



The Royal Australian and New Zealand College of
Obstetricians and Gynaecologists

“Excellence in Women’s Health”

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THE QUALITY CYCLE

Effective PR&CRM requires you to engage in a number of steps, creating a cycle of quality.



- IDENTIFY** an issue or area for review/improvement
- EVALUATE** your current performance
- SET GOALS** that would improve your performance
- ACT** on your goals
- EVALUATE** the effectiveness of your action
- IDENTIFY...** and on it goes

Quality Cycle Stage	Quality Improvement Process	Questions to Answer	Example
IDENTIFY an issue or area for review/improvement	<ul style="list-style-type: none"> • Clinical experience • Literature review • Data collection 	<ul style="list-style-type: none"> • Which area in your clinical practice requires improvement? • What is the rationale behind this? 	Inconsistent follow-up of pathology reports. Reports missing from histories or follow-up action not clearly documented.
EVALUATE your current performance	<ul style="list-style-type: none"> • Guidelines • Literature review • Collecting data • Comparing results against standards • Audit N.B extra PR&CRM Points can be claimed for doing a Clinical Audit. Please see the audit template. 	<ul style="list-style-type: none"> • How did you evaluate the situation or processes? • What forms the basis to the standard that you would like to achieve in this area? • How did you collect the data to support the need for this improvement? • How long did it take? 	Review previous 6 months data in comparison with NH&MRC based standard.
SET GOALS that would improve your performance	<ul style="list-style-type: none"> • Discussing the problem with all staff involved • Holding brainstorming sessions • Documenting plans to bring current practice into line with clinical standards 	<ul style="list-style-type: none"> • What goals would you like to achieve? • How are you going to set out to achieve these goals? • What methods did you use? • How long did it take? 	To develop a new tracking and documentation system in consultation with pathology laboratory, medical, nursing and reception staff.
ACT on your goals	<ul style="list-style-type: none"> • Implement change 	<ul style="list-style-type: none"> • What changes have been made? 	New tracking system implemented.
EVALUATE the effectiveness of your action	<ul style="list-style-type: none"> • Re-audit to assess impact of changes • Compare outcomes with standards 	<ul style="list-style-type: none"> • How did you re-evaluate this area? • What was the result of the implemented changes to your practice? 	Re-audit process to ensure that improved follow-up of Pap smears has occurred.
IDENTIFY and on it goes	<ul style="list-style-type: none"> • Refine the problem and continue to follow the quality cycle. 	<ul style="list-style-type: none"> • How do you plan to monitor these changes? 	Conduct random audit every 12 months to ensure compliance. Should any problems be identified then start the process again.

Please keep a summary of your activity as verification documentation

To claim points in the Practice Review & Clinical Risk Management category, enter the title of the activity and the amount of points on your Annual Points Claim form.

For queries, contact PR&CRM staff on +61 3 9417 1699 or prcrm@ranzcog.edu.au

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