Define a Quality Improvement measure to improve Quality Improvement activities at the clinic location. The QI measure will fall into one of these areas:

1. Choose and use a formal model for quality improvement.
2. Establish and monitor metrics to evaluate improvement efforts and outcome: ensure all staff members understand the metrics for success.
3. Ensure that patients, families, providers, and care team members are involved in quality improvement activities.
4. Optimize use of health information technology to meet Meaningful Use criteria.

**BACKGROUND:** (what led you to start this project? Is this cycle a continuation of another cycle? Why is this topic relevant? Include any baseline data that has already been collected. Include relevant information from literature).

**PLAN:**

A. **AIM/Objective statement:** (what do you hope to learn? What are you trying to improve (AIM), by how much (goal) and by when (timeframe)?)

B. **Plan for change/test/intervention:** (include the WHO (target population), WHAT (change/test), WHEN (dates of test), WHERE (location), and HOW (description of plan)).

C. **Measures:** (what will you measure in order to meet your AIMS? How will you know that a change is an improvement? Will you use outcome or process measures?).

D. **Plan for data collection:** (include the WHO (will collect), WHAT (measures), WHEN (time period), WHERE (location), and HOW (method)).
**DO:** (carry out the change/test. Collect Data. Be sure to note when completed, observations, problems encountered, and special circumstances).

**STUDY:** (summarize and analyze data (quantitative and qualitative), and include any charts or graphs).

**ACT:**

A. **Document/summarize what was learned:** (Did you meet your AIMS and goals? Did you answer the questions you wanted to address? List major conclusions from the cycle).

B. **Define next steps:** (Are you confident that you should expand size/scope of test or implement? What changes are needed for the next cycle?).