September 2021

TRANSITIONAL SERVICES INC.

QUALITY TIME WITH TSI

Newsletter of the TSI Quality Department

What is PDCA?

At TSI we follow a Quality Cycle called PDCA (some writers also call it the "Deming Wheel" or the "Shewhart Cycle"). The letters stand for Plan, Do, Check, Act It is a four step approach to test out and manage improvement measures. Maybe without knowing it, you have participated in a PDCA cycle whenever you have been involved in a quality improvement project or SMART Goal!

Triumphs, Successes, Innovations!

Every department at TSI has a SMART Goal. They are ventures that the person initiating the project feels will help our Persons Served, make work easier or improve a process. This space is reserved for highlighting SMART Goal successes big and small from all around our organization. This month, we showcase:

Chief Executive Officer:

Goal: "Improve Service Delivery in the ID and PD Programs"

Why: The service TSI offers to the individuals in our care forms the backbone of our organization. Metrics identified as important in creating good outcomes for our clients tell us how well we are doing in delivering this service. If we can improve these key metrics, our persons served will have a higher probability of a good outcome from their time with us.

Metrics: Seven metrics from the Monthly Dashboard form the data points for this SMART Goal. Metrics from both the ID and PD Departments are included. They are: 1. Apartment Cleanliness (ID) 2. % Discharged to an Independent Level of Care (PD) 3. % Engaged in Meaningful Activity (PD) 4. Medication Accuracy (PD) 5. Step/Goal Completion 6 & 7. Preventable Incidents (one for ID and one for PD).

Expected Outcomes: By June 30, 2022, TSI will have improvement in at least 4 out 7 Key Performance Indicators in the ID and PD service delivery programs that have not attained their goal in FY21.

Notice the word used... Improvement. Much of Quality work is about making small, continuous gains over a sustained period of time. If one step forward is made every month, think how far the process will improve in one year, or five!

TSI Survey Timelines:

October:
Employee Satisfaction Survey

October:
Leadership Satisfaction Survey

February or March:
CARF Survey
More information to come!

The Candy Corn Pumpkin featured in the Engagement Committee's Guessing Game Contest. This fun contest uses the Quality skill of *Estimating* which is developing a educated guess based on incomplete data. Please remind your Persons Served to enter their guesses to Michele Charmello by 10/29/2021. Thank you to Michele for sharing this photo and to the Engagement Committee for coming up with the contest!

PDCA continued...

Step 1: Plan.

In this step the current state of the problem is observed, studied, or measured. An opportunity is identified and an objective is put into place.

Step 2: Do.

The idea generated in step 1 is put into place and tested.

Step 3: Check.

Review the outcome, analyze the results and identify what has been learned.

Step 4: Act.

If the test was successful, implement the change across other sites. If it the test did not work, go through the cycle again with a different idea.

Use the PDCA Cycle when:

- Starting a new improvement project.

- Implementing a change in a process

- Improving a process, product or service… or developing a new one.

- Working towards continuous improvement.

Information on the PDCA Cycle from the American Society for Quality.

Quality Toolbox

Snapshots

A Snapshot is a time sensitive piece of a larger chart. In our organization you see this idea at work on the Medication Accuracy Report each month. Below the process control chart on the first page you see a set of monthly performance statistics for each site. This is the "Snapshot."

Snapshots can help supervisors manage projects and see how these projects progress across time.

Take a look at the Medication Accuracy Report and see if you can find the Snapshot today!

"PDCA Cycle". This graphic comes from the American Society for Quality.