| **QI IMPROVEMENT CHARTER** | | | | | |
| --- | --- | --- | --- | --- | --- |
| **1. Team Name:** | | **2. Version:** | | | **3. Subject:** |
| Tulare PHN | | 1.0 | | | Class V TB |
| **4. Problem / Opportunity Statement:** | | | | | |
| Internal and external communication problems/breakdown, missing information in forms, from TB to PHN offices | | | | | |
| **5. Strategic Alignment**: | | | | | |
| **6. Team Leader:** C.S. | | | | **7. Team Sponsor:** C.V | |
| **8. Team Members:** | | **9. Area of Expertise:** | | | **10. Time Commitments** |
| H.H. | | TB and Computer Genius | | |  |
| S.N. | | TB Case Management | | |  |
| L.B. | | TB Case Management | | |  |
| P.T. | | TB Case Management | | |  |
| L.Y. | | TB Case Management | | |  |
| S.F. | | TB Case Management | | |  |
| C.P. | | TB Case Management | | |  |
| R.T. | | Administrative | | |  |
| **11. Performance Improvement Aim (Mission):** | | | | | |
| To increase the % of Class V TB referrals that meet time requirements to 100% (1-2 business day turnaround from TB office receipt or generation of referral to PHN supervisor, 1-2 business day turnaround from PHN supervisor receipt to initial attempt to contact client) during the pilot phase stating from December 1, 2014 through February 28, 2015. | | | | | |
| **12. In Scope (Boundaries):** | | | | | |
| * Evaluating TB Classes: V * Methods of communication: email, text, and phone calls * Process from receipt or generation of referral to initial attempt to contact client   **Out of Scope (Boundaries):**   * Process around “actual contact with the client”, “diagnostic/ screening clinic issues” | | | | | |
| **13. Customers (primary and other):** | | | **Customer Needs Addressed:** | | |
| TB team | | | Achieve consistent communication and referral turn around | | |
| Client/patient | | | Identification and treatment starts sooner | | |
| **14. Objectives:- SMART - Specific, Measurable, Achievable, Realistic, Time Frame** | | | | | |
| * By February 28, 2015 TB Team will achieve 100% TB case referrals that meet time requirements for class V TB. | | | | | |
| * All staff (TB & PHN) will document referral date and first attempts in *Nightingale Notes (EMR)* | | | | | |
|  | | | | | |
| **15. Success Metrics (Measures):** | | | | | |
| * 100% TB case referrals meet time requirments. * 100% of nurses enter referrals and first attempts in Nightingale Notes. | | | | | |
| **16. Constraints / Obstacles / Risks** | | | | | |
| * Staff resistance and understanding * Technology transition to Nightingale Notes * Lack of communication with TB staff * Inconsistent use of mobile technology * TB Department is understaffed | | | | | |
| **17. Key Milestones:** | **Date:** | | | | |
| PLAN | November 2014 | | | | |
| DO | December 1, 2014-February 28, 2015 | | | | |
| STUDY | February-March 2015 | | | | |
| ACT | March 2015 | | | | |
| **18. Communication Plan (Who, How, and When):** | | | | | |
| * Bi-weekly team meetings | | | | | |
| **19. Key Stakeholders:** | | | | | |
| Health Officer | | | | | |
|  | | | | | |