

Using Labs Wisely:
Quality Improvement Plan

Hospital Name:

Date: Click or tap here to enter text.

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| Problem Statement**\* Required** |
| Please provide one or two sentences that identifies and summarizes a condition, problem, or issue. A problem can be defined as the gap between the existing state and the desired state of a process. |
| **What is the problem?**   |
| Click or tap here to enter text. |
| **Why is it a problem?**  |
| Click or tap here to enter text. |
| **Where do we observe the problem/who is impacted?** |
| Click or tap here to enter text. |
| **When did we first observe the problem? How did we observe it?** |
| Click or tap here to enter text. |

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| **Background and Alignment with Organization Strategic Direction\* Required**  |
| Please detail how the QI initiative(s) aligns with the strategic direction of the organization (link the QI initiative with the specific organizational strategic priority). |
| Click or tap here to enter text. |

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| **Establishing a Quality Gap with Baseline Data (if available)\* Required** |
| **What are you trying to accomplish?** |
| Click or tap here to enter text. |
| **What parts of the overarching problem will you address?** |
| Click or tap here to enter text. |

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| **Engaging Others (Stakeholder Mapping)** (Optional) |
| Click or tap here to enter text. |

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| **Resources Required** (Optional) |
| Click or tap here to enter text. |

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| **Aim Statement)\* Required** |
| Should, at minimum, describe the target population, desired improvement and targeted timeframe (remember “how much, by when”) Consider using the SMART approach: specific, measurable, actionable, realistic and timely. |
| Click or tap here to enter text. |

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| **Data/Measurement\* Required** |
| What data will you be collecting and analyzing to support the QI initiative? Please list the data elements that will support the QI initiative. |
| **Outcome Measure(s):** |
| Click or tap here to enter text. |
| **Process Measure(s):** |
| Click or tap here to enter text. |
| **Balancing Measure(s):** |
| Click or tap here to enter text. |

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| **Describing the problem with process tools** (Optional) |
| Click or tap here to enter text. |

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| **Theory of Change and Candidate Change Concepts/Ideas** (Optional) |
| Is it a knowledge problem? A patient expectation problem? An issue related to excess variation? As you consider potential changes, how do the candidate change concepts or ideas map to the theory for why the problem exists? What are the key points within the current state that are opportunities for change and improvement? You may want to mention here barriers to change that you encountered and how you overcame them. |
| Click or tap here to enter text. |

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| **PDSA Cycles (ideally 2-3 cycles at least)** (Optional) |
| Click or tap here to enter text. |

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| **Project Results\* Required** |
| Click or tap here to enter text. |

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| **Anticipated Barriers and Mitigation Strategies\* Required** |
| Click or tap here to enter text. |

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| **Lessons Learned\* Required** |
| Please list the strategies your organization will utilize to support physicians in the reflection of the individual or group data that is being used for the QI initiative. |
| Click or tap here to enter text. |