

Model for Improvement

Step 1: Thinking Part - Three Fundamental Questions

Complete the Model for Improvement (MFI) as a whole team.

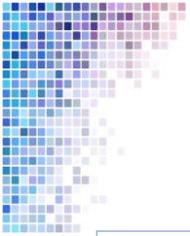
AIM		1. What are we trying to accomplish?	
By answering this question, you will develop your GOAL for improvement. It is important to establish a S.M.A.R.T (Specific, Measurable, Achievable, Relevant, Time bound) and people-crafted aim that clearly states what you are trying to achieve.			
Increase cervical screening rates among priority populations through staff training, promoting self-collection, and fostering an inclusive, culturally safe environment.			
MEASURE(S)		2. How will we know that a change is an improvement?	
By answering this question, you will develop the MEASURE(S) you will use to track your overarching goal. Record and track your baseline measurement to allow for later comparison. Tip: Use a Run Chart to plot trends.			
Number of active eligible patients due or overdue for cervical cancer screening			
Baseline:	500 active eligible patients with 370 eligible patients identified as due/overdue for cervical screening	Baseline date:	December 2024
CHANGE IDEAS		3. What changes can we make that will result in improvement?	
By answering this question, you will develop IDEAS for change. Tip: Engage the whole team in formulating change ideas using tools such as brainstorming, driver diagrams or process mapping. Include any predictions and measure their effect quickly.			
Idea 1	Training staff to support and promote HPV self-collection in cervical screening.		
Idea 2	Increase the utilisation of Health Pathways Gold Coast for cervical screening among clinical staff		
Idea 3	Engaging patients through targeted education to increase screening uptake.		
Idea 4	Implementing culturally safe and inclusive practices to increase screening uptake.		
Next steps:	Each idea may involve multiple short and small PDSA cycles.		

PDSA (Plan-Do-Study-Act)

Step 2: Doing Part - Plan-Do-Study-Act

Once you have completed the Model for Improvement (MFI), use the template below to document and track your PDSA cycles (i.e. small rapid tests of change).

Idea	Plan		Do	Study	Act
#	Plan the test	Prediction	Do the test on small scale	Analyse the results	Make a plan for next step
	<i>How will we run this test? Who will do it and when? What will we measure?</i>	<i>Prediction or hypothesis on what will happen.</i>	<i>Was the plan completed? Yes or No. Collect data. Consider what worked well and why? Document any unexpected observations, events or problems.</i>	<i>Analyse results, compare them to predictions, and reflect on what you learned.</i>	<i>Based on your learnings from the test, what will you do next (e.g., adopt, adapt or abandon)? How does this inform the plan for your next PDSA?</i>
Change idea 1.1	PM, Nurse, 2x GP's to be offered protected time to complete GPEX Training – Cervical Screening, HPV and Self-Collection. Date: 3rd December 2024	We predict staff will complete the training on time and feel more confident in discussing cervical screening and self-collection options with patients.	The practice manager, practice nurse and two GPs completed the training and certificates of completion were collected. Although the training was time consuming, it was a worthwhile activity, as staff who completed the training felt more competent in discussing cervical screening and self-collection as an option for eligible patients.	Staff felt this training was greatly beneficial as they felt more competent is discussing cervical screening and self-collection. This training will be embedded into the induction process for clinical staff.	ADOPT. All new staff will complete this training during protected time within three months of commencing employment as part of their induction plan.
Change Idea 2.1	All practice staff to complete Cultural Awareness Training through Kalwun.	We predict that all practice staff will attend Cultural Awareness Training	All staff completed the cultural awareness training and felt more comfortable discussing cervical screening including self-collection with	Staff felt that this training session was of great benefit, not just for discussing cervical screening, it assisted in providing culturally safe	ADOPT. All new staff will complete this training within three months of commencing



	<p>A staff meeting will be held post training to discuss our practice policy regarding provision of respectful and appropriate care (as per RACGP criterion C2.1)</p> <p>Date: 17 December 2024</p>		<p>patients who identify as Aboriginal and/or Torres Strait Islander.</p>	<p>care across all appointments for patients who identify as Aboriginal and/or Torres Strait Islander.</p>	<p>employment as part of their induction plan.</p>
Summary of Results	<p>The implementation of cervical screening improvement initiatives demonstrated notable success. Staff training on cervical screening and self-collection increased confidence and competence. Cultural awareness training enhanced staff ability to provide culturally safe care, improving patient engagement and setting a new standard for onboarding processes.</p>				