more</li> </ul>	rn the information and the Medical Care / Healthcare t, to include a Local Medica r UTIs by staff on how to use the staff on how to use the UTIs and other conditions	n train staff on these new Passport al Care Card, for (deadline). Healthcare Passport, to in ocal Medical Care Card, in 5. Staff will know which h	w strategies each month, for individuals, beginning nclude a Local Medical Care
Exem	Pla a st of your change. a ment the steps that are heeded. What is your timeline? Who will be involved? Include how you will plan to collect and analyze data to study your change.	<ol> <li>Task</li> <li>Obtain copy of Healthcare Passport and Medical Care Card</li> <li>Identify which individuals to start with (risk for UTIs)</li> <li>Assign staff to complete Descrot and Card with</li> </ol>	Who is responsible?	Begin and end dates	Result
	Do: Implement your plan. Describe what happened. Study: Study and analyze the data	Passport and Card with individual			





### What other change could you test?

*				and Developmental Gervices
Aim Statement: What is your baseline data, and what is your SMART objective?	The aim of the UTI learning collabora The Learning Collaborative, the base For our organization, the baseline is:	line is: 16/75 (21 <u>%)</u> The Goal is:	13%	Fls by September 2024.
<b>Measure:</b> 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. <b>Data collection:</b> 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.			
<b>Change:</b> What change can you make that will result in an improvement? What do you predict will happen when you make the change?	Change: Prediction:			
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:		·	•	10





# 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 3 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





- ✓ 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!
  - <u>Pebbles.Brown@dbhds.virginia.gov</u> Quality Improvement Specialist, Region 4
  - DBHDS Office of Community Quality Management (OCQM), (804) 314-2065
  - <u>MaryBeth.Cox@dbhds.virginia.gov</u>, QI Coordinator, OCQM, (804) 709-9225
  - Tammie Williams, RNCC, Community Nursing and Educational Lead. <u>tammie.Williams@dbhds.virginia.gov</u>
  - Marylou Bryan, RNCC, Educational Development. <u>marylou.bryan@dbhds.virginia.gov</u>
  - Joy Richardson, RNCC, joy.richardson.@dbhds.virginia.gov
  - Brian Phelps, BCBA. <a href="mailto:brian.phelps@dbhds.virginia.gov">brian.phelps@dbhds.virginia.gov</a>



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









