Quality Payment Program
Leveraging Improvement Activities to Improve Quality

Choose Improvement Activities that Improve Quality!

To fully participate in MIPS, clinicians will need to engage in Improvement Activities for at least 90 days to earn their full 40 points in this category. With over 100 Improvement Activities to choose from, large practices will select up to four and small practices will select up to two. Why not choose Improvement Activities that can help your practice implement quality improvement strategies? Here are some ideas:

- Implementation of formal quality improvement methods, practice changes or other practice improvement processes. IA_PSPA_19 (Medium weighted activity)

- Leadership engagement in regular guidance and demonstrated commitment for implementing practice improvement changes. IA_PSPA_20 (Medium weighted activity)

- Measurement and improvement at the practice and panel level. IA_PSPA_18 (Medium weighted activity)

Using the Model for Improvement[1]

The Model for Improvement is a time-tested method of quality improvement that is simple, highly effective, and supports a bottom-up approach to change. The Model for Improvement reduces risk by starting small. At its most basic level, the model has two parts: three fundamental questions and the Plan-Do-Study-Act (PDSA) cycle. The three fundamental questions include:

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

Aim Statements: The first step is to develop an effective aim statement to get to the heart of the three fundamental questions. The aim statement should:

- State the aim clearly
- Use numerical goals
- State the timeframe and site of the work

Plan-Do-Study-Act (PDSA): Next, use the Plan-Do-Study-Act (PDSA) cycles test changes in real work settings. The PDSA cycle guides the test of a change to determine if the change is an improvement.
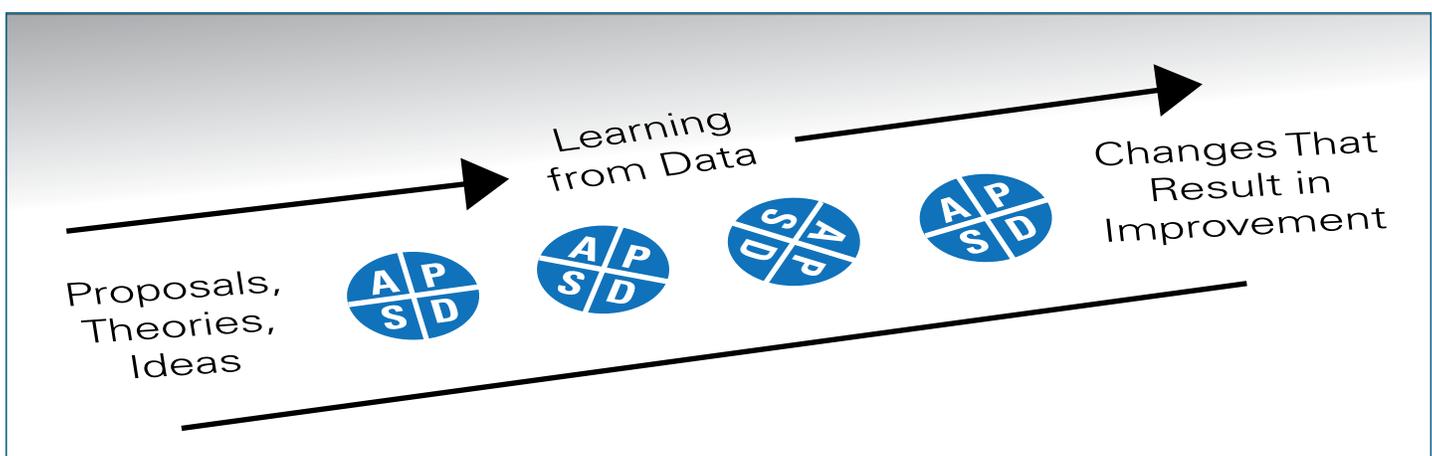
[1] *The Improvement Guide: A Practical Approach to Enhancing Organizational Performance.* G. Langley, K. Nolan, T. Nolan, C. Norman, L. Provost

To use this process most effectively, a small-scale change cycle should be repeated and refined several times on a daily or weekly basis. Changes are best tested initially with a small team—i.e., one provider and care team, one change at a time, on the smallest scale possible. Read more about the Model for Improvement from the Institute for Healthcare Improvement

Stable, successful projects can be expanded to other innovators within the organization for further testing before an organization-wide process change is adopted. Download our PDSA worksheet.

Aim Statement: "By March 31, 90% of our patients will have tobacco use status recorded in the EHR problem list during a visit to our office."

Primary Care Example:

PDSA Cycle

Plan: For one week, a single care team will test the use of a daily "tobacco use status report" generated by the EHR. The report will identify patients with appointments scheduled that day who have never been asked about their history of tobacco use. The report will be given to the medical assistant (MA) in the morning before patients start arriving.

Do: For an entire week, a tobacco use status report was generated at the beginning of each clinic day. When the patients arrived for their appointment, identified patients were asked about tobacco use by the MA during vitals collection. The patient's response was entered into the EHR problem list and the provider was verbally informed, prior to entering the exam room, whether the patient was a tobacco user.

Act: The PDSA was partially successful. After team discussion, it was decided that this PDSA could be improved with a second reminder. A temporary reminder note could be placed in the patient's electronic chart so the MA would be prompted to inquire about tobacco use while gathering vitals.

Study: At the end of the week, the team studied the PDSA. One or two names appeared each day on the tobacco status report. Chart review revealed that some names generated by the report still did not have the status of tobacco use recorded. The MA believes this is because she remembered to ask those patients who arrived in the morning but by the afternoon she was less diligent about focusing on the tobacco use report. By the end of the PDSA week, 8 of the identified 14 patients had tobacco use status entries in the EHR problem list.

Plan: Test for one week the use of a daily tobacco use status report—in combination with an electronic reminder—to see if this improves the collection of tobacco use status for patients who have never been assessed before.

Celebrate Success: After each successful project or PDSA cycle, be sure to celebrate success! Recognizing the team's efforts with a small reward or staff meeting recognition is important in keeping your team engaged in the quality improvement efforts. Building on their success, you are now ready to start a new aim statement.