Capstone Initiative - Tips

- Project Scope – keep it manageable
- Carefully consider team members and roles
- Availability and access to data
- Regular meetings with your mentor
  - Recommend use of monthly report
- Opportunity to get feedback from faculty and fellows throughout project (Capstone zoom sessions)
- Inform Joan or Elina of any major issues that may interfere with the progress of your project

Monthly Report

GNYHA/UHF Clinical Quality Fellowship Program (CQFP)
Capstone Quality Improvement Initiative Team Report

General Instructions:
1. This report will help you organize your thoughts and progress with your project. Please use this form to share your team's progress.
2. Make your descriptions **brief** and **summarized**. This should not be long or onerous to complete.
3. Please submit to your mentor and GNYHA/UHF prior to your scheduled call/meeting.

GNYHA/UHF CQFP Capstone Quality Improvement Initiative Team Report

CQFP Fellow Name: Hospital Name: Date:

Please list Team Members Involved:

Briefly describe your project.

Briefly describe the PDSA cycles/tests you conducted, or changes you made during this reporting period.

List other accomplishments of your team during this reporting period.

List some of your immediate next steps.

List any challenges your team has encountered and how you have begun to address them.

Discuss any data results of process or outcome measures. Describe your data collection progress. If you haven't collected data yet, please describe what impact you have made so far through this work.

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Project Timeline

Activity	Estimated Timeframe
QUALITY IMPROVEMENT INITIATIVE <u>PLANNING</u>	
Identify Interdisciplinary team members to be involved	April – May 2023
<u>**Topic/Scope/Aim**</u> /What is the problem you are trying to address? What do you hope to accomplish?	April – May 2023
Team meeting schedule and agendas Use tools, e.g., brainstorm, fishbone, process map, etc. to identify issues, scope project, and refine aim statement	Starting May/June 2023 ongoing bi-weekly or monthly
Assign appropriate team members to be responsible for specific parts of project	Ongoing
Identify initial data sources , develop data collection tools, and collect baseline data to analyze extent of issue; Provide data feedback to team to help define goals and identify tests of change	June, July, Aug 2023
FURTHER DEFINING GOALS AND TESTING INTERVENTIONS	
Identify and Conduct PDSA Cycles/Tests of Change; Collect data for PDSA Cycles/Tests of change	Aug - Sept 2023
Start to review data from tests; What does it show?	Sept, Oct, Nov 2023
Consider presenting progress of project to hospital senior leadership	Nov - Dec 2023
Based on data from PDSA Cycles, next steps: What other intervention(s) will be tested? What monthly data will be collected? Who will collect it? How will it be collected?	Dec – Jan 2024
Test interventions, collect data monthly, and tweak continually, as necessary	Jan, Feb, March 2024
Continue team meetings/interactions Plan for sustainability	March, April 2024
Develop Capstone quality improvement initiative summary/abstract, with guidance from CQFP mentor and GNYHA/UHF	April 2024