

Delfini Evidence-based Clinical Quality Tool Kit

Clinical Quality Improvement Project Proposal Tool

Project:
Prepared by:
Date:

Introduction

Good evidence-based clinical improvement projects improve quality. Frequently they reduce costs. They are necessary for providing true value. What you are looking for in identifying potential improvement projects are areas where you can “close gaps” between current care and optimal care, or where you can diminish clinical uncertainty. Gaps and uncertainties are frequently in the following areas:

- Health Status
- Satisfaction
- Cost / Utilization.

You will need to compare your internal organizational data with the best available evidence to determine the size of your gap. The size of the gap should justify the effort it will take to close it. This tool can help you document projects of interest and present information to decision-makers within your organization.

Worksheet

1) Proposed medical and operational sponsors and leaders:
2) Proposed internal champion:
3) Rationale Introduction: Evidence of need/gap – a) Clinical uncertainty (yes/no): Gap – evidence is available to demonstrate current care differs from optimal care (yes/no):
4) Evidence availability and recommended approach – supply background and reasons for recommendations: Sufficient valid, useful and applicable evidence exists to close the gap (yes/no): If no – a) Suggested plans for closing the gap despite lack of good evidence: If yes – b) Recommended clinical practice guideline or other quality improvement method that has been evaluated for validity in process and other considerations (yes/no): i) Plans for literature update and improvements for adaptation: c) Evidence available in the medical literature that has been critically appraised for validity and for which other results have been successfully assessed that could be used to create a guideline or develop a clinical improvement strategy (yes/no): i) Recommendation develop clinical guideline (yes/no): ii) Recommendation develop other evidence-based clinical improvement strategy (yes/no): iii) Other recommended strategy:

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5) Patient population and applicable circumstances:
6) What this project will accomplish:
7) Estimated projection of outcomes (quality, economic, other):
8) Benefits, harms, costs, uncertainties of change:
9) Alternatives:
10) Are clinicians and staff likely to accept this change (acceptance and appropriate use)?
11) Are patients likely to accept this change (acceptance and adherence)?
12) Estimated impact on staff (including satisfaction):
13) Estimated impact on patients (including satisfaction):
14) Estimated impact on purchasers (including satisfaction):
15) Do we have the capabilities to do this?
16) Proposed timeline:
17) Preliminary measurement plan:
18) Preliminary implementation plan:
19) Estimated resources – facilities, systems, roles (including staffing), methods (including procedures), equipment, supplies and other resources:
20) Other Comments:
21) For additional information, as needed:
22) See Project Selection Tool & Documentation that follows for further information.
23) Decision: