



# Improvement Plan: Plan-Do-Study-Act (PDSA)

**Continuous Quality Improvement Objective:**

Immediate (0-3 months)     
  Short Term (3-6 months)     
 Long Term (6 months-1 year)

<b>Start Date:</b>	<b>Projected Date of Completion:</b>	<b>Staff Coordinating/Staff Involved:</b>		
<b>Actual Date of Completion:</b>		Individual	Team	Organization

**Type of PDSA:**

Professional Development   
  Self-Care   
  Team Building   
  Program Outcomes

Other: \_\_\_\_\_

**Your Overall AIM:**

The AIM should be stated as a single SMART goal (Specific, measurable, attainable, realistic, time limited)

**Baseline Data/Information:**

**Anticipated Challenges:**

What source(s) of evidence did you use to determine the need for this objective

**CYCLE #1**

PLAN	Person(s) Responsible	Completion
Action Step #1:		
Action Step #2:		
Action Step #3:		
What resources, professional development or support will be needed to achieve this objective?		

**DO**

Were the action steps carried out as planned?   
 Yes   
 No   
**Barriers:**

What did you observe that wasn't part of the plan?

**STUDY**

What were the results?

What does the data tell you?

**ACT**

<input type="checkbox"/> Adapt	<input type="checkbox"/> Continue objectives/Action steps	<input type="checkbox"/> Adopt	<input type="checkbox"/> Complete	<b>Abandon</b>
Start date for cycle #2:				

**CYCLE # 2**

New Data/Information:
Anticipated Challenges:

What source(s) of evidence did you use to determine the need for this objective

**PLAN**

**Person(s) Responsible**

**Completion**

PLAN	Person(s) Responsible	Completion
Action Step #1:		
Action Step #2:		
Action Step #3:		
What resources, professional development or support will be needed to achieve this objective?		

**DO**

Were the action steps carried out as planned? <input type="checkbox"/> Yes <input type="checkbox"/> No	Barriers:
What did you observe that wasn't part of the plan?	

**STUDY**

What were the results/New data?
What does the data tell you?

**ACT**

<input type="checkbox"/> Adapt	<input type="checkbox"/> Continue objectives/Action steps	<input type="checkbox"/> Adopt	<input type="checkbox"/> Complete	<b>Abandon</b>
Start date for cycle #3:				

**CYCLE # 3**

**New Data/Information:**

**Anticipated Challenges:**

What source(s) of evidence did you use to determine the need for this objective

**PLAN**

**Person(s) Responsible**

**Completion**

**Action Step #1:**

**Action Step #2:**

**Action Step #3:**

**What resources, professional development or support will be needed to achieve this objective?**

**DO**

**Were the action steps carried out as planned?**  **Yes**  **No** **Barriers:**

**What did you observe that wasn't part of the plan?**

**STUDY**

**What were the results?**

**What does the data tell you?**

**ACT**

**Adapt**  **Continue objectives/Action steps** **Complete** **Abandon**