



QUALITY IMPROVEMENT (QI) PLAN FORMAT

<p>Facility Name:</p>													
					<p>Facility Number:</p>								
<p>Title of Project:</p>													
<p>Name:</p>						<p>Title:</p>							
<p>Telephone:</p>				<p>Extension:</p>				<p>Plan Development Date:</p>					
<p>1. Clinical Measure</p> <p>Clinical Measure identified for improvement.</p>		<p>2. Baseline Result</p> <p>Enter the baseline (current) result for measure including date and %.</p>		<p>3. Goal(s)</p> <p>Enter your facility goal to be achieved including date (e.g., "To improve our baseline of ___ % to ___ % by what date).</p>		<p>4. Root Cause(s)</p> <p>Enter cause(s) that have been identified by your facility that are contributing to the facility's current performance rate. (Enter each cause on a separate line below).</p>		<p>5. Action(s)</p> <p>For each identified cause, describe the action step(s) your facility will use to achieve improvement. Indicate who in your facility is responsible for each action step.</p>		<p>6. Time Frame</p> <p>For each action step, indicate the Beginning date (date action step was started) and the End date (date action step to be completed).</p> <p><u>Begin Date</u> <u>End Date</u></p>		<p>7. Evaluation Process</p> <p>Describe how your facility will continuously evaluate each action step taken to see if improvement is being achieved. (e.g., tracking tools, meetings, monitoring, etc) Include who will be responsible for follow up and compliance.</p>	

