CHAM QI Project Charter

**Focus on highlighted numbers; the remaining can be copied from your application proposal*

1. Project Title: Provide a brief, descriptive title for your project.

Click here to enter text.

2. Problem: What is the problem and why is it important? Use numerical examples when possible. Include a brief background of the problem that you are addressing.

Click here to enter text.

3. Setting Aims: Which of the six IOM (Institute of Medicine) elements for health care improvement is the project addressing? (Safe, Effective, Patient-Centered, Timely, Efficient, and Equitable Care) You may list more than one element.

Click here to enter text.

4. SMARTIE Aim Statement: What will you improve, at what specific site/location, by how much, and by what date? See this link on how to develop a SMARTIE Aim Statement: From SMART to SMARTIE Objectives

Click here to enter text.

5. Project Team Members:

Project Leader: Click here to enter text.

(This is the person responsible for the project proposal, modeling, approval, implementation, and all other areas for project completion)—Usually you!

Project Sponsor: Click here to enter text.

(Identify a clinical leader who will guide you with the proper support for implementation and completion of your QI project)

Administrative Sponsor: Click here to enter text.

(Identify an administrative leader who will provide any necessary key administrative and executive support to increase the success of your project)

Team Key Stakeholders: Click here to enter text.

Children's Hospital at Montefiore Einstein

(Include all key team members or groups of providers who will be essential to the implementation of your QI project and whether they have agreed to participate in your project)

PI Coach: Click here to enter text.

6. Measures: What specific measures will you use to know your change is an improvement? Include outcome, process, and balancing measures. Please be as specific as possible. As examples--what is your numerator and denominator, start time and end time? See this link on how to develop QI measures:

https://www.ihi.org/how-improve-model-improvement-establishing-measures.

Click here to enter text.

7. Baseline data: What is the current state for the measures you list above? What is the source of your baseline data, and is it adequate to indicate that an improvement is needed and to see a change going forward?

Click here to enter text.

8. Data Collection: Who will collect your data? What will be the source and how often will it be collected? Ideally, the project data will be from the same source and collected the same way as the baseline data. Provide details about how the data is collected and what, if any, differences exist in the methodology of data collection for your project outcomes compared to your baseline comparative data.

Click here to enter text.

9. Intervention(s): What system change(s) will you put in place to improve the process (if known) and what evidence do you have that they will work? Over the first few weeks of the course, you will learn tools to help identify possible interventions.

Click here to enter text.

10. Tracking Compliance/Adherence: What is your plan to measure compliance and adherence to the changes that you plan to implement? This will be similar or the same as your process measures ideally.

Click here to enter text.

11. Change Roll Out: What is your plan to roll-out the intervention(s) and how will you know the interventions are accepted and working? Who will be responsible for this roll out?

Click here to enter text.

12. Project Sustainability: Who will be responsible for sustaining the implementation of successful interventions and maintaining or continuing measurement of any QI outcomes for your project?

Click here to enter text.

QI Project Checklist to determine need for IRB submission

	Yes	No
1. Does the project assign people or lab specimens to groups for simultaneous comparisons?	☐	☐
2. Is it being conducted in hopes of contributing to generalizable knowledge in the area of study, and not for the sole purpose of improving processes at CHAM? (This includes testing a hypothesis or theory).	☐	☐
3. Is the initial intent to publish the results?	☐	☐
4. Does it involve patients/subjects undergoing procedures that normally would not be conducted for their care or at the workplace (i.e., beyond routine care for patients or outside of standard work routine for employees)?	☐	☐
5. Does it involve randomization of patients/subjects to different treatments, regimens, and or processes?	☐	☐
6. Does it involve the use of a placebo or any other significant deviation from the standard of care (this includes preventative, diagnostic, and treatment measures)?	☐	☐
7. Does it involve increased risk or burden to the participants (e.g., additional blood draws, fatigue, embarrassment, or giving personal information)?	☐	☐
8. Does it involve interactions or observations that do not routinely occur in patient care (for patients) or everyday life?	☐	☐
9. Does it involve releasing data, protected health information (PHI) or personal information to individuals/entities other than for regulatory/accreditation?	☐	☐
10. Does it involve processes that you expect may only be of benefit to individuals as an incidental or delayed effect?	☐	☐