

CHARTER FORM

Name:
Team Members:
Project Title:
University/Organization Name:
Health System Sponsor Name:
What are we trying to accomplish? Aim statement (How good? For whom? By when? 1-2 sentences):
Problem to be addressed (Defines WHAT broadly; 2-3 sentences)
Reason for the effort (Defines WHY; 4-5 sentences)
Expected outcomes/benefits (Defines WHAT specifically, still not HOW; 3-4 sentences)
How do we know that a change is an improvement?
(Identify outcome, process, and balancing measures; 4-5 sentences)
What changes can we make that will lead to improvement? (Initial changes, barriers, key stakeholders; 4-5 sentences)
Read the following statement and check the box below before submitting this charter to the IHI Open School. □ I certify that my faculty advisor has reviewed and approved this charter.



Charter Assessment

---DO NOT COMPLETE THIS PAGE - FOR IHI USE ONLY---

What are we trying to accomplish?	Needs Improvement	Meets Expectations	Exceeds Expectations
Aim statement is clear and answers how good, by when, and for whom.			
Problem to be addressed clearly justifies need for improvement.			
Identifies aspect of care that will be improved and subsystems that will be affected.			
The impact (positive and negative) on patients is clear.			
Supportive background information is provided.			
Specific objectives and numerical goals are clearly defined.			
Project can be completed within time frame.			
Addresses anticipated products, tools, and deliverables that will be used in process.			

How do we know that a change is an improvement?	Needs Improvement	Meets Expectations	Exceeds Expectations
An appropriate family of measures is identified (minimum of 1 outcome measure, 2-3			
process measures and a minimum of 1 balancing measure).			
Measures identified are directly related to the project description, objectives, and goals.			
Each measure is appropriately operationally defined.			
Data collection on metrics is reasonable and practical given scope of QI project.			

What changes can we make that will lead to improvement?	Needs	Meets	Exceeds
what changes can we make that will lead to improvement.	Improvement	Expectations	Expectations
Initial changes to be tested are clear and well defined.			
Specific strategy/methodology (i.e. driver diagram) used in selecting change is			
identified and explained.			
Project constraints/barriers are defined including how they will be addressed.			
Identifies key stakeholders and explains their role in the process.			



PLAN DO STUDY ACT (PDSA) FORM

		Cycle #:
	Start Date:	End Date:
Project Title:		
University/Organization Name:		
Health System Sponsor Name:		
Objectives of this Cycle:		
Test a Change		
Implement a Change		
Spread a Change		
Short objective of cycle:		
PLAN Act Plan Study Do		
Test/Implementation Plan:		
What change will be tested or implemented?		
How will the change be tested or implementation be conducted (consider s	mall scale early)?	
Who will run the test or implementation?		
Where will the test or implementation take place?		
When will the test or implementation take place?		
Predictions:		
1.		
2.		
3.		
4.		



Data Collection Plan	1	•
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What information is important to collect?

Why is it important?

Who will collect the data?

Who will analyze the data prior to Study?

Where will data be collected?

When will the collection of data take place?

How will the data (measures or observations) be collected?

DO



Observations:

Record observations not part of the plan:

Did you need to tweak the original Plan?

Begin analysis of data (graph of the data, picture):

STUDY



Questions: Copy and paste Questions and Predictions from Plan above and evaluate learning. Complete analysis of the data. Insert graphic analysis whenever possible.

1. Prediction:

Learning (Comparison of questions, predictions, and analysis of data):



2. Prediction:

Learning (Comparison of questions, predictions, and analysis of data):

3. Prediction:

Learning (Comparison of questions, predictions, and analysis of data):

4. Prediction:

Learning (Comparison of questions, predictions, and analysis of data):

Summary (Look at your data. Did the change lead to improvement? Why or why not?):

ACT



Describe next PDSA Cycle: Based on the learning in "Study," what is your next test?

Problem Description
Describe Current Process
Describe Current i Tocess
Identify Root Causes

Proposed Solution and Action Plan
Operationalizing Action Plan
Data Collection – Outcome Measure and Method of Ascertainment

Α	nalysis
Α	ctions on Lessons Learned

PDCA/ PDSA	7 STEP	7 QC Tools			
Plan	 Select a Theme Collect Data Analyze causes/opportunities 	Check sheet, graph, Histogram, scatter diagram, Pareto diagram, cause-and-effect diagram, Flowcharts			
Do	4. Plan and implement solution / improvement	Flowcharts			
Check/ Study	5. Evaluate effects	Check sheet, graph, Histogram, scatter diagram, Pareto diagram, cause-and-effect diagram, run chart/control chart			
Act	6. Standardize7. Reflect on process	Flowchart			
Repetition	Process	Tools			

Reference: Tumolo (isites.harvard.edu/fs/docs/.../Tumolo%20Toolbox.ppt)





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Project Title:	Health System Sponsor Name:
Team Members:	
Team Members:	

Program: _ Situation:			Logic Mod	del							
Situation.											
Inputs Outputs						Outcomes Impact					
Input	ts	ЦП	Activities	Service Delivery	Short Term Long Term Impact						
Assumptions	•					External Factors					

Evaluation Questions Focus - Collect Data - Analyze and Interpret - Report							
Indicators							

QI Bootcamp Exercises

Checklist and checksheet

- Open QI Macro
- Choose QI Macro>Fill-In-Blanks Template>Improvement Tools>Checklist
- Choose QI Macro>Fill-In-Blanks Template>Improvement Tools>Checksheet

Scatter Plot

- Open Scatter.xls
- What is the correlation between daily calorie intake and weight gain?

Bar Chart

- Open Healthcare.xls
- Click on XmR data tab
- What is monthly patient satisfaction data for past year?

Histogram

- Click on histogram tab
- What is radiology report turnaround time data?

Run Chart

- Click on XmR data tab
- Do a run chart on patient falls from Jan 04 to May 06

Control Chart

Do a control chart on the same data

Flowcharting

- Open Lucidchart
- Make a flowchart of a pediatric patient coming into an office including steps:
 - filling out paper work
 - o determining whether to go to sick child room or not
 - terminate by seeing doctor

Pareto chart

- Go back to Healthcare.xls
- Go to Pareto tab

Bootcamp Exercises

• Make pareto chart of medication errors at baseline

Fishbone diagram

 Go to QI Macro> Fill-In-Blanks Template>Flowchart and Fishbones>Ishikawa-Fishbone

Mindmapping

- Open Lucidchart
- Make a mindmap

Pareto Chart

- · Go back to Healthcare.xls
- Go to Pareto tab
- Make pareto chart of medication errors at baseline, 6, and 18 months