

ALPQC Maternal Hypertension Initiative

PDSA Worksheet Sample

TEST DETAILS
Project Name: ALPQC Maternal Hypertension Initiative
Project SMART Aim:
☐ Follow up and discharge education
□ Narrow inequity gap in severe maternal morbidity
Component of Change Package:
\square Readiness: Development and Implementation of standard processes
☐ Recognition and Prevention: Educate, identify, and assess
⊠ <u>Respond</u> : Timely treatment of severe hypertension
☐ Change Systems: Foster a culture of safety and improvement
Test Name: Implementation of timely treatment order set
Test Start Date: 4/1/2021
Test Complete Date: 4/5/2021
What is the objective of the test? To 1) educate providers regarding the order set, 2) monitor use of the order set, 3) reduce the time to treatment of severe hypertension

PLAN:

Briefly describe the test: We have developed an order set to streamline the process for ordering IV labetalol, IV hydralazine, and oral nifedipine.

How will you measure the success of this test? 1) a reduction in time between the order being placed and patient receiving pharmacotherapy 2) a reduction in time between identification of severe hypertension and therapeutic treatment

What would success look like? 1) a reduction in time between the order being placed and patient receiving pharmacotherapy

2) a reduction in time between identification of severe hypertension and therapeutic treatment

What do you predict will happen? The order set will improve efficiency in the way medications are ordered and delivered to patients and increase the number of patients treated within 60 minutes.

Plan for collection of data: Collect 2 distinct time metrics: 1) time from order to treatment 2) time between BP reading and treatment

Tasks:

Name of Task	Person Responsible	Dates:	Location
Provider education	Julie (MD lead)	3/15/21-3/29/21	MEU
Order set creation	Bob (Pharmacy)	3/01/21-3/15/21	MEU
Nursing education	Harriet (Nurse educator	3/15/21-3/29/21	MEU
Data collection	Harold (IT)	3/15/21-3/29/21	IT



DO:
Was the cycle carried out as planned? ✓ Yes ✓ No
Record data and observations: Providers content with order set, but only used around 50% of the time. Unclear whether all providers received education and may need ongoing reminders.
What did you observe that was not part of the plan? Significant wait times in the room prior to BP reading; may need to optimize upstream processes prior to order being placed.
STUDY:
Did the results match your predictions? ☐ Yes ☒ No
Compare the result of your test to your previous performance: In the patients in which the order set was used, there was a reduction in time to treatment, but not when all included patients were analyzed.
What did you learn? We need to ensure that all providers are educated. Also need to talk to providers that did receive education but did not use the order set; any specific reasons as to why not? May need to post reminders in the work rooms next to work stations regarding the order set. May also need to have nurse champions during shifts to similarly reinforce education.
ACT: Decide to Adapt, Adopt, or Abandon
Adapt: Improve the change and continue testing the plan. Plan/changes for the next test: See above regarding improving education. Also need to work on the process between triage and BP measurement. Will need to analyze staffing sufficiency by shift and particularly when there are anticipated surges in patient volume.
☐ Adopt: Select changes to implement on a larger scale and develop an implementation plan and plan for sustainability
☐ Abandon: Discard the change idea and try a different one