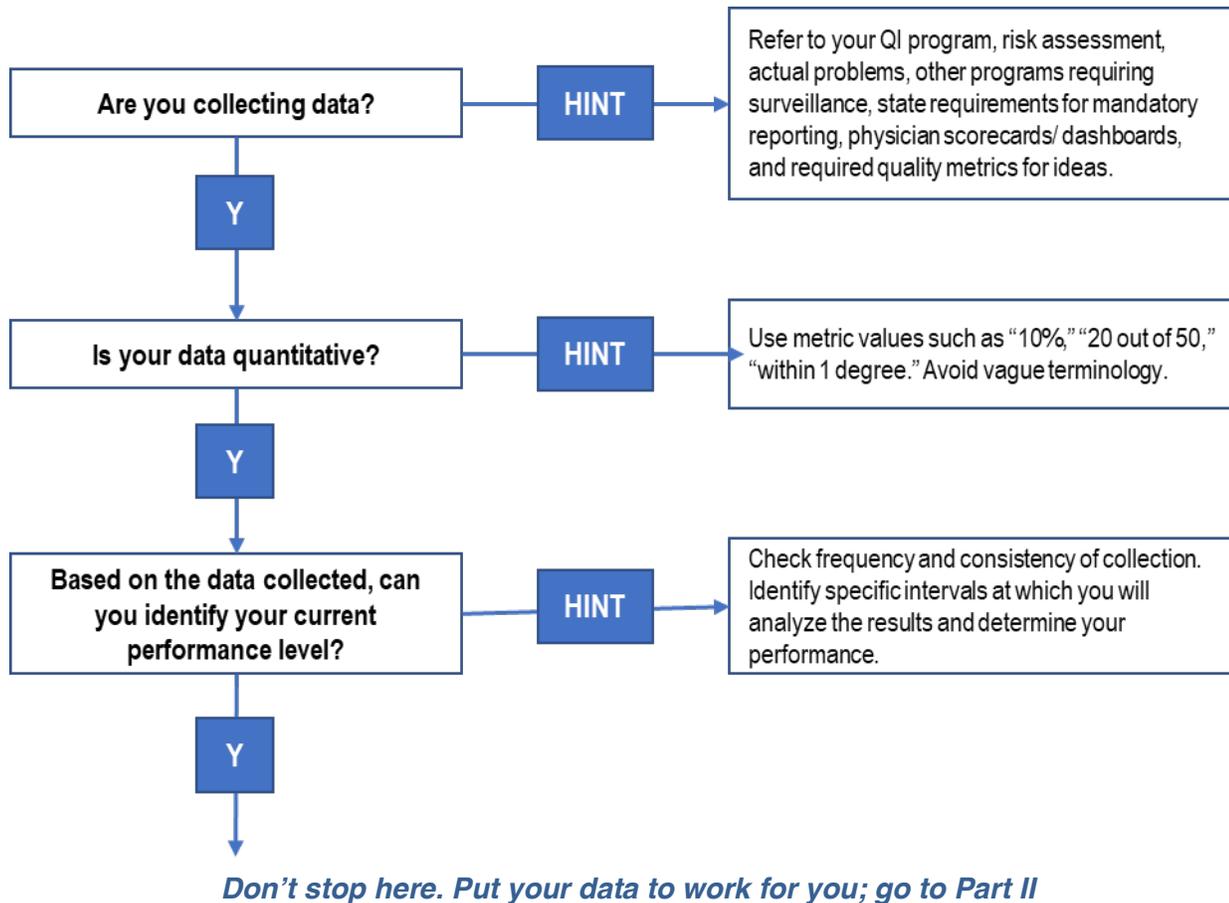


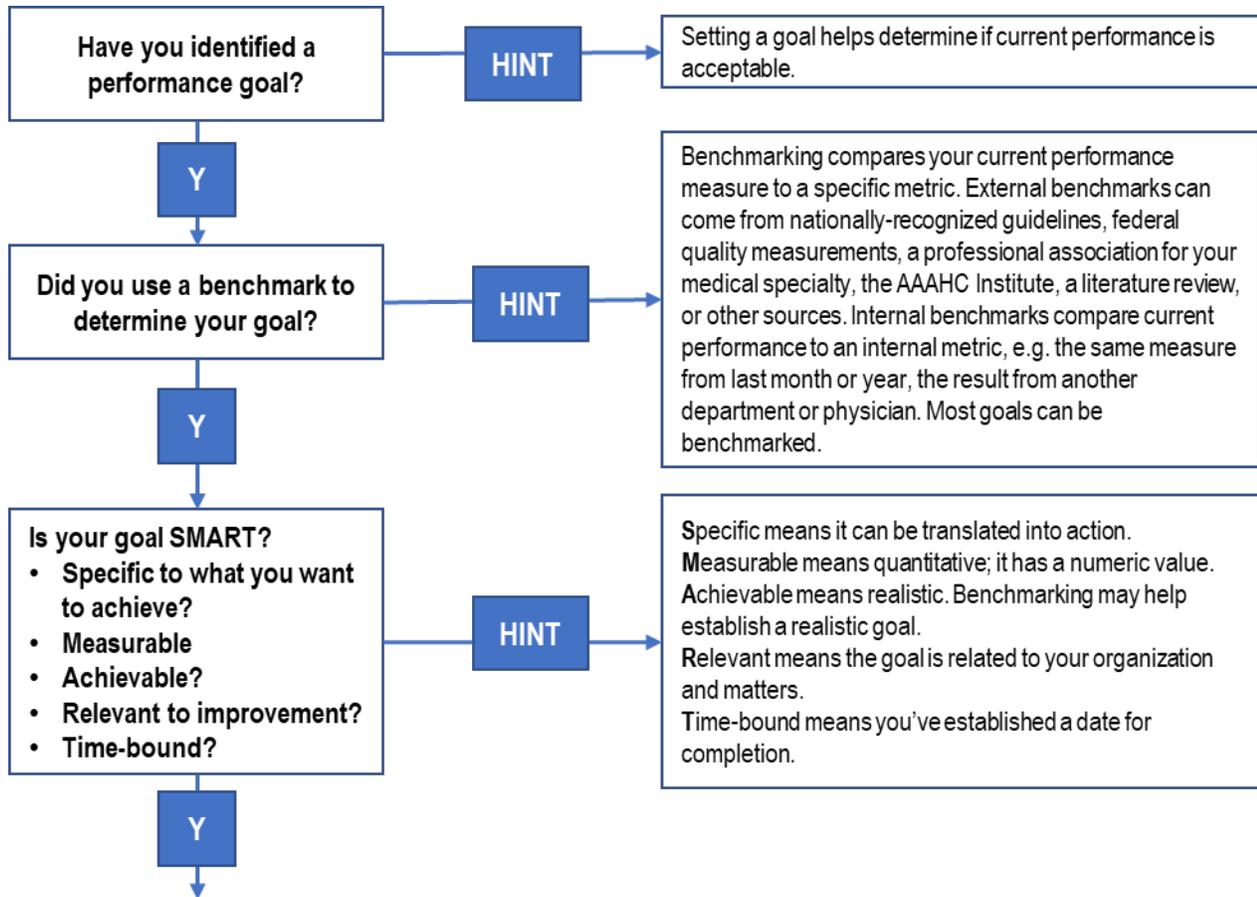
Developing Meaningful Quality Improvement Studies

Organizations seeking accreditation are expected to maintain an active, integrated, organized, ongoing, data-driven program of quality management and improvement. The chart below assumes that you have an existing, written program (Standard 5.1.A). It is intended to help you use existing monitoring activities (Standard 5.1.C) to generate QI studies (Standard 5.1.D) that will result in meaningful organizational improvement.

PART I: COLLECT DATA

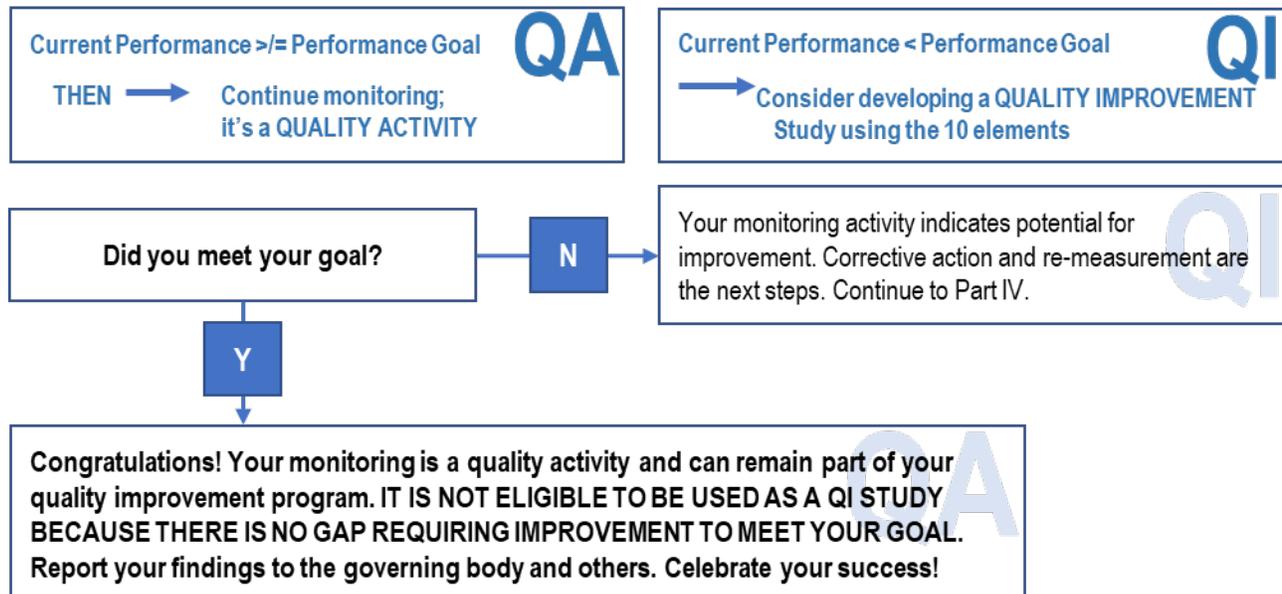


PART II: COMPARE PERFORMANCE

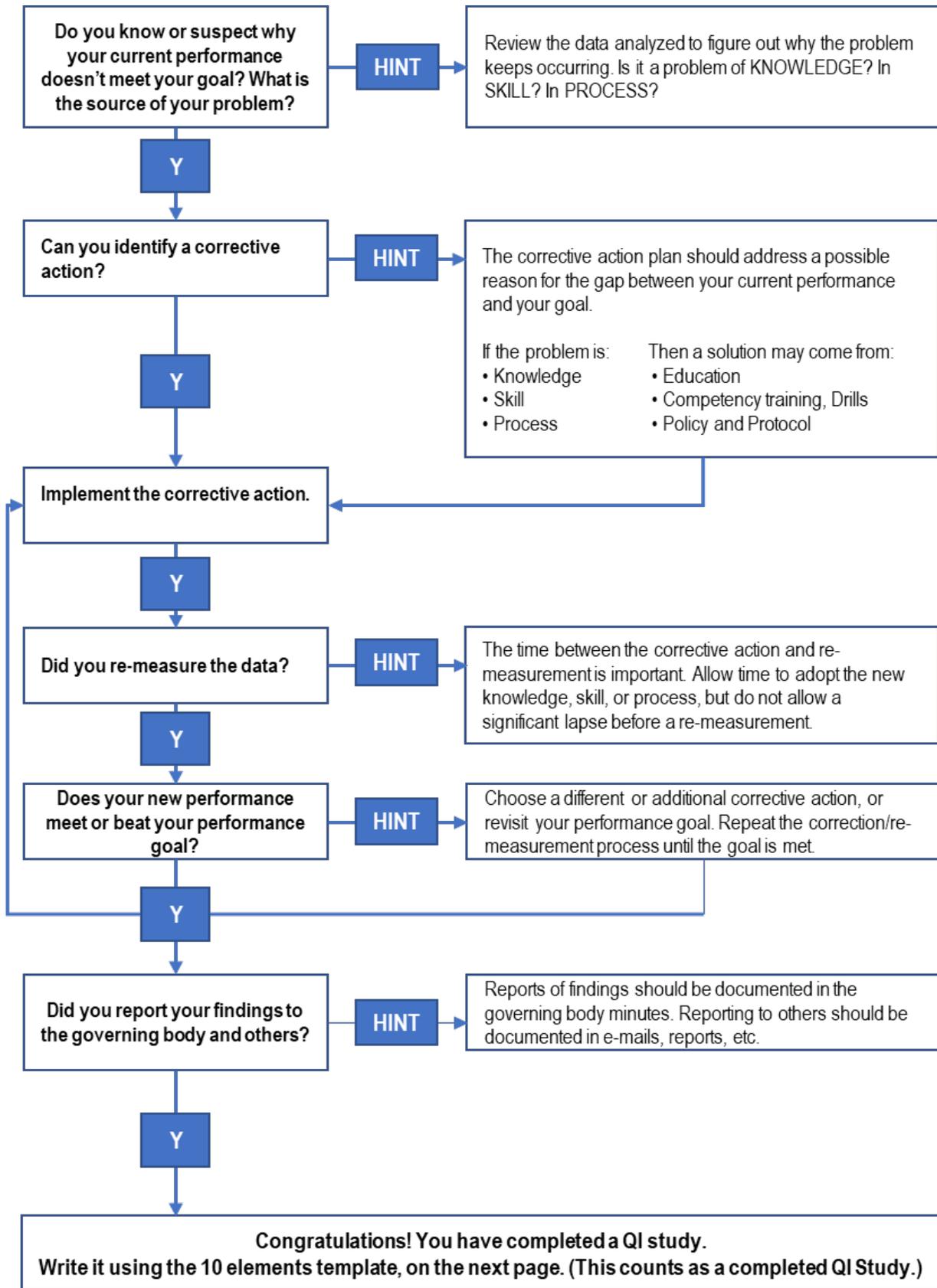


Don't stop here. Put your data to work for you; go to Part III

PART III: SOLVE THE QUALITY EQUATION



PART IV: BUILDING A QI STUDY



The following template is designed to help you through the process of documenting a QI study in your organization using ten distinct elements. The individual items are not meant to be steps completed in order, but elements that should be included in written review of the problem and how it was solved in a way that will be sustainable going forward. Feel free to photocopy these pages for use with multiple studies.

Element 1	Description	Hints for Getting Started
	A statement of the purpose of the QI activity that includes a description of the known or suspected problem, and explains why it is significant to the organization	<ol style="list-style-type: none"> 1. Briefly state your known or suspected problem 2. Describe why it is important for your organization to address this problem
<p><i>Use the space below to state the purpose of the QI study you are conducting, and to describe why it is important for your organization to address this problem</i></p>		

Element 2	Description	Hints for Getting Started
	Identification of the performance goal against which the organization will compare its current performance in the area of study	Determine and describe the level of performance your organization wants to achieve in the area of study. For example, if you are studying medication error rates, your goal might be to have zero medication errors. If you are studying rates of compliance with a particular policy, your goal might be 100% compliance. Before setting your goal, it is often useful to determine if there are internal or external benchmarks available to help you decide on a goal that is both realistic and constructive. Zero occurrences or 100% compliance may not be realistic for every issue you study.
<p><i>Use the space below to identify the performance goal for the QI study you are conducting</i></p>		

Element 3	Description	Hints for Getting Started
	<p>Description of the data that have been or will be collected in order to determine the organization's current performance in the area of study</p>	<p>Determine the following:</p> <ol style="list-style-type: none"> 1. What data is needed in order to verify: <ul style="list-style-type: none"> ▪ Whether the problem actually exists (if this is uncertain) ▪ Frequency and severity of the problem expressed as a number or percentage ▪ Source(s) of the problem 2. How will the data be collected? <p>For example, if you are studying medication error rates, what information do you need in order to determine your current error rate? How will you collect that information?</p>
<p><i>Use the space below to describe the data you will collect for the QI study you are conducting, and how you will collect it</i></p>		

Element 4	Description	Hints for Getting Started
	<p>Evidence of data collection</p>	<p>Describe the data you actually collected. For example, did you review X number of charts for patient visits that occurred from Month A to Month F? What did you look at in those charts? What information did you extract from them? How did you record the data that you collected? At this point you are not trying to describe your conclusions about the data — just the data itself.</p>
<p><i>AFTER YOU HAVE COLLECTED THE DATA FOR THE QI STUDY, use the space below to briefly describe the data collected.</i></p>		

Element 5	Description	Hints for Getting Started
	Data analysis that describes findings about the frequency, severity, and source(s) of the problem(s)	<ol style="list-style-type: none"> Carefully analyze the data you have collected. (The complexity of the analysis you need to do will depend on various factors, such as the amount and type of data you have collected.) Determine what the data tells you about whether the suspected problem actually exists. Describe how the data was analyzed and your findings (conclusions) regarding whether or not the problem exists. If the problem DOES exist, determine what the data tells you about the frequency, severity, and source(s) of the problem(s). If the problem DOES NOT exist, then choose another known or suspected problem and begin again.
<p><i>Use the space below to briefly record your findings for the QI study you are conducting</i></p>		

Element 6	Description	Hints for Getting Started
	A comparison of the organization's current performance in the area of study against the previously identified performance goal	<ol style="list-style-type: none"> Compare the results of your data analysis to the performance goal you identified in Element 2. For example, if the data indicates that you currently have 65% compliance and the goal is 90% compliance, a simple statement to that effect is sufficient.
<p><i>Use the space below to briefly state your comparison of current performance vs. goal for the QI study you are conducting</i></p>		

Element 7	Description	Hints for Getting Started
	Implementation of corrective action(s) to resolve identified problem(s)	<ol style="list-style-type: none"> Based on what you have learned about the frequency, severity, and source(s) of the problem(s), determine what corrective action(s) you will take to improve your performance in the area of study. Implement the selected corrective action(s) and determine the appropriate length of time until re-measurement is to occur.
<p><i>Use the space below to describe what corrective action(s) were taken for the QI study you are conducting, including how the corrective actions were implemented</i></p>		

Element 8	Description	Hints for Getting Started
Element 8	Re-measurement (a second round of data collection and analysis) to objectively determine whether the corrective actions have achieved and sustained demonstrable improvement	<ol style="list-style-type: none"> 1. At the designated re-measurement time, repeat the steps shown for Elements 4 and 5 2. Compare the results of your second round of data collection and analysis to the performance goal you identified as Element 2, and determine whether the corrective actions have achieved the desired performance goal
<p><i>Use the space below to describe the second round of data collected and how you collected it. Also state your comparison of the new current performance vs. goal for the QI study you are conducting</i></p>		

Element 9	Description	Hints for Getting Started
Element 9	If the initial corrective action(s) did not achieve and/or sustain the desired improved performance, implementation of additional corrective action(s) and continued re-measurement until the problem is resolved	<ol style="list-style-type: none"> 1. Determine whether this step is applicable to the study you are conducting. If you have met and are sustaining your performance goal, this step does not apply 2. If this step does apply, repeat the steps shown for Elements 7 and 8 until your performance goal has been achieved in a sustainable manner
<p><i>Use the space below to indicate whether this step applies to the QI study you are conducting. If it applies, describe what additional corrective action(s) were taken for the QI study you are conducting, including how the corrective actions were implemented. Also describe the additional round of data collected and how you collected it, and state your comparison of the new current performance vs. goal for the QI study you are conducting</i></p>		

Element 10	Description	Hints for Getting Started
Element 10	Communication of the findings of the quality improvement activities: <ul style="list-style-type: none"> ▪ to the governing body ▪ throughout the organization, as appropriate 	<ol style="list-style-type: none"> 1. Report your QI study and its results to your governing body. Ensure that the governing body's review of the report is appropriately documented 2. Determine who else in the organization needs to know about the results of the study. Communicate the findings to those people, and document that this has occurred 3. Determine whether other educational activities of the organization should reflect the findings of the study. If so, take appropriate steps to have this occur
<p><i>Use the space below to describe how the results of the study will be reviewed by the governing body, and how this review will be documented. Also describe other groups that will be notified of the study's results, and how this notification will take place, and educational activities that will take place as a result of this study</i></p>		