Public Health Quality Improvement Exchange (PHQIX) Submission Form

This form is a printable version of a web-based form used to submit quality improvement (QI) Initiatives to PHQIX. The term "QI Initiative" refers to a systematic quality improvement initiative that includes a plan to change or test how something works, the implementation of that plan, a review of the results, and actions taken to make an improvement based on those results.

We welcome the submission of both in-progress and completed QI Initiatives. In-progress QI Initiatives should have obtained a funding source or approval to begin the project, an aim statement, and at least an initial plan for implementation of the Initiative. We expect that submitters of in-progress Initiatives will not be able to complete several fields in this form, including fields related to methods of evaluation, QI outcomes, and future plans.

To prepare to submit your QI Initiative, gather information about your QI team and the organizations with which your QI team members are associated, background on the project and its implementation, information about any technical assistance your team members received to assist with the project, and details regarding the evaluation of the success of your QI Initiative. Also, gather any tools or other materials created during the Initiative. Please read through the fields included in the following form to gain an idea of other types of information that might be helpful when completing this form.

When you are ready to submit your QI Initiative, please register for PHQIX and use the online submission form. If you do not have all of the information necessary to submit your QI Initiative, you can save your work and finish the form later.

If you cannot use the web-based form for any reason, please contact submissions@phqix.org and let us know. Thank you so much for sharing your QI work with us—we very much look forward to reading about it!

Title of QI Initiative

Please provide a title for the QI Initiative you are submitting to PHQIX.

Does PHQIX Have Permission to Share this Initiative?

By submitting your QI Initiative to PHQIX, you are agreeing to share the submitted information publicly. Please confirm that the submission of this information for public distribution has been approved by the appropriate parties from your organization and partner organizations.

○ Yes; I confirm that the content and submission of this initiative have been cleared with the appropriate parties and organizations.

○ No; this information has not been cleared. (Please note that this information must be cleared by your agency before it is submitted to PHQIX.)

Contact Information of the Submitter

Please provide contact information for the submitter of the QI Initiative:

Name(s): _____

Title: _____

Organization: _____

Organization Street Address: _____

City: _____

State: _____

ZIP: _____

Phone: _____

E-mail: _____

Please provide contact information for alternate team members.

Name: _____

E-mail: _____

Name: _____

E-mail: _____

Submission Status

○ In Progress

○ Completed

Organization(s) that Led the QI Initiative

What are the names of the organization(s) (health departments, collaboratives, etc.) that led the QI Initiative?

Primary (Submitter's) organization: _____

Which of the following describes the organization(s) that submitted the QI Initiative?

☐ State Health Department

☐ Territorial Health Department

☐ Local Health Department (An administrative or service unit of local or state government, concerned with health and carrying some responsibility for the health of a jurisdiction smaller than the state.)

       ☐ City/Town

       ☐ City-County

       ☐ Multi-City

       ☐ County

       ☐ Multi-County

☐ Tribal Health Department

☐ Community-based organization

☐ Professional association

☐ University

☐ Hospital

☐ Community health center

☐ Public Health Institute

☐ Other (specify): --

Partner organizations: _____

Which of the following describes the partner organization(s) that collaborated on the QI Initiative?

☐ State Health Department

☐ Territorial Health Department

☐ Local Health Department (An administrative or service unit of local or state government, concerned with health and carrying some responsibility for the health of a jurisdiction smaller than the state.)

       ☐ City/Town

       ☐ City-County

       ☐ Multi-City

       ☐ County

       ☐ Multi-County

☐ Tribal Health Department

☐ Community-based organization

☐ Professional association

☐ University

☐ Hospital

☐ Community health center

☐ Public Health Institute

☐ Other (specify): _____

Size of Population Served by Organization

Please select the category describing the population served by the organization that is submitting the QI Initiative.

○ Less than 24,499

○ 25,000–49,999

○ 50,000–99,999

○ 100,000–249,999

○ 250,000–499,999

○ 500,000–999,999

○ 1,000,000 +

Characteristics of the Area and Population Served by Organization

Please provide information about the location of the area served by your organization and information about the sociodemographics of the population served.

Accreditation Status

Please select the category that indicates your organization's accreditation status with the Public Health Accreditation Board (PHAB).

○ Accredited
○ Submitted statement of intent for accreditation
○ Planning to submit application for accreditation in the next year
○ Planning to submit application for accreditation in the next 3 years
○ Not planning to submit application for accreditation in the next 3 years
○ Not applicable

QI Implementation in the Organization

In the past 12 months, how many formal QI Initiatives has your organization implemented to improve the quality of a service, process, or outcome? (The term "QI Initiative" refers to a systematic quality improvement initiative that includes a plan to change or test how something works, the implementation of that plan, a review of the results, and actions taken to make an improvement based on those results.)

○ None

○ 1–3 Initiatives

○ 4–6 Initiatives

○ 7–10 Initiatives

○ 11–20 Initiatives

○ More than 20 Initiatives

How would you describe the level of QI activity in your organization?

○ Informal QI: My organization conducts sporadic, program-focused QI efforts.

○ Formal QI in Specific Areas: My organization conducts multiple Initiatives; there is a QI infrastructure and process across the organization, and we include QI as part of planning.

○ Formal Agency-Wide QI: The QI plan is integrated into overall agency policies and the plans, including the strategic plan. Policies and procedures are in place and data are commonly used for problem-solving and decision making.

○ QI Culture: My organization uses evidence-based decision making and has data collection systems to use QI across the organization.

○ QI Community: My organization participates in multi-organizational QI Initiatives implemented on a community-wide, regional, or state-wide basis.

Summary of QI Initiative

Please provide a summary of the QI Initiative in 200 to 300 words.

Information on the Area for Improvement

Describe the scope of the public health issue in your jurisdiction, or introduce the problem that the QI Initiative addressed.

Use data (include references) to frame the issue, including health burden and/or economic costs, and specify the affected population(s).

Need for the QI Initiative

How was the need for the QI Initiative determined?

Describe the process of how the improvement was chosen.

Aim Statement/Improvement Goal

Please provide your preliminary aim statement that articulates the goal of the initiative in terms of the measureable improvement sought.

For guidance on writing aim statements, submitters can consider the following framework:

What are we trying to accomplish? What is the specific goal, purpose or outcome desired? Who benefits from the results? What are the benefits from achieving the goal? What requirements or limitations exist?

Initiative Dates

Provide the timeline for the QI Initiative. If applicable, please provide the dates and when the Plan, Do, Study, Act (PDSA) cycle(s) was executed. If the QI Initiative is in progress and there is no known end date, do not enter an end date.

Begin Date _____ End Date _____

Final Initiative Timeframe From Start To Completion

○ None

○ Less than 6 months

○ Between 6-12 months

○ Between 12-18 months

○ Between 18-24 months

○ Greater than 24 months

Public Health Accreditation Board Domains, Standards, and Measures

Provide each of the PHAB domains, standards, and measures addressed by the QI Initiative. Use the link below for reference.

http://www.phaboard.org/wp-content/uploads/PHAB-Standards-and-Measures-Version-1.0.pdf

Domain(s):

Standard(s):

Measure(s):

Add domains, standards, and measures as necessary.

QI Initiative Focus Activity(ies)

Please indicate the specific activity(ies) on which the QI Initiative focused. When submitting the online form, choose from the list of public health activities.

QI Method/Approach

Select one or more of the following QI methods:

☐ Adaptive Promising Practice

☐ Business Process Analysis

☐ Kaizen

☐ Lean/Six Sigma

☐ Model for Improvement

☐ PDCA/PDSA Cycle (Plan, Do, Check/Study, Act)

☐ Rapid Cycle Improvement

☐ SDCA Cycle (Standardize, Do, Check, Act)

☐ Total Quality Management

☐ No specific QI method or approach

☐ Nominal Group Technique

☐ Other (specify):

_____

QI Tools

Select one or more of the following QI tools that were used for this improvement:

☐ Affinity Diagram

☐ Brainstorming

☐ Cause and Effect Diagrams

☐ Check Sheet

☐ Control Chart

☐ Control and Influence Plots

☐ Flowchart

☐ Fishbone Diagram

☐ Five-Whys

☐ Force-Field Analysis

☐ Histogram

☐ Interrelationship Digraph

☐ Know and Don't Know Matrix

☐ Multi-Voting Technique

☐ Pareto Chart

☐ PDPC (Process Decision Program Chart)

☐ Prioritization Matrix

☐ Process Maps

☐ Radar Chart

☐ Root Cause Analysis

☐ Run Chart

☐ Scatter Diagram

☐ SMART Chart

☐ SWOT (Strengths, Weaknesses, Opportunities, and Threats) Analysis

☐ Surveys

☐ Tree Diagram

☐ No specific QI tool

☐ Other (specify):

_____

QI Tool Links

When completing this form via the PHQIX website, submitters will be asked to upload completed QI tools that were generated during the QI Initiative. If you have been asked to complete this form offline, please e-mail us any completed QI tools that were generated during the course of your QI Initiative.

Root Cause

List the root cause identified in planning the QI Initiative.

Implementation of the QI Initiative

Describe how the specific QI methods and tools were used. Describe the initiative; why it was chosen; and what was to be done initially, and by whom. Describe how the initiative was implemented and how it addressed the problem. Describe who is impacted by this initiative. These people could be clients, employees, or community members.

Methods of Evaluation

How did you or how will you measure the impact of the QI Initiative?

Describe both the outcome and process measures used to evaluate the impact of the QI Initiative. Provide information about the data sources used for capturing each measure (e.g., billing data, direct observation,

EHR, survey). Provide information about the type of evaluation design used (e.g., pretest posttest, pretest posttest with comparison group, interrupted time series).

Measurable QI Outcomes

Include all measures available to illustrate the outcomes or results of the Initiative. Include any specific numbers that illustrate the scope of the impact. If you used a formal statistical analysis to evaluate the outcomes, please include the confidence intervals and/or statistical significance of the outcomes.

We welcome submissions of QI Initiatives that were not able to achieve positive QI outcomes because they can provide valuable lessons learned. Even if your organization was not able to achieve positive QI outcomes, please provide specific numbers to illustrate how outcomes were measured.

Other QI Outcomes

Identify any non-measurable, short-term, or intermediate outcomes as a result of the QI Initiative that demonstrate how the improvement addressed the problem (e.g., change in policy, change in local-level practices, establishment of additional funding).

Standardize the Initiative and Establish Future Plans

Describe plans to standardize the Initiative and future plans established to ensure continued improvement.

Describe plans to replicate the Initiative in other units, service lines, or organizations. Describe plans to maintain the gains, provide any insights on the likelihood that observed gains may weaken over time, and include plans for monitoring and maintaining improvement.

Size of QI Initiative Team

Total number of staff on QI team: _____

Total number of full-time equivalents (FTEs) on QI team: _____

Characteristics of QI Initiative Team

Please provide information on the main health department staff who were involved with this QI Initiative. Please provide their role in the Initiative (e.g., Lead, Project Manager), their role in the organization (e.g., job title), and FTE (your best estimate of the staff member's time commitment to the Initiative, ranging from 0 to 1, with .2 = 20% time by a full-time employee).

Role in Initiative: _____   Role in Organization: _____

FTE: _____

Role in Initiative: _____   Role in Organization: _____

FTE: _____

Role in Initiative: _____   Role in Organization: _____

FTE: _____

Role in Initiative: _____   Role in Organization: _____

FTE: _____

QI-Related Training Received

Did members of the QI team receive any QI-related training during or just before the QI Initiative?

○ Yes

○ No

○ Uncertain

If yes, what type of QI-related training was received?

Describe who received the training, the mode of the training offered, who provided it, when it was offered, and for what duration. Include any other relevant information about training that would affect the results of the Initiative. If there is a way to provide others with access to the training, such as a web link or URL, please provide that information.

Technical Assistance Received

Did members of the QI team receive any external technical assistance for the QI Initiative other than QI-related training?

○ Yes

○ No

○ Uncertain

If yes, what type of technical assistance was received?

Describe who received the technical assistance, the mode of the technical assistance offered, who provided it, when it was offered, and for what duration. Include any other relevant information about the technical assistance that would affect the results of the Initiative.

Lessons Learned, Observations, and Insights

Describe other factors relevant to the conduct and interpretation of the QI findings. Examples of this information might include the following:

- *Any insights regarding the findings of your QI Initiative, including a summary of key successes and difficulties in implementing the improvement*
- *Efforts to minimize and adjust for study limitations*
- *Reasons for differences between observed and expected outcomes*

- *Ethical aspects of implementing and studying the improvement and how ethical concerns were addressed*
- *Any caution that should be applied when learning about the Initiative (limitations, confounding)*
- *How the Initiative addressed health equity or disparity*

Posting of Your QI Initiative on the Internet

Is this submission published anywhere else on the Internet? If so, please provide a link to that location.

Other Information

Please provide any information not already provided about the QI Initiative that might help others in their QI work.

Check if Any of the Following are Being Submitted to Complement your Initiative:

When completing this form via the PHQIX website, submitters will be asked to upload any materials generated during the QI Initiative that they would like to share. If you have been asked to complete this form offline or are completing this form because you cannot complete the web-based form, please e-mail us any completed materials that were generated during your QI Initiative.

☐ Testimonials

☐ Quote from partner/participant

☐ Sample of materials produced

☐ Press release

☐ Promotional materials

☐ Initiative photo(s)

☐ Publication (e.g., news story, journal article)

☐ Report

☐ Storyboard

☐ Video/audio clip

☐ Website URL

☐ Other (explain): _____