



REGISTER USING THIS QR CODE:



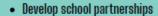
FINAL CALL:

1ST WEEK OF JUNE

KICKOFF: 03/19/2025

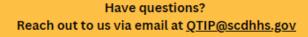
Objectives :







- Increase influenza vaccine uptake
- · Learn how to use appropriate diagnosis codes
- Standardize Asthma action plans and ACT (Asthma Control Test)



Be SMART About Asthma

WORKSHOP INSTRUCTIONS

Workshop Schedule

WED - March 19
Group Kick-off Session

•7:30 am
•12:30 pm

April 14 - 18

This will be an email

Q

May 19 - 23

This will be an email

Virtual drop-in with Dr. Kumar/Shiann

• Choose your time

March 26-27

Group Midpoint Check-In

- •7:30 am
- •12:30 pm

WED – April 30th

Group Final Call Presentation

- WED @ 7:30 am
- FRI @ 12:30 pm

WED – June 4th &

FRI – June 6th

Due Monday 3/31 to QTIP@scdhhs.gov

Select drop-in time for Dr. Kumar virtual follow-up next Wed or Thurs (less than 10 minutes)

• Choose your time via booking link

Baseline Survey

- Report on CURRENT practices in office
 - This is BASELINE data be honest it's okay!

Select 7:30 am or 12:30 pm for the midpoint call **and** final workshop presentation

- Same time for both calls
 - If needed we can offer different times

PLAN section of PDSA log

• Email only complete PLAN section

NEW: PDSA Log Template



QI TOOLS + RESOURCES

QTIP PRACTICES: Fill out entire PLAN Section ONLY -Thank You

PLAN section only:
Due Monday
3/31

PDSA WORKSHEET

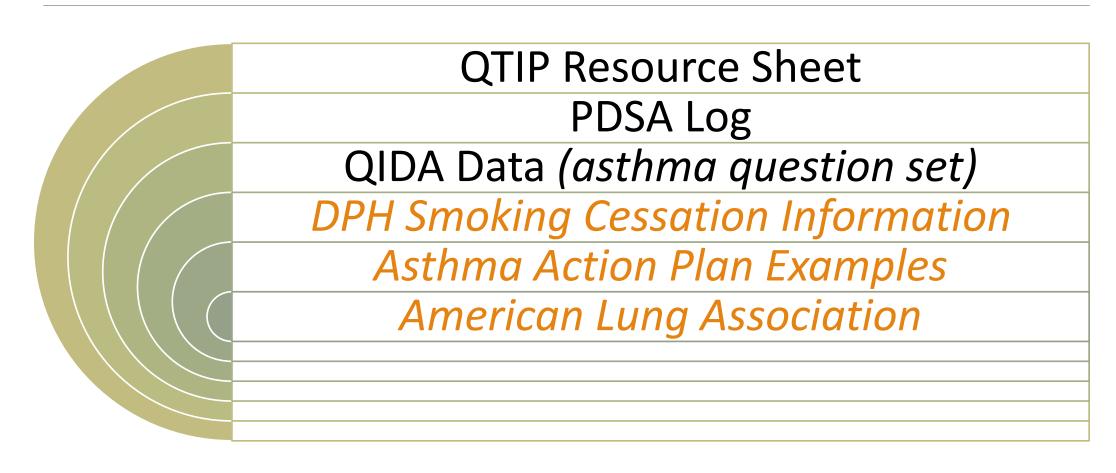
CHANGE IDEA:			CYCLE NUMBER: DA			ATE:		
			PLAN					
WHAT IS THE PURPOSE OF THIS PROJECT? (Check one)			DEVELOP		TEST 🔲	ı	MPLEMENT	
WHAT IS THE OBJECT	TIVE OF THIS PROJECT? WI	HAT QUESTION	IS DO YOU	WANT TO AN	SWER? WHAT ARE Y	OUR PRED	ICTIONS?	
LIST TASKS NECESSARY TO SET UP AND CONDUCT THE TEST (THINK 'ONENESS' AND 'DROP TWO')								
What? (Specific task)	How? (Checklist, tally sheet) Who? (Na		ame or role) When		es, dates - be specific)	Where? (Program, location site - be		
						specific)	ecific)	
OUTLINE YOUR PDSA DATA COLLECTION PLAN (WHAT, HOW, WHO WHEN AND WHERE)								
What data will be collected?	How? (Checklist, tally sheet) Who? (Nan		me or role) When? (Times, dates - be		es, dates - be specific)	Where will the data be recorded?		

Baseline Practice Survey Due Monday 3/31

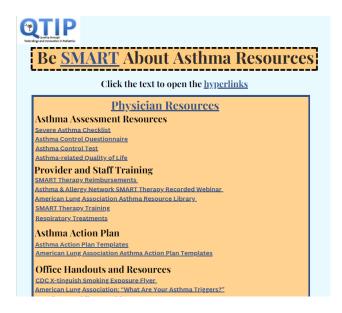




Workshop Resources



QTIP Resources







Patient Resources

SMART Therapy

My S.M.A.R.T. Asthma Booklet

Asthma Triggers

Avoiding and Controlling Asthma Triggers

Asthma Resource Library

This interactive library includes videos, toolkits, worksheets, infographics and other resources for











Midpoint & Final Group Calls

During your assigned time, please come prepared to share your progress.

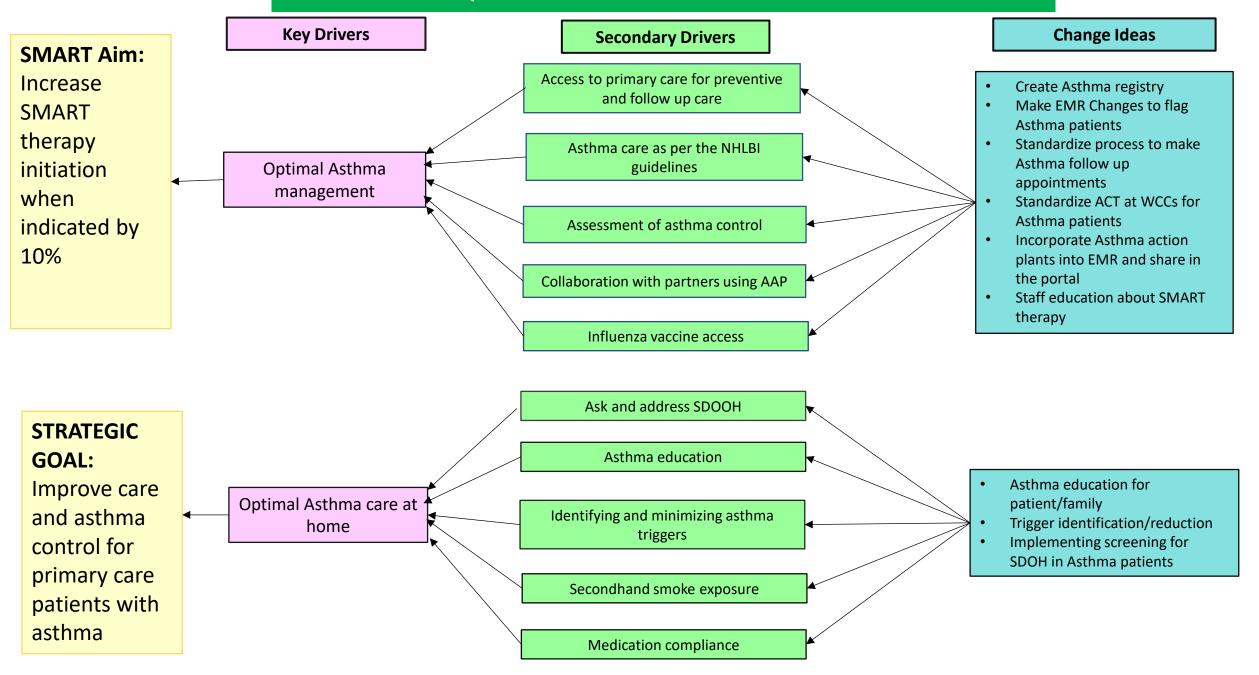
Examples of information to share include:

- •Changes made based on feedback from a previous meeting or your PDSA cycles
 - Handouts/educational material developed, shared and posted
 - Data gathered
 - Staff involvement/changes
- Lessons learned (successes and challenges)
 - Benefits to your team, patients, etc.
- •QI Tools
 - Types of measures (process, outcome, balancing)
 - YOUR Key Driver Diagram (if you created a specific one for your practice)
 - Flow Chart/Process Map
 - Run charts
 - Etc.



Final presentation must be in PowerPoint form

QTIP ASTHMA DRIVER DIAGRAM







ABP MOC Part 4

To be eligible for Part 4 credits:

- •Review the driver diagram and pick a measure
 - Pick or create a change idea that you want to work on
- Write your Aim statement
 - Define the denominator, numerator, percentage improvement and time frame
- •Collect 3(including the baseline) or more data sets and 2 QI Cycles
 - Do 2 PDSA or QI Techniques during the 12-week period
 - (March 24 May 30)
 - Can use QIDA data
 - Can use existing projects
- Complete the QTIP/ABP generic attestation form and send it to: ramkumarjayagopalan@gmail.com

Questions.....