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| PDSA Worksheet | Team: | PDSA Leader: |
| Long-term Goal: |
| Focus: ☐ Patients ☐ Providers ☐ Non-clinical Staff ☐ System ☐ Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Objective of Cycle: ☐ Collect Data ☐ Develop a Change ☐ Test a Change ☐ Implement a Change |
| PDSA Cycle Aim:  |

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| **PLAN** | SPECIFY | What are you trying to accomplish or what questions do you hope to answer? | Key Driver Impacted:1.2.3. |
| MEASURE | How will you know that change is an improvement?* Provide an evaluation plan to support your predictions.
 | Who (will collect):What (measures):When (time period):Where (location):How (method): |
| ACTION | State the tasks of the PDSA cycle * Note who, what, when, where, and how the PDSA cycle will be accomplished.
 | List steps necessary to complete the PDSA cycle | Person Responsible |
| 1.2.3.4.5. |  |
| REASON | What do you predict will happen when the PDSA cycle is completed? |  |
| TIME | What is the time frame of this PDSA cycle? | Date Started:Target Completion Date: |

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| **DO** | Carry out the PDSA & Collect data.Describe: * observations
* problems encountered
* special circumstances
* items not part of the plan
 | Was the PDSA carried out as planned? ☐ Yes ☐ No1.2.3. |

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| **STUDY** | Analyze the data and summarize the results. | Did your results match your predictions? ☐ Yes ☐ No What did you learn from this?1.2. |

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| **ACT** | List lessons learned, major conclusions.Are you confident that you should expand size/scope of test or implement? What modifications/refinements are needed for the next cycle? | Did you meet your aims and goals? ☐ Yes ☐ NoDid you answer the questions you wanted to address? ☐ Yes ☐ No Do you plan to ☐ Adopt ☐ Adapt ☐ Abandon the change or test?1.2.3.  |