UFCOM-J Resident/Fellow Quality Improvement Project Report:

Project Name: *Enter the name of the project.*

_____
_____
_____

Keywords: *Enter 3-5 topic areas that project addressed.*

_____
_____
_____

Project was submitted to QIPR:
- ❑ Yes
- ❑ No

Clinical Location of Project: *Enter the main clinical department where project was performed.*

_____
_____
_____

Start Date: **_____**
End Date: **_____**

Team Members: *Enter the names of all the people involved in the project, list all roles.*

***Professional Role Examples** –*
Faculty, Resident/Fellow, Mid-level Provider (APRN, PA, CRNA, etc.), Nursing, Pharmacy, IT/EPIC, Administrative Support, Finance/Billing, Other (describe)

***Project Involvement** – Include all project jobs completed by each team member –*
Project Champion, Process Owner, Team Lead, Project Problem Identification, Project Problem Investigation/Measurement, Problem Data Collection, Root Cause Analysis, Brainstorm Solutions/Research Best Practices, Develop Pilot Plan, Implement Pilot Plan, Monitor Plan/Data Collection, Pilot Data Analysis, Development of Modifications to Pilot Plan, Implement Modifications, Monitor Progress/ Data Collection (2nd round), Modification Data Analysis, Final Results Analysis, Development of Control Plan (long-term maintenance), Summarize results/lessons learned/next steps

Name	Professional Role	Department / Clinical Site	Project Involvement (list all that apply)

Background: *Why did you start? Answer the questions below:*

- **What is the problem?**

  _____
  _____
  _____

- **Where does the problem occur?**

  _____
  _____
  _____

- **We know this because...** This problem was identified through: (*check all that apply*)
  - ❑ Review of the literature
  - ❑ Local QI initiative
  - ❑ Regional/national QI initiative
  - ❑ Personal clinical experience
  - ❑ Patient safety issue
  - ❑ Other, please describe _____

- **When, or under what conditions, does the problem occur?**

  _____
  _____
  _____

- **Are certain populations affected by the problem more than others? What population might fall into the gaps from this issue? How can you include input from the community, populations affected?**

  _____
  _____
  _____

- **What is the impact or extent of the problem?**

  _____
  _____
  _____

Problem Statement: *Explicitly and concisely state the project's purpose.*
(In 1-2 sentences, describe the problem in clear, quantitative terms. Do not describe a goal or solution.)

_____
_____
_____
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Project Goal:
Quantify the goal for the project in a one-line statement that includes a measurable indicator. Remember good goals are SMART (specific, measurable, actionable, reasonable and time-bound). Do not specify a solution.
Example: Goal is to decrease/increase (choose one) _____(what are you trying to decrease/increase) from _____(baseline) to _____ (target) by _____ (target date)

_____
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Metrics: *List measurements used to collect baseline and project data*

Outcome measure:
What outcome(s) are we trying to achieve? Outcomes matter to patients (patient satisfaction, death, length of stay) or are connected to something with robust evidence to an outcome (e.g. lowering HgbA1C). This is related to your SMART AIM.
Examples:
- *Sepsis mortality: # who died with sepsis this cycle/all patient with sepsis this cycle.*
- *Central line infections: Total #CLABSI's per 100 patient days this cycle.*
- *Wait time: Mean (or Median) wait times for all patients seen this cycle*

_____
_____
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Process measures:

These metrics measure compliance with the processes that we think will lead to improved outcomes. For example, we think that order sets may decrease sepsis mortality and central line placement insertion bundles may prevent CLABSI's. The process measures would be

- *# of admissions for sepsis using the sepsis order set/all admissions this cycle*
- *# central lines placed using the insertion bundle/ all lines placed this cycle*

If compliance with process measures is high, but outcomes are not improving, you may need a different process

_____
_____
_____
_____
_____
_____

Balance measures:

What are the unintended consequences of this project? If we are safely doing less, will we undertreat some conditions? If we implement new procedures, will the staff find them burdensome or neglect other important tasks? If we try to administer antibiotics for sepsis within an hour of presentation, will we overtreat viral infections?

_____
_____
_____
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QI Methodology Used *(check primary method used):*
- ❑ PDSA (Plan, Do, Study, Act) AKA The Model for Improvement
     (Complete only PDSA section of form below)
- ❑ DMAIC (Define, Measure, Analyze, Improve, Control) AKA Six Sigma
     (Complete only DMAIC section of form below)

Please complete only the Branch of the Form for the chosen QI Method used.

The Plan-Do-Study-Act method is a way to test a change that is implemented. By going through the prescribed four steps, it guides the thinking process into breaking down the task into steps and then evaluating the outcome, improving on it, and testing again. **You should complete at least 3 cycles**.

CYCLE 1:

Plan:
I plan to: *Here you will write a concise statement of what you plan to do in this testing. This will be much more focused and smaller than the implementation of the tool. It will be a small portion of the implementation of the tool.*

_____
_____
_____
_____
_____
_____

I hope this produces: *Here you can put a measurement or an outcome that you hope to achieve. You may have quantitative data like a certain number of doctors performed teach-back, or qualitative data such as nurses noticed less congestion in the lobby.*

_____
_____
_____
_____
_____
_____

Steps to execute: *Here is where you will write the steps that you are going to take in this cycle. You will want to include the following:*
- *The population you are working with – are you going to study the doctors' behavior or the patients' or the nurses'?*
- *The time limit that you are going to do this study – remember, it does not have to be long, just long enough to get your results. And, you may set a time limit of 1 week but find out after 4 hours that it doesn't work. You can terminate the cycle at that point because you got your results.*

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Do:

After you have your plan, you will execute it or set it in motion. During this implementation, you will be keen to watch what happens once you do this.

What did you observe? *Here you will write down observations you have during your implementation. This may include how the patients react, how the doctors react, how the nurses react, how it fit in with your system or flow of the patient visit. You will ask, "Did everything go as planned?" "Did I have to modify the plan?"*

_____
_____
_____
_____
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_____

Study:

After implementation you will study the results.

What did you learn? Did you meet your measurement goal? *Here you will record how well it worked, if you meet your goal.*

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_____
_____
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_____
_____

Act:

What did you conclude from this cycle? *Here you will write what you came away with for this implementation, if it worked or not. And if it did not work, what can you do differently in your next cycle to address that. If it did work, are you ready to spread it across your entire practice?*

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CYCLE 2:

Plan:
I plan to:

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I hope this produces:

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Steps to execute:

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Do:
What did you observe?

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_____
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Study:
What did you learn? Did you meet your measurement goal?

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Act:
What did you conclude from this cycle?

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CYCLE 3:

Plan:
I plan to:

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I hope this produces:

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Steps to execute:

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Do:
What did you observe?

_____
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Study:
What did you learn? Did you meet your measurement goal?

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Act:
What did you conclude from this cycle?

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Final Results Analysis:
Use this section to document process/outcome/balance measures over time. Attach table, including time points and measures. Or may attach Run Chart.
Attach any project data & analysis tools.
Example Tools:
- ❑ Table of measures and dates/times.
- ❑ Run Chart
- ❑ Description of unintended consequences such as unexpected benefits, problems, failures, or costs associated with the intervention(s)

Use this section to answer the following:
- *What did you learn? Did you meet your measurement goal? How well?*
- *How will you ensure the results are sustained?*

_____
_____
_____
_____
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Summary Description:

Short paragraph addressing the following:

- *Key findings, including relevance to the rationale and specific aims*
- *Lessons learned*
- *Next steps*

_____
_____
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_____

DMAIC Branch:

DEFINE:

Problem Statement: *Explicitly and concisely state the project's purpose.*
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_____
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_____

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Example: Goal is to decrease/increase (choose one) _____(what are you trying to decrease/increase) from _____(baseline) to _____ (target) by _____ (target date)

_____
_____
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(Optional) Attach any problem definition tools.
Example Tools:
- ❑ Gantt Chart
- ❑ VOC
- ❑ Process Mapping
- ❑ SWOT

MEASURE:

Baseline Measures:
Use this section to document the steps taken by the team & current conditions found.

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_____
_____
_____
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_____

<u>**Root Cause Analysis:**</u>

Use this section to list the actions taken by the team to think through potential solutions for the problem.

Example: Team used brainstorming techniques including idea generation and 5 Whys to identify the root causes of the top causes/problems. Main contributors were determined to be:

- *Lack of consistent use of search terms in EHR library inhibits search capabilities.*
- *Lack of standardization of searches by care partners results in inconsistent success.*
- *Most care partners are not trained on the use of Boolean search capabilities.*

(Optional) Attach any baseline measures tools.

Example Tools:
- ❑ Fishbone or 5whys
- ❑ Check Sheet & Pareto
- ❑ Data Collection Plan
- ❑ ID root causes

<u>**ANALYSIS:**</u>

Potential Solutions:

Use this section to list the actions taken by the team to think through potential solutions for the problem

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_____
_____
_____
_____
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(Optional) Attach any analysis tools.

Example Tools:
- ❑ Brainstorm solutions
- ❑ Research Best Practices
- ❑ Interview stakeholders
- ❑ List Reduction / Selection Matrix
- ❑ Identify Solution(s)

<u>**IMPROVE:**</u>

Improvement Plan:

Use this section to document any improvements the team implemented.

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_____
_____
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_____

(Optional) Attach any improvement tools.
Example Tools:
- ❑ Develop pilot plan
- ❑ Implement pilot plan
- ❑ Communicate plan

Plan Monitoring Measures:
Use this section to document process/outcome/balance measures over time. Attach table, including time points and measures. Or may attach Run Chart.
Attach any project data & analysis tools.
Example Tools:
- ❑ Table of measures and dates/times.
- ❑ Run Chart
- ❑ Description of unintended consequences such as unexpected benefits, problems, failures, or costs associated with the intervention(s)

Pilot Analysis:
Use this section to answer the following:
- *What did you learn? Did you meet your measurement goal? How well?*
- *If it did not work, what can you modify to improve?*
- *If it did work, are you ready to spread it across your entire practice?*

_____
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_____

CONTROL:
Control Plan:
Use this section to document interventions put into place to ensure all improvements are sustained.
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_____
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_____
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(Optional) Attach any tools.
- ❑ SOPs developed/ documented
- ❑ Learning & Future Plans summarized

Summary Description:
Short paragraph addressing the following:
- *Key findings, including relevance to the rationale and specific aims*

- *Lessons learned*
- *Next steps*

_____
_____
_____
_____
_____
_____