

Quality Improvement Initiative Plan



Quality
Insights

Renal Network 3



QUALITY IMPROVEMENT INITIATIVE PLAN

Facility Name: _____

Facility CMS Certification Number (CCN): _____

Designated Contact Name: _____ Title: _____

Email: _____ Phone: _____

Additional Team Members: _____ Title _____

_____ Title _____

_____ Title _____

QII Plan Development Date: _____

Provide a description of the concern or problem that was identified.

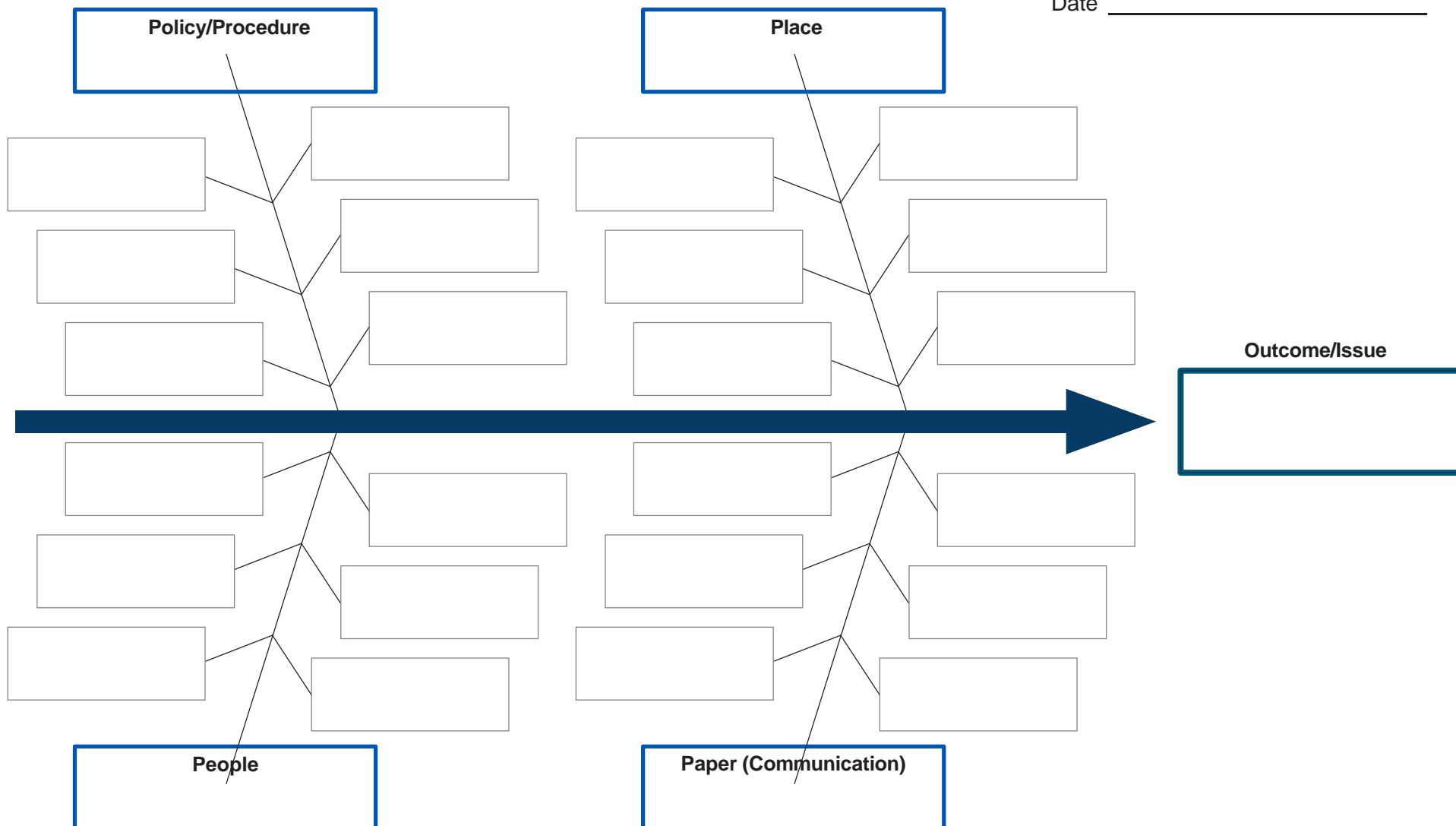
Perform a Root Cause Analysis (RCA) to look into the issue to see why it happened. For a common approach to performing a RCA, use the Fishbone Diagram (page 3), the 5 Whys Tool (page 4) or other RCA tool that you prefer.

Depending on your quality opportunity, one or the other might suffice. Typically, you would not use two different RCA tools; therefore, select the tool that best matches the extent of the issue you are striving to solve, identifies all of the root causes and assists you in developing appropriate interventions. Describe your findings.

FISHBONE DIAGRAM: ROOT CAUSE ANALYSIS

CMS Certification Number (CCN) _____

Date _____



Comments:

5 WHYSTOOL

CMS Certification Number (CCN) _____

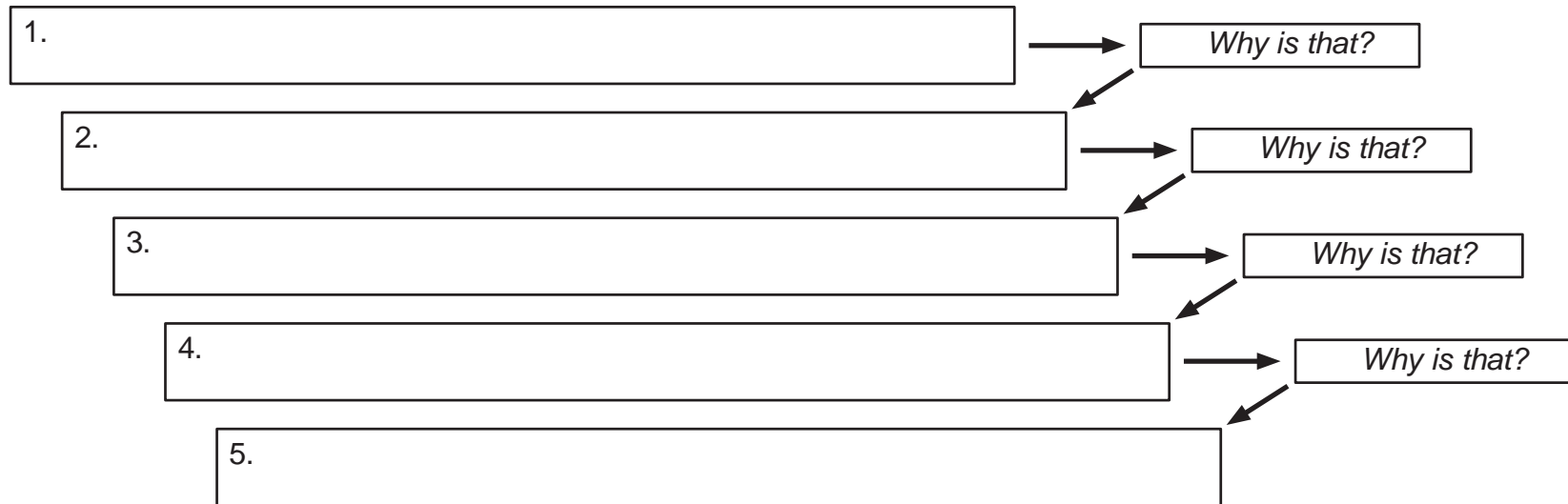
Date _____

Steps

- a) Define a problem; be specific.
- b) Ask why this problem occurs and list the reasons in Box 1.
- c) Select one of the reasons from Box 1 and ask, "Why does this occur?" List the reasons in Box 2.
- d) Continue this process of questioning until you have uncovered the root cause of the identified problem. If there are no identifiable answers or solutions, address a different reason.

The problem:

Why does this occur?



Summary

Goal Setting Worksheet



Directions: Goal setting is important for any measurement related to performance improvement. This worksheet is intended to help QAPI teams establish appropriate goals for individual measures and also for performance improvement projects. Goals should be clearly stated and describe what the organization or team intends to accomplish. Use this worksheet to establish a goal by following the SMART formula outlined below. Note that setting a goal does **not** involve describing what steps will be taken to achieve the goal.

Describe the business problem to be solved:

Use the SMART formula to develop a goal:

SPECIFIC

Describe the goal in terms of 3 'W' questions:

What do we want to accomplish?

Who will be involved/affected?

Where will it take place?

MEASURABLE

Describe how you will know if the goal is reached:

What is the measure you will use?

What is the current data figure (i.e., count, percent, rate) for that measure?

What do you want to increase/decrease that number to?

ATTAINABLE

Defend the rationale for setting the goal measure above:

Did you base the measure or figure you want to attain on a particular best practice/average score/benchmark?

Is the goal measure set too low that it is not challenging enough?

Does the goal measure require a stretch without being too unreasonable?

RELEVANT

Briefly describe how the goal will address the business problem stated above.

TIME-BOUND

Define the timeline for achieving the goal:

What is the target date for achieving this goal?

Write a goal statement, based on the SMART elements above. The goal should be descriptive, yet concise enough that it can be easily communicated and remembered.

[*Example:* Increase the number of long-term residents with a vaccination against both influenza and pneumococcal disease documented in their medical record from 61 percent to 90 percent by December 31, 2011.]

Tip: It's a good idea to post the written goal somewhere visible and regularly communicate the goal during meetings in order to stay focused and remind caregivers that everyone is working toward the same aim.

Clearly state the goal you are trying to accomplish _____

Date QII plan will begin _____ CMS Certification Number (CCN) _____

All interventions and planned actions should be implemented using the [PDSA cycle](#).

Area Needing Improvement	Planned Action/Intervention	Staff responsible	Date Due	Measurement and Monitoring Plan <i>(Describe how you will collect data to evaluate the results and monitor progress.)</i>	Status and date complete	Results and Lessons Learned
Area needing improvement 1						
Area needing improvement 2						

Clearly state the goal you are trying to accomplish _____

Date QII plan will begin _____

CMS Certification Number (CCN) _____

Area Needing Improvement	Planned Action/Intervention	Staff responsible	Date Due	Measurement and Monitoring Plan <i>(Describe how you will collect data to evaluate the results and monitor progress.)</i>	Status and date complete	Results and Lessons Learned
Area needing improvement 3						
Area needing improvement 4						

QII EDUCATIONAL ACTIVITIES

CMS Certification Number (CCN) _____

Date _____

Educational Activities

QII Measure Concern Identified	Activity	Training Topic	Date Training Was Completed	Staff	Attendance List (yes/no)

Describe your plan for sustainability. You should build into your plan how you will continue the improvement efforts after completion of your QI plan.